



2024 Pension Worksheet

Member Name (Pastor or Worker): _____ SS#: _____

Hiring Body (Church or Board): _____

Circle the Payment Month: Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec

Pension Plan contribution: CHECK IF SALARY INCREASE/DECREASE (____)

- | | |
|---|------------|
| A. No Parsonage: Cash Salary + Housing Allowance: | \$ _____ |
| B. Parsonage Provide: | |
| 1. Cash Salary | \$ _____ |
| 2. 30% of Cash Salary (or utilities paid
& fair market value of parsonage) | \$ _____ |
| C. Total Compensation: | \$ _____ |
| D. Pension contribution (12% of Line D) | \$ _____ |
| E. minus \$15, \$10 or \$8): | |
| Up to age 64 \$15 | \$ - _____ |
| Age 64 to 70 \$10 | |
| Age 71 plus \$8 | |
| Total | \$ _____ |

Treasurer Signature: _____

Date: _____

Note any changes in church Treasurer Address and Phone Below:
