

June 2017

Table of Contents

<u>Public Four-year Universities</u>	
Harris-Stowe State University	1
Lincoln University	
Missouri Southern State University	3
Missouri State University	
Missouri State University – West Plains Campus	
Missouri Western State University	
Northwest Missouri State University	
Southeast Missouri State University	
Truman State University	
University of Central Missouri	
University of Missouri System	
University of Missouri – Columbia	
University of Missouri – Kansas City	
Missouri University of Science & Technology	15
University of Missouri – St. Louis	
·	
Public Two-year Colleges	
Crowder College	17
East Central College	
Jefferson College	
Metropolitan Community College	
Blue River2	20~21
Business & Technology	
Longview	
Maple Woods	
Penn Valley	25
Mineral Area College	
Moberly Area Community College	
North Central Missouri College	
Ozarks Technical Community College	30~32
St. Charles County Community College	33~35
St. Louis Community College	
St. Louis Community College at Florissant Valley	37
St. Louis Community College at Forest Park	
St. Louis Community College at Meramec & Wildwood	39
State Fair Community College	
Three Rivers Community College	
State Technical College	
State Technical College of Missouri	12~43

Public Four-Year Universities

Name: Dr. Dwaun J. Warmack
Institution: Harris-Stowe State University

Contact Person: Brian M. Huggins
Phone: 314-340-3335

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$237,786			\$237,786		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family	\$38,487			\$39,449		
Long-term disability for self	\$307		_	\$307		
Deferred compensation						
Retirement benefit	\$40,352			\$46,321		
Other (please specify)						
Life Insurance	\$174			\$174		
A D and D Insurance	\$304			\$304		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$317,410	\$0	\$0	\$324,341	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$40,000			\$40,000		
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)						
Annuity	\$18,000			\$18,000		
TOTAL	\$58,000	\$0	\$0	\$58,000	\$0	\$0

Name: Dr. Kevin Rome
Institution: Lincoln University
Phone: 573 681-5019
Contact Person: Jim Marcantonio HR Director

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	016 Actual Expendi	tures	FY 201	FY 2017 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	\$223,000			\$240,000				
Medical/dental/vision insurance for self	\$4,737			\$5,064				
Medical/dental/vision insurance for spouse/family	\$13,472			\$13,145				
Long-term disability for self	\$948			\$950				
Deferred compensation								
Retirement benefit	\$13,737			\$13,737				
Other (please specify) Annuity	\$21,500			\$21,500				
Adjunct Teaching				\$2,400				
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$277,394	\$0	\$0	\$296,796	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendi	tures	FY 2017 Estimated Expenditures		
			Estimated Value			Estimated Value
		Private Funds	of Compensation		Private Funds	of Compensation
	Institutional	(e.g. Institutional	(not reflected in	Institutional	(e.g. Institutional	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)
Housing	\$22,800			\$0		
Utilities						
Housing allowance (provided for private rent/lease/purchase)						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$9,000			\$9,000		
Automobile allowance (provided for private lease/purchase)						
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships		\$9,000			\$9,000	
Other (please specify)						
TOTAL	\$31,800	\$9,000	\$0	\$9,000	\$9,000	\$0

Name: Dr. Alan Marble

Institution: Missouri Southern State University

Contact Person: Evan Jewsbury, Director of Human Resources

Phone: 417-625-9805

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 2	016 Actual Expendit	ures	FY 201	7 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$184,217			\$189,442		
Medical/dental/vision insurance for self	\$7,066			\$7,035		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$238			\$238		
Deferred compensation	\$48,000		\$48,000	\$48,000		\$48,000
Retirement benefit	\$39,407			\$40,294		
Other (please specify)						
Additional life insurance	Value					
	\$0					
Annuity	Value					
TOTAL	\$278,928	\$0	\$48,000	\$285,008	\$0	\$48,000

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$3,594			\$3,594		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$3,594	\$0	\$0	\$3,594	\$0	\$0

Name: Clif Smart
Institution: Missouri State University

Contact Person: Tina McManus
Phone: (417) 836-4232

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$309,981			\$334,981		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family	\$5,978			\$5,978		
Long-term disability for self						
Deferred compensation						
Retirement benefit						
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
	†245.050	40	40	†340.050	40	40
TOTAL	\$315,959	\$0	\$0	\$340,959	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$40,000			\$40,000		
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	\$7,773			\$8,404	\$1,640	
Other (please specify)						
TOTAL	\$47,773	\$0	\$0	\$48,404	\$1,640	\$0

Name: Drew Bennett
Institution: Missouri State University-West Plains
Contact Person: Tina McManus
Phone: 417-836-4232

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 2	016 Actual Expendit	ures	FY 20:	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$161,252			\$164,477				
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)								
Additional life insurance	Value							
Annuity	Value							
				T				
TOTAL	6464.353	40	40	6464 477	40	40		
TOTAL	\$161,252	\$0	\$0	\$164,477	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	tures	FY 201	FY 2017 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	\$24,000			\$24,000			
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	\$2,328			\$2,573			
Other (please specify)							
TOTAL	\$26,328	\$0	\$0	\$26,573	\$0	\$0	

Name: Dr. Robert Vartabedian

Institution: Missouri Western State University

Contact Person: Sara Freemyer, Director of Human Resources

Phone: 816.271.4587

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$255,593			\$255,593		
Medical/dental/vision insurance for self	\$7,548			\$7,815		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$301			\$319		
Deferred compensation						
Retirement benefit	\$46,198			\$52,515		
Other Basic Life \$802, Annuity \$24,000	\$24,802			\$24,802		
Additional life insurance	Value					
	\$512,000					
Annuity	Value					
	\$24,000					
TOTAL	\$334,442	\$0	\$0	\$341,044	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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		,		- 1 - 3	,	3 3 3 3 3	
Utilities Housing allowance (provided for private rent/lease/purchase) Housekeeper	\$28,000			\$28,000			
Custodian, groundskeeper							
Insurance for personal property Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)	\$12,500			\$12,500			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings Club/other memberships	\$3,633			\$3,633			
Other (please specify)							
TOTAL	\$44,133	\$0	\$0	\$44,133	\$0	\$0	

Name: Dr. John Jasinski

Institution: Northwest Missouri State University

Contact Person: Anne Long

Phone: 660-562-1129

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 2	2016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$258,315			\$267,720			
Medical/dental/vision insurance for self	\$7,378			\$7,282			
Medical/dental/vision insurance for spouse/family	\$13,281			\$12,851			
Long-term disability for self	\$269			\$332			
Deferred compensation	\$12,000			\$12,000			
Retirement benefit	\$48,723			\$50,319			
Other (please specify)							
Basic Life Insurance (1x annual salary)	\$499			\$563			
Additional life insurance	\$268,000						
	(1x annual salary	provided)					
Annuity	Value						
TOTAL	\$340,465	\$0	\$0	\$351,067	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	, ,	,	\$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			\$1,200			\$1,200	
Other (please specify)							
TOTAL	\$0	\$0	\$27,000	\$0	\$0	\$27,000	

Name: Carlos Vargas-Aburto

Institution: Southeast Missouri State University

Contact Person: Melissia Coffee

Phone: (573) 986-6192

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 2	016 Actual Expendit	ures	FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$270,000			\$278,000		
Medical/dental/vision insurance for self	\$4,989			\$5,266		
Medical/dental/vision insurance for spouse/family	\$0			\$0		
Long-term disability for self	\$216			\$216		
Deferred compensation						
Retirement benefit	\$17,317			\$17,464		
Other (please specify)	\$1,093			\$929		
(Life Insurance, AD&D, Employee Assistance						
Program, Parking, and Cafeteria Plan)						
Additional life insurance	Value					
	\$0					
Annuity	Value					
	\$24,000					
TOTAL	\$293,614	\$0	\$0	\$301,874	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.	Estimated Value of Compensation		Private Funds (e.g.	Estimated Value of Compensation	
	Institutional	Institutional	(not reflected in	Institutional	Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing	\$30,000			\$30,000			
Utilities	\$5,707			\$5,707			
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$7,525			\$7,525			
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	\$43,232	\$0	\$0	\$43,232	\$0	\$0	

Name: Troy D. Paino FY16/Susan L. Thomas FY17
Institution: Truman State University

Contact Person: Dave Rector
Phone: 660-785-4100

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$241,500			\$233,334			
Medical/dental/vision insurance for self	\$6,675			\$6,675			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self	\$210			\$210			
Deferred compensation							
Retirement benefit	\$40,982		\$26,958	\$36,597			
Other (please specify)							
Basic Life	\$267			\$133			
AD&D	\$53			\$36			
FICA/Medicare	\$10,339			\$9,103			
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$300,026	\$0	\$26,958	\$286,088	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$10,500						
Housing allowance (provided for private rent/lease/purchase)				\$6,000			
Housekeeper	\$3,250			\$0			
Custodian, groundskeeper	\$2,109			\$0			
Insurance for personal property	\$407			\$0			
Entertainment		\$12,750			\$10,700		
Automobile Automobile allowance (provided for private lease/purchase)	\$1,271			\$3,000			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships		\$743			\$0		
Other (please specify)							
TOTAL	\$17,537	\$13,493	\$0	\$9,000	\$10,700	\$0	

Name: Dr. Charles M. Ambrose
Institution: University of Central Missouri
Contact Person: 660-543-8703

Phone: Sondra Moore

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$297,550			\$322,550			
Medical/dental/vision insurance for self	\$7,817			\$7,554			
Medical/dental/vision insurance for spouse/family				\$2,035			
Long-term disability for self	\$462			\$549			
Deferred compensation	\$25,000			\$25,000			
Retirement benefit	\$16,789			\$18,289			
Other (please specify)	\$20,000			\$20,000			
Relocation incentive							
Additional life insurance	Value						
Amerika	Value						
Annuity	Value						
TOTAL	\$367,618	\$0	\$0	\$395,977	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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			\$23,556			\$23,556	
Utilities Housing allowance (provided for private rent/lease/purchase)	\$9,133			\$7,400			
Housekeeper	\$8,502			\$8,320			
Custodian, groundskeeper	\$8,393			\$8,065			
Insurance for personal property							
Entertainment	\$1,409	\$789		\$1,200	\$1,000		
Automobile Automobile allowance (provided for private lease/purchase)	\$7,892			\$7,900			
Automobile repair/maintenance/mileage							
Professional development	\$4,494			\$2,500			
Expense for spouse/family to attend meetings		\$1,783			\$2,000		
Club/other memberships	\$75			\$75			
Other (please specify)							
TOTAL	\$39,898	\$2,572	\$23,556	\$35,460	\$3,000	\$23,556	

Name: Mun Choi - President (effective 3/1/2017)

Institution: University of Missouri System

Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2016 Actual Expenditures			FY 20	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary				\$441,667				
Medical/dental/vision insurance for self				\$3,828				
Medical/dental/vision insurance for spouse/family				\$6,078				
Long-term disability for self				\$246				
Deferred compensation				\$16,667				
Retirement benefit				\$12,738				
Other (please specify)								
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$0	\$0	\$0	\$481,224	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	operating and	roundations	zuogety	Univ Provided (No market value available)	,	zuogeti	
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile				\$5,835			
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)							
ER contribution to 401(a)				\$40,500			
TOTAL	\$0	\$0	\$0	\$46,335	\$0	\$0	

Name: Michael Middleton - President (interim through 2/28/2017)

Institution: University of Missouri System

Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2	016 Actual Expendit	ures	FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$477,544			\$119,386		
Medical/dental/vision insurance for self	\$2,891			\$3,889		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$148			\$222		
Deferred compensation	\$29,167			\$45,833		
Retirement benefit	\$37,190			\$39,173		
Other (please specify)						
Life Insurance	\$60			\$90		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$547,000	\$0	\$0	\$208,593	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$16,800			\$19,200			
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)	\$17,214			\$3,218			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
(e.g. ER contribution to 401(a)							
TOTAL	\$34,014	\$0	\$0	\$22,418	\$0	\$0	

Name: Henry Foley - Chancellor (interim)
Institution: University of Missouri - Columbia
Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$374,850			\$459,000			
Medical/dental/vision insurance for self	\$5,445			\$5,684			
Medical/dental/vision insurance for spouse/family	\$2,891			\$5,684			
Long-term disability for self	\$293			\$269			
Deferred compensation	\$55,000			\$0			
Retirement benefit	\$30,772			\$30,336			
Other (please specify)							
Incentive Pay	\$33,075			\$39,933			
Life Insurance	\$447			\$386			
Additional life insurance	Value						
Annuity	Value						
				T		•	
TOTAL	\$502,773	\$0	\$0	\$541,292	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$15,725			\$15,992			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
(e.g. ER contribution to 401(a)							
TOTAL	\$15,725	\$0	\$0	\$15,992	\$0	\$0	

Name: Leo Morton - Chancellor

Institution: University of Missouri - Kansas City

Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2016 Actual Expenditures			FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$305,409			\$305,409		
Medical/dental/vision insurance for self	\$5,019			\$6,543		
Medical/dental/vision insurance for spouse/family	\$5,019			\$6,243		
Long-term disability for self	\$294			\$296		
Deferred compensation						
Retirement benefit	\$40,204			\$40,369		
Other (please specify)						
Incentive	\$25,204			\$27,487		
Life Insurance	\$119			\$88		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$381,268	\$0	\$0	\$386,435	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$57,300			\$57,300			
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)	\$15,100			\$15,357			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
ER contribution to 401(a)	\$54,000			\$54,000			
TOTAL	\$126,400	\$0	\$0	\$126,657	\$0	\$0	

Name: Cheryl Schrader - Chancellor

Institution: Missouri University of Science & Technology (Rolla)

Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$334,950			\$334,950		
Medical/dental/vision insurance for self	\$4,557			\$4,342		
Medical/dental/vision insurance for spouse/family	\$7,774			\$6,926		
Long-term disability for self	\$294			\$271		
Deferred compensation	\$51,000					
Retirement benefit	\$37,525			\$36,965		
Other (please specify)						
Incentive	\$27,805			\$28,821		
Life Insurance	\$461			\$442		
Additional life insurance	Value					
A deficient line insurance	Value					
Annuity	Value					
TOTAL	\$464,366	\$0	\$0	\$412,717	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$7,280	<i>'</i>	20.08207	\$36,000	, , , , , , , , , , , , , , , , , , , ,	
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)	\$14,868			\$15,121		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
ER contribution to 401(a)				\$54,000		
TOTAL	\$22,148	\$0	\$0	\$105,121	\$0	\$0

Name: Thomas George - Chancellor

Institution: University of Missouri - St. Louis

Contact Person: Debora Hulett, Lead Compensation Consultant

Phone: 573-884-2021

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 2016 Actual Expenditures			FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$319,802			\$319,802		
Medical/dental/vision insurance for self	\$5,745			\$6,843		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$294			\$296		
Deferred compensation						
Retirement benefit	\$35,594			\$35,594		
Other (please specify)						
Incentive	\$24,385			\$27,533		
Life Insurance	\$81			\$81		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$385,901	\$0	\$0	\$390,149	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.	Estimated Value of Compensation		Private Funds (e.g.	Estimated Value of Compensation	
	Institutional	Institutional	(not reflected in	Institutional	Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
				Univ provided			
Housing				(No market value available)			
· ·				avallable)			
Utilities Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile				Univ provided			
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)							
ER contribution to 401(a)	\$54,000			\$54,000			
TOTAL	\$54,000	\$0	\$0	\$54,000	\$0	\$0	

Public Two-Year Colleges

Name: Jennifer Methvin
Institution: Crowder College

Contact Person: Amy Rand
Phone: (417)455-5533

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$156,863			\$161,569			
Medical/dental/vision insurance for self	\$6,600			\$6,660			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$23,702			\$24,393			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$187,165	\$0	\$0	\$192,622	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$15			\$15			
Other (please specify)							
TOTAL	\$15	\$0	\$0	\$15	\$0	\$0	

Name: Carl J. Bauer

Institution: East Central College

Contact Person: Karen Rinne HR Specialist

Phone: 636-584-6711

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 2	016 Actual Expendit	ures	FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$147,755			\$150,242		
Medical/dental/vision insurance for self	\$7,260			\$7,370		
Medical/dental/vision insurance for spouse/family	\$7,126			\$7,236		
Long-term disability for self	\$224			\$242		
Deferred compensation						
Retirement benefit	\$22,477			\$22,854		
Other (please specify)						
Travel	\$6,000			\$6,000		
Health Savings Account	\$5,200			\$5,200		
Life Insurance Premium Benefit	\$139			\$122		
Additional life insurance	Value					
The college provides \$100,000 Basic Life- Dr. Bauer	purchased an addi	tional \$140,000				
Annuity	Value					
TOTAL	¢406.404	40	40	¢100.255	40	40
TOTAL	\$196,181	\$0	\$0	\$199,266	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)							
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Dr. Ray Cummiskey, President

Institution: Jefferson College

Contact Person: Daryl Gehbauer, Vice President Finance and Administration

Phone: (636)481-3120

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$212,022			\$217,889		
Medical/dental/vision insurance for self	\$5,834			\$6,138		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$236			\$236		
Deferred compensation						
Retirement benefit	\$31,853			\$32,742		
Other (please specify) Insurance Reimbursement	\$1,821			\$1,780		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$251,767	\$0	\$0	\$258,785	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)							
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Mark James - Chancellor

Institution: Metropolitan Community College - Blue River

Contact Person: Shelley Kneuvean - 816-604-1253

Phone: 816-604-1011

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 2016 Actual Expenditures			FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$251,256			\$251,256		
Medical/dental/vision insurance for self	\$9,435			\$10,203		
Medical/dental/vision insurance for spouse/family	\$0			\$0		
Long-term disability for self	\$882			\$882		
Deferred compensation						
Retirement benefit	\$36,432			\$36,432		
Other (please specify)						
403b	\$1,000			\$1,000		
Life insurance	\$1,814		\$605	\$1,814		\$605
Additional life insurance	Value					
	\$0					
Annuity	Value					
	\$0					
TOTAL	\$300,819	\$0	\$605	\$301,587	\$0	\$605

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$3,848			\$3,600			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$3,848	\$0	\$0	\$3,600	\$0	\$0	

Name: Michael Banks - President

Institution: Metropolitan Community College - Blue River

Contact Person: Shelley Kneuvean - 816-604-1253

Phone: 816-604-6542

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$162,633			\$168,011		
Medical/dental/vision insurance for self	\$7,840			\$8,470		
Medical/dental/vision insurance for spouse/family	\$9,856			\$10,327		
Long-term disability for self	\$588			\$630		
Deferred compensation						
Retirement benefit	\$23,582			\$24,362		
Other (please specify)						
403b	\$1,000			\$1,000		
Life Insurance	\$1,171		\$391	\$1,212		\$403
Additional life insurance	Value					
Additional me insurance	\$0					
Annuity	Value					
	\$0					
TOTAL	\$206,670	\$0	\$391	\$214,012	\$0	\$403

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$6,985			\$7,200			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$6,985	\$0	\$0	\$7,200	\$0	\$0	

Name: Jackie Gill - President (start date 2/29/16)

Institution: Metropolitan Community College - BTC

Contact Person: Shelley Kneuvean 816-604-1253

Phone: 816-604-5250

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 2016 Actual Expenditures			FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
	\$51,688			4454 000			
Base salary	(prorated)			\$151,000			
Medical/dental/vision insurance for self	\$6,533			\$8,470			
Medical/dental/vision insurance for spouse/family	\$0			\$0			
Long-term disability for self	\$455			\$634			
Deferred compensation							
Retirement benefit	\$7,498			\$21,895			
Other (please specify)							
403b	\$0			\$1,000			
Life Insurance	\$1,087		\$362	\$1,087		\$362	
Additional life insurance	Value						
	\$0						
Annuity	Value						
	\$0						
TOTAL	\$67,261	\$0	\$362	\$184,086	\$0	\$362	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$3,000			\$7,200			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$3,000	\$0	\$0	\$7,200	\$0	\$0	

Name: Kirk Nooks - President

Institution: Metropolitan Community College - Longview

Contact Person: Shelley Kneuvean 816-604-1253

Phone: 816-604-2414

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$154,800			\$159,396		
Medical/dental/vision insurance for self	\$7,840			\$8,470		
Medical/dental/vision insurance for spouse/family	\$9,856			\$10,327		
Long-term disability for self	\$546			\$588		
Deferred compensation						
Retirement benefit	\$22,446			\$23,112		
Other (please specify)						
403B	\$0			\$0		
Life Insurance	\$1,116		\$372	\$1,150		\$384
A 1 1995 - 1 1965 -						
Additional life insurance	Value					
	\$0					
Annuity	Value					
	\$0					
TOTAL	\$196,604	\$0	\$372	\$203,043	\$0	\$384

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$5,989			\$7,200			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$5,989	\$0	\$0	\$7,200	\$0	\$0	

Name: Utpal Goswami

Institution: Metropolitan Community College - Maple Woods

Contact Person: Shelley Kneuvean 816-604-1253

Phone: 816-604-3046

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$159,960			\$164,659		
Medical/dental/vision insurance for self	\$7,840			\$8,470		
Medical/dental/vision insurance for spouse/family	\$6,172			\$6,317		
Long-term disability for self	\$588			\$588		
Deferred compensation						
Retirement benefit	\$23,194			\$23,876		
Other (please specify)						
403b	\$1,000			\$1,000		
Life Insurance	\$1,152		\$384	\$1,186		\$396
Additional life insurance	Value					
	\$0					
Annuity	Value					
	\$0					
TOTAL	\$199,906	\$0	\$384	\$206,096	\$0	\$396

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$7,723			\$7,200			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$7,723	\$0	\$0	\$7,200	\$0	\$0	

Name: Joseph Seabrooks*

Institution: Metropolitan Community College - Penn Valley

Contact Person: Shelley Kneuvean 816-604-1253

Phone: 816-604-4205

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 2016 Actual Expenditures			FY 201	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit		Foundations)	Standard Benefit		
Base salary	\$174,731			\$160,000				
Medical/dental/vision insurance for self	\$7,840			\$8,470				
Medical/dental/vision insurance for spouse/family	\$9,856			\$0				
Long-term disability for self	\$630			\$630				
Deferred compensation								
Retirement benefit	\$25,336			\$23,200				
Other (please specify)								
403b	\$1,000			\$1,000				
Life Insurance	\$1,219		\$408	\$1,152		\$384		
Additional life insurance	\$0							
Annuity	\$0							
TOTAL	\$220,612	\$0	\$408	\$194,452	\$0	\$384		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
			Estimated Value			Estimated Value	
		Private Funds (e.g.	of Compensation		Private Funds (e.g.	of Compensation	
	Institutional	Institutional	(not reflected in	Institutional	Institutional	(not reflected in	
	Operating Funds	Foundations)	budget)	Operating Funds	Foundations)	budget)	
Housing							
Utilities							
Housing allowance (provided for private rent/lease/purchase)							
Housekeeper							
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile	\$4,698			\$7,200			
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	\$4,698	\$0	\$0	\$7,200	\$0	\$0	

^{*}In FY 2017, this position was filled with an independent contractor acting as the interim president. This is a contract and the compensation does not run through the College's payroll system

Name: Steven Kurtz
Institution: Mineral Area College
Contact Person: Sarah Dement
Phone: 573-518-2129

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 2	016 Actual Expendit	ures	FY 20:	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$171,976			\$177,135				
Medical/dental/vision insurance for self	\$6,939			\$7,186				
Medical/dental/vision insurance for spouse/family								
Long-term disability for self	\$223			\$200				
Deferred compensation	\$23,000			\$25,000				
Retirement benefit	\$25,943			\$26,727				
Other (please specify)								
Stipends	\$203			\$101				
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$228,284	\$0	\$0	\$236,349	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$5,350 \$1,552			\$5,350 \$1,552			
Automobile repair/maintenance/mileage	\$398			\$387			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships Other (please specify)							
Cell Phone	\$1,321			\$1,200			
TOTAL	\$8,621	\$0	\$0	\$8,489	\$0	\$0	

Name: Jeffery C. Lashley

Institution: Moberly Area Community College

Contact Person: Ann Parks

Phone: 660 263 4100 ext. 11272

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 2	016 Actual Expendit	ures	FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$171,000			\$171,000		
Medical/dental/vision insurance for self	\$8,537		\$295	\$7,501		\$180
Medical/dental/vision insurance for spouse/family	\$11,684		\$11,684	\$12,055		\$12,055
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$26,033			\$25,883		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$217,254	\$0	\$11,979	\$216,439	\$0	\$12,235

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$9,000			\$9,000			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Cell phone	\$646			\$650			
TOTAL	\$9,646	\$0	\$0	\$9,650	\$0	\$0	

Name: Dr. Lenny Klaver (started May 2016)
Institution: North Central Missouri College
Contact Person: Tyson Otto

Phone: 660-359-3948, ext 1500

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 2	016 Actual Expendit	ures	FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$18,851			\$145,580		
Medical/dental/vision insurance for self	\$464			\$5,835		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$2,801			\$21,955		
Other (please specify)						
Life Insurance	\$19			\$120		
Additional life insurance	Value					
	\$50,000					
Annuity	Value					
TOTAL	\$22,135	\$0	\$0	\$173,490	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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					\$1,200		
Automobile Automobile allowance (provided for private lease/purchase)	\$667			\$8,000			
Automobile repair/maintenance/mileage	\$1,767			\$10,500			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships				\$500			
Other (please specify)							
Phone Stipend	\$90			\$720			
Medical Allowance	\$0			\$500			
Moving Expenses	\$2,648						
TOTAL	\$5,172	\$0	\$0	\$20,220	\$1,200	\$0	

Name: Dr. Neil Nuttall (retired June 2016)
Institution: North Central Missouri College
Contact Person: Tyson Otto
Phone: 660-359-3948, ext 1500

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$135,580						
Medical/dental/vision insurance for self	\$5,523						
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$20,460						
Other (please specify)							
Life Insurance	\$161						
Paid-time off payout	\$20,858						
Additional life insurance	Value						
	\$50,000						
Annuity	Value						
TOTAL	\$182,582	\$0	\$0	\$0	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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		\$1,200					
Automobile Automobile allowance (provided for private lease/purchase)	\$8,000						
Automobile repair/maintenance/mileage	\$7,980						
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Phone Stipend	\$630						
TOTAL	\$16,610	\$1,200	\$0	\$0	\$0	\$0	

Name: Dr. Hal Higdon

Institution: Ozarks Technical Community College

Contact Person: 417-447-4842

Phone: Marla Moody

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 2	016 Actual Expendit	ures	FY 201	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$246,472			\$251,402				
Medical/dental/vision insurance for self	\$6,159			\$6,342				
Medical/dental/vision insurance for spouse/family	\$8,598		\$8,598	\$2,758		\$2,758		
Long-term disability for self	\$130			\$130				
Deferred compensation								
Retirement benefit	\$41,712			\$42,448				
Other (please specify)								
Group Term Life Insurance	\$102			\$102				
Health and Wellness Center	\$600			\$600				
403b	\$23,000		\$23,000	\$23,000		\$23,000		
Additional life insurance	Value							
Annuity	Value							
			ı					
TOTAL	\$326,773	\$0	\$31,598	\$326,782	\$0	\$25,758		

Other Compensation:

	FY 2016 Actual Expenditures			FY 2017 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)	\$12,000			\$12,000			
Automobile repair/maintenance/mileage	\$633			\$340			
Professional development Expense for spouse/family to attend meetings							
Club/other memberships	\$420			\$420			
Other (please specify)							
TOTAL	\$13,053	\$0	\$0	\$12,760	\$0	\$0	

Name: Dr. Jeffrey Jochems

Institution: Ozarks Technical Community College - Richwood Valley Campus

Contact Person: 417-447-4842

Phone: Marla Moody

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 2016 Actual Expenditures		FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$131,112			\$136,356		
Medical/dental/vision insurance for self	\$6,298			\$6,535		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$130			\$130		
Deferred compensation						
Retirement benefit	\$19,910			\$20,715		
Other (please specify)						
Group Term Life Insurance	\$102			\$102		
Health and Wellness Center	\$600			\$600		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$158,152	\$0	\$0	\$164,438	\$0	\$0

Other Compensation:

	FY 2016 Actual Expenditures			FY 2017 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	\$2,187			\$1,232			
Professional development							
Expense for spouse/family to attend meetings Club/other memberships							
Other (please specify)							
TOTAL	\$2,187	\$0	\$0	\$1,232	\$0	\$0	

Name: Mr. Cliff Davis

Institution: Ozarks Technical Community College - Table Rock Campus

Contact Person: (417) 447-4842

Phone: Marla Moody

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 2016 Actual Expenditures		FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$131,112			\$136,356		
Medical/dental/vision insurance for self	\$6,219			\$6,342		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$130			\$130		
Deferred compensation						
Retirement benefit	\$19,910			\$20,715		
Other (please specify)						
Group Term Life Insurance	\$102			\$102		
Health and Wellness Center	\$600			\$600		
Additional life insurance	Value					
Annuity	Value					
				l		
TOTAL	\$158,073	\$0	\$0	\$164,245	\$0	\$0

Other Compensation:

	FY 2016 Actual Expenditures			FY 2017 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)	\$9,600			\$9,600			
Automobile repair/maintenance/mileage	\$3,958			\$2,098			
Professional development Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$13,558	\$0	\$0	\$11,698	\$0	\$0	

Name: Ron Chesbrough
Institution: St. Charles Community College
Contact Person: Justine Lundin

Phone: 636-922-8593

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 2	016 Actual Expendit	ures	FY 20:	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$97,897			\$89,739				
Medical/dental/vision insurance for self								
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$14,195			\$13,012				
Other (please specify)								
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$112,092	\$0	\$0	\$102,751	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$3,800			\$2,100			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships	\$6,050			\$3,850			
Other (please specify)							
Cell phone	\$715			\$455			
TOTAL	\$10,565	\$0	\$0	\$6,405	\$0	\$0	

Name: Todd Galbierz - Interim President
Institution: St. Charles Community College
Contact Person: Justine Lundin
Phone: 636-922-8593

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 2	016 Actual Expendit	ures	FY 201	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$51,515			\$22,078				
Medical/dental/vision insurance for self								
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$7,470			\$3,201				
Other (please specify)								
Additional life insurance	Value							
Annuity	Value							
	4=0.004	40		40-0-0		40		
TOTAL	\$58,984	\$0	\$0	\$25,279	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)	\$2,100			\$900			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$2,100	\$0	\$0	\$900	\$0	\$0	

Name: Dr. Barbara Kavalier

Institution: St. Charles Community College

Contact Person: Justine Lundin

Phone: 636-922-8593

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 2016 Actual Expenditures			FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary				\$216,000		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit				\$31,320		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$0	\$0	\$0	\$247,320	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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				\$6,000		
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile Automobile allowance (provided for private lease/purchase)				\$7,200		
Automobile repair/maintenance/mileage						
Professional development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Cell phone				\$1,560		
Relocation				\$10,000		
TOTAL	\$0	\$0	\$0	\$24,760	\$0	\$0

Name: Jeff Pittman, Chancellor
Institution: St Louis Community College
Contact Person: Ron Portman, Payroll Supervisor
Phone: 314-539-5208

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$260,000			\$267,800			
Medical/dental/vision insurance for self	\$42			\$36			
Medical/dental/vision insurance for spouse/family	\$34			\$29			
Long-term disability for self	\$272			\$272			
Deferred compensation							
Retirement benefit	\$38,425			\$40,163			
Other (please specify)							
403(b)			\$18,000		\$18,000		
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$298,773	\$0	\$18,000	\$308,300	\$18,000	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$29,000	Touridationsy	buageti	\$24,000	, , , , , , , , , , , , , , , , , , , ,	buugetij	
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)	\$11,100			\$11,100			
Automobile repair/maintenance/mileage							
Professional development Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$40,100	\$0	\$0	\$35,100	\$0	\$0	

Name: Ruby Curry, Interim President

Institution: St Louis Community College, Florissant Valley

Contact Person: Ron Portman, Payroll Supervisor

Phone: 314-539-5208

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 2016 Actual Expenditures			FY 201	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$159,533					
Medical/dental/vision insurance for self	\$6,602					
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$249					
Deferred compensation						
Retirement benefit	\$24,090					
Other (please specify)						
403(b)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$190,474	\$0	\$0	\$0	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)							
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Roderick Nunn, Interim President

Institution: St Louis Community College, Forest Park

Contact Person: Ron Portman, Payroll Supervisor

Phone: 314-539-5208

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 2	016 Actual Expendit	ures	FY 20:	17 Estimated Expend	ditures
		Private Funds (e.g.			Private Funds (e.g.	
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit
Base salary	\$119,650					
Medical/dental/vision insurance for self	\$5,353					
Medical/dental/vision insurance for spouse/family	\$269					
Long-term disability for self	\$204					
Deferred compensation						
Retirement benefit	\$18,125					
Other (please specify)						
403(b)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$143,601	\$0	\$0	\$0	\$0	\$0

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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)							
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Pamela McIntyre, President

Institution: St Louis Community College, Meramec and Wildwood

Contact Person: Ron Portman, Payroll Supervisor

Phone: 314-539-5208

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 2	016 Actual Expendit	ures	FY 20:	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$14,400							
Medical/dental/vision insurance for self								
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$2,088							
Other (please specify)								
403(b)								
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$16,488	\$0	\$0	\$0	\$0	\$0		

Other Compensation:

	FY 2016 Actual Expenditures			FY 2017 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)							
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	

Name: Dr. Joanna J Anderson

Institution: State Fair Community College

Contact Person: Garry Sorrell

Phone: (660) 596-7301

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$156,060			\$166,060			
Medical/dental/vision insurance for self	\$6,809			\$7,018			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$23,383			\$24,852			
Other (please specify) Life insurance	\$231			\$198			
Additional life insurance	Value						
Annuity	Value						
				T		ı	
TOTAL	\$186,483	\$0	\$0	\$198,128	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$16,800			\$6,804			
Custodian, groundskeeper Insurance for personal property Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)	\$4,800			\$4,800			
Automobile repair/maintenance/mileage Professional development							
Expense for spouse/family to attend meetings Club/other memberships Other (places specific)							
Other (please specify)							
TOTAL	\$21,600	\$0	\$0	\$11,604	\$0	\$0	

Name: Dr. Wesley Payne
Institution: Three Rivers College
Contact Person: Anita Freeman
Phone: 573-840-9105

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary	\$180,250			\$182,954			
Medical/dental/vision insurance for self	\$6,346			\$6,592			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$27,092			\$27,484			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$213,688	\$0	\$0	\$217,030	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$12,000			\$12,000			
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)	\$588			\$664			
Automobile repair/maintenance/mileage							
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Cell Phone	\$640			\$700			
TOTAL	\$13,228	\$0	\$0	\$13,364	\$0	\$0	

State Technical College

Name: Dr. Donald M. Claycomb - Retired effective 6/30/2016

Institution: State Technical College of Missouri

Contact Person: Jenny Jacobs

Phone: 573-897-5147

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 2016 Actual Expenditures			FY 201	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.			
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above		
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit		
Base salary	\$217,695							
Medical/dental/vision insurance for self	\$6,052							
Medical/dental/vision insurance for spouse/family								
Long-term disability for self								
Deferred compensation								
Retirement benefit	\$33,940							
Other (please specify)								
Additional life insurance	Value							
Annuity	Value							
TOTAL	\$257,687	\$0	\$0	\$0	\$0	\$0		

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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	\$5,600						
Automobile allowance (provided for private lease/purchase)							
Automobile repair/maintenance/mileage	\$1,730						
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
TOTAL	\$7,330	\$0	\$0	\$0	\$0	\$0	

Name: Dr. Shawn Strong - Started 7/1/16
Institution: State Technical College of Missouri
Contact Person: Jenny Jacobs
Phone: 573-897-5147

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 2	016 Actual Expendit	ures	FY 2017 Estimated Expenditures			
		Private Funds (e.g.			Private Funds (e.g.		
	Institutional	Institution	Amount Above	Institutional	Institution	Amount Above	
	Operating Funds	Foundations)	Standard Benefit	Operating Funds	Foundations)	Standard Benefit	
Base salary				\$180,000			
Medical/dental/vision insurance for self							
Medical/dental/vision insurance for spouse/family				\$6,867			
Long-term disability for self							
Deferred compensation							
Retirement benefit				\$30,546			
Other (please specify)							
Additional life insurance	Value						
Annuity	Value						
TOTAL	\$0	\$0	\$0	\$217,413	\$0	\$0	

Other Compensation:

	FY 2	016 Actual Expendit	ures	FY 2017 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				\$13,308			
Custodian, groundskeeper							
Insurance for personal property							
Entertainment							
Automobile Automobile allowance (provided for private lease/purchase)				\$5,600			
Automobile repair/maintenance/mileage				\$2,000			
Professional development							
Expense for spouse/family to attend meetings							
Club/other memberships							
Other (please specify)							
Moving expenses included in gross pay - \$1,050.00				\$3,506			
TOTAL	\$0	\$0	\$0	\$24,414	\$0	\$0	