

PCA Call Package Guidelines Evaluation and Review Worksheet

Candidate: _____; Presbytery/Church: _____

This worksheet is based on the most recent copy of the PCA Call Package Guidelines (CPG's), and was developed to help you evaluate a Call Package. It focuses your attention on several key areas, and risk. It's ok if several questions are answered 'No.' Answering 'No' to any particular question may not indicate an insufficient Call Package. To determine that, you must make a judgment call based on all of the answers on this Worksheet. In making that judgment, ask whether this Call Package reflects sufficient conformity to and engagement with the PCA CPG's, and whether it provides the necessary income, benefits, and protections needed. Missing benefits increase a pastor's family's risk, as well as the congregation's risk! Focus on risk! What happens if...? Will he be able to retire?

Family & Demographics:

Is this Pastor married? Y N

What is his approx. age? _____ Wife's approx. age? _____

Number of children: _____ Ages: _____

Does this Pastor/family **need** benefits? Y N Some? Which? _____

If not, why not? (military chaplain, retired, wife has benefits, independently wealthy, etc...) _____

(Demographic info helps when considering the financial needs of this family. Ask: 'Are there any special needs or circumstances?')

Primary Benefits:

1. Retirement Contributions (Pastors pay no tax on PCA 403(b) contributions, but must pay 15.3% Social Security tax on IRA contributions.)

a Is the church making retirement contributions? Y N

b If so, what percentage of gross salary is being contributed: _____% (Calculate as a % of Salary + Housing)

c Is this % within the 10-15% Guidelines? Y N

(If no contributions, then contributions will need to be made from the Salary package. Deduct 10-15% x 'Salary+Housing' from Salary below)

2. Healthcare Insurance

a Individual: Group: Sharing Ministry: Medicare:

(If Individual, discuss potential tax benefits of Employer-paid or reimbursed plans if he is the only full-time employee...)

b Is this a High-Deductible Health Care Plan (HDHP)? Y N Deductible amount? \$ _____ .00/yr.

c Are 'HSA' contributions being made? Y N Contribution to HSA? \$ _____ .00/yr.

d What is the maximum annual out-of-pocket expense? \$ _____ .00/year

(Risk Alert: If high deductible, and no HSA, ask the Church 'How will he pay for the deductible if required to do so?' e.g. Will 'out-of-pocket' med expenses come from the Pastor's budget, or is the church 'Self-Insuring' for this potential expense?)

e What is the cost? \$ _____ .00/month x 12 = \$ _____ .00/year

f Does the church pay the premium? Y N (Subtract non-Employer paid cost from Salary)

g Are the premiums taxable to the pastor? Y N (If yes, reduce his Salary by 'Premiums + 22%' more...)

3. Life Insurance

a Is Group Term Life Insurance provided? Y N (PCA RBI Basic + Std Life = \$26.48/mo. or \$318/yr.)

b How much coverage is being provided? \$ _____ .00 Estimated Need? \$ _____ .00

c Is Life insurance coverage sufficient? Y N (Young families = highest need. Any other coverage?)

(Risk Alert: If not provided, discuss with church needed protection for church and family! This ought to be a non-negotiable!)

4. Long-Term Disability Insurance (LTD)

a Is Long-Term Disability Insurance provided? Y N (PCA LTD = \$304/yr for \$50k Sal, \$425/yr for \$70k Sal)

(Risk Alert: If not is provided, discuss with church needed protection for church and family! This ought to be a non-negotiable!)

5. Ministerial Counseling and Coaching

Confidential & Affordable Reimbursement plan? Y N _____

Secondary Benefits:

6. Dental Insurance

Is Dental Insurance provided? Y N _____

7. Vision Insurance

Is Vision Insurance provided? Y N _____

8. Long-Term Care Insurance

Is Long-Term Care Insurance provided? Y N _____

Relocation/Temporary Benefits:

9. Relocation/Moving Expenses

Are moving expenses provided? Y N N/A \$ _____ .00 _____

Other Paid or Reimbursed Expenses? Y N \$ _____ .00 _____

Vacations & Leaves:

10. **Vacation Weeks/Days** Specified? Y N _____

How many? _____ wks/days. Are these sufficient? Y N _____

11. **Leave** Is sick leave, paternity leave, funeral leave, educational leave, or sabbatical leave specified? _____

If so, describe: _____

Salary & Allowances:

- A . **Salary** (Circle if known: Monthly, Bi-weekly, Semi-monthly, Monthly, Annual)
- 1 Is Salary specified apart from Benefits? Y N How Much? \$ _____
- 2 Are Benefits paid by church in addition to Salary? Y N _____

If not, subtract necessary benefits from his salary on worksheet below to discover his net or 'true' salary.

- B . **Housing Allowance**
- 1 Is a Housing Allowance amount specified? Y N How Much? \$ _____
- 2 Does it appear sufficient? Y N (Ask if Pastor completed Housing Allow. Worksheet?)
- 3 If manse: is a 'Home Equity Allowance' provided? Y N N/A If not, why not? _____

- C . **Social Security Allowance**
- 1 **Has he opted out of Social Security?** Y N (Add 12%+ more for ret contributions if he opted-out...)
- 2 If not, is a 'Social Security Allowance' being paid? Y N If not, why not? _____

(A Social Security Allowance should be at least equivalent to the 7.65% 'Employer Portion' of the tax.)

Salary Worksheet : (Use if any benefits are not provided to discover true Salary; References correspond to worksheet line #'s)

A	1	+ Specified Salary	(Consider this \$60,000 'Lump Sum' example...)		+ \$	42,000		+ \$	-
B	1	+ Housing Allowance Estimate	Est.		+ \$	18,000		+ \$	-
		Subtotal			= \$	60,000		= \$	-
	1	- Ret Contribution	(1.b,c, C.1 -- if not provided, or deficient)	10 %	- \$	6,000		- \$	-
	2	- Health Ins.	(2.e,f,g -- if not provided, or deficient.)	Est. (\$ 900 mo.)	- \$	10,800		- \$	-
	3	- Life Ins.	(3.a -- if not provided, or deficient)	Est. (\$ 318 yr.)	- \$	318		- \$	-
	4	- Disability Ins.	(4.a -- if not provided, or deficient)	Est. (\$ 365 yr.)	- \$	365		- \$	-
C	2	- Social Security Allowance	(if not provided, or deficient)	7.65 %	- \$	4,590		- \$	-
		= ESTIMATED SALARY	(consider for 'apples to apples' income comparison)		\$	37,927		= \$	-

Add Salary + Housing Allowance, then subtract the amount that he will have to pay 'out-of-pocket' for Basic Life, LTD, and Healthcare Insurance; also subtract needed Retirement Plan Contributions, and 7.65% Social Security Allowance if not provided by the church. This amount would be equivalent to the **Gross Salary** he would be paid by an employer who provides benefits (e.g. \$38k Salary + Benefits).

Call Review / Approval Status: (for Presbytery Committee use)

- 1 . Does this call reflect engagement with Guidelines? Y N _____
- 2 . Does this net salary appear sufficient for this family? Y N _____
- 3 . Are all 'primary benefits' provided? Y N _____

(If not, ask: 'What will happen to this family if he becomes disabled, dies, or has major medical expenses? Will he be able to retire one day?')

- 4 . Is this call approved? Y N Cnd (Yes, No, Conditionally)
- If no, what modifications could be made to make this Call acceptable? _____

Make clear suggestions for modification. Refer back to deficiencies noted above. Consider the welfare of the pastor as well as the church. Speak with member(s) of the Session and seek their counsel. Be realistic. If a church budget can not provide sufficient salary & benefits, the Committee might suggest that alternative funding strategies and sources be considered (e.g. partial 'tent-making,' part-time or retiree options, two-church sharing arrangements, circuit opportunities, stated supply, just to name a few...)

If Conditions apply, stipulate them clearly: _____

On the condition that: _____

On the condition that: _____

On the condition that: _____

Conditions: For example if the Call Package is insufficient in funding 'retirement', a Committee might ask a church with current financial difficulties to promise to increase retirement contributions over a specified period of time. A Committee might also approve a Call on the condition that 'Employer' benefits be established over a specified period of time to minimize unnecessary taxation; etc...

Committee Members who examined this call:

RE TE _____

RE TE _____

RE TE _____

RE TE _____

RE TE _____

Additional Comments: _____