

Definition of Compensation, Benefits, and Responsibilities of the Pastor



Southwestern Minnesota Synod
Evangelical Lutheran Church in America
God's work. Our hands.

Prepared by _____ for the Rev. _____
on a _____ full- or _____ -time basis for the period _____ to _____.

A. ANNUAL DEFINED COMPENSATION: The congregation will provide the following annual compensation:

NO PARSONAGE PROVIDED <i>If you do provide a parsonage, please skip to the next section.</i>	
1. Annual base salary	\$ _____
2. Designated housing allowance (payments to pastor)	\$ _____
3. Subtotal (Lines 1 + 2)	\$ _____
4. Social Security (FICA) tax allowance (optional) (Recommended: 7.65% of Line 3).....	\$ _____
5. Total Annual Defined Compensation (Lines 3 + 4)	\$ _____

(Continue at B. ELCA Pension and Other Benefits below)

PARSONAGE PROVIDED	
1. Annual base salary	\$ _____
2. Social Security (FICA) tax allowance (optional) (Recommended: 7.65% of Line 1).....	\$ _____
3. Subtotal (Lines 1 + 2)	\$ _____
4. 30% of Line 3 (used only for benefits calculations).....	\$ _____
5. Household furnishings and utilities allowances (optional)	\$ _____
6. Total Annual Defined Compensation (Lines 3 + 4 + 5).....	\$ _____
7. Annual payments to pastor in parsonage (Line 6 minus Line 4).....	\$ _____

(Continue at B. ELCA Pension and Other Benefits below)

B. ELCA PENSION AND OTHER BENEFITS

The congregation will sponsor the pastor in the Pension and Other Benefits Program of the Evangelical Lutheran Church in America, which provides retirement, disability, survivor, and medical-dental coverage. Please refer to the calculators at Portico Benefit Services: (<https://employerlink.porticobenefits.org/Home/Resources/Calculators.aspx>) to complete this section. (*Sponsorship will include medical-dental coverage for the pastor's spouse and children unless they have other employer-provided group medical insurance coverage and the pastor consents to waiving medical-dental coverage for them under the ELCA Pension and Other Benefits Program.*)

1. Employer Retirement Contribution (10% x Total Annual Defined Compensation)	\$ _____
2. Health Coverage, including Dental (<i>please check one</i>):	\$ _____
<input type="checkbox"/> Member only <input type="checkbox"/> Member and spouse <input type="checkbox"/> Member and children	
<input type="checkbox"/> Member, spouse, and children <input type="checkbox"/> Coverage waived	
3. Required contributions (*) and other benefits:	
a. Disability* (<u>1.5</u> % x Total Annual Defined Compensation)	\$ _____
b. Basic Group Life* (<u>.7</u> % x Total Annual Defined Compensation)	\$ _____
c. Retiree support* (<u>0</u> % x Total Annual Defined Compensation).....	\$ _____
d. Other (optional) _____	\$ _____
4. Total Pension and Other Benefits (Lines 1 + 2 + 3.a-d)	\$ _____
5. TOTAL COMPENSATION PAYMENTS: NO PARSONAGE (Line A.5 + Line B.4)	
 OR WITH PARSONAGE (Line A.7 + Line B.4).....	\$ _____

C. EXPENSES

The congregation will provide for the following expenses related to this pastor's ministry.

1. Automobile and travel allowance	\$ _____
2. Other professional expenses	\$ _____
3. *Expenses for official meetings of the synod (Synod Assembly, Theological Conf.)	\$ _____

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- 4. Continuing education (*\$1,000 recommended; minimum \$750 from calling source*) \$ _____
 Other _____ \$ _____
- 6. Pay the moving expenses to this field of service as follows: _____

D. AGREEMENT

- 1. Vacation time of _____ per year, including _____ Sundays;
- 2. Continuing education time of _____ weeks per year (*recommended minimum of two weeks per year that may be accumulated up to three years, as reflected in a continuing-education agreement developed by the pastor and congregation council*);
- 3. Participation in a First-Call Theological Education program, where applicable;
- 4. Ongoing care through a Mutual Ministry Committee;
- 5. Up to two months of continued salary, housing, and contributions to the ELCA Pension and Other Benefits Program in a 12-month period in the event that the pastor is physically or mentally disabled (*Provision may be made for further unpaid time for disability recovery as agreed by the congregation, but with the stipulation that unused accumulated sick leave will not be compensated at the end of this call.*); and
- 6. Where applicable, parental leave up to six weeks with full salary, housing, and benefits.

A description of the particular responsibilities of this position may be attached to this "Definition of Compensation, Benefits, and Responsibilities" form OR the following may be completed.

E. OTHER PROVISIONS

Special emphases of the pastor and special encouragement by the congregation:

- 1. During this time period, the pastor will give special attention in ministry to the following:
 - (a) _____
 - (b) _____
 - (c) _____
- 2. The congregation will encourage this pastor's ministry in the following ways:
 - (a) _____
 - (b) _____
 - (c) _____

F. OTHER MATTERS

(Ex: accountabilities, service on synodical or churchwide committees, work in church-camp programs, other)

We, the undersigned, certify that the necessary approvals of the congregation and congregation council have been granted for the provisions set forth above.

Date: _____

_____ Congregation President

_____ Council Secretary

I certify that I accept the above statement:

The Rev. _____ Date: _____