2027 CLERGY SERVING 50% or 25% TIME

East Ohio Conference
The United Methodist Church

START HERE!

Pastor's Name ______________________ **Effective Date** ________

Part 1 -- WORKSHEETS

List all churches. Use additional forms, if needed, or contact your district office.

1A. Compensation Paid by Local Church

	Church Name(s)				TOTAL
a. CASH SALARY *This amount represents total gross salary paid prior to any deduction including any personal pension contributions (before or after-tax).*	$				0
b. Other cash compensation paid to pastor *such as Social Security taxes, bonuses, payments to private investment programs, or scholarships.*	$				
c. Total Cash Allowances *(carried from Worksheet 1C below, if applicable).*	$				0
Worksheet 1A Total Cash Salary (Enter Total Cash Salary on Part 3, Line 1)	$				0

1B. Accountable Reimbursements

Click here to JUMP to Next Page

This Section is for Informational Purposes Only. Report applicable travel, education and other reimbursed expenses submitted with receipt or otherwise vouchered. Any money given as cash, without documentation, needs to be reported in Worksheet 1C as taxable income.

1. Travel (mileage)	$				
2. Continuing education, books and publications	$				
3. Annual Conference expenses paid by local church	$				
4. Automobile provided by local church including insurance & maintenance	$				
5. Other (cell phone, entertainment, supplies, membership fees)	$				
Total Reimbursements	$				0

1C. Cash Allowances *Do not include amounts entered in Worksheet B as reimbursements.*

USE THIS WORKSHEET ONLY IF APPLICABLE; amounts entered into Worksheet 1C are monies given to the pastor without receipts or documentation. This is considered taxable income and becomes part of their compensation package. (The total from Worksheet 1C must be listed in Worksheet 1A above.) Do not enter housing allowance in this section. Cash for housing should be entered in Part 3, line 3).

a. Monies provided for health or other insurance premiums *(Do not include Conference Health Care Plan or premiums paid under qualified 105/106 Plans.)*	$				
b. Travel (Mileage, lodging, meals)	$				
c. Continuing education, books and publications	$				
d. Other allowances (e.g., cell phone, entertainment allowance, fees)	$				
Worksheet 1C Total Cash Allowances (Carry 1C Total to Worksheet 1A above, Line c.)	$				0

Part 5 – SIGNATURES

pastors & SPRC do not need to sign for a mid-year appointment

Signature of Pastor ______________________ Date ________

Signature of S/PPR or Finance Chair ______________________ Date ________

Signature of District Superintendent ______________________ Date ________

CLEAR FORM CAUTION: This button clears entire form of all data

2027 Clergy Compensation Report for CLERGY SERVING 50% or 25% TIME

Part 2 – GENERAL INFO Pastor's Name ____________________ Birthdate ____________

Current Churches /Charge ______________________________ District ____________

New Address ______________________________ ____________ ____________
leave blank if no change — email — phone

Reason for Change ____________________ ______________________________

New District ____________ New Appointment / Church ______________________________

Status ○ AM ○ FD ○ FE ○ OD ○ OE ○ OF ○ PD ○ PE ○ PL ○ Retired/Supply ○ Lay Assigned / CLM

TIME INCREMENT (check one) ☐ **50%** ☐ **25%** Is this a status change? ____________

Local Pastors serving at 25% are defined as TPC compensation below $17,781 (shown on Line 4 TOTAL) **Effective Date:** ____________

Part 3 – PLAN COMPENSATION

Complete Worksheet Page **FIRST.**
Click Here to Jump to Next Page

How many churches are you serving? ○ 1 ○ 2 ○ 3

Is a Parsonage Provided? ○ **YES** --Go to LINE 2 ○ **NO** -- Go to LINE 3

		Church Names			**TOTAL**
1. **Total Cash Salary** (Total carried from Worksheet 1A TOTAL)	$	0	0	0	0
2. **Parsonage Amount** - Parsonage Minimum Value is $10,000	$				0
3. **Cash Housing Allowance,** if provided in lieu of a parsonage. (Not a Housing EXCLUSION. See below)	$		0		
4. **Total Plan Compensation Value (TPC)** (Total Lines 1, 2 & 3)	$	**0**	**0**	**0**	**0**

If Line 4 Total is greater than $35,563, use 100%-75% Compensation Report

Housing Exclusion Amount (please enter a 12 month value)	$				

Housing Exclusion is the amount of Line 1 (Cash Salary) elected by pastor to be excluded from Federal taxable income in agreement with the Housing Exclusion Resolution Form (available on the EOC website or from district offices). You can not include any amount from housing allowance (line 3) or any parsonage expenses/utilities that are paid directly by the church. The amount must be approved by Church Council and cannot be dated retroactively. Clergy still need to pay self-employment tax on full compensation.

Part 4 - PIP Personal Investment Plan

(Personal Contributions listed in Part 4B are NOT a church liability.)

4A. Employer's (local church) Contribution to Pastor's PIP. Give % per Wespath's Adoption Agreement 0%

4B. Personal Contribution made by the Pastor as a deduction from salary. ______ /mo x 12 = $ ______

Which church is withholding pastor's contribution? ____________

4C. If church is funding an investment plan other than, or in addition to, PIP, provide plan name and amount of contribution.

____

To START or CHANGE your monthly contribution, send completed PIP Contribution Elections forms to Wespath Benefits & Investments.
Call Wespath at 800-851-2201 with questions or go online. To contact EOC Benefit Office email robin@eocumc.com

DOES YOUR CHURCH(ES) USE THE EOC PAYROLL SERVICES? ○ YES ○ NO

Provide name of church(es) and additional information: i.e. Is there a "lead" church handling payroll for all churches or are churches paying separately?

Mid-year appointments: If the EOC processes the church payroll, contact the Benefits Office about updating paperwork