

National Capital Presbytery		
Annual Report Form Pastor Salary		
Report form for 20 Hours or more		
<p>Instructions: Enter data in the grey boxes as applicable</p> <p>If excel format, Cells outlined in blue auto-calculate &amp; calculations round to the nearest dollar</p> <p>If Line 7, Column E is changed to "No", then contact office for new form.</p>		
Pastor:		
Church:		
Date:		
COMPENSATION		Annualized
EFFECTIVE SALARY		
1	Annual Cash Salary (full amount of cash paid per annum)	
2	Housing Allowance (see line 57)	
3	Employee's contributions to 403(b)(9) plan	
4	Employer's contributions to 403(b) plan, TSA, equity allowance (not including matching contributions)	
5	Optional pre-tax salary reduction - health FSA (\$2,750 maximum)	
6	Optional pre-tax salary reduction - dependent care FSA (\$5,000 maximum)	
7	Is minister enrolled in Social Security? (Yes/No)	yes
7a	If Box D7 is Yes: SECA (Social Security) Tax Allowance <i>in excess of 50% of SECA tax obligation</i>	
7b	If Box D7 is No: Allowance in place of SECA	
8	Other (optional medical, dental reimbursement) - Identify	
9	Other, continued - Identify	
10	<b>Subtotal: Effective Salary (lines 1-9)</b>	<b>\$0.00</b>
REQUIRED BENEFITS		
11	Pension Benefit Dues (8.5% of line 10)	\$0.00
12	Death/Disability Dues (1%) of Line 10)	\$0.00
13	Temporary Disability Plan Dues (.5% of line 10)	\$0.00
14	Medical Dues (27% - minimum of \$11,000; maximum \$33,500))	\$11,000.00
15	Employer's portion of SECA Tax (7.65% of Line 10)	\$0.00
OPTIONAL BENEFITS		
16	Dental Insurance	
17	Group Term Life Insurance	
18	Other Deferred Income [Employer <b>matching</b> contributions to PCUSA 403(b)(9)]	
19	Group Plan Health Reimbursement Account	
20	<b>Subtotal: Benefits (lines 11-19)</b>	<b>\$11,000.00</b>

REIMBURSED EXPENSES/ALLOWANCES		
21	Auto/Travel Reimbursement (IRS rate 2022 - 58.5 cents per mile)	
22	Continuing Education/Professional Development	
23	Books	
24	Technology and Communications Allowance	
25	Professional Expenses Allowance	
26	Other, continued - Identify	
27	<b>Subtotal: Reimbursed Expenses/Allowances (lines 17-24)</b>	<b>\$0.00</b>
28	<b>TOTAL COMPENSATION, BENEFITS, AND EXPENSES</b>	<b>\$11,000.00</b>
29	Technology Agreements	
30	Vacation - minimum one month (30 days, including 4 Sundays)	1 month
31	Study Leave - minimum 2 weeks (14 days, including 2 Sundays)	2 weeks
32	Other Leave (Military, Sabbatical, etc.)	
33	<b>Person to contact regarding this form:</b>	
34	<b>Phone:</b>	
35	<b>Date of Session meeting where the terms were reviewed:</b>	
36	<b>Date of Congregational meeting where the terms were adopted (required only if there are changes in the Terms of Call):</b>	
	minimum HUD 3BR monthly rental rate*	
	minimum allowance =12 months HUD rent plus 3 months HUD rent for utilities	\$0.00
	<a href="#">*determine HUD rental rate from zip code - see METRO Area Fair Market Rents 2022</a>	