

NEW CASTLE PRESBYTERY
EFFECTIVE SALARY FORM — YEAR 2021

Church: _____

Minister: _____ **EFFECTIVE DATE:** _____

- Pastor Associate Pastor Designated Pastor/Associate
 Co-Pastor Interim Pastor/Associate CRE/Other _____

Check one: Full time Part time - **Hours/week** _____ (*20 hours minimum/week*)

Active church members as of year-end (December 31, 2020) _____

COMPENSATION INCLUDED IN EFFECTIVE SALARY (Please round all numbers to nearest dollar)

1. _____ Annual Cash Salary
2. _____ Housing, Utility, and Furnishings Allowance
3. _____ Deferred Compensation (403(b) plans, tax-sheltered annuities, etc.)
4. _____ Bonuses, un-vouchered allowances, gifts from employer
5. _____ SECA Allowance in excess of 50% of the minister's SECA Obligation
6. _____ Other Allowances/Compensation (e.g. medical deductibles not paid through a group plan, additional insurance, etc.)
7. _____ Manse Amount (if applicable; must be at least 30% of lines 1-6)
8. _____ **TOTAL Effective Salary (TES, Sum of lines 1-7).**

Presbytery minimum for **2021** is **\$53,181.00** (full-time ordained pastors)

Minimum TES and other compensation minimums do not apply to CREs.

BENEFITS (See www.pensions.org for more information)

- a. _____ Board of Pensions (**37% of line 8**) Includes Medical/Death and Disability/Pension
- b. _____ Medical Wrap-around (**2.0% of Line 8**) (New Castle Presbytery Requirement).
9. _____ **TOTAL Benefits (Sum of lines a & b above).**

REIMBURSEMENTS NOT INCLUDED IN EFFECTIVE SALARY

10. _____ Continuing Education (minimum \$500)
11. _____ Travel/Automobile/Business/Professional Expenses (\$2,000 minimum)
12. _____ SECA Contribution - up to 7.65% of total obligation (Social Security/Medicare)
13. _____ Group plan for medical deductible, co-insurance and dental premiums
14. _____ Other vouchered allowances _____
15. _____ **TOTAL Reimbursements (Sum of lines 10-14)**
16. _____ **FINAL TOTAL costs to budget (Sum of lines 8, 9, and 15)**

Vacation: ___ weeks (Min. 4 weeks) Study Leave: ___ weeks (Min. 2 weeks) Other: ___ weeks _____

Minister: _____ **Date** _____

Clerk of Session: _____ **Date:** _____

Send to: Email (dscully@ncpresbytery.org), fax (302-366-0714), or mail the form to:
New Castle Presbytery, 1102 W Church Rd, Newark, DE 19711 by **February 15, 2021 or ASAP.**