

AGENCY NAME:

Housing Finance and Development Authority

AGENCY CODE:

L32

SECTION:

42



**Fiscal Year 2020-21  
Agency Budget Plan**

**FORM A - BUDGET PLAN SUMMARY**

**OPERATING  
REQUESTS  
(FORM B1)**

**For FY 2020-21, my agency is (mark "X"):**

- Requesting General Fund Appropriations.
- Requesting Federal/Other Authorization.
- Not requesting any changes.

**NON-RECURRING  
REQUESTS  
(FORM B2)**

**For FY 2020-21, my agency is (mark "X"):**

- Requesting Non-Recurring Appropriations.
- Requesting Non-Recurring Federal/Other Authorization.
- Not requesting any changes.

**CAPITAL  
REQUESTS  
(FORM C)**

**For FY 2020-21, my agency is (mark "X"):**

- Requesting funding for Capital Projects.
- Not requesting any changes.

**PROVISOS  
(FORM D)**

**For FY 2020-21, my agency is (mark "X"):**

- Requesting a new proviso and/or substantive changes to existing provisos.
- Only requesting technical proviso changes (such as date references).
- Not requesting any proviso changes.

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

	<i>Name</i>	<i>Phone</i>	<i>Email</i>
<b>PRIMARY CONTACT:</b>	Paul Linhardt	(803) 896-9151	Paul.linhardt@schousing.com
<b>SECONDARY CONTACT:</b>	Bonita Shropshire	(803)896-9005	Bonita.shropshire@schousing.com

I have reviewed and approved the enclosed FY 2020-21 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<i>Agency Director</i>	<i>Board or Commission Chair</i>
<b>SIGN/DATE:</b>	<i>Bonita Shropshire 9/17/19</i>	<i>R. D. Mickle, Jr. 9/17/19</i>
<b>TYPE/PRINT NAME:</b>	Bonita Shropshire	Robert D. Mickle, Jr.

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

Fiscal Year 2020-21 Budget Request Executive Summary

Agency Code: L320  
 Agency Name: Housing Finance & Development Authority  
 Section: 42

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Housing Initiatives		3,757,593	9,100		3,766,693					0.00
2	B1 - Recurring	Executive Administration and Special Projects			886,003		886,003					0.00
3	B1 - Recurring	Support Services			310,000		310,000					0.00
4	B1 - Recurring	Contract Administration and Compliance		5,032,860			5,032,860					0.00
5	B1 - Recurring	Rental Assistance		90,000			90,000					0.00
6	B1 - Recurring	Mortgage Servicing			57,983		57,983					0.00
7	B1 - Recurring	Finance			170,000		170,000					0.00
8	B1 - Recurring	Housing Tax Credits			201,000		201,000					0.00
9	B1 - Recurring	Employee Benefits			(15,159)		(15,159)					0.00
10							0					0.00
11							0					0.00
12							0					0.00
13							0					0.00
14							0					0.00
15							0					0.00
16							0					0.00
17							0					0.00
18							0					0.00
19							0					0.00
20							0					0.00
21							0					0.00
22							0					0.00
23							0					0.00
24							0					0.00
25							0					0.00
26							0					0.00
27							0					0.00
28							0					0.00
29							0					0.00
30							0					0.00
TOTAL BUDGET REQUESTS			0	8,880,453	1,618,927	0	10,499,380	0.00	0.00	0.00	0.00	0.00

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>1</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Housing Initiatives</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal: \$3,757,593</b> <b>Other: \$9,100</b> <b>Total: \$3,766,693</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input checked="" 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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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	

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>2 Provide resources to support the cost-effective development of affordable rental housing that addresses the needs of South Carolina.</p> <p>2.1 Finance the construction and preservation of affordable housing with the combined resources of all Development Division programs.</p> <p>2.2 Increase the use of leveraged funds in affordable housing development.</p> <p>2.3 Develop affordable housing for high-demand communities and populations.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>Housing Initiatives Programs provide housing services for low-to-very-low income families and individuals.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The federal and other funds increase request will allow the Authority to expend increased federal and program-income on housing programs for low-income families. The funds are used to promote the development of affordable multi-family housing, special needs housing and to allow low income homeowners to remain in their homes by making needed repairs.</p>
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*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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<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>2</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Executive Administration and Special Projects</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$886,003</b> <b>Total: \$886,003</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<input checked="" type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input checked="" 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 #

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<ol style="list-style-type: none"> <li>1 Assist low- and moderate-income South Carolinians by financing affordable and sustainable homeownership opportunities.</li> <li>2 Provide resources to support the cost-effective development of affordable rental housing that addresses the needs of South Carolina.</li> <li>3 Support the physical and financial condition of existing affordable rental housing through our Rental Assistance &amp; Compliance activities.</li> <li>4 Serve as a responsible steward of public funds and maintain the Authority's financial condition.</li> <li>5 Continue development of a secure, comprehensive technology infrastructure that serves the needs of the Authority and its customers.</li> <li>6 Operate a professional public agency by hiring, developing, and retaining essential talent.</li> <li>7 Establish the Authority as the foremost resource in South Carolina on housing issues and foster new and existing relationships with public and private entities.</li> </ol>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	Loan purchases, grants and other Special Projects will benefit very-low to moderate income families and help them achieve safe and affordable housing.
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	Provide budget authority for consulting and legal services related to the agency's Homeownership and Rental Development programs. Changing regulations and tightening economy require greater cash management and financial consulting related to the bond programs and other sources of funds to provide mortgages and down payment assistance and subsidize Multi-family development for low-to-moderate income South Carolinians.
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*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.*

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>3</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Support Services</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$310,000</b> <b>Total: \$310,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 checked="" type="checkbox"/>	IT Technology/Security related
	<input checked="" type="checkbox"/>	Consulted DTO during development
	<input type="checkbox"/> Related to a Non-Recurring request – If so, Priority # _____	

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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>5 Continue development of a secure, comprehensive technology infrastructure that serves the needs of the Authority and its customers.</p> <p>5.1 Deploy new enterprise software solutions to improve programmatic efficiency.</p> <p>5.2 Serve the needs of internal stakeholders in an effective and timely manner.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	Administrative Costs and purchases of software and hardware to enhance the Authority's Information Technology (IT) system and IT security.
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	To purchase hardware, software and to hire short-term temporary consultants to assist with implementations that will enhance IT operations and increase IT security.
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*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.*



<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>4</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Contract Administration and Compliance</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal: \$5,032,860</b> <b>Other:</b> <b>Total: \$5,032,860</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>	
	<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 #	

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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>3 Support the physical and financial condition of existing affordable rental housing through our Rental Assistance &amp; Compliance activities.\</p> <p>3.1 Perform mandated rental assistance activities in an efficient, effective manner as administrator of HUD's Housing Choice Voucher and Project- Based Rental Assistance programs.</p> <p>3.2 Ensure that properties financed by the Authority are habitable and sustainable.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>The federal funds pay rent and utilities for very-low income families.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The federal funds increase is for program payments mandated and paid for by the Department of Housing and Urban Development (HUD). The federal funds are paid as rent to apartment complexes under contract with HUD. These complexes house very-low income families and individuals.</p>
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*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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<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>5</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Rental Assistance</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal: \$90,000</b> <b>Other:</b> <b>Total: \$90,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>	
	<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 # _____	

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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>3 Support the physical and financial condition of existing affordable rental housing through our Rental Assistance &amp; Compliance activities.</p> <p>3.1 Perform mandated rental assistance activities in an efficient, effective manner as administrator of HUD's Housing Choice Voucher and Project-Based Rental Assistance programs.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>The federal funds pay rent and utilities for very-low income families and operating expenses under the HUD Housing Choice Voucher program.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The federal funds increase is for assistance payments and operating expenses paid by HUD. The Housing Choice Voucher program pays rent and utilities on behalf of very-low income families in seven counties. This increase is needed to keep up with rent inflation and the rising administrative costs associated with increasing program complexity.</p>
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*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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<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>6</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Mortgage Servicing</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$57,983</b> <b>Total: \$57,983</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>	
	<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 # _____

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark “X” for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>1.2 Operate an effective servicing division that ensures Authority assets are preserved and minimizes default among our customers and costs associated with providing services.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>The Servicing Department handles the servicing of all the Authority's single-family and multi-family loans.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Authority has worked over the past year to cut costs in this area while maintaining quality services to the individuals and families we serve. The increase is needed to cover the cost of increasing complexity and regulation of mortgage servicing.</p>
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*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.*

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>7</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Finance</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$170,000</b> <b>Total: \$170,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 checked="" type="checkbox"/>	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>4 Serve as a responsible steward of public funds and maintain the Authority's financial condition.</p> <p>4.1 Ensure that the Authority's finances are viewed as stable by stakeholders.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>These funds would enhance financial reporting through additional software purchases.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Finance Division is looking to purchase a financial reporting system to handle the increasing complexity and volume of required financial reports.</p>
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*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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<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>8</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Housing Tax Credits</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$201,000</b> <b>Total: \$201,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 # _____

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>2 Provide resources to support the cost-effective development of affordable rental housing that addresses the needs of South Carolina.</p> <p>2.1 Finance the construction and preservation of affordable housing with the combined resources of all Development Division programs.</p> <p>2.2 Increase the use of leveraged funds in affordable housing development.</p> <p>2.3 Develop affordable housing for high-demand communities and populations.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>This increase will pay the increasing administrative costs of the Low-income Tax Credit program.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Low-income Tax Credit program uses IRS Tax Credits to subsidize the development of new and rehabilitation of existing low-income rental units in the private rental market. This increase request is due to increasing complexity and regulatory requirements of the Tax Credit program.</p>
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*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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<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>9</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Employee Benefits</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General:</b> <b>Federal:</b> <b>Other: \$(15,159)</b> <b>Total: \$(15,159)</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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	

<b>AGENCY NAME:</b>	<b>Housing Finance and Development Authority</b>		
<b>AGENCY CODE:</b>	<b>L32</b>	<b>SECTION:</b>	<b>42</b>

<b>ACCOUNTABILITY OF FUNDS</b>	<p>All Objectives – This decrease will better align the budget with actual anticipated expenditures.</p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>Administrative</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The decrease will better align the budget with actual anticipated expenditures.</p>
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*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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