



# 2019–2020 TASB/TASA Superintendent Salary Survey

HR Services  
Texas Association of School Boards

**Due Date: August 20, 2019**

To participate online, go to <http://hrservices.tasb.org/surveys>. A user name and password is required and was e-mailed to superintendents on July 23, 2019.  
Call 800.580.7782 if you need this information.

## District Information

District Name:	
Education Service Center:	
County-District Number:	
Name of Person Completing Survey:	
Position:	
Phone Number:	
Extension:	
E-mail Address:	

What is the district's estimated student enrollment for the 2019–2020 school year?

Is the current superintendent an interim assignment?

Yes

No

**If “Yes”, stop here and submit this survey, otherwise, continue to the next page.**

## Superintendent Experience

*Please round decimals to nearest whole number. If less than one year's experience, report 0.*

Years of experience as a superintendent in the <b>current district</b> as of September 1, 2019:	
Years of experience as a superintendent in <b>all districts</b> including current:	
Total <b>number of all districts</b> the superintendent has served in <b>as a superintendent</b> :	
Total years in education in <b>all districts and all positions</b> :	

Is the superintendent a retired employee?

Yes

No

## Superintendent Salary

*Base salary only; do not include allowances or benefits.*

What is the superintendent's base salary <b>this year</b> (2019–2020)?	\$
What was the superintendent's base salary <b>last year</b> (2018–2019)? <i>(Leave blank if this is the first year as superintendent for this district.)</i>	\$

## Superintendent Incentive Pay

*An incentive or bonus is taxable income, in addition to base salary, paid directly to the superintendent, usually in a single payment.*

Is there an incentive or bonus pay plan for the superintendent?

Yes

No

<i>Skip this question if the above response is "No".</i>	Yes	No	If yes, provide <b>annual</b> amount	Incentive/bonus given for:
Was an incentive or bonus paid to the superintendent in 2018–2019?	<input type="checkbox"/>	<input type="checkbox"/>	\$	<input type="checkbox"/> Performance <input type="checkbox"/> Retention <input type="checkbox"/> Other

Incentive/Bonus Comments:

## Transportation Benefits

	Yes No
Is a vehicle provided by the district for the sole use of the superintendent?	<input type="checkbox"/> <input type="checkbox"/>

	Yes No	If yes, provide <b>annual</b> amount
Is a set allowance paid to the superintendent for the business use of his or her personal vehicle? <i>Do not include mileage reimbursement.</i>	<input type="checkbox"/> <input type="checkbox"/>	\$

## Other Allowances

	Yes No	If yes, provide <b>annual</b> amount
Does the district pay for the superintendent's personal membership to any civic, private, or professional organizations and clubs?	<input type="checkbox"/> <input type="checkbox"/>	\$
Does the district pay a communication allowance (for cell phone and/or home internet) to the superintendent?	<input type="checkbox"/> <input type="checkbox"/>	\$
Does the district pay a business expense allowance to the superintendent? <i>Do not include expense reimbursement or transportation/vehicle allowance.</i>	<input type="checkbox"/> <input type="checkbox"/>	\$

## Housing Assistance

	Yes No
Does the district subsidize the cost of housing for the superintendent?	<input type="checkbox"/> <input type="checkbox"/>

**If "No", continue to health insurance section beginning on page 4.**

	Yes No
Does the district provide a residence at no cost or reduced cost for the superintendent?	<input type="checkbox"/> <input type="checkbox"/>

	Yes No	If yes, provide <b>annual</b> amount
Does the district provide a housing allowance to cover the cost of rent, utilities, or other housing expenses for the superintendent?	<input type="checkbox"/> <input type="checkbox"/>	\$

## Health Insurance

Does the superintendent participate in the district's health insurance plan?	Yes No <input type="checkbox"/> <input type="checkbox"/>
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**If “No”, continue to life insurance section beginning on page 5.**

Does the superintendent receive a health insurance premium benefit beyond what other full-time employees receive? (*i.e., the district pays more towards the superintendent's monthly premium, or pays for coverage of the superintendent's dependents*)

Yes

No

What type of coverage does the superintendent elect?

Superintendent only

Superintendent and spouse

Superintendent and children

Superintendent and family

Is this a TRS-ActiveCare plan?

Yes

No

If this is a TRS-ActiveCare plan, please indicate which plan.  
(*Note: We do not disclose the type of plan an individual chooses.*)

ActiveCare 1-HD (High Deductible)

ActiveCare Select

ActiveCare 2

FirstCare

Scott & White

Blue Essentials (BlueCross BlueShield of Texas)

## Health Insurance (continued)

What is the total monthly premium for the superintendent's health insurance plan?  
 If TRS-ActiveCare plan, see table below.

How much of the superintendent's total monthly health insurance premium is paid by the district each month? *Minimum is \$225 (includes \$75 from state funds).*

### 2019–2020 TRS ActiveCare and HMO Total Monthly Premiums

Coverage Category	ActiveCare 1-HD (High Deductible)	ActiveCare Select	ActiveCare2	FirstCare	Scott & White	Blue Essentials
Employee Only	\$378	\$556	\$852	\$561	\$559	\$487
Employee & Spouse	\$1,066	\$1,367	\$2,020	\$1,417	\$1,307	\$1,178
Employee & Children	\$722	\$902	\$1,267	\$892	\$877	\$762
Employee & Family	\$1,415	\$1,718	\$2,389	\$1,455	\$1,457	\$1,249

Health Insurance Comments:

## Life Insurance

	Yes	No
Is the superintendent provided with a <b>different</b> life insurance policy than any policy provided to other employees?	<input type="checkbox"/>	<input type="checkbox"/>

<i>Answer this question if the above response is "Yes".</i>	If yes, provide <b>annual</b> cost to the district	Term	Whole Life	Policy Face Value
What are the details of the policy?	\$	<input type="checkbox"/>	<input type="checkbox"/>	\$

## Long-Term Disability

	Yes	No	If yes, provide <b>annual</b> cost to district
Is the superintendent provided with a <b>different</b> long-term disability policy than any policy provided to other employees?	<input type="checkbox"/>	<input type="checkbox"/>	\$

## Additional Retirement Benefits

	Yes	No	If yes, provide <b>annual</b> cost to the district	Length of Vesting Schedule (in years)
Does the district contribute to an investment account for the superintendent <b>in addition to</b> the Teacher Retirement System of Texas (TRS)?	<input type="checkbox"/>	<input type="checkbox"/>	\$	

	Yes	No	If yes, provide <b>annual</b> cost to district
Does the district pay any part of the superintendent's portion of TRS contributions (in addition to the amount the district is responsible for)?	<input type="checkbox"/>	<input type="checkbox"/>	\$

	Yes	No	If yes, provide <b>annual</b> cost to district
Does the district contribute to the cost of purchasing additional TRS service credits for the superintendent?	<input type="checkbox"/>	<input type="checkbox"/>	\$

Are any of the additional retirement benefits above contingent on the superintendent meeting certain criteria?

Yes (Please indicate below)

No

Retirement Benefit Comments:

## Other Compensation

Please indicate any other financial incentives or allowances paid to the superintendent not mentioned in the survey and provide the **annual** cost to the district.

	Amount	Description
Other Compensation 1	\$	
Other Compensation 2	\$	

Please use this space to clarify or describe any other compensation or financial incentives paid to the superintendent:

## Comments and Suggestions

Please note any suggestions for improving this survey:

Thank you for participating in the 2019–2020 TASB/TASA Superintendent Survey!

### Submit your questionnaire

***By fax:***

512.467.3508

Attn: Superintendent Survey

***By e-mail:***

Salary.Survey@tasb.org

Re: Superintendent Survey

***By mail:***

TASB HR Services

P.O. Box 400

Austin, TX 78767-0400

### Questions? Contact us!

Toll free: 800.580.7782

E-mail: [salary.survey@tasb.org](mailto:salary.survey@tasb.org)