

AGENCY NAME:	STATE COMMISSION FOR MINORITY AFFAIRS		
AGENCY CODE:	L460	SECTION:	71



**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"):	
<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
<input type="checkbox"/>	Requesting Federal/Other Authorization.
<input type="checkbox"/>	Not requesting any changes.

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

For FY 2020-21, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting Non-Recurring Appropriations.
<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
<input type="checkbox"/>	Not requesting any changes.

**CAPITAL
REQUESTS
(FORM C)**

For FY 2020-21, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting funding for Capital Projects.
<input checked="" type="checkbox"/>	Not requesting any changes.

**PROVISOS
(FORM D)**

For FY 2020-21, 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:	Delores Dacosta	803-832-8160	ddacosta@cfma.sc.gov
SECONDARY CONTACT:	Jason Epting	803-737-3061	Jason.Epting@admin.sc.gov

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

SIGN/DATE:	<i>Agency Director</i> 	<i>Board or Commission Chair</i>
TYPE/PRINT NAME:	Delores Dacosta	Ken Battle

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

Fiscal Year 2020-21 Budget Request Executive Summary

Agency Code: L460
 Agency Name: Commission On Minority Affairs
 Section: 71

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Director of Policy and Community Engagement	102,000				102,000	1.00				1.00
2	B1 - Recurring	Program Coordinator II- Asian Community	74,800				74,800	1.00				1.00
3	B1 - Recurring	Regional Field Representatives	238,680				238,680	3.00				3.00
4	B1 - Recurring	Research Program Expansion (existing programs)	50,000				50,000					0.00
5	B2 - Non-Recurring	Rural Poverty Initiatives	300,000				300,000					0.00
6	B2 - Non-Recurring	Rural Area Census Initiative	400,000				400,000					0.00
7							0					0.00
8							0					0.00
9							0					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			1,165,480	0	0	0	1,165,480	5.00	0.00	0.00	0.00	5.00

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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	Director of Policy and Community Engagement
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$102,000 Federal: Other: Total: \$102,000
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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.

NEW POSITIONS	1
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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 checked="" 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	

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ACCOUNTABILITY OF FUNDS	<p>Strategy: 1.2; 2.1; 3.2</p> <p>The mission of CMA is to be a catalyst that identifies and examines emerging issues and trends by providing constructive solutions and approaches to support the policy and socio-economic development of ethnic minority communities through:</p> <ul style="list-style-type: none"> ● Community engagement and awareness; ● State recognition of Native Americans; ● Collecting, diagnosing and analyzing collaborative data; ● Acting as a liaison bridging the gap between communities, government agencies and other organizations and; ● Influencing public policy and state services <p>The creation of this new division at CMA will allow the agency to develop and implement a system to monitor legislation, advocate, recommend legislative action based of statistical data impacting minority communities and enhancing community awareness.</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?

RECIPIENTS OF FUNDS	<p>This funding would cover the cost of hiring a director to oversee this process. This position will be advertised through the standard state employment competitive process. The job description will highlight the duties and responsibilities of a director of policy and community engagement as well as the hiring salary range.</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?

JUSTIFICATION OF REQUEST	<p>The Commission for Minority Affairs is a small state agency servicing minority communities which comprise of about 1.5 million (1,510,667). According to the 2017 American Community Survey, 31% of South Carolina's 4,893,444 citizens make up the state's ethnic communities. In an effort to adequately serve the state's minority communities, CMA must expand its reach to bridge the gap statewide in these areas. This is a new division at CMA and a much needed one to help drive the mission of this agency. The existing vacancies are accounted for to cover our shared services or other needed areas in the organization. Advocacy and policy work are weak areas in this agency. They have contributed to low name recognition and very limited legislative action. Influencing policy and state services are instrumental in helping economically deprived communities.</p> <p>Salary: \$75000 Fringe: 27,000 Total: \$102,000</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.

AGENCY NAME:	South Carolina Commission for Minority Affairs		
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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	Program Coordinator II- Asian Community
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$74,800 Federal: Other: Total: \$74,800
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What is the net change in requested appropriations for FY 2019-20? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	1
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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 checked="" 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

AGENCY NAME:	South Carolina Commission for Minority Affairs		
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ACCOUNTABILITY OF FUNDS	<ul style="list-style-type: none"> ➤ Strategy: 2.1; 3.1; 3.2 ➤ Be the single point of contact for statistical data and information regarding Asian communities and their socio-economic development. ➤ Address the needs of Asian populations by acting as a liaison bridging the gap between communities, government agencies and other organizations to effect change. ➤ Address the needs of Asian populations through technical assistance, capacity building, outreach and program initiatives. ➤ Be the catalyst to provide constructive solutions and approaches to promote equitable treatment and achieve economic prosperity through public policy. ➤
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What specific strategy, as outlined in the FY 2018-19 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 FUNDS	<p>This funding will be used to cover the cost of hiring a New FTE program coordinator for CMA's Asian Affairs Division. According to the statute, CMA is required to have representation for all ethnic minority groups. The Asian Americans were added in 2003 along with Native Americans and Hispanic/Latinos. However, CMA neglected to create this division.</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?

JUSTIFICATION OF REQUEST	<p>The South Carolina Commission for Minority Affairs (CMA) is a non-cabinet state agency, established in 1993, to study the causes and effects of socio-economic deprivation and other inequities impacting African American communities. In 2003, the scope of the organization was broadened to include Native Americans, Hispanics/Latinos, and the Asian populations around the state. The creation of this position puts the agency in compliance with the statute.</p> <p>Salary: \$55,000 Fringe: \$19,800 Total: \$74,800</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.

AGENCY NAME:	SC Commission for Minority Affairs		
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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	Regional Field Representatives
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$238,680 Federal: Other: Total: \$238,680
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What is the net change in requested appropriations for FY 2019-20? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	3 new positions
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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 checked="" 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 checked="" type="checkbox"/>	Public Infrastructure and Economic Development
	<input type="checkbox"/>	Government and Citizens

AGENCY NAME:	SC Commission for Minority Affairs		
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ACCOUNTABILITY OF FUNDS	<p>Strategy:2.1; 3.1; 3.2; 3.3; 6.2</p> <p>This funding source will be used to fulfill our strategy to address the needs of minority populations through technical assistance, capacity building, outreach and other program initiatives. Regional field officers will enhance our data collection process and strengthen our research efforts. Field officers are instrumental in conducting surveys, marketing, advertising and social networking. Through community interactions, field officers will be able to capture raw data to be analyzed and measured to help determine the cause of social and economic issues in minority communities. The use of these funds will be measured by the outcomes achieved from assigned tasks.</p>
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What specific strategy, as outlined in the FY 2018-19 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 FUNDS	<p>These new positions will be advertised through the standard state employment competitive process. The job description will highlight the duties and responsibilities of a field officer as well as a hiring salary range.</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?

JUSTIFICATION OF REQUEST	<p>The three NEW field officers will be placed strategically around the state and assigned various tasks to collect raw data pertinent to the communities they serve and constantly feeding it electronically to our research team to be analyzed and disseminated. CMA is a very small agency with few vacancies. Our partnership with Shared services is ongoing. We are able to use the one stop shopping approach for budgeting and accounting, procurement, human resources and also IT services. The savings to the agency is approximately \$30000 a year. Without field officers, our research department would be very limited in its raw data collection which is imperative when conducting surveys and pilot programs. We want to produce data that is accurate. We cannot accurately determine how many Native Americans or Hispanic/Latinos live in South Carolina without going to their communities and counting them. Our relationship with minority communities will be instrumental in obtaining a more accurate census count in 2020. Aside from the research, field officers will make CMA visible in the community. Public awareness of who we are and what we do is still unclear around the state. Placing more people in the field will help close the gap.</p> <p>Salaries: \$175500 Fringe: \$63,180 Total: \$238,680</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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FORM B1 – RECURRING OPERATING REQUEST

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

TITLE	Research Program Expansion (existing programs)
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$50,000 Federal: Other: Total: \$50,000
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What is the net change in requested appropriations for FY 2018-19? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0
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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 checked="" 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 checked="" 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 type="checkbox"/>	Government and Citizens	

AGENCY NAME:	South Carolina Commission for Minority Affairs		
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ACCOUNTABILITY OF FUNDS	<p>Strategy: 1.1; 2.1; 3.3; 5.1</p> <p>This funding source will be used to fulfill our strategy to address the needs of minority populations through technical assistance, capacity building, outreach and other program initiatives. These funds will enhance our data collection process and strengthen our research efforts such as: conducting surveys, marketing/ rebranding, advertising and social networking. As the agency continues to grow, our products and services will become more diversified to adequately serve our culturally diverse Populations. The cost for new technology, production and printing will continue to go rise as this agency advances. In addition, all printed material will be translated in Spanish.</p>
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What specific agency objective, as outlined in the agency’s accountability report, does this funding request support? How would this request advance that objective? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	<p>All of our program areas will benefits from these funds, African American, Native American Indian, Hispanic Affairs and Asian. Research, Community Engagement, minority business and communications are all working together to move CMA forward. In addition, board and staff development is ongoing in order to keep up with the changing times and to better serve our communities.</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?

JUSTIFICATION OF REQUEST	<p>The Commission for Minority Affairs statute mandates that the agency serves as a single point of contact for the collection and dissemination of statistical data for the African-American, Native American Indian, Hispanic-Latino and Asian populations. In addition, the statute mandates that research be provided to minority officials, the business community, state and local municipal government(s), the general public, as well as members of the General Assembly on an as needed basis. This request is in keeping with the major goals in the agency’s Accountability Report related to current and ongoing systemic research, training and development and statewide agency awareness.</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.

AGENCY NAME:	STATE COMMISSION FOR MINORITY AFFAIRS		
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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	5 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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TITLE	Rural Poverty Initiatives <i>Provide a brief, descriptive title for this request.</i>
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AMOUNT	\$300,000 <i>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.</i>
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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 checked="" 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 checked="" type="checkbox"/> Request for Non-Recurring Appropriations	
<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/> Related to a 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>Strategy: 4.2; 5.2</p> <p>In response to strategy 2) Addressing the needs of ethnic minority populations by acting as a liaison bridging the gap between communities, government agencies and other organizations to effect change. These rural projects will focus on addressing social economic issues involving the youth in our poorest counties, Allendale, Bamberg, Jasper, Hampton, Dillon, Marion, Clarendon and Williamsburg. In addition, we will develop a pilot program in a targeted county to educate adults living in poverty through Ruby Payne’s <i>Bridges Out of Poverty</i>, a poverty reduction program that involves educational curriculum and process to help communities understand poverty and to teach them the process on how to create their own solutions.</p> <p><i>What specific strategy, as outlined in the FY 2019-20 Strategic Planning and</i></p>
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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 FUNDS	The requested funds will be used to design and implement pilot projects, purchase training materials, hire and train facilitators of the programs, purchase program software, cover travel expenses
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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?

JUSTIFICATION OF REQUEST	<p>To address the issue of socio-economic deprivation, we must develop a process that allows those impacted to work through their own situation. CMA will develop processes to lead communities to economic freedom. Under the Umbrella of rural projects, CMA will develop:</p> <ol style="list-style-type: none"> 1. The Anti-Poverty designed by Dr. Ruby Payne; A multi-cultural summer camp which allows more interactions between, Native Americans, African Americans, Hispanic/Latinos and Asian children. Program will be designed to educate children about each-others cultures. (\$50000) 2. African American Youth Project focusing on developing the youth in Allendale County (\$50000) 3. Designing and implementing the Bridges out of Poverty demonstration project strategy to fight poverty: \$200000 <ol style="list-style-type: none"> a. The people directly affected by the problems or issues of poverty in the community have to be actively and authentically participating in the efforts to fight poverty b. Create an organized group within the community to help many people rather than working with a few individuals c. The people affected need to identify the issues d. People in poverty need to understand that they can often address and solve their own issues. e. Fighting poverty takes time
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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. Does this non-recurring appropriation request create an annualization or need for recurring funds?

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FORM B2 – NON-RECURRING OPERATING REQUEST

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

TITLE	Rural Area Census Initiative
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Provide a brief, descriptive title for this request.

AMOUNT	\$400,000
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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.

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 checked="" 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 checked="" type="checkbox"/> Request for Non-Recurring Appropriations
<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/> Related to a 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	Strategies 1.1; 1.2; 2.1
	<ul style="list-style-type: none"> ➤ Develop a process to disseminate relevant statistical data and information. ➤ Implement a protocol for collaborating with federal, state and local agencies and other organizations. ➤ Build relationships with policy makers, officials and stakeholders to assist with the creation of policy, legislation and community engagement.

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?

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RECIPIENTS OF FUNDS	The funds will be used in partnership with CMA, United Way, Census Bureau, Together SC and the SC Grant Makers Network
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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?

JUSTIFICATION OF REQUEST	<p>Partners of the SC Grantmaker’s Network have contributed a little over \$400,000 in private funds with a goal to ensure that participation levels in the census are level with the 2010 census. A match from the state would help to set a more ambitious goal to possibly include increasing participation, especially with hard to count populations. The SC Commission for Minority Affairs is a partner with the Grantmaker’s Network. We are the only State agency with the mission to serve ethnic minority populations in South Carolina. As such, the Commission plays a valuable role in providing outreach to underserved populations, which are also the most undercounted in the Census. The Commission is asking for the State to provide matching funds (\$400,000) to contribute to targeted outreach in minority and rural areas to reach those demographics that are most undercounted in the Census.</p> <p>Additionally these matching funds will be used to support efforts in undercounted areas as indicated on the maps and tracts from the US Census Bureau. (https://www.censushardtocountmaps2020.us/). Priorities include tracts with low response rate, low internet access, or predominately inhabited by hard to count populations as identified by the US Census Bureau. Specific priority areas include Orangeburg County, Abbeville County, Chesterfield County, Allendale County, Marion County, Spartanburg County, Lancaster County. The collaborative efforts of the United Way Association of SC, Together SC, and SC Commission for Minority Affairs ensure that each Complete Count Committee and other community-based efforts for a complete count have appropriate support and shared materials. Resource and material sharing efforts ensure reduction in duplicative efforts by communities and maximum effectiveness of funds</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. Does this non-recurring appropriation request create an annualization or need for recurring funds?

AGENCY NAME:	STATE COMMISSION ON MINORITY AFFAIRS		
AGENCY CODE:	L460	SECTION:	71

**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	\$45,517 <i>What is the General Fund 3% reduction amount (minimum based on the FY 2019-20 recurring appropriations)? This amount should correspond to the reduction spreadsheet prepared by EBO.</i>
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ASSOCIATED FTE REDUCTIONS	None <i>How many FTEs would be reduced in association with this General Fund reduction?</i>
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PROGRAM/ACTIVITY IMPACT	N/A <i>What programs or activities are supported by the General Funds identified?</i>
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SUMMARY	N/A <i>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.</i>
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AGENCY COST SAVINGS PLANS	The agency does not have cost savings measures that exceed the \$50,000 threshold for reporting. <i>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?</i>
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AGENCY NAME:	COMMISSION ON MINORITY AFFAIRS		
AGENCY CODE:	L460	SECTION:	71

FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	N/A
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Provide a brief, descriptive title for this request.

EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	N/A
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What is the expected savings to South Carolina’s businesses and citizens that is generated by this proposal? The savings could be related to time or money.

FACTORS ASSOCIATED WITH THE REQUEST	Mark “X” for all that apply: <input type="checkbox"/> Repeal or revision of regulations. <input type="checkbox"/> Reduction of agency fees or fines to businesses or citizens. <input type="checkbox"/> Greater efficiency in agency services or reduction in compliance burden. <input checked="" type="checkbox"/> Other
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METHOD OF CALCULATION	N/A
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Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.

REDUCTION OF FEES OR FINES	The Commission on Minority Affairs does not charge fines or fees.
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Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?

REDUCTION OF REGULATION	N/A
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Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?

SUMMARY	N/A
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Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?