



2026 INSTALLED PASTORAL CONTRACT

THE FOLLOWING CONTRACT IS BETWEEN:

Church: _____

Address: _____ (Street, City, State & Zip)

Name of Pastor: _____

Is being called to the position of: (Circle/ check one):

<input type="checkbox"/>	Pastor				
<input type="checkbox"/>	Associate Pastor				
<input type="checkbox"/>	Designated Pastor	Length of term:	<input type="checkbox"/> 2 years	<input type="checkbox"/> 3 years	<input type="checkbox"/> 4 years
<input type="checkbox"/>	Designated Associate Pastor	Length of term:	<input type="checkbox"/> 2 years	<input type="checkbox"/> 3 years	<input type="checkbox"/> 4 years
<input type="checkbox"/>	Other (Please specify)				
<input type="checkbox"/>	Full-time	<input type="checkbox"/>	Part-time ** Hours per week: _____		

(TOC will not be approved if left blank for part time)

FOR NEW SERVICE IN INSTALLED POSITIONS: The beginning date is: _____.

FOR ALL CONTRACTED POSITIONS: The term of the contract is from _____ to _____.

We will pay regularly to the Board of Pensions a sum equal to the required percent of your salary for participation in the PCUSA Pension and Medical Plan during the time of your being and continuing in the pastoral relationship set forth in this call to this church, and to other provisions established by the General Assembly for participating in the Plan.

Minimum Terms of Call for 2026 Fulltime:

Effective Salary - Teaching Elder	\$53,325.00 (75% of Churchwide Median of \$71,000)
Effective Salary – for Associate Pastor	Minimum Salary is 60% of Head of Staff

Board of Pensions Calculators can be found here: <https://www.pensions.org/decision-guide/>

FOR INSTALLED POSITIONS (G-2.0504a):

The following compensation was approved by the Session at a meeting on _____

The following terms of call were approved by the Congregation at a meeting on _____

We promise and obligate ourselves to review with you annually the adequacy of this compensation.

Clerk of Session: _____ Date: _____

I agree to the following terms of call:

Pastor: _____ Date: _____

The Presbytery of Giddings Lovejoy approved this contract and its conditions:

Date: _____

Stated Clerk: _____ Date: _____

Annual Compensation		
Effective Salary		
1.	Annual Cash Salary	\$
2.	Deferred Income (403(b), annuity, equity)	\$
3.	Bonuses, Unvouchered Allowances, Gifts	\$
4.	Social Security (reimbursement of 51% or more of SECA taxes)	\$
5.	Housing Allowance & Utilities (does not apply if utilities are paid directly by the church and if they are listed in the church's name)	\$
6.	Manse Value (value must be at least 30% of items 1-5 above.)	\$
7.	Other (copayments, medical, dental expenses) - Identify	\$
8.	Contributions to Taxed-Deferred Plans (<u>not</u> church matching contributions)	\$
Total Effective Salary		\$
9.	Moving Expenses (if applicable)	\$
10.	Other Deferred Income (Employer <u>matching</u> contributions to PCUSA 403(b)(9))	\$
Total Compensation		\$
Other Benefits and Reimbursable Allowances (* = required benefits)		
1.	* Board of Pension Dues Congregational Pastors Package 27.5% (17.5% Medical + 10% Pension, D&D, TD) Transitional Pastors Participation 47% (37% Medical + 10% Pension, D&D, TD)	\$
2.	Post Retirement Service Dues (if retired and working 20+ hours – 12% of effective salary.)	\$
3.	Dues for Optional Board of Pensions Benefits (Dental and/or Life Insurance, FSA)	\$
4.	* Travel/Auto Reimbursement (suggested: IRS rate)	\$
5.	* Continuing Education (\$1,000/full-time; \$500/part-time)	\$
6.	Social Security (reimbursement of up to 50% of SECA taxes)	\$
7.	Books/Other Professional Expenses	\$
8.	Other Vouchered/Reimbursable Expenses - Identify	\$
Total Allowances		\$
Total Compensation, Allowances, and Expenses		\$
Paid Leave		
1.	* Continuing Education Leave (2 weeks minimum)	
2.	* Vacation (4 weeks minimum; including 4 Sundays)	
3.	* Medical and Family Leave (12 weeks – Policy is on Glpby.org.)	

Complete, sign and either scan and email or snail mail originals. When all parties have signed, a copy goes to 1) the minister, 2) the calling church, 3) the presbytery of call and 4) the minister's presbytery of membership/care.

**Submit to: Stated Clerk, Presbytery of Giddings Lovejoy
1001 Craig Road, Ste. 170, St. Louis MO 63146 or BEddy@glpby.org**