

The Commission on Equitable Compensation and Moving Expenses

Request for Equitable Compensation Grant - 2024

(Incomplete Form Will Be Returned)

Date of Application _____ Funding Period: _____ to _____

Pastor's Name: _____ Work Phone: _____ Cell Phone: _____

Mailing Address: _____

E-Mail Address _____

PASTOR'S CONFERENCE MEMBERSHIP:

- Full Member Associate Member Provisional Member
 Approved Local Pastor Other Denomination Other _____

COMPENSATION TO BE PAID BY THE LOCAL CHURCH(ES): (do not include requested grant amount)

Name of Church(es) <small>(each church if more than one on Charge)</small>	Membership	Housing Allowance (Parsonage)	Worship Attendance	Base Salary (Do not include grant amount)	SPRC Chair Initials
Total (add all Lines of Base Salary) ENTER THIS AMOUNT ON LINE "E" BELOW	Leave Blank				Leave Blank

MINIMUM BASE COMPENSATION CALCULATION:

(Please refer to table on reverse side for Minimum Base Compensation and additions for number of years of service)

- A. Minimum Base Compensation (see instructions on other side) \$ _____
- B. Additional Compensation for years of service (see instructions on other side) \$ _____
- C. Additional Compensation for multi-point Charge (see instructions on other side) \$ _____
- D. **Total Minimum Base Compensation due pastor** (add A + B + C) \$ _____
- E. **Base Salary to be Paid by Local Church(es)** (same as shown in chart above) \$ _____
- F. **Amount Requested from the Equitable Compensation Fund (D - E)** \$ _____
- Note: This amount CANNOT be more than 50% of line D

Additional Information: (Refer to the Equitable Compensation Report in the latest Conference Journal)

- Has Pastor's compensation been approved at Charge/Church Conference? YES NO Date _____
- Has a stewardship/financial campaign been concluded in the last year? YES NO
- Does pastor's reimbursable expense equal 13% or greater of the pastor's compensation? YES NO \$ _____
- Were Ministerial Support, World Service / Conference Benevolence paid in full in the last year? YES NO
- If this is not a 1st time, full calendar year request, has charge increased amount paid to pastor by at least 10%? YES NO
- Is the church's upcoming year budget and a previous or current-year financial statement showing revenues and expenditures included? YES NO

If the answer to any of the above questions is "NO", an explanation is required in the District Superintendent's cover letter.

Number of years this exact charge has received Equitable Compensation? _____

Number of paid staff (not including clergy): Full-time _____ Part-time _____ Total value of unrestricted funds \$ _____

Finance Chair(s) Signature(s) _____ Pastor's Signature _____

District Superintendent's Signature _____

Revised 12-23

INSTRUCTIONS (1 through 7)

1. Grants are usually made on a January to January basis. If applying for a partial year, use annual figures in this request and indicate the number of months for the request in the Funding Period section.
(Note: Requests which overlap two calendar years will not be approved.)

2. This is the approved schedule for 2024. This will be the Minimum Base Compensation - Line A.

MINIMUM BASE COMPENSATION LEVELS ADOPTED FOR THE YEAR 2024	
\$45,750	Full or Provisional Members of the Annual Conference
\$42,550	Associate Members of the Annual Conference
\$39,020	Approved Local Pastor or an approved minister from another denomination

3. To calculate additional compensation for years of service (Line B) use this table. Each calculation has been rounded up to the next dollar.

ADDITIONAL COMPENSATION FOR YEARS OF SERVICE COMPLETED				
Year	Amount		Year	Amount
1	\$0		11	\$750
2	\$75		12	\$825
3	\$150		13	\$900
4	\$225		14	\$975
5	\$300		15	\$1,050
6	\$375		16	\$1,125
7	\$450		17	\$1,200
8	\$525		18	\$1,275
9	\$600		19	\$1,350
10	\$675		20 or more	\$1,425

4. Additional Compensation for Multi-point Charge (Line C) is \$200 for second church and \$100 for each additional church.

5. To be eligible for participation each charge must show signs of viability including, but not limited to:

- a) An average worship attendance of at least 45 is recommended. For churches with lower attendance the district superintendent will submit in writing his/her understanding of the reasons for the charge's viability.
- b) Conduct an every member stewardship program each year.
- c) Increase the amount the local church is paying toward the pastor's compensation by at least 10% each full calendar year.
- d) Adopt an ARP for professional expenses which is at least 13% of total compensation.
- e) Every church is expected to pay apportionments in full. Any church paying less than 100% will be expected to increase the percentage of apportionments paid by not less than 10% per year while receiving assistance.
- f) Describe the mission field to which the church or charge is called to relate and what specific missional goals, strategies, and plans the church or charge has for reaching that missional field.
- g) Pay the Pastor's health insurance and pension direct billing per the policy of the Annual Conference.

Failure to comply with any of these conditions must be explained in writing by the District Superintendent.

6. Requests for equitable compensation must be submitted in accordance with the following standardized format set by the Commission:

- a) A cover letter from the district superintendent, which shall explain any extenuating circumstances, especially for requests beyond the 3 year maximum policy and/or charges that are declining in membership, and/or failing to pay apportionments in full. The cover letter shall have four (4) attachments:
- b) Request form initialed by the SPRC Chair(s) and signed by the Finance Chair(s), Pastor, and DS
- c) A copy of the charge's previous year's financial statement to include revenue and expenses and all funds on hand at the end of the year
- d) A brief summary of the charge's vision and goals for the forthcoming year
- f) A copy of the upcoming year's budget

7. Applications should be submitted by the church or the District Superintendent to Nan Pyle at npyle@riotexas.org. Requests that are not submitted in accordance with the above instructions will be returned for proper completion.