

Agency Name:	State Treasurer's Office		
Agency Code:	E160	Section:	98



Fiscal Year FY 2021-2022

Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS <i>(FORM B1)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input checked="" type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

NON-RECURRING REQUESTS <i>(FORM B2)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input checked="" type="checkbox"/>	Not requesting any changes.

CAPITAL REQUESTS <i>(FORM C)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting funding for Capital Projects.
	<input checked="" type="checkbox"/>	Not requesting any changes.

PROVISOS <i>(FORM D)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
	<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
	<input checked="" type="checkbox"/>	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Brad Livingston	(803) 734-2638	Brad.Livingston@sto.sc.gov
SECONDARY CONTACT:	Carla Lindler	(803) 734-9811	Carla.Lindler@sto.sc.gov

I have reviewed and approved the enclosed FY 2021-2022 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:		
TYPE/PRINT NAME:		

This form must be signed by the agency head – not a delegate.

Agency Name:	State Treasurer's Office
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BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	2% Base Pay Increase and Health Insurance 2020 Plan Increases in Employer Contributions and 1% Retirement rate increase (Requested in FY 21)	0	0	180,000	0	180,000	0.00	0.00	0.00	0.00	0.00
2	B1 - Recurring	Court Fines & Fees and Conviction Surcharge Support (Requested in FY 21)	50,000	0	0	0	50,000	0.00	0.00	0.00	0.00	0.00
3	B1 - Recurring	Insurance Reserve Fund Premium Increase (Requested in FY 21)	0	0	15,748	0	15,748	0.00	0.00	0.00	0.00	0.00
4	B1 - Recurring	Banking Compliance, Banking Security and Vendor Management	0	0	230,000	0	230,000	0.00	0.00	2.00	0.00	2.00
5	B1 - Recurring	Building Security and Law Enforcement in Wade Hampton Building	0	0	31,000	0	31,000	0.00	0.00	0.00	0.00	0.00
6	B1 - Recurring	529 Savings Plan Field Representatives	0	0	125,000	0	125,000	0.00	0.00	0.93	0.00	0.93
7	B1 - Recurring	Internet bandwidth, IT security and Software licensing	0	0	50,000	0	50,000	0.00	0.00	0.00	0.00	0.00
8	B1 - Recurring	22.00 FTE Adjustment - State to Other Funded	0	0	0	0	0	-22.00	0.00	22.00	0.00	0.00
TOTALS			50,000	0	631,748	0	681,748	-22.00	0.00	24.93	0.00	2.93

Agency Name:	State Treasurer's Office		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	1
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	2% Base Pay Increase and Health Insurance 2020 Plan Increases in Employer Contributions and 1% Retirement rate increase (Requested in FY 21)
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$180,000 Total: \$180,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill all goals, strategies and objectives as defined in its fiscal year 2020 Accountability Report.</p> <p>2019-20 Accountability Report Goals 1 through 7.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	<p>State Treasurer's Office Other Funded employees who were eligible for the FY 2019-20 2% base pay increase, health insurance increase and Other Funded employees participating in the SCRS retirement plan and the related employer contributions.</p>
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Originally requested during the FY 2020-21 budget process.

The State Treasurer’s Office is requesting an increase in Other Funds authorization for the employee 2% base pay increase authorized in the 2019-20 Appropriation Act and the associated employer fringe cost. Also included in this request for additional authorization is the associated costs for the SCRS and PORS 1% rate increase, as well as the employer health and dental insurance increase effective 1/1/20.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	State Treasurer's Office		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	2
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Court Fines & Fees and Conviction Surcharge Support (Requested in FY 21)
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Provide a brief, descriptive title for this request.

AMOUNT	<p>General: \$50,000</p> <p>Federal: \$0</p> <p>Other: \$0</p> <p>Total: \$50,000</p>
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in General Fund appropriation will allow the Agency to fulfill its goals, strategies and objectives as defined in its Fiscal Year 2020 Accountability Report, Treasury Management specifically to effectively managing the collection and distribution of court fees and fines and conviction surcharges as specified in statutes: Section 14-1-206(C8), Section 14-1-207(C8), Section 14-1-208 (C12), Section 14-1-210 E, Section 13-1-212 (B1).</p> <p>2019-20 Accountability Report Goal 4.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	<p>These funds are for actual administrative costs incurred by the Treasurer's Office and include personal services and related employer contributions as well as contractor and vendor payments.</p>
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Originally requested during the FY 2020-21 budget process.

The State Treasurer’s Office receives .16% of assessed court fines from general sessions, family court, magistrates court and municipal court to defray administrative expenses associated with collecting and distributing the revenue of these assessments.

The State Treasurer’s Office may retain actual cost up to \$40,000 on conviction surcharges on fines, forfeitures, escheatments or other monetary penalties imposed in general sessions court or in magistrates or municipal court for misdemeanor traffic offenses or for non-traffic violations.

During FY 2019-20 actual administrative expenditures associated with the collection and distribution of these revenues was approximately \$162,000 and revenue retained by the Treasurer’s Office from court fees and fines and conviction surcharges totaled approximately \$90,000. This General Fund appropriation increase will allow the Treasurer’s Office to recover the actual administrative costs associated with this activity.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	3
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Insurance Reserve Fund Premium Increase (Requested in FY 21)
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Provide a brief, descriptive title for this request.

AMOUNT	<p>General: \$0</p> <p>Federal: \$0</p> <p>Other: \$15,748</p> <p>Total: \$15,748</p>
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill all goals, strategies and objectives as defined in its fiscal year 2020 Accountability Report.</p> <p>2019-20 Accountability Report Goals 1 through 7.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	<p>These funds are for actual administrative costs incurred by the Treasurer's Office for property, automobile liability and tort insurance coverage through the Insurance Reserve Fund.</p>
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Originally requested during the FY 2020-21 budget process.

The State Treasurer’s Office is requesting an increase in Other Funds authorization for the 55% increase in insurance premiums approved at the December 10, 2019 SFA meeting. This increase represents approximately \$16,000 in additional annual cost.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	4
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Banking Compliance, Banking Security and Vendor Management
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$230,000 Total: \$230,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	2.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input checked="" type="checkbox"/>	Government and Citizens

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill its goals, strategies and objectives as defined in its Fiscal Year 2020 Accountability Report, specifically to the banking and investment management services provided to the State of South Carolina's state agencies and universities and the Local Government Investment Pool (LGIP).</p> <p>2019-20 Accountability Report Goals 1 and 4.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	<p>This increase in Other Funds is associated with the payment of personal service and employer contribution amounts associated with the addition of two (2) FTE's and one existing vacant FTE as outlined in this request.</p>
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

The Banking and Investments Division manages relationships with the qualified public depository banks that provide banking services to the State of South Carolina's state agencies, colleges, universities and the Local Government Investment Pool (LGIP) in order to support receipt and disbursement of funds, including specialized services for merchant payment cards and merchant card processing.

This Other Funds authorization request will allow for a total of two (2) new FTE positions and one existing vacant FTE, and the related employer contributions.

- (1) FTE will perform **Banking Services Compliance**, managing activities associated with the State's various vendors providing merchant card services (credit and debit card services), and developing/managing an associated data security compliance program, ensuring that all State agencies subscribing to the services are complying with all State and Payment Card Industry (PCI) requirements.
- (1) FTE will perform **Banking Security Services** for wires, ACH transactions, banking interfaces, online access, identity theft prevention, disaster recovery access and business continuity enhancements. The addition of this FTE will support the strengthening of banking compliance and security measures in an effort to decrease the risk of fraud.
- (1) FTE will perform **Vendor Management** oversight to improve efficiencies by monitoring vendor payment terms and methods. This will increase the Treasurer's Office ability to leverage additional available funds for investment and increase the potential for General Fund investment income.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	5
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Building Security and Law Enforcement in Wade Hampton Building
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$31,000 Total: \$31,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input checked="" type="checkbox"/>	IT Technology/Security related
<input type="checkbox"/>	Consulted DTO during development	
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill all goals, strategies and objectives as defined in its Fiscal Year 2020 Accountability Report.</p> <p>2019-20 Accountability Report Goals 1 through 7.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Department of Administration
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

The Department of Administration implemented physical security improvements to the Wade Hampton building beginning in March 2020. Improvements included a metal detector, additional security screening protocols and a law enforcement presence in the Wade Hampton building lobby. The requested increase in other funds authorization represents the State Treasurer's Office portion of the estimated annual cost for law enforcement personnel assigned to the Wade Hampton building.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	6
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	529 Savings Plan Field Representatives
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$125,000 Total: \$125,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.93
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill its goals, strategies and objectives as defined in its Fiscal Year 2020 Accountability Report, specifically to effectively manage the College Savings Program. Representatives interact with employers and technical audiences to provide program education and technical assistance.</p> <p>2019-20 Accountability Report Goal 6</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	<p>This increase in Other Funds is associated with the payment of personal service and employer contribution amounts associated with the addition of one (0.93) FTE as outlined in this request.</p>
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Future Scholar is South Carolina’s tax-advantaged 529 college savings plan, providing families with a smart, easy way to save for college. Future Scholar had 188,267 accounts with approximately \$4.33 billion in assets under management as of June 30, 2020 and is ranked as the lowest-cost direct plan in the country.

This Other Funds authorization request will allow for a total of 0.93 FTE positions and the related employer contributions. The State Treasurer’s Office currently has .07 of an authorized FTE and the .93 requested will provide another full FTE position.

FTE will serve as field representative for the 529 college savings plan. The Field Representatives interact with employers and technical audiences to provide program education and technical assistance to increase awareness of and participation in the Future Scholar 529 College Savings Program. The Field Representatives will also serve as liaisons to the Financial Intermediary Plan and provide continuing education courses related to the Future Scholar 529 College Savings Program to CPAs, CFPs and attorneys who are required to earn annual CE credits to maintain their professional designations.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	7
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Internet bandwidth, IT security and Software licensing
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$50,000 Total: \$50,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input checked="" type="checkbox"/>	IT Technology/Security related
<input type="checkbox"/>	Consulted DTO during development	
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This increase in Other Funds authorization will allow the Agency to fulfill all goals, strategies and objectives as defined in its Fiscal Year 2020 Accountability Report.</p> <p>2019-20 Accountability Report Goals 1 through 7.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Department of Administration – Division of Technology Operations
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

The State Treasurer’s Office IT division, working in conjunction with the Department of Administration - Division of Technology Operations (DTO), supports all agency mission critical functions.

Increased Bandwidth / Connectivity – DTO advised the State Treasurer’s Office of the need to increase bandwidth to meet actual usage levels and eliminate slow response times and dropped sessions. This adjustment allows the agency to administer critical business functions throughout the agency including Banking and Investments, Treasury Management and Debt Management Divisions. These increased costs are passed to STO by DTO.

Firewalls – A redundant firewall for the State Treasurer’s Office is necessary to ensure network availability and continuity for critical applications supporting Banking & Investments, Treasury Management, Debt Management and telephony in the event of an outage of the primary firewall during system upgrades or outages. The additional costs are passed to STO by DTO.

Program license, annual maintenance & support – Support and maintenance fees for business software (MS Projects, MS Teams, Visio, Adobe Pro) to stay compliant with state information security mandates and administer critical business functions throughout the agency. The additional costs are passed to STO by DTO.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	State Treasurer's Office		
Agency Code:	E160	Section:	98

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	8
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	22.00 FTE Adjustment - State to Other Funded
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$0 Total: \$0
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>This request is to realign twenty-two (22) State authorized FTE positions to Other Funds in order to accurately reflect the number of authorized FTE's funded by Other Funds. Additional other funds authorization is not being requested.</p> <p>2019-20 Accountability Report Goals 1 through 7.</p>
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Existing State Treasurer's Office Other Funded employees.
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FUNDS

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

The State Treasurer's Office is requesting the realignment of twenty-two (22) existing State authorized FTE positions to Other Funds. This realignment is needed to accurately reflect the number of authorized positions funded from Other Funds. No additional Other Funds authorization is needed as part of this FTE realignment.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	State Treasurer's Office		
Agency Code:	E160	Section:	98

FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION CONTINGENCY PLAN

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
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AMOUNT	\$63,360
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What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.

ASSOCIATED FTE REDUCTIONS	N/A
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How many FTEs would be reduced in association with this General Fund reduction?

PROGRAM / ACTIVITY IMPACT	<p>The State Treasurer's Office General Funds provide the Agency with the ability to support statewide Treasury Management, Banking and Investment services as well as administration of the Palmetto ABLE Savings Program. These funds also provide support services for Debt Management and the Agency consumer programs which include the Future Scholar 529 College Savings Plan, Tuition Prepayment and Unclaimed Property Programs. Therefore, all state government agencies, colleges and universities, local governments, and the citizens of South Carolina are served by the use of these funds.</p>
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What programs or activities are supported by the General Funds identified?

SUMMARY	<p>Any reduction in General Funds to the State Treasurer's Office would negatively impact the Agency's ability to provide essential Treasury Management, Banking and Investments and Palmetto ABLE Savings Program services to state government agencies, college and universities, local governments, and the citizens of South Carolina. A General Fund reduction would also negatively affect the ability to deliver essential support services that the Agency provides for its five major program areas: Treasury Management, Banking and Investments Management, Debt Management and Consumer Programs which include the Unclaimed Property Program, College Savings Plans (Future Scholar 529 and Tuition Prepayment) and Palmetto ABLE Savings Programs.</p>
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Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.

**AGENCY COST
SAVINGS PLANS**

The State Treasurer's Office continuously analyzes its personnel, process and procedures to ensure the most effective and economic methods are being utilized. The agency will continue to review agency needs, processes and procedures to ensure expenditures are controlled while providing the necessary services to the State of South Carolina's state agencies, local governments, colleges and universities and the citizens of South Carolina.

What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?

