

2020 Workers' Compensation Worksheet

Western PA Annual Conference

Church Name: _____ Senior Pastor: _____

Church ID: _____ Employer ID Number (EIN): _____

Enter the number of Parsonages occupied by the pastor(s):

(Enter a fraction or percentage if your church contributes less than 100% to the parsonage)
(e.g if you are on a 2 point charge and split the costs evenly, enter 1/2 or 50% or 0.5)

Annual 2020 Clergy Salaries:

(Enter the full year anticipated Salary- NOT pro-rated)

1) Senior Pastor Anticipated Annual 2020 Salary: **1**

2) All Associate Pastors Anticipated Annual 2020 Salaries: **2**

Staff Salaries:

3) All Pre-School/Childcare Anticipated 2020 Annual Salaries: **3**

4) All other Anticipated 2020 Annual Church Staff Salaries: **4**
(Included by not limited to: all lay employees, diaconal ministers, other staff leaders, youth directors, custodians, choir directors, secretaries, etc.)

Total Salaries (Clergy + All Staff)

5) Add boxes 1+2+3+4 and enter result in box 5 **5**

Premium Rate for 2020 is .8%

6) Multiply Box 5 by 0.008 and enter result in box 6 **6**

Assessment – Short Term Incapacity Fund – mandatory \$25.00

+ \$25.00

Total Payment Due (Box 6 plus \$25.00)

Total:

Payment Procedure

Return this form and a check payable to WPAUMC for the Total Payment Due to: Western PA Annual Conference, c/o Treasurers Office, P.O. BOX 5002, Cranberry Twp., PA 16066- 0002

Prepared By: _____

Check Number: _____

Phone: _____

Email: _____



Western PA Conference
The United Methodist Church

Payment Due March 31, 2020