

Substitute Form P11D

Paper C

United Reformed Church—Employer’s PAYE ref: 951/U168

National Insurance form for the tax year 6 April 2022 to 5 April 2023
Church Return *to be copied to your minister/CRCW*

Church name and number: _____

Minister/CRCW’s name: _____

Date of joining church, if after 05/04/22 _____ Date of leaving church, if before 06/04/23 _____

Please complete section 1 or 2 and then section 3 and return this form by 1 June 2023

SECTION 1—NIL NATIONAL INSURANCE LIABILITY

<p>If the above church was (i) without a minister/CRCW, (ii) there were no assessable benefits, or (iii) formed part of a "grouping" in which another church provided the expense payments and benefits to your minister/CRCW for the entire tax year please tick this box. Complete the declaration in section 3 below and return this form to the MOM Office.</p>	
--	--

SECTION 2—EXPENSE PAYMENTS OR BENEFITS PROVIDED—(Complete the details below as appropriate)

		<i>Guidance Notes:</i>	COLUMN A		ASSESSABLE BENEFIT	
1	Car Benefit	<i>(Page 6)</i>	£	x 100% =		Box 14
2	Car Fuel Benefit Charge	<i>(Page 6)</i>	£	x 100% =		Box 15
3	Furniture, curtains and blinds	<i>(Page 8)</i>	£	x 75% =		Box 13
4	Internal decoration, repairs and maintenance	<i>(Page 8)</i>	£	x 75% =		Box 13
5	Assets (e.g. Carpets, free-standing units etc)	<i>(Page 9)</i>	£	x 20% =		Box 18
6	Telecoms (landline, Internet, Mobile & Zoom)	<i>(Pages 11-12)</i>	£	x 100% =		
7	Other	<i>(Pages 10,14-15)</i>	£	x 100% =		Box 18

Cheques should be made payable to ‘URC Trust’

Total sum of boxes _____ *Figure 1*

National Insurance due, Figure 1 above x 13.8% _____ *Figure 2*

SECTION 3—Declaration

Completed by : _____
(insert name)

Capacity in which signed : _____
(eg Treasurer/Secretary)

Signature _____

Date: _____

Please return this form to: MOM Office, United Reformed Church, 86 Tavistock Place, London WC1H 9RT

Figure 2 (above) is the amount to be remitted and returned with this form by 1 June 2023