

CLERGY SALARY AND ALLOWANCE FOR THE YEAR 2009

Clergy Name:		Part Time _____ Full Time _____
Church Name:		
Church City:		
1	Cash Stipend	
2	Social Security reimbursement (Paid in addition to stipend)	
3	Utilities and Household Allowance (if separate from 5a)	
4	Subtotal of lines 1 through 3	\$
5 a)	Allowance Provided for Home Purchase or Rental (OR)	
b)	Rectory Value (30% of line 4)	
6	Subtotal of line 4 plus 5a or 5b	
7	Annuity or other tax-deferred plan	
8	Other taxable income (bonuses, tuition paid for dependents, non-accountable expenses paid)	
9	Total of lines 6 through 8	
10	Pension (18% of line 9)	
11	Travel Reimbursable Allowance	
12	Continuing Education Reimbursable Allowance	
13	Medical Insurance, Net cost of Church's share	
	Employee only, net is	\$5,152
	Employee and spouse, or employee and children	\$7,498
	Employee and spouse and child(ren)	\$9,232
	Total of lines 9 through 13	\$
	Less Line 5b if applicable	()
	Net Cost to Budget	
Form Completed by:		Phone #:
Date Completed:		

BE SURE TO RETURN THIS FORM WITH YOUR PAROCHIAL REPORT

PLEASE MAKE COPIES OF THIS FORM AND COMPLETE FOR EACH CLERGY PERSON

ITEMS 1 THROUGH 9 ARE TO BE REPORTED TO THE CHURCH PENSION FUND IN THE SAME AMOUNTS