

**Michigan Conference of The United Methodist Church
2021 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 2021 DSA Compensation Recommendation Report Instructions for directions on completing the form.

2021 Salary

DSA Compensation

	2020	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

	2020	Church 1	Church 2	Church 3	Total
7 DSA's Before-tax Contribution to UMPIP Pension Plan					
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

	2020	Church 1	Church 2	Church 3	Total
12 Total Cash Compensation (Line 6)		0	0	0	0
13 Household Furnishings Allowance (Exclusion to Income)					
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

	2020	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)					
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)					
21 Total Cash pd annually (Line 18 minus Line 19)	0	0	0	0	0
22 Gross 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

	2020	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)					
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

	2020	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					
30 Parsonage Utilities					0
31 Housing Allowance (Line 17)					
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 Employer FICA 7.65% of Line 12		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