

2009 Pastoral Compensation Recommendation to the Church/Charge Conference

Complete one form for each pastor under appointment to your charge.
Send it to the District Office in time to arrive 10 days before the Charge Conference. Make a copy of this report and bring it to the meeting for your presentation.

Charge _____
Pastor _____

Church Name: _____

		2009 Salary			
		2008 Total	Church 1	Church 2	2009 Total
1	Salary (Including UMPIP before- and/or after-tax amounts)				\$0
1a	Pastor's Contribution to Health (if paid by the church)				\$0
2	Other (Allowances, e.g. Discretionary, S.E. Tax, etc.)				\$0
3	Other (E.g. Equitable Salary or other support)				\$0
4	Other (E.g. Travel if non-accountable or see 18 below)				\$0
5	Total Compensation (Add Lines 1 thru 4)	\$0	\$0	\$0	\$0

Note: Calculation in this box is for use in maximizing UMPIP contributions; see Worksheet for details.

Enter amount from Line 5	\$0
If a parsonage is provided, enter 25% of Line 5 as Parsonage value... OR	\$0
Enter the actual Housing Allowance shown on Line 17	
Plan Compensation base for CRSP contributions by Conference and UMPIP billing to church	\$0

Salary Reduction (Before Tax) Items

6	Pastor's Contribution to UMPIP 403(b) Pension Plan				\$0
7	Pastor's Contribution to Health Ins. Premium				\$0
7a	Pastor's Vision Insurance Premium				\$0
8	Medical Reimbursement Account (Cafeteria Plan)				\$0
9	Other Pre-tax Items				\$0
10	Total Salary Reduction Items (Add 6 thru 9)	\$0	\$0	\$0	\$0

Salary Reportable to IRS

11	Total Pastoral Compensation (Line 5)				\$0
12	Minus Household Furnishings Allowance (Exclusion)				0
13	Minus Salary Reduction Items (Line 10)				0
14	Salary Reportable on W-2 (Line 11 - 12 - 13)	\$0	\$0	\$0	\$0

Employee Benefits (From your Church Budget)

15	Health Care Plan (Conference BC/BS Group or Other)				\$0
16	Parsonage Utilities				\$0
17	Housing Allowance (In lieu of parsonage)				\$0
18	Travel Vouchered at IRS Rate				\$0
19	Continuing Education & Annual Conference				\$0
20	Pension Amount billed by Conference				\$0
21	Accountable Reimbursement Plan				\$0
22	Other				\$0
23	Total Benefits Costs	\$0	\$0	\$0	\$0

Signatures

Date: _____

Chair, Pastor-Parish Relations Committee

Treasurer

Chair, Administrative Board/Council

Pastor

Church Treasurer's Calculation for Payroll

Total Pastoral Compensation (Line 5)	\$0
Minus Salary Reduction Items (Line 10)	\$0
Minus any other authorized withholdings	
Total cash to be paid annually to the pastor:	\$0
Divide the above total by the number of paydates for the year (12, 24, 26, etc.)	26
	\$0