

REPORT OF 2023 TERMS OF CALL

JOHN CALVIN PRESBYTERY

MINISTER:

CHURCH:

CITY:

CHURCH EMPLOYER IDENTIFICATION NUMBER (EIN):

Check all that apply:

<input type="checkbox"/>	FULL TIME	<input type="checkbox"/>	PART-TIME-Please specify percentage of time	<input type="checkbox"/>	¾ TIME
<input type="checkbox"/>	PASTOR	<input type="checkbox"/>	¼ TIME	<input type="checkbox"/>	STATED SUPPLY
<input type="checkbox"/>	CO-PASTOR	<input type="checkbox"/>	1/3 TIME	<input type="checkbox"/>	COMMISSIONED RULING ELDER
<input type="checkbox"/>	INTERIM PASTOR	<input type="checkbox"/>	½ TIME	<input type="checkbox"/>	OTHER

COMPENSATION (Subject to Board of Pension Dues)

1	\$	Annual Cash Salary
2	\$	Housing allowance
3	\$	Deferred Income
4	\$	Bonuses, lump sum allowances, gifts, etc.
5	\$	Other:
6	\$	Fair Rental value of manse (or at least 30% of lines 1 – 5)
7	\$	Total Effective Salary (Lines 1-6)... [Presbytery Minimum \$ 46,000 if full-time]
8	\$	Board of Pensions Dues (39% of line 7)

ACCOUNTABLE REIMBURSEMENT PLAN (Voucher expenses)

9	\$	Continuing Education Allowance [Minimum: \$ 1,500]
10	\$	Automobile: Check One: IRS rate** Car with full expenses
11	\$	Professional Expenses*
12	\$	Social Security Tax supplemental income
13	\$	Medical deductible, coinsurance payments, dental
14	\$	Other:
15	\$	Total Cost to church budget (Lines 7 – 14)
16		Continuing Education leave [Minimum two weeks]
17		Vacation leave [Minimum four weeks]
18		Sabbatical Leave Allowance [See sabbatical leave policy]

Rental value of manse is the larger of fair rental value or 30% of the total of all other amounts in Compensation, items 1-5.

*Professional expense reimbursements paid through an Accountable Expense Reimbursement Plan are listed under Professional Expenses. Reimbursements paid through a non-accountable plan are to be listed as Salary.

**IRS maximum allowable mileage reimbursement for 2022 was \$0.585 per mile through June, then \$0.625 per mile July through December. The 2023 reimbursement rate is expected to be published by the IRS in December.

The session has reviewed the adequacy of compensation with minister? Yes ___ No ___

The session has conducted an annual performance review of the minister? Yes ___ No ___

Date of congregational approval _____ (If the congregation has not yet acted on the terms, send the completed form anyway. Send corrections later if any are made.)

Signed: _____
Minister

Clerk of Session

Please return this form by email to: gwilson@jcpresbytery.com

or mail to John Calvin Presbytery, PO Box 1394, Ozark, MO 65721-1394
Questions? Contact staff at bkick@jcpresbytery.com or gwilson@jcpresbytery.com