

Arkansas Conference/District Tithe & District Mission Apportionment Remittance Form

Please remit one (1) form for each month

*Church #: _____

*Church Income For: _____
Month Year

*Church Name: _____

*Paid to Conference in: _____
Month Year

*City: _____

*District: Central Northeast Northwest Southeast Southwest

To Calculate Your Tithe:	
Total Gross Income for previous month including designated giving and other funds	A
APPROVED Local Church EXCLUSIONS	
Less income for capital campaigns (this does not include LOC/mortgage payments)	B
Less income for memorials and endowments	C
Less income from sale of church-owned real estate (not used for operation expenses)	D
Less income from tuition-based services (preschool, daycare, etc.)	E
Less direct costs of fund-raising (this does not include income raised)	F
Less income for pass-through/outreach ministries	G
Less Paycheck Protection Program Loan	H
ADJUSTED GROSS INCOME = Line A minus B, C, D, E, F, G, H	I
Conference & District Tithe Remitted to Conference (LINE I x 10.5%) =	J
District Mission Apportionment Remitted to Conference =	K

OTHER DESIGNATED GIVING remitted to Conference at this time			
	Project Name	Code	\$Amount
To be sure that your funds are allocated properly, refer to the Project Code List for the correct Project Code #			
TOTAL DESIGNATED GIVING Remitted to Conference			L

*Date: _____ Check#: _____

Total Check Amount J+K+L

*Prepared by: _____

*Phone: _____

*Email: _____

Check this box if form was submitted online

Please keep a copy for your records

*Denotes a required field

If you have questions, contact Wendy Brunson Daniels - wbrunson@arumc.org

Make checks payable to: Arkansas Conference UMC

P.O. Box 55588

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