

April 2023

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# **State Technical College**

State Technical College of Missouri
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# Public Four-Year Universities

Name: Dr. La Tonia Collins Smith

Institution: Harris-Stowe State University
Phone: 314-340-3335

Contact Person: Brian M. Huggins

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$200,000			\$290,000		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family	\$6,874			\$9,948		
Long-term disability for self	\$288			\$302		
Deferred compensation						
Retirement benefit	\$47,020			\$76,357		
Other (please specify)						
Basic Life Insurance	\$198			\$198		
A D and D Insurance	\$19			\$19		
Total	\$254,399	\$0	\$0	\$376,824	\$0	\$0
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 2023 Estimated Expenditures			
		Private Funds	Estimated Value of Compensation		Private Funds	Estimated Value of Compensation	
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing				\$48,000			
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Annuity				\$36,000			
TOTAL	\$0	\$0	\$0	\$84,000	\$0	\$0	

Name: Dr. John Moseley

Institution:	Lincoln University
Phone:	573-681-5073
Contact Person:	Jeff Barlow

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	22 Actual Expendi	itures	FY 2023 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$250,000			\$250,000			
Medical/dental/vision insurance for self	\$8,281			\$9,386			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self	\$1,000			\$1,000			
Deferred compensation							
Retirement benefit - MOSERS	\$58,775			\$65,825			
Other (please specify) - Basic Life	\$593			\$593			
Total	\$318,648	\$0	\$0	\$326,803	\$0	\$0	
Additional life insurance	Value						
Annuity	Value						
	\$25,000						

#### Other Compensation:

	FY 20	022 Actual Expend	itures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing	\$36,000			\$36,000		
Utilities Housing allowance (provided for private rent/lease/purchase)	\$11,502			\$11,847		
Housekeeper	\$4,875			\$4,875		
Custodian, groundskeeper	\$21,710			\$21,710		
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$6,600			\$6,600		
Automobile repair/maintenance/mileage Professional development Expense for spouse/family to attend meetings						
Club/other memberships		\$9,254			\$9,254	
Other (please specify)						
TOTAL	\$80,687	\$9,254	\$0	\$81,032	\$9,254	\$0

Name: Dr. Dean Van Galen

Institution: Missouri Southern State University

Phone: 417-625-9805

#### Contact Person: Christina Means, Director of Human Resources

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$270,000			\$275,000		
Medical/dental/vision insurance for self	\$8,874			\$8,177		
Medical/dental/vision insurance for spouse/family	\$2,619			\$3,365		
Long-term disability for self	\$238			\$260		
Deferred compensation						
Retirement benefit	\$58,046			\$71,663		
Other (please specify)						
Basic Life and ADD	\$208			\$227		
Total	\$339,985	\$0	\$0	\$358,692	\$0	\$0
Additional life insurance	Value		, · ·			
Annuity	Value					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$25,000			\$35,000			
Custodian, groundskeeper							
Insurance for personal property Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)	\$15,000			\$25,000			
Automobile repair/maintenance/mileage Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships Other (please specify)	\$4,887			\$5,112			
TOTAL	\$44,887	\$0	\$0	\$65,112	\$0	\$0	

Name: Dr. Dennis Lancaster, Chancellor

Name: Dr. Dennis Lancaster, Interim Chancellor 7/1/2021-12/31/2021

Institution: Missouri State University

Phone: 417-836-3002

Contact Person: Kristin Bilyeu

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$146,856			\$166,400				
Medical/dental/vision insurance for self	\$4,899			\$5,236				
Medical/dental/vision insurance for spouse/family	\$4,899			\$5,236				
Long-term disability for self	\$161			\$200				
Deferred compensation								
Retirement benefit	\$36,642			\$48,553				
Other (please specify)								
Accidental Death & Dismemberment	\$23			\$26				
Basic Life	\$51			\$106				
Total	\$193,531	\$0	\$0	\$225,757	\$0	\$0		
Additional life insurance	Value							
Annuity	Value							

#### Other Compensation:

	FY 20	22 Actual Expend	itures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)	\$9,000			\$18,000		
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$1,740			\$1,580		
Other (please specify)						
TOTAL	\$10,740	\$0	\$0	\$19,580	\$0	\$0

Name: Clif Smart, President

Institution: Missouri State University

Phone: 417-836-3002

Contact Person: Kristin Bilyeu

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	22 Actual Expend	itures	FY 2023	B Estimated Exper	nditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$391,400			\$407,056		
Medical/dental/vision insurance for self	\$4,889			\$5,399		
Medical/dental/vision insurance for spouse/family	\$4,889			\$4,994		
Long-term disability for self	\$319			\$240		
Deferred compensation						
Retirement benefit	\$71,338			\$82,368		
Other (please specify)						
Retention Payment (one-time)				\$25,000		\$25,000
Accidental Death & Dismemberment	\$56			\$47		
Basic Life Insurance	\$294			\$191		
Total	\$473,185	\$0	\$0	\$525,295	\$0	\$25,000
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expend	itures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds		Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)	\$40,000			\$40,000		
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$1,375	\$6,402		\$1,500	\$6,876	
Other (please specify)						
TOTAL	\$41,375	\$6,402	\$0	\$41,500	\$6,876	\$0

Name: Elizabeth Kennedy

Institution: Missouri Western State University

Phone: 816-271-4587

Contact Person: Sara Freemyer, Director of Human Resources

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$275,000			\$300,000		
Medical/dental/vision insurance for self	\$9,362			\$9,433		
Medical/dental/vision insurance for spouse/family	\$909			\$0		
Long-term disability for self	\$279			\$300		
Deferred compensation						
Retirement benefit	\$18,036			\$19,536		
Other (please specify) Cellphone	\$600		\$600	\$600		\$600
Total	\$304,186	\$0	\$600	\$329,869	\$0	\$600
Additional life insurance	Value					
	\$550,000					
Annuity	Value					

#### Other Compensation:

	FY 20	)22 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$25,000			\$25,000		
Custodian, groundskeeper						
Insurance for personal property						
Entertainment Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships Other (please specify)						
TOTAL	\$25,000	\$0	\$0	\$25,000	\$0	\$0

Name: John Jasinski (FY22) / Interim President Clarence Green (FY23)

Institution: Northwest Missouri State University

Phone: 660-562-1129

Contact Person: Brooke Hull

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	22 Actual Expend	itures	FY 2023	3 Estimated Exper	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$318,862	\$0		\$250,000	\$0	
Medical/dental/vision insurance for self	\$11,023	\$0	\$2,330	\$9,577	\$0	\$0
Medical/dental/vision insurance for spouse/family	\$20,035	\$0	\$5,890	\$0	\$0	
Long-term disability for self	\$332	\$0	\$0	\$332	\$0	\$0
Deferred compensation	\$20,000	\$0	\$20,000	\$0	\$0	
Retirement benefit	\$83,616	\$0	\$0	\$70,248	\$0	\$0
Other (please specify) Basic Life Insurance	\$578	\$0	\$246	\$284	\$0	\$0
Total	\$454,445	\$0	\$28,466	\$330,441	\$0	\$0
Additional life insurance	\$275,000					
Annuity	\$20,000					

#### Other Compensation:

	FY 20	22 Actual Expend	itures	FY 202	3 Estimated Exper	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing			\$9,000			\$9,000
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$16,800			\$16,800		
Automobile repair/maintenance/mileage Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships			\$1,500			
Other (please specify)						
TOTAL	\$16,800	\$0	\$10,500	\$16,800	\$0	\$9,000

Name: Carlos Vargas-Aburto

Institution: Southeast Missouri State University

Phone: (573) 986-6192

Contact Person: Melissia Coffee

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$314,948			\$337,126		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit						
Other (please specify)						
Total	\$314,948	\$0	\$0	\$337,126	\$0	\$0
Additional life insurance	Value					
Annuity	\$30,000					
Vacation Buy Back	\$12,114					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional	Private Funds (e.g. Institutional	· ·	Institutional	Private Funds (e.g. Institutional	Estimated Value of Compensation (not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing Utilities	\$30,000			\$30,000 \$3,700		
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$7,074			\$7,074		
Automobile repair/maintenance/mileage	\$723			\$800		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Grounds Maintenance	\$1,407	\$8,000		\$9,407		
Automobile Insurance	\$1,213			\$1,225		
TOTAL	\$44,063	\$8,000	\$0	\$52,206	\$0	\$0

Name: Dr. Susan L. Thomas, President

Institution: Truman State University

Phone: 660-785-7607

Contact Person: Arletta Nelson, Assistant to the VP for Administration, Finance & Planning

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$270,030			\$274,965		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family	\$11,358			\$11,358		
Long-term disability for self	\$210			\$210		
Deferred compensation	\$48,240		\$48,240	\$55,000		\$55,000
Retirement benefit	\$63,343			\$72,398		
Other (please specify): ADD	\$34			\$34		
Life Insurance	\$156			\$156		
FICA/Medicare	\$13,170			\$14,594		
Total	\$406,541	\$0	\$48,240	\$428,715	\$0	\$55,000
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

ional g Funds \$9,655	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional	Estimated Value of Compensation (not reflected in
g Funds	(e.g. Institutional	(not reflected in budget)		(e.g. Institutional	
g Funds		` budget)		· -	(not reflected in
	Foundations)	<u> </u>	Operating Funds		•
\$9,655		4		Foundations)	budget)
\$9,655		\$18,000			\$18,000
	;		\$11,613		
\$2,800	)		\$2,800		
\$235	5		\$255		
\$3,666	5		\$3,831		
\$1,281			\$1,620		
	1				1
	. ,	\$3,666 \$1,281 \$1,281			

Name:	Roger Best
Institution:	University of Central Missouri
Phone:	660-543-4406
Contact Person:	Lisa Miller

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$294,322			\$298,700		
Medical/dental/vision insurance for self	\$7,492			\$8,676		
Medical/dental/vision insurance for spouse/family	\$2,951			\$3,773		
Long-term disability for self	\$453			\$464		
Deferred compensation						
Retirement benefit	\$69,117			\$78,648		
Other (please specify)						
Car Allowance	\$12,000		\$12,000	\$12,000		\$12,000
Total	\$386,335	\$0	\$12,000	\$402,261	\$0	\$12,000
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 2023 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment	\$0	\$267					
Automobile Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development	\$6,703	\$0		\$9,651			
Expense for spouse/family to attend meetings	\$0	\$0					
Club/other memberships	\$75			\$75			
Other (please specify)							
TOTAL	\$6,778	\$267	\$0	\$9,726	\$0	\$0	

Mun Choi - President (3/1/2017 - present); University of Missouri-Columbia Chancellor (4/14/2020 - present) Name: DUAL ROLE

Institution: University of Missouri System

Phone: 573-882-4310

Contact Person: Mindy Allen - Lead Compensation Analyst

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2022 Actual Expenditures 7/1/2021 - 6/30/2022			FY 2023 Estimated Expenditures 7/1/2022 - 6/30/2023			
	Institutional	Private Funds (e.g. Institution	Amount Above	Institutional	Private Funds (e.g. Institution	Amount Above Standard Benefit	
Base salary	Operating Funds \$675,000	Foundations)	Standard Benefit	Operating Funds \$775,000	Foundations)		
Medical/dental/vision insurance for self	\$5,709			\$5,714			
Medical/dental/vision insurance for spouse/family	\$12,106			\$12,885			
Long-term disability for self	\$204			\$204			
Deferred compensation	\$150,000		\$150,000	\$150,000		\$150,000	
Retirement benefit	\$120,243		\$43,500	\$108,297			
Other (please specify)							
- ER Paid Life Insurance	\$549			\$638			
- Retiree Health & Welfare	\$7,965			\$9,145			
Total	\$971,775	\$0	\$193,500	\$1,061,883	\$0	\$150,000	
Additional life insurance	Value						
Annuity	Value						

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing	university provide	d		university provide	d	
Utilities Housing allowance (provided for private rent/lease/purchase)	\$0					
Housekeeper	\$0					
Custodian, groundskeeper	\$0					
Insurance for personal property	\$0					
Entertainment	\$0					
Automobile Automobile allowance (provided for private lease/purchase)	\$0			\$17,868		
Automobile repair/maintenance/mileage	\$0					
Professional development	\$0					
Expense for spouse/family to attend meetings	\$0					
Club/other memberships	\$0					
Other (please specify)						
- ER Contribution to 401(a) (SRP)				\$45,750		
TOTAL	\$17,868	\$0	\$0	\$63,618	\$0	\$0

Name: C. Mauli Agrawal - Chancellor (6/20/2018 - present)

Institution: University of Missouri System

Phone: 573-882-4310

Contact Person: Mindy Allen - Lead Compensation Analyst

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 202	2 Actual Expenditu	ires	FY 202	3 Estimated Expen	ditures	
	7/1	/2021 - 6/30/2022		7/1/2022 - 6/30/2023			
	Institutional	Private Funds (e.g. Institution	Amount Above	Institutional	Private Funds (e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit		Foundations)	Standard Benefit	
Base salary	\$417,496	,		\$435,000	· · · · ·		
Medical/dental/vision insurance for self	\$4,797			\$4,802			
Medical/dental/vision insurance for	. ,						
spouse/family	\$5,897			\$6,028			
Long-term disability for self	\$204			\$204			
Deferred compensation	\$20,000		\$20,000	\$20,000		\$20,000	
Retirement benefit	\$56,916			\$69,013			
Other (please specify)							
- ER Paid Life Insurance	\$230			\$242			
- Retiree Health & Welfare	\$5,399			\$5,511			
Total	\$510,939	\$0	\$20,000	\$540,800	\$0	\$20,000	
Additional life insurance	Value						
Annuity	Value						

#### Other Compensation:

	FY 202	2 Actual Expenditu	ires	FY 2023 Estimated Expenditures			
			Estimated Value			Estimated Value	
		Private Funds	of Compensation	1	Private Funds	of Compensation	
	Institutional Operating Funds	(e.g. Institutional Foundations)	(not reflected in budget)	Institutional Operating Funds	(e.g. Institutional Foundations)	(not reflected in budget)	
Housing	· · · · · ·	, , , , , , , , , , , , , , , , , , , ,	buuget)		Toundations	buuget)	
Housing	\$0						
Utilities	\$0 Reported \$30,000						
	per contract. Actual						
	paid \$40,000 due to						
Housing allowance (provided for private	payroll error from						
rent/lease/purchase)	previous year.			\$30,000			
Housekeeper	\$0						
Custodian, groundskeeper	\$0						
Insurance for personal property	\$0						
Entertainment	\$0						
Automobile							
	Reported \$15,000 per contract. Actual paid \$30,000 due to						
Automobile allowance (provided for private lease/purchase)	payroll error from previous year.			\$15,000			
Automobile repair/maintenance/mileage	\$0						
Professional development	\$0						
Expense for spouse/family to attend meetings	\$0						
Club/other memberships	\$0						
Other (please specify)	\$0						
TOTAL	\$0	\$0	\$0	\$45,000	\$0	\$0	

Name: Mohammad Dehghani - Chancellor (8/1/2019 - present)

Institution: University of Missouri System

Phone: 573-882-4310

Contact Person: Mindy Allen - Lead Compensation Analyst

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		) 22 Actual Expendi /1/2021 - 6/30/202			FY 2023 Estimated Expenditures 7/1/2022 - 6/30/2023			
	Institutional	Private Funds (e.g. Institution	Amount Above	Institutional	Private Funds (e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	<b>Operating Funds</b>	Foundations)	Standard Benefit		
Base salary	\$525,000			\$549,996				
Medical/dental/vision insurance for self	\$7,245			\$7,250				
Medical/dental/vision insurance for spouse/family	\$16,048			\$17,067				
Long-term disability for self	\$204			\$204				
Deferred compensation	\$85,000		\$85,000	\$85,000		\$85,000		
Retirement benefit	\$60,675			\$79,199				
Other (please specify)								
- ER Paid Life Insurance	\$96			\$106				
- Retiree Health & Welfare	\$5,900			\$6,490				
Total	\$700,168	\$0	\$85,000	\$745,312	\$0	\$85,000		
Additional life insurance	Value							
Annuity	Value							

#### Other Compensation:

	FY 20	)22 Actual Expendi	itures	FY 202	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing	university provide	d					
Utilities Housing allowance (provided for private rent/lease/purchase)	\$0						
Housekeeper	\$0						
Custodian, groundskeeper	\$0						
Insurance for personal property	\$0						
Entertainment	\$0						
Automobile Automobile allowance (provided for private lease/purchase)	\$0			\$15,000			
Automobile repair/maintenance/mileage	\$0						
Professional development	\$0						
Expense for spouse/family to attend meetings	\$0						
Club/other memberships	\$0						
Other (please specify)	\$0						
	\$0						
TOTAL	\$15,000	\$0	\$0	\$15,000	\$0	\$0	

Kristin Sobolik - Chancellor (4/9/2020 - present)

Name: Interim ( 9/1/2019 - 4/8/2020)

Institution: University of Missouri System

Phone: 573-882-4310

Contact Person: Mindy Allen - Lead Compensation Analyst

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		) 22 Actual Expendi /1/2021 - 6/30/202		FY 2023 Estimated Expenditures 7/1/2022 - 6/30/2023			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$400,000			\$426,667			
Medical/dental/vision insurance for self	\$4,797			\$4,802			
Medical/dental/vision insurance for spouse/family	\$11,476			\$12,111			
Long-term disability for self	\$204			\$204			
Deferred compensation	\$20,000		\$20,000	\$20,000		\$20,000	
Retirement benefit	\$51,107			\$64,690			
Other (please specify)							
- ER Paid Life Insurance	\$332			\$353			
- Retiree Health & Welfare	\$4,720			\$5,035			
Total	\$492,636	\$0	\$20,000	\$533,862	\$0	\$20,000	
Additional life insurance	Value						
Annuity	Value						

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
	Institutional Operating Funds university provided	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing Utilities	1					
Housing allowance (provided for private rent/lease/purchase)	\$0 \$0					
Housekeeper	\$0					
Custodian, groundskeeper	\$0					
Insurance for personal property	\$0					
Entertainment	\$0					
Automobile	\$0					
Automobile allowance (provided for private lease/purchase)	\$15,000			\$15,000		
Automobile repair/maintenance/mileage	\$0					
Professional development	\$0					
Expense for spouse/family to attend meetings	\$0					
Club/other memberships	\$0					
Other (please specify)	\$0					
- ER Contribution to 401(a)	\$0			\$0		
TOTAL	\$15,000	\$0	\$0	\$15,000	\$0	\$0

# Public Two-Year Colleges

Name: Dr. Katricia Pierson

Institution: Crowder College

Phone: 417-455-5675

Contact Person: Cassie Hale

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	22 Actual Expend	itures	FY 202	FY 2023 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$200,000			\$204,000				
Medical/dental/vision insurance for self	\$6,720			\$6,720				
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$29,974			\$30,554				
Other (please specify)								
Total	\$236,694	\$0	\$0	\$241,274	\$0	\$0		
Additional life insurance								
Annuity	Value							

#### Other Compensation:

	FY 20	22 Actual Expend	itures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify) Teaching 1 credit hour class	\$525			\$525		
TOTAL	\$525	\$0	\$0	\$525	\$0	\$0

Name: Carl Jon Bauer

Institution: East Central College

Phone: 636-584-6501

Contact Person: Annette Moore (636-584-6704)

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	FY 2023 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$161,757			\$168,227				
Adjunct Pay				\$670				
Medical/dental/vision insurance for self	\$10,246			\$11,206				
Medical/dental/vision insurance for spouse/family	\$10,631		\$10,631	\$11,645		\$11,645		
Long-term disability for self	\$258			\$258				
Deferred compensation								
Retirement benefit	\$24,940			\$26,176				
HSA Contribution	\$5,200		\$5,200	\$5,200		\$5,200		
Auto Allowance	\$6,000		\$6,000	\$9,000		\$9,000		
Total	\$219,033	\$0	\$21,831	\$232,382	\$0	\$25,845		
Additional life insurance	Value							
\$200,000 ( additional \$150,000)	\$245							
Annuity	Value							

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 2023 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities Housing allowance (provided for private							
rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment		\$6,100			\$10,000		
Automobile Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$0	\$6,100	\$0	\$0	\$10,000	\$0	

Name: Dr. Dena McCaffrey, President

Institution: Jefferson College

Phone: (636)481-3120

Contact Person: Daryl Gehbauer, Vice President Finance and Administration

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$172,975			\$179,525		
Medical/dental/vision insurance for self	\$9,590			\$9,396		
Medical/dental/vision insurance for spouse/family	\$0			\$0		
Long-term disability for self	\$220			\$220		
Deferred compensation	\$0			\$0		
Retirement benefit	\$26,695			\$27,627		
Other (please specify) QHDHP Contribution	\$1,536			\$1,608		
Life Insurance Board Paid	\$22			\$22		
Service Award	\$225			\$0		
Total	\$211,263	\$0	\$0	\$218,398	\$0	\$0
Additional life insurance	\$0					
Annuity	\$0					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
			Estimated Value			Estimated Value
	Institutional	Private Funds (e.g. Institutional	of Compensation (not reflected in	Institutional	Private Funds (e.g. Institutional	of Compensation (not reflected in
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing	\$0	· · · ·	budget,	\$0	, , , , , , , , , , , , , , , , , , , ,	
Utilities	\$0			\$0		
Housing allowance (provided for private rent/lease/purchase)	\$0			\$0		
Housekeeper	\$0			\$0		
Custodian, groundskeeper	\$0			\$0		
Insurance for personal property	\$0			\$0		
Entertainment	\$0			\$0		
Automobile	\$0			\$0		
Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200		
Automobile repair/maintenance/mileage	\$0			\$0		
Professional development	\$0			\$0		
Expense for spouse/family to attend meetings	\$0			\$0		
Club/other memberships	\$0			\$0		
Other (please specify)	\$0			\$0		
TOTAL	\$7,200	\$0	\$0	\$7,200	\$0	\$0

Name: Dr. Kimberly Beatty - Chancellor

Institution: Metropolitan Community College

Phone: 816-604-1130

Contact Person: Patricia Amick

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$303,365			\$375,000		
Medical/dental/vision insurance for self	\$11,128			\$12,024		
Medical/dental/vision insurance for spouse/family	\$5,404			\$6,549		
Long-term disability for self	\$1,092			\$1,037		
Deferred compensation						
Retirement benefit	\$45,602			\$56,046		
Other (please specify)						
403B	\$1,000			\$1,000		
Life Insurance	\$2,376		\$792	\$2,700		\$900
Total	\$369,967	\$0	\$792	\$454,356	\$0	\$900
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment		\$4,779			\$3,600	
Automobile Automobile allowance (provided for private lease/purchase)	\$12,000					
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$12,000	\$4,779	\$0	\$0	\$3,600	\$0

Name: Dr. Thomas Meyer - President of Blue River and Business & Technology Campuses

Institution: Metropolitan Community College

Phone: 816-604-1130

Contact Person: Patricia Amick

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$166,460			\$180,508		
Medical/dental/vision insurance for self	\$11,128			\$12,024		
Medical/dental/vision insurance for spouse/family	\$0			\$6,549		
Long-term disability for self	\$588			\$519		
Deferred compensation						
Retirement benefit	\$25,750			\$27,844		
Other (please specify)						
403B	\$1,000			\$1,000		
Life Insurance	\$1,302		\$434	\$1,300		\$434
Total	\$206,228	\$0	\$434	\$229,744	\$0	\$434
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$7,200	\$0	\$0	\$7,200	\$0	\$0

Name: Dr. Kathrine Swanson - President of Longview

Institution: Metropolitan Community College

Phone: 816-604-1130

Contact Person: Patricia Amick

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$181,330			\$188,583		
Medical/dental/vision insurance for self	\$9,045			\$9,765		
Medical/dental/vision insurance for spouse/family	\$751			\$751		
Long-term disability for self	\$672			\$518		
Deferred compensation						
Retirement benefit	\$31,887			\$33,117		
Other (please specify)						
403B	\$0			\$0		
Life Insurance	\$1,417		\$472	\$1,358		\$453
Total	\$225,102	\$0	\$472	\$234,092	\$0	\$453
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$7,200	\$0	\$0	\$7,200	\$0	\$0

Name: Dr. Larry Rideaux - President of Maple Woods

Institution: Metropolitan Community College

Phone: 816-604-1130

Contact Person: Patricia Amick

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$173,565			\$180,508		
Medical/dental/vision insurance for self	\$11,128			\$12,024		
Medical/dental/vision insurance for spouse/family	\$5,404			\$6,428		
Long-term disability for self	\$630			\$519		
Deferred compensation						
Retirement benefit	\$26,781			\$27,844		
Other (please specify)						
403B	\$0			\$0		
Life Insurance	\$1,357		\$452	\$1,300		\$434
Total	\$218,865	\$0	\$452	\$228,623	\$0	\$434
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$7,200	\$0	\$0	\$7,200	\$0	\$0

Name: Dr. Tyjaun Lee - President of Penn Valley Campus

Institution: Metropolitan Community College

Phone: 816-604-1130

Contact Person: Patricia Amick

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$182,477			\$189,776		
Medical/dental/vision insurance for self	\$10,067			\$10,874		
Medical/dental/vision insurance for spouse/family	\$0			\$0		
Long-term disability for self	\$672			\$519		
Deferred compensation						
Retirement benefit	\$28,109			\$29,188		
Other (please specify)						
403B	\$0			\$1,000		
Life Insurance	\$1,427		\$476	\$1,368		\$456
Total	\$222,752	\$0	\$476	\$232,725	\$0	\$456
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	e.g. Institutional (not reflected in		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	of Compensation (not reflected in		
Housing								
Utilities Housing allowance (provided for private rent/lease/purchase)								
Housekeeper								
Custodian, groundskeeper								
Insurance for personal property								
Entertainment								
Automobile Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200				
Automobile repair/maintenance/mileage								
Professional development								
Expense for spouse/family to attend meetings								
Club/other memberships								
Other (please specify)								
TOTAL	\$7,200	\$0	\$0	\$7,200	\$0	\$0		

Name: DR JOSEPH GILGOUR

Institution: MINERAL AREA COLLEGE

Phone: 573-518-2188

Contact Person: CRYSTAL COFFMAN

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$171,700			\$178,400		
Medical/dental/vision insurance for self	\$6,902			\$7,343		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$160			\$160		
Deferred compensation						
Retirement benefit	\$26,903			\$27,212		
Other (please specify):						
H.S.A. Contributions (Board Paid)	\$588			\$593		
Life Insurance (Board Paid)	\$124			\$124		
Bonus (x2)	\$7,346					
PTK Club Sponsor	\$0			\$4,000		
Total	\$213,723	\$0	\$0	\$217,833	\$0	\$0
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage	\$12,000			\$12,000			
Professional development	_						
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$12,000	\$0	\$0	\$12,000	\$0	\$0	

Name: Jeffery C. Lashley

Institution: Moberly Area Community College

Phone: <u>660 263 4100 ext. 11274</u>

Contact Person: Susan Spencer

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	Amount Above Standard Benefit \$1,284 \$14,452	
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$205,438			\$225,981			
Medical/dental/vision insurance for self	\$9,852		\$1,236	\$10,200		\$1,284	
Medical/dental/vision insurance for spouse/family	\$16,224		\$13,967	\$16,788		\$14,452	
Long-term disability for self	\$0			\$0			
Deferred compensation	\$0			\$0			
Retirement benefit	\$31,217			\$34,246			
Other (please specify)							
Basic life \$20,000, ADD \$20,000	\$19			\$19			
Total	\$262,750	\$0	\$15,203	\$287,235	\$0	\$15 736	
Additional life insurance	Value	Ĵ.	\$13,203	\$207,235	Ú,	\$13,730	
Annuity	Value						

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Cell Phone	\$902			\$1,100		
TOTAL	\$902	\$0	\$0	\$1,100	\$0	\$0

Name: Dr. Lenny Klaver

Institution: North Central Missouri College

Phone: 660-359-3948

Contact Person: Tyson Otto

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	Institution Amount Above	
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$164,720			\$171,309			
Medical/dental/vision insurance for self							
Medical/dental/vision insurance for spouse/family	\$6,770			\$7,926			
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$24,866			\$25,989			
Other (please specify)							
Life Insurance	\$83				\$58	1	
	¢106.120			¢205.202	ćo		
Total	\$196,439	\$0	\$0	\$205,282	\$0	\$0	
Additional life insurance	Value						
Annuity	Value						

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	(e.g. Institutional	of Compensation	
Housing							
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment		\$1,200			\$1,200		
Automobile Automobile allowance (provided for private lease/purchase)	\$11,000			\$11,000			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships	\$800			\$500			
Other (please specify)							
TOTAL	\$11,800	\$1,200	\$0	\$11,500	\$1,200	\$0	

Name: Dr. Hal Higdon

Institution: Ozarks Technical Community College

Phone: 417-447-6643

Contact Person: Drew Courtway

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	)22 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$290,771			\$ 314,404		
Medical/dental/vision insurance for self	\$7,573			\$ 7,733		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$102			\$ 97		
Deferred compensation						
Retirement benefit	\$42,050			\$ 44,225		
Other (please specify)						
Group Term Life Insurance	\$87			\$ 72		
Health and Wellness Center	\$624			\$ 624		
403B	\$23,230		\$23,230	\$ 27,000		\$ 27,000
Additional life insurance	Value					
Annuity	Value					
Total	\$ 364,437	\$-	\$ 23,230	\$ 394,155	\$-	\$ 27,000

#### Other Compensation:

	FY 2	022 Actual Expend	itures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$ 12,120			\$ 12,120		
Automobile repair/maintenance/mileage	\$ 471			\$ 1,923		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$ 12,591	\$ -	\$ -	\$ 14,043	\$ -	\$ -

Name: Dr. Dusty Childress

Institution: Ozarks Technical Community College

Phone: 417-447-6643

Contact Person: Drew Courtway

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		FY 20	22 Actual Expend	itures		FY 202	3 Estimated Exper	ditures
			Private Funds				Private Funds	
	In	stitutional	(e.g. Institution	Amount Above		nstitutional	(e.g. Institution	Amount Above
	Ope	rating Funds	Foundations)	Standard Benefit	Оре	erating Funds	Foundations)	Standard Benefit
Base salary	\$	132,600			\$	137,904		
Medical/dental/vision insurance for self	\$	7,573			\$	7,733		
Medical/dental/vision insurance for spouse/family								
Long-term disability for self	\$	97			\$	97		
Deferred compensation								
Retirement benefit	\$	20,325			\$	21,117		
Other (please specify)								
Group Term Life Insurance	\$	72			\$	72		
Health and Wellness Center	\$	624			\$	624		
403B								
Additional life insurance		Value						
Annuity		Value						
Total	\$	161,291	\$-	\$ 23,230	\$	167,548	\$-	\$-

#### Other Compensation:

	FY 20	22 Actual Expend	itures	FY 202	3 Estimated Exper	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage Professional development	\$4,268			\$5,651		
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$4,268	\$0	\$0	\$5,651	\$0	\$0

Name: Dr. Cliff Davis

Institution:	Ozarks Technical Community College
Phone:	417-447-6643
Contact Person:	Drew Courtway

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		FY 20	022 Actual Expendi	tures		FY 202	3 Estimated Expen	ditures
			Private Funds				Private Funds	
	In	stitutional	(e.g. Institution	Amount Above	Ir	stitutional	(e.g. Institution	Amount Above
	Ope	rating Funds	Foundations)	Standard Benefit	Оре	erating Funds	Foundations)	Standard Benefit
Base salary	\$	147,357			\$	153,251		
Medical/dental/vision insurance for self	\$	7,573			\$	7,733		
Medical/dental/vision insurance for spouse/family								
Long-term disability for self	\$	97			\$	97		
Deferred compensation								
Retirement benefit	\$	22,465			\$	23,343		
Other (please specify)								
Group Term Life Insurance	\$	72			\$	72		
Health and Wellness Center	\$	624			\$	624		
403B								
Additional life insurance		Value						
Annuity		Value						
Total	\$	178,188	\$-	\$ 23,230	\$	185,120	\$-	\$-

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage	\$2,337			\$4,587		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$2,337	\$0	\$0	\$4,587	\$0	\$0

Name: Dr. Robert Griffith

Institution: Ozarks Technical Community College

Phone: 417-447-6643

Contact Person: Drew Courtway

## Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

		FY 20	022 Actual Expendi	tures		FY 202	3 Estimated Expen	ditures
		itutional	Private Funds (e.g. Institution	Amount Above		nstitutional	Private Funds (e.g. Institution	Amount Above
	Opera	ating Funds	Foundations)	Standard Benefit		erating Funds	Foundations)	Standard Benefit
Base salary	\$	135,660			\$	137,904		
Medical/dental/vision insurance for self	\$	7,573			\$	7,733		
Medical/dental/vision insurance for spouse/family								
Long-term disability for self	\$	97			\$	97		
Deferred compensation								
Retirement benefit	\$	20,769			\$	21,117		
Other (please specify)								
Group Term Life Insurance	\$	72			\$	72		
Health and Wellness Center	\$	624			\$	624		
403B								
Additional life insurance	· ·	Value						
Annuity	<u> </u>	Value						
					-			
Total	\$	164,795	\$-	\$ 23,230	\$	167,548	\$-	\$-

#### Other Compensation:

	FY 2	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage	\$2,577			\$3,635		
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$2,577	\$0	\$0	\$3,635	\$0	\$0

Name: Dr. Barbara Kavalier

Institution:	St. Charles Community College
Phone:	636-922-8000
Contact Person:	Jessica Trimborn

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	22 Actual Expend	itures	FY 202	3 Estimated Exper	nditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$268,675			\$278,392		
Medical/dental/vision insurance for self	\$12,630		\$4,401	\$14,244		\$5,630
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$831		\$831	\$900		\$900
Deferred compensation	\$2,154		\$2,154	\$14,000		\$14,000
Retirement benefit	\$39,970			\$41,759		
Other (please specify)						
Total	\$324,259	\$0	\$7,386	\$349,295	\$0	\$20,530
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	22 Actual Expend	litures	FY 2023	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$12,000			\$12,000		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Business Allowance	\$2,400			\$2,400		
TOTAL	\$14,400	\$0	\$0	\$14,400	\$0	\$0

Name: Jeff L. Pittman, Chancellor

Institution: St. Louis Community College Phone: 314-539-5208

Contact Person: Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$304,281			\$343,000		
Medical/dental/vision insurance for self	\$3,993			\$3,993		
Medical/dental/vision insurance for spouse/family	\$4,796			\$4,796		
Long-term disability for self	\$242			\$242		
Deferred compensation						
Retirement benefit						
Other (please specify) 403B	\$24,000		\$24,000	\$24,000		\$24,000
Total	\$337,312	\$0	\$24,000	\$376,031	\$0	\$24,000
Additional life insurance	Value					
Annuity	Value					

#### Other Compensation:

	FY 20	022 Actual Expendi	tures	FY 2023 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)	\$24,000			\$24,000		
Housekeeper Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)	\$11,100			\$11,100		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$8,992			\$4,274		
Other (please specify)						
TOTAL	\$44,092	\$0	\$0	\$39,374	\$0	\$0

Name: Elizabeth Perkins, Campus President Flo Valley

Institution:	St. Louis Community College
Phone:	314-539-5208

Contact Person: Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$161,616			\$173,939		
Medical/dental/vision insurance for self	\$9,318			\$9,318		
Medical/dental/vision insurance for spouse/family	\$7,056			\$7,056		
Long-term disability for self	\$242			\$242		
Deferred compensation						
Retirement benefit	\$24,785			\$26,572		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
Annuity	value					
TOTAL	\$203,016	\$0	\$0	\$217,127	\$0	\$0

#### Other Compensation:

	FY 20	021 Actual Expendi	tures	FY 202	2 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Julie Fickas, Campus President, Forest Park

Institution:	St. Louis Community College
Phone:	314-539-5208
Contact Person:	Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$158,620			\$170,715		
Medical/dental/vision insurance for self	\$9,367			\$9,367		
Medical/dental/vision insurance for spouse/family	\$7,300			\$7,300		
Long-term disability for self	\$242			\$242		
Deferred compensation						
Retirement benefit	\$24,358			\$26,112		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
			1			
				44.44		
TOTAL	\$199,886	\$0	\$0	\$213,735	\$0	\$0

#### Other Compensation:

	FY 20	021 Actual Expendi	tures	FY 202	2 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Feleccia Moore-Davis, Campus President Meramec

Institution: St. Louis Community College
Phone: 314-539-5208

Contact Person: Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 2023 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$158,620			\$170,715			
Medical/dental/vision insurance for self	\$9,367			\$9,367			
Medical/dental/vision insurance for spouse/family	\$6,032			\$6,032			
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$24,358			\$26,112			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$198,376	\$0	\$0	\$212,226	\$0	\$0	

#### Other Compensation:

	FY 20	021 Actual Expendi	tures	FY 202	2 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Stephen White, Current Campus President Wildwood

Institution: <u>St. Louis Community College</u> Phone: <u>314-539-5208</u>

Contact Person: Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$161,615			\$173,938		
Medical/dental/vision insurance for self	\$9,369			\$9,369		
Medical/dental/vision insurance for spouse/family	\$426			\$426		
Long-term disability for self	\$242			\$242		
Deferred compensation						
Retirement benefit	\$18,148			\$26,580		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
	Ć100.000	ćo	Ć.	6040 FFF	ćo	Ć.
TOTAL	\$189,800	\$0	\$0	\$210,555	\$0	\$0

#### Other Compensation:

	FY 20	021 Actual Expendi	tures	FY 202	2 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

\_\_\_\_

Name: Carol Lupardus, Past Campus President Wildwood

Employee retired 6/30/2022

Institution:	St. Louis Community College
Phone:	314-539-5208

Contact Person: Rose Ervin, Payroll Supervisor

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	FY 2023 Estimated Expenditures			
		Private Funds			Private Funds			
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$161,615			\$173,938				
Medical/dental/vision insurance for self								
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$24,668			\$0				
Other (please specify)								
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$186,283	\$0	\$0	\$173,938	\$0	\$0		

#### Other Compensation:

	FY 20	021 Actual Expendi	tures	FY 202	2 Estimated Expen	ditures
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)
Housing						
Utilities Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase) Automobile repair/maintenance/mileage Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Dr. Joanna Anderson (FY22) / Dr. Brent Bates (FY23)

Institution: State Fair Community College

Phone: 660.596.7301

Contact Person: Keith Acuff

#### **Direct Compensation:**

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 20	022 Actual Expendi	tures	FY 202	3 Estimated Expen	ditures
		Private Funds			Private Funds	
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$189,582			\$182,000		
Medical/dental/vision insurance for self	\$8,970			\$9,270		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$28,790			\$27,734		
Other (please specify) Life Insurance	\$140			\$177		
Total	\$227,482	\$0	\$0	\$219,181	\$0	\$0
Additional life insurance	Value					
Annuity	Value					
	Value					

#### Other Compensation:

	FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper							
Custodian, groundskeeper Insurance for personal property Entertainment							
Automobile							
Automobile allowance (provided for private lease/purchase)	\$4,800			\$6,000			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$4,800	\$0	\$0	\$6,000	<u>\$0</u>	\$0	

Name: Dr. Wesley Payne

Institution:	Three Rivers College
Phone:	573-840-9105
Contact Person:	Anita Freeman

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
		Private Funds			Private Funds		
	Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$225,848			\$227,647			
Medical/dental/vision insurance for self	\$7,901			\$8,143			
Medical/dental/vision insurance for spouse/family	\$0						
Long-term disability for self	\$0						
Deferred compensation	\$0						
Retirement benefit	\$33,894			\$34,190			
Other (please specify)							
Total	\$267,642	\$0	\$0	\$269,980	\$0	\$0	
Additional life insurance	Value						
Annuity	Value						

#### Other Compensation:

	FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institutional Foundations)	Estimated Value of Compensation (not reflected in budget)	
Housing							
Utilities Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)			\$4,220			\$13,947	
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Cell Phone	\$1,276			\$1,020			
TOTAL	\$1,276	\$0	\$4,220	\$1,020	\$0	\$13,947	

State Technical College

Name: Dr. Shawn Strong

Institution: State Technical College of Missouri

Phone: 573-897-5147

Contact Person: Jenny Jacobs

#### Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
	Private Funds			Private Funds		
Institutional	(e.g. Institution	Amount Above	Institutional	(e.g. Institution	Amount Above	
Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
\$213,696			\$235,066			
\$8,856			\$8,876			
\$951			\$1,046			
\$50,240			\$61,893			
\$273,743	\$0	\$0	\$306,881	\$0	\$0	
Value						
Value						
	Institutional Operating Funds \$213,696 \$8,856 \$951 \$50,240 \$50,240 \$273,743 Value	Private Funds       Institutional     Private Funds       Operating Funds     (e.g. Institution       \$213,696     \$8,856       \$8,856     \$951       \$951     \$50,240       \$50,240     \$       \$273,743     \$0       Value     \$	Institutional Operating Funds     Private Funds (e.g. Institution Foundations)     Amount Above Standard Benefit       \$213,696	Institutional Operating Funds     Private Funds (e.g. Institution Foundations)     Amount Above Standard Benefit     Institutional Operating Funds       \$213,696     \$235,066       \$8,856     \$8,876       \$951     \$1,046       \$951     \$1,046       \$50,240     \$61,893       \$273,743     \$0     \$0       \$273,743     \$0     \$306,881	Private Funds     Amount Above     Institutional     Private Funds       Operating Funds     Foundations)     Standard Benefit     Operating Funds     Foundations)       \$213,696     \$235,066     \$235,066     \$235,066       \$8,856     \$8,876     \$38,876       \$951     \$1,046       \$50,240     \$61,893       \$273,743     \$0     \$0       \$273,743     \$0     \$0	

#### Other Compensation:

	FY 2022 Actual Expenditures			FY 2023 Estimated Expenditures			
	Institutional	Private Funds (e.g. Institutional	Estimated Value of Compensation (not reflected in	Institutional	Private Funds (e.g. Institutional	Estimated Value of Compensation (not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing			\$15,000			\$17,500	
Utilities Housing allowance (provided for private rent/lease/purchase)	\$4,630			\$5,092			
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)			\$11,750			\$11,750	
Automobile repair/maintenance/mileage	\$6,896			\$6,000			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$11,526	\$0	\$26,750	\$11,092	\$0	\$29,250	