

**Michigan Conference of The United Methodist Church
2020 District Superintendent Assignment Compensation Recommendation Report**

DSA _____
 District _____
 Church/Charge _____

District Superintendent Assignment

Please check all boxes that apply below with an "x".

Full time 3/4 time 1/2 time 1/4 time

Eligible for Conf Health Ins Yes No

Health Insurance Enrollment

Conference Subscriber Dependent Non-Conf

Housing

Parsonage None

See the 2020 DSA Compensation Recommendation Report Instructions for directions on completing the form.

2020 Salary

DSA Compensation		2019	Church 1	Church 2	Church 3	Total
1	Cash Salary					0
2	Health Care Compensation if pd by Church (NON-Conf plans only)					0
3	Other taxable wages (Equitable Salary, Allowances, Grants, etc.)					0
4	Subtotal Cash Compensation (Add Lines 1-3)		0	0	0	0
5	DSA's Conf Health Insurance Contribution (if paid by the church)					0
6	Total Cash Compensation (Add Lines 4 and 5)	0	0	0	0	0
Salary Reduction (Before Tax) Items		2019	Church 1	Church 2	Church 3	Total
7	DSA's Before-tax Contribution to UMPIP Pension Plan					0
8	DSA's Contribution to Health Insurance Premium (Conference Plan only)					0
9	Medical Reimbursement Account (FSA Plan) see restrictions on instruction form					0
10	Other Pre-tax Items (Describe _____)					0
11	Total Salary Reduction Items (Add Lines 7-10)	0	0	0	0	0
Salary Reportable to IRS		2019	Church 1	Church 2	Church 3	Total
12	Total Cash Compensation (Line 6)		0	0	0	0
13	Household Furnishings Allowance (Exclusion to Income)					0
14	Salary Reduction Items (Line 11)		0	0	0	0
15	Salary Reportable on W-2 (Line 12 minus Line 13 minus Line 14)	0	0	0	0	0
Church Treasurer's Calculation for Payroll		2019	Church 1	Church 2	Church 3	Total
16	Total Cash Compensation (Line 6)		0	0	0	0
17	Housing Allowance (In lieu of parsonage; Exclusion to income)					0
18	Subtotal (Line 16 plus Line 17)		0	0	0	0
19	Salary Reduction Items (Line 11)		0	0	0	0
20	Other authorized after-tax withholdings (i.e. Roth/after-tax pension withholding)					0
21	Total Cash to be paid annually (line 18 minus line 19 minus line 20)	0	0	0	0	0
22	Wage Per Pay (Divide line 21 by number of paydates in the year i.e. 12, 24, 26)					0
Compensation base for retirement plan contributions & Benefits Ministry Shares		2019	Church 1	Church 2	Church 3	Total
23	Total Cash Compensation (Line 6)		0	0	0	0
24	If a parsonage is provided, enter 25% of Line 23 as Parsonage value... OR		0	0	0	0
25	Housing Allowance (Line 17)					0
26	Compensation base for local church Benefits Ministry Shares (add lines 23-25)	0	0	0	0	0
Church Ministry Expenses related to DSA Compensation/Benefits		2019	Church 1	Church 2	Church 3	Total
27	Benefits Ministry Shares (5% of line 26)		0	0	0	0
28	Health Care Plan (Conference Plan only)					0
29	Waiver Contribution for eligible DSA electing alternate health insurance					0
30	Parsonage Utilities					0
31	Housing Allowance (Line 17)					0
32	Professional Accountable Reimbursement Plan					0
33	Travel Vouchered at IRS Rate (if not included in Line 32)					0
34	Continuing Education Fund (if not included in Line 32)					0
35	Annual Conference Expenses (if not included in Line 32)					0
36	FICA 7.65% of Line 15		0	0	0	0
37	Total Benefits Costs (Add Lines 27-36)	0	0	0	0	0

The above compensation amounts are used to determine clergy salary and benefits contributions. Our signatures affirm all amounts have been reviewed and are accurate

Signatures

Date:

S/PPRC Chair or Administrative Board/Church Council Chair

Treasurer or Finance Director

District Superintendent Assignment

District Superintendent