



# DIocese OF OGDENSBURG

## Human Resources Office

604 WASHINGTON STREET • P.O. BOX 369 • OGDENSBURG, NEW YORK 13669  
TELEPHONE: 315-393-2920, Ext. 211 • FAX: 1-866-314-7296 • email: ksnover@dioogdensburg.org

December 27, 2011

### INSTRUCTIONS FOR 2011 CENSUS FORMS

- TO: All Parishes and Institutions in the Diocese
- RE: **ANNUAL CENSUS** - The completion of these forms is required by the Internal Revenue Service. Arbitrary withholding or excluding of employees is against the law. Every parish or institution is required to complete and return the following forms by January 31.
- NB: IF YOU DO NOT HAVE ANY EMPLOYEES, YOU MUST RETURN THIS FORM MARKED: "*No employees at this location*" and sign your name.

**COMPLETE ONE OF THESE FORMS FOR EVERY W-2 THAT YOU ISSUE. DO NOT CUT APART.**

d Employees Social Security Number	5 Medicare Wages
Section 125 Plan	
e Employees name, address, and ZIP code	
<b>Form W-2 Wage and Tax Statement 2011</b> This information is being furnished to the Internal Revenue Service	

Type of work \_\_\_\_\_

Place of work \_\_\_\_\_

Employee's date of birth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date employment started \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Employment terminated \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

We provide this person with living accommodations (room and board) \_\_\_\_\_

We provide the following meals per day: 1 2 3

Married \_\_\_\_\_ Single \_\_\_\_\_

If married, maiden name \_\_\_\_\_

Average number of hours worked/week \_\_\_\_\_

Total number of hours worked/year \_\_\_\_\_

Other Diocesan Employment \_\_\_\_\_

Any breaks in service? \_\_\_\_\_

If yes, please indicate time period employee did not work \_\_\_\_\_

REMEMBER TO INDICATE OTHER DIOCESAN EMPLOYMENT DURING 2011 AND ADDITIONAL INCOME SUCH AS ANNUITIES AND SECTION 125 PLANS.

- TYPE OF WORK:** Secretary, janitor, teacher, cemetery worker, etc.
- PLACE OF WORK:** Church and rectory, school, cemetery, etc.
- EMPLOYEE'S DATE OF BIRTH:** January 1, 1970 = 1/1/70
- DATE EMPLOYMENT STARTED:** October 1, 1990 = 10/1/90
- DATE EMPLOYMENT TERMINATED:** State only if they are not returning.
- If you wish for a leave of absence, notify the Human Resource Office.
- ROOM and BOARD:** Yes or No
- MEALS:** If applicable, please circle one
- AVERAGE NUMBER OF HOURS WORKED/WEEK:** Take the number of hours worked in 2010 and divide by the number of weeks the employee worked e.g. a cemetery worker might work 600 hours over 20 weeks so the answer would be 30 hours per week.
- TOTAL NUMBER OF HOURS WORKED/YEAR:** Take the total number of hours worked during 2011. **Since eligibility for the Lay Employees' Retirement Plan is based on a minimum number of hours worked per year, this number must be accurate.**
- OTHER DIOCESAN EMPLOYMENT:** If an employee works or worked at another church or institution in the diocese, please indicate.

**PLEASE NOTE THAT THE FORM MUST BE FILLED OUT COMPLETELY FOR EACH EMPLOYEE. INCOMPLETE FORMS WILL BE RETURNED FOR COMPLETION. SUBMITTING A COPY OF YOUR EMPLOYEES' W-2 FORM IN PLACE OF THE CENSUS FORM IS NOT ACCEPTABLE.**