Agency Summary And Certification

179 -- STEM

Original Submission ___ or Rev No. ___ **FY2017 Request** Page ____ of ____ Pages

In accordance with 67-3503, Idaho Code, I certify the attached forms properly state the receipts and expenditures of the department (agency, office, or institution) for the fiscal years indicated. The summary of expenditures by major program, fund source, and standard class is indicated below.

Signature of Department Director : Angela Hemingway Date: 9/1/15

Function/Activity	FY 2015 Total Appropriation	FY 2015 Total Expenditures	FY 2016 Original Appropriation	FY 2016 Estimated Expenditures	FY 2017 Total Request
STEM	0	0	647,300	647,300	1,934,000
Total	0	0	647,300	647,300	1,934,000
By Fund Source	Total Appropriation	Actual Expenditures	Original Appropriation	Estimated Expenditures	Total Request
G 0001-00 General Revenue Fund	0	0	547,300	547,300	1,334,000
O 0349-00 Miscellaneous Revenue	0	0	100,000	100,000	600,000
Total	0	0	647,300	647,300	1,934,000
By Object	Total Appropriation	Actual Expenditures	Original Appropriation	Estimated Expenditures	Total Request
Personnel Costs	0	0	229,800	229,800	259,500
Operating Expenditures	0	0	409,500	409,500	1,674,500
Capital Outlay	0	0	8,000	8,000	0
Trustee And Benefit Payments	0	0	0	0	0
Lump Sum	0	0	0	0	0
Total	0	0	647,300	647,300	1,934,000
FTP Total	0.00	0.00	2.00	2.00	2.00

FY 2017 Agency Budget - Request

Detail Report

Agency: 179 - STEM

Function: 01 - STEM

		FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
FY 2015 Actual Expenditures								
		0.00	0	0	0	0	0	0
	Total	**0.00**	**0**	**0**	**0**	**0**	**0**	**0**
FY 2016 Original Appropriation								
3.00 FY 2016 Original Appropriatioin								
HB 326								
0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT 0001-00	General	0.00	0	250,000	8,000	0	0	258,000
0349-00	Other	0.00	0	100,000	0	0	0	100,000
	Total	**2.00**	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
FY 2016 Total Appropriation								
0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT 0001-00	General	0.00	0	250,000	8,000	0	0	258,000
0349-00	Other	0.00	0	100,000	0	0	0	100,000
	Total	**2.00**	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
FY 2016 Estimated Expenditures								
0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT 0001-00	General	0.00	0	250,000	8,000	0	0	258,000
0349-00	Other	0.00	0	100,000	0	0	0	100,000
	Total	**2.00**	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
Base Adjustments								
8.41 Removal of One-Time Expenditures								
OT 0001-00	General	0.00	0	(250,000)	(8,000)	0	0	(258,000)
	Total	**0.00**	**0**	**(250,000)**	**(8,000)**	**0**	**0**	**(258,000)**
FY 2017 Base								
0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT 0001-00	General	0.00	0	0	0	0	0	0
0349-00	Other	0.00	0	100,000	0	0	0	100,000
	Total	**2.00**	**229,800**	**159,500**	**0**	**0**	**0**	**389,300**
Program Maintenance								
10.11 Change in Health Benefit Costs								
0001-00	General	0.00	700	0	0	0	0	700
	Total	**0.00**	**700**	**0**	**0**	**0**	**0**	**700**

		FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
10.12	Change in Variable Benefit Costs							
	0001-00 General	0.00	700	0	0	0	0	700
	Total	**0.00**	**700**	**0**	**0**	**0**	**0**	**700**
10.61	Salary Multiplier - Regular Employees							
	0001-00 General	0.00	2,100	0	0	0	0	2,100
	Total	**0.00**	**2,100**	**0**	**0**	**0**	**0**	**2,100**
10.64	27th Payroll							
	0001-00 General	0.00	8,000	0	0	0	0	8,000
	Total	**0.00**	**8,000**	**0**	**0**	**0**	**0**	**8,000**
10.65	27th Payroll - CEC Costs							
	0001-00 General	0.00	100	0	0	0	0	100
	Total	**0.00**	**100**	**0**	**0**	**0**	**0**	**100**
FY 2017 Total Maintenance								
	0001-00 General	2.00	241,400	59,500	0	0	0	300,900
OT	0001-00 General	0.00	0	0	0	0	0	0
	0349-00 Other	0.00	0	100,000	0	0	0	100,000
	Total	**2.00**	**241,400**	**159,500**	**0**	**0**	**0**	**400,900**
Line Items								
12.01	Grants, Projects, and Program Administration							
	This decision unit request represents additional ongoing and one-time General Fund monies to promote STEM activities throughout Idaho, engaging educators and industry. Monies will support the needs of educators and industry with professional development, needs and gap analysis, outreach, and research.							
	0001-00 General	0.00	0	500,000	0	0	0	500,000
OT	0001-00 General	0.00	0	500,000	0	0	0	500,000
	Total	**0.00**	**0**	**1,000,000**	**0**	**0**	**0**	**1,000,000**
12.02	Industry Contributions and Projects							
	This decision unit request represents an additional $500,000 in dedicated fund spending authority for those monies received via industry, private donations, and/or grant applications.							
	0349-00 Other	0.00	0	500,000	0	0	0	500,000
	Total	**0.00**	**0**	**500,000**	**0**	**0**	**0**	**500,000**
12.03	Personnel Costs for Program Manager							
	This decision unit requests represents additional personnel costs for a Program Manager who maintains an education degree that is specific to science, technology, engineering, and math.							
	0001-00 General	0.00	18,100	0	0	0	0	18,100
	Total	**0.00**	**18,100**	**0**	**0**	**0**	**0**	**18,100**

		FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
12.04 Membership and Dues								
This decision unit request represents additional monies to support membership and dues for national organizations of STEM professionals.								
0001-00	General	0.00	0	15,000	0	0	0	15,000
	Total	**0.00**	**0**	**15,000**	**0**	**0**	**0**	**15,000**
FY 2017 Total								
0001-00	General	2.00	259,500	574,500	0	0	0	834,000
OT 0001-00	General	0.00	0	500,000	0	0	0	500,000
0349-00	Other	0.00	0	600,000	0	0	0	600,000
	Total	**2.00**	**259,500**	**1,674,500**	**0**	**0**	**0**	**1,934,000**

FY 2017 Agency Budget - Request

DU Summary Report

Agency: 179 STEM

Function: 01 STEM

			FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
FY 2015 Total Appropriation									
FY 2015 Actual Expenditures									
FY 2016 Original Appropriation									
	0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT	0001-00	General	0.00	0	250,000	8,000	0	0	258,000
	0349-00	Other	0.00	0	100,000	0	0	0	100,000
			2.00	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
Appropriation Adjustments									
FY 2016 Total Appropriation									
	0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT	0001-00	General	0.00	0	250,000	8,000	0	0	258,000
	0349-00	Other	0.00	0	100,000	0	0	0	100,000
			2.00	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
Expenditure Adjustments									
FY 2016 Estimated Expenditures									
	0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT	0001-00	General	0.00	0	250,000	8,000	0	0	258,000
	0349-00	Other	0.00	0	100,000	0	0	0	100,000
			2.00	**229,800**	**409,500**	**8,000**	**0**	**0**	**647,300**
Base Adjustments									
OT	0001-00	General	0.00	0	(250,000)	(8,000)	0	0	(258,000)
			0.00	**0**	**(250,000)**	**(8,000)**	**0**	**0**	**(258,000)**
FY 2017 Base									
	0001-00	General	2.00	229,800	59,500	0	0	0	289,300
OT	0001-00	General	0.00	0	0	0	0	0	0
	0349-00	Other	0.00	0	100,000	0	0	0	100,000
			2.00	**229,800**	**159,500**	**0**	**0**	**0**	**389,300**
Employee Benefit Costs									
	0001-00	General	0.00	1,400	0	0	0	0	1,400
			0.00	**1,400**	**0**	**0**	**0**	**0**	**1,400**
Change In Employee Compensation									
	0001-00	General	0.00	10,200	0	0	0	0	10,200
			0.00	**10,200**	**0**	**0**	**0**	**0**	**10,200**
FY 2017 Total Maintenance									
	0001-00	General	2.00	241,400	59,500	0	0	0	300,900
OT	0001-00	General	0.00	0	0	0	0	0	0
	0349-00	Other	0.00	0	100,000	0	0	0	100,000
			2.00	**241,400**	**159,500**	**0**	**0**	**0**	**400,900**

Agency: 179 STEM

Function: 01 STEM

		FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
Line Items								
0001-00	General	0.00	18,100	515,000	0	0	0	533,100
OT 0001-00	General	0.00	0	500,000	0	0	0	500,000
0349-00	Other	0.00	0	500,000	0	0	0	500,000
		0.00	**18,100**	**1,515,000**	**0**	**0**	**0**	**1,533,100**
FY 2017 Total								
0001-00	General	2.00	259,500	574,500	0	0	0	834,000
OT 0001-00	General	0.00	0	500,000	0	0	0	500,000
0349-00	Other	0.00	0	600,000	0	0	0	600,000
		2.00	**259,500**	**1,674,500**	**0**	**0**	**0**	**1,934,000**

FORM B3: DIVISION DESCRIPTIONS

Agency/Department: STEM Action Center

Division:

Request for Fiscal Year : 2017

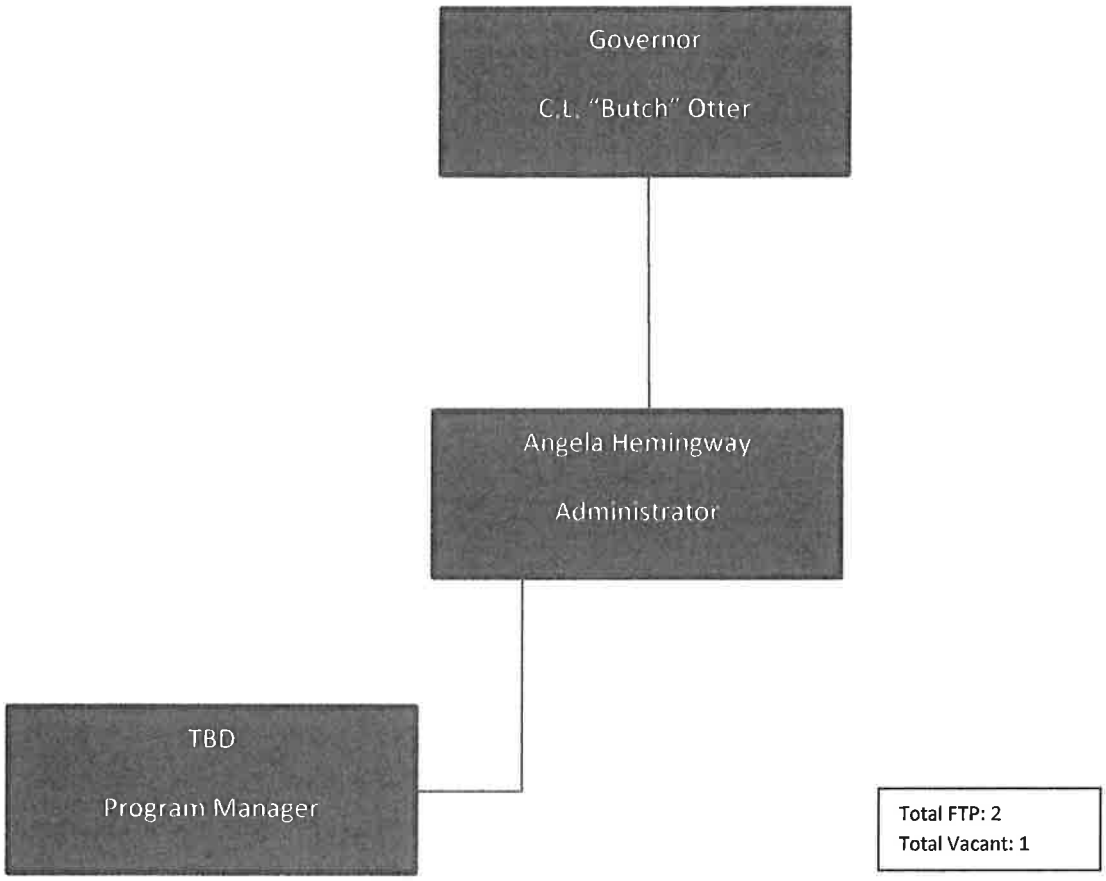
Agency Number: 179

Original Request Date:	Revision Request Date:

Page: _____ of _____

The Action Center was created to promulgate and promote the expansion of student engagement in science, technology, engineering, and math (STEM) within Idaho schools. The STEM Action Center strives to coordinate with other agencies the receive monies for STEM education, and where practicable, administer those monies. Additionally, the STEM Action Center will encourage financial contributions from industry and other potential sources to accomplish its goals as outlined in Section 67-823, Idaho Code.

179 – STEM ORGANIZATIONAL CHART



FY 2017 Agency Budget - Request

Line Item Report

Agency: 179 STEM

Decision Unit		Priority	Agency Request FTP	General	Total
STEM					
12.01	Grants, Projects, and Program Administration	0	0.00	1,000,000	1,000,000
12.02	Industry Contributions and Projects	0	0.00	0	500,000
12.03	Personnel Costs for Program Manager	0	0.00	18,100	18,100
12.04	Membership and Dues	0	0.00	15,000	15,000
			0.00	**1,033,100**	**1,533,100**

FORM B11: REVENUE

Agency/Department: STEM Action Center
Program (If applicable)

Request for Fiscal Year: 2017
Agency Number: 179
Budget Unit (If Applicable): GVST
Function/Activity Number (If Applicable): 1

Original Request Date:	Revision Request Date:

Page: _____ of _____

Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Summary Object Code	Revenue Source Description -Summary Level	FY 2013 Actual Revenue	FY 2014 Actual Revenue	FY 2015 Actual Revenue	FY 2016 Estimated Revenue	FY 2017 Estimated Revenue
0349	00	Miscellaneous Revenue		3615	Contributions	0	0	0	100,000	600,000
0349	**00**	**Miscellaneous Revenue**		**FUND TOTAL**		**$0**	**$0**	**$0**	**$100,000**	**$600,000**
				FUND TOTAL		**$0**	**$0**	**$0**	**$0**	**$0**
				FUND TOTAL		**$0**	**$0**	**$0**	**$0**	**$0**
				FUND TOTAL		**$0**	**$0**	**$0**	**$0**	**$0**
				FUND TOTAL		**$0**	**$0**	**$0**	**$0**	**$0**
				FUND TOTAL		**$0**	**$0**	**$0**	**$0**	**$0**
				GRAND TOTAL		**$0**	**$0**	**$0**	**$100,000**	**$600,000**

Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Summary Object Code	Revenue Source Description -Summary Level	FY 2013 Actual Revenue	FY 2014 Actual Revenue	FY 2015 Actual Revenue	FY 2016 Estimated Revenue	FY 2017 Estimated Revenue

SIGNIFICANT ASSUMPTIONS

Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Provide Details for any Significant Assumptions Listed	FY 2017 Estimated Impact
					$0
					$0
					$0
					$0
					$0
					$0

FORM B12: ANALYSIS OF FUND BALANCES **Request for Fiscal Year :** 2017

Agency/Department: STEM Action Center Agency Number:

Original Request Date: _____ or Revision Request Date: _____ Page of

Sources and Uses:

FUND NAME: Miscellaneous Revenu Fund	FUND CODE: 0349-00	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Beginning Free Fund Balance			**0**	**0**	**100,000**	**600,000**
Encumbrances as of July 1			0	0	0	0
Beginning Cash Balance		**0**	**0**	**0**	**100,000**	**600,000**
Revenues (from Form B-11)		0	0	0	0	0
Non-Revenue Receipts		0	0	0	0	0
Transfers in from (Fund Title):	Fund or Reference:	0	0	0	0	0
Transfers in from (Fund Title):	Fund or Reference:	0	0	0	0	0
Transfers in from (Fund Title):	Fund or Reference:	0	0	0	0	0
Total Available for Year		**0**	**0**	**0**	**100,000**	**600,000**
Transfers out to (Fund Title):	Fund or Reference:	0	0	0	0	0
Transfers out to (Fund Title):	Fund or Reference:	0	0	0	0	0
Non-Expenditure Disbursements		0	0	0	0	0
Cash Expenditures for Prior Year Encumbrances		0	0	0	0	0
Original Appropriation		*0*	*0*	*0*	*100,000*	*0*
Prior Year Reappropriations, Supplementals, Rescissions		*0*	*0*	*0*	*0*	*0*
Non-cogs, Receipts to Appropriation, Board of Examiners Reduction, Governor's Holdback		*0*	*0*	*0*	*0*	*0*
Reversions		*0*	*0*	*0*	*0*	*0*
Current Year Reappropriation		*0*	*0*	*0*	*0*	*0*
Reserve for Current Year Encumbrances		*0*	*0*	*0*	*0*	*0*
Current Year Cash Expenditures		0	0	0	100,000	0
Ending Cash Balance		**0**	**0**	**0**	**0**	**600,000**
Prior Year Encumbrances as of June 30		0	0	0	0	0
Current Year Encumbrances as of June 30		0	0	0	0	0
Borrowing Limit		0	0	0	0	0
Ending Free Fund Balance		**0**	**0**	**0**	**0**	**600,000**
Budgetary Basis Expenditures (Current Year Cash Expenditures + Current Year Encumbrances)		**0**	**0**	**0**	**100,000**	**0**
Outstanding Loans (if this fund is part of a loan program)		**0**	**0**	**0**	**0**	**0**

Note:

FORM B8.1: PROGRAM REQUEST BY DECISION UNIT

Agency/Department: STEM Action Center
Function/Division: STEM Action Center
Activity/Program: 01

Request for Fiscal Year : 2017
Agency Number: 179
Function/Activity Number: 01
Budget Unit: GVST

Original Request Date:	Revision Request Date:

Page: of

Decision Unit Number: 12.01 **Descriptive Title:** Grants, Projects, and Program Administration

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP)					
PERSONNEL COSTS:					
1. Salaries					
2. Benefits					
3. Group Position Funding					
TOTAL PERSONNEL COSTS:					
OPERATING EXPENDITURES **by summary object:**					
1. Miscellaneous Expense Ongoing	500,000				$500,000
2. Miscellaneous One Time	500,000				$500,000
3.					
TOTAL OPERATING EXPENDITURES:	**$1,000,000**				**$1,000,000**
CAPITAL OUTLAY **by summary object:**					
1.					
2.					
3.					
TOTAL CAPITAL OUTLAY:					
T/B PAYMENTS:					
LUMP SUM:					
GRAND TOTAL	**$1,000,000**				**$1,000,000**

1. What is being requested and why? What is the agency staffing level for this activity and how much funding, by source, is in the base?
In order to support the intent of Section 67-823, Idaho Code, additional ongoing and one-time funding is being requested in order to promote STEM activities throughout Idaho and to fully engage with educators and industry. Additional monies will support the needs of educators and industry including professional development, needs and gap analysis, outreach and and research.

2. What resources are necessary to implement this request?
Financial support is needed in order to fulfill the intent of the legislation.

3. Provide additional detail about the request, including one-time versus ongoing. Include a description of major revenue assumptions, for example, whether there is a new new customer base, fee structure changes, or anticipated grant awards.
One time expenses will be used to construct new databases, conduct initial analyses, research and grant applications.
Ongoing expenses will be used to support professional development, pilot projects and outreach.

4. Who is being served by this request and what are the expected impacts of the funding requested? If this request is not funded who and what are impacted?
As directed in Section 67-823, Idaho Code, the intent is to serve, educators and students (K-college), business and industry.

FORM B8.1: PROGRAM REQUEST BY DECISION UNIT

Agency/Department:	STEM Action Center	Request for Fiscal Year :	2017
Function/Division:	STEM Action Center	Agency Number:	179
Activity/Program:	01	Function/Activity Number:	01
		Budget Unit:	GVST
Original Request Date:	Revision Request Date:	Page:	of

Decision Unit Number: 12.02 **Descriptive Title:** Industry Contributions and Projects

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP)					
PERSONNEL COSTS:					
1. Salaries					
2. Benefits					
3. Group Position Funding					
TOTAL PERSONNEL COSTS:					
OPERATING EXPENDITURES **by summary object:**					
1. Miscellaneous Expense Ongoing		500,000			$500,000
2.					
3.					
TOTAL OPERATING EXPENDITURES:		**$500,000**			**$500,000**
CAPITAL OUTLAY **by summary object:**					
1.					
2.					
3.					
TOTAL CAPITAL OUTLAY:					
T/B PAYMENTS:					
LUMP SUM:					
GRAND TOTAL		**$500,000**			**$500,000**

1. What is being requested and why? What is the agency staffing level for this activity and how much funding, by source, is in the base?
It is anticipated that $500,000 in dedicated funds will be received via industry, private donations and/or grant applications.

2. What resources are necessary to implement this request?
The ability to secure spending authority over these monies is necessary to distribute the funds.

3. Provide additional detail about the request, including one-time versus ongoing. Include a description of major revenue assumptions, for example, whether there is a new customer base, fee structure changes, or anticipated grant awards.
This is a one time request in order to spend monies secured from a variety of resources.

4. Who is being served by this request and what are the expected impacts of the funding requested? If this request is not funded who and what are impacted?
As directed in Section 67-823, Idaho Code, the intent is to serve, educators and students (K-college), business and industry.

FORM B8.1: PROGRAM REQUEST BY DECISION UNIT

Agency/Department:	STEM Action Center	Request for Fiscal Year :	2017
Function/Division:	STEM Action Center	Agency Number:	179
Activity/Program:	01	Function/Activity Number:	01
		Budget Unit:	GVST

Original Request Date:	Revision Request Date:	Page:	of

Decision Unit Number: 12.03 **Descriptive Title:** Personnel Costs for Program Manager

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP)					
PERSONNEL COSTS:					
1. Salaries	15,000				$15,000
2. Benefits	3,100				$3,100
3. Group Position Funding					
TOTAL PERSONNEL COSTS:	**$18,100**				**$18,100**
OPERATING EXPENDITURES **by summary object:**					
1.					
2.					
3.					
TOTAL OPERATING EXPENDITURES:					
CAPITAL OUTLAY **by summary object:**					
1.					
2.					
3.					
TOTAL CAPITAL OUTLAY:					
T/B PAYMENTS:					
LUMP SUM:					
GRAND TOTAL	**$18,100**				**$18,100**

1. What is being requested and why? What is the agency staffing level for this activity and how much funding, by source, is in the base?
The nature, complexity, and the scope of work required for administering the STEM programs facilitates this request for additional monies for a candidate who maintains an education degree, specific to science, technology, engineering, and math.

2. What resources are necessary to implement this request?
General Fund monies

3. Provide additional detail about the request, including one-time versus ongoing. Include a description of major revenue assumptions, for example, whether there is a new customer base, fee structure changes, or anticipated grant awards.
This request is for ongoing funding for the Program manager position.

4. Who is being served by this request and what are the expected impacts of the funding requested? If this request is not funded who and what are impacted?
As directed in Section 67-823, Idaho Code, the intent is to serve, educators and students (K-college), business and industry.

FORM B8.1: PROGRAM REQUEST BY DECISION UNIT

Agency/Department: STEM Action Center
Function/Division: STEM Action Center
Activity/Program: 01

Request for Fiscal Year : 2017
Agency Number: 179
Function/Activity Number: 01
Budget Unit: GVST

Original Request Date:	Revision Request Date:

Page: of

Decision Unit Number: 12.04 **Descriptive Title:** Membership and Dues

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP)					
PERSONNEL COSTS:					
1. Salaries					
2. Benefits					
3. Group Position Funding					
TOTAL PERSONNEL COSTS:					
OPERATING EXPENDITURES **by summary object:**					
1. Individual Organization Membership Ongoing	15,000				$15,000
2.					
3.					
TOTAL OPERATING EXPENDITURES:	**$15,000**				**$15,000**
CAPITAL OUTLAY **by summary object:**					
1.					
2.					
3.					
TOTAL CAPITAL OUTLAY:					
T/B PAYMENTS:					
LUMP SUM:					
GRAND TOTAL	**$15,000**				**$15,000**

1. What is being requested and why? What is the agency staffing level for this activity and how much funding, by source, is in the base?
Membership in various organizations will serve to guide the implementation of the activities of the STEM Action Center. These additional funds will support membership in the Council of Chief State School Officers (CCSSO) and STEMx, both national organization with extensive networks of STEM professionals and will provide valuable tools and best practices for potential use within the STEM Action Center.

2. What resources are necessary to implement this request?
Financial support will allow these activities to occur.

3. Provide additional detail about the request, including one-time versus ongoing. Include a description of major revenue assumptions, for example, whether there is a new customer new customer base, fee structure changes, or anticipated grant awards.
Ongoing funding will be needed for the annual membership fees.

4. Who is being served by this request and what are the expected impacts of the funding requested? If this request is not funded who and what are impacted?
As directed in Section 67-823, Idaho Code, the intent is to serve, educators and students (preK-college), business and industry.

FORM B6: WAGE & SALARY RECONCILIATION

Agency/Department: Office of the Governor
Function/Division: Science, Technology, Engineering and Math Action Center
Activity/Program: STEM Action Center

Agency Number: 179
Function/Activity Number:
Budget Unit: GVST
Fiscal Year: 2017

Original Request Date:
Revision Date: Revision #:

Fund Name: General
Fund Number: 0001-00
Budget Submission Page # of

PCN	CLASS CODE	DESCRIPTION	Indicator Code	FTP	SALARY	FY 2016 HEALTH BENEFITS	FY 2016 VAR BENEFITS	FY 2016 TOTAL	FY 2017 SALARY CHG	FY 2017 CHG HEALTH BENEFITS	FY 2017 CHG VAR BENEFITS	TOTAL BENEFIT CHANGES
		Totals from Wage and Salary Report (WSR):										
		Permanent Positions	1	0.00	0	0	0	0	0	0	0	0
		Board & Group Positions	2		0	0	0	0				
		Elected Officials & Full Time Commissioners	3	0.00	0	0	0	0		0	0	0
		TOTAL FROM WSR		0.00	0	0	0	0		0	0	0
		FY 2016 ORIGINAL APPROPRIATION	229,800	2.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!				
		Unadjusted Over or (Under) Funded:	Est Difference	2.00	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		#DIV/0!		
		Adjustments to Wage & Salary: Add Funded / Subtract Unfunded - Vacant or Authorized - Positions:										
		Retire Cd / **Adjustment Description / Position Title**										
0001	41009	R1 Executive Director	1	1.00	110,000	11,200	23,120	144,320	4,231	340	429	769
0002		R1 Program Manager	1	1.00	61,000	11,200	12,821	85,021	2,346	340	238	578
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
				0.00	0	0	0	0	0	0	0	0
		Other Adjustments:										
				0.00	0	0	0	0		0	0	0
				0.00	0	0	0	0		0	0	0
				0.00	0	0	0	0		0	0	0
				0.00	0	0	0	0		0	0	0
		Estimated Salary Needs:										
		Permanent Positions	1	2.00	171,000	22,400	35,941	229,341	6,577	680	667	1,347
		Board & Group Positions	2	0.00	0	0	0	0			0	0
		Elected Officials & Full Time Commissioners	3	0.00	0	0	0	0		0	0	0
		Estimated Salary and Benefits		2.00	171,000	22,400	35,941	229,341	6,577	680	667	1,347
		Adjusted Over or (Under) Funding:	Orig. Approp	0.00	300	0	100	400		Calculated overfunding is .2% of Original Appropriation		
			Est. Expend	0.00	300	0	100	400		Calculated overfunding is .2% of Estimated Expenditures		
			Base	0.00	300	0	100	400		Calculated overfunding is .2% of the Base		

Personnel Cost Reconciliation - Relation to Zero Variance --->

DU			Original Appropriation	FTP	FY 16 Salary	FY 16 Health Ben	FY 16 Var Ben	FY 2016 Total	FY 2017 SALARY CHG	FY 17 Chg Health Bens	FY 17 Chg Var Bens	Total Benefit Change
3.00		**FY 2016 ORIGINAL APPROPRIATION**	229,800	2.00	171,342	22,445	36,013	229,800				
		Rounded Appropriation		2.00	171,300	22,400	36,000	229,800				
		Appropriation Adjustments:										
4.11		Reappropriation		0.00	0	0	0	0				
4.31		Supplemental		0.00	0	0	0	0				0
5.00		**FY 2016 TOTAL APPROPRIATION**		2.00	171,300	22,400	36,000	229,800				
		Expenditure Adjustments:										
6.31		FTP or Fund Adjustment		0.00	0		0	0				0
6.51		Transfer Between Programs		0.00	0	0	0	0				0
7.00		**FY 2016 ESTIMATED EXPENDITURES**		2.00	171,300	22,400	36,000	229,800				

		Base Adjustments:										
8.31		Transfer Between Programs		0.00	0	0	0	0				0
8.41		Removal of One-Time Expenditures		0.00	0		0	0				0
8.51		Base Reduction		0.00	0	0	0	0				0
				FTP	FY 17 Salary	FY17 Health Ben	FY 17 Var Ben	FY 2017 Total				
9.00		**FY 2017 BASE**		2.00	171,300	22,400	36,000	229,800				
10.11		Change in Health Benefit Costs				700		700				
10.12		Change in Variable Benefits Costs					700	700				
								0				
		Subtotal CEC Base:	Indicator Code	2.00	171,300	23,100	36,700	231,200				
10.51		Annualization			0	0	0	0				
10.61		CEC for Permanent Positions	1.00%		1,700		400	2,100				
10.62		CEC for Group Positions	1.00%		0		0	0				
10.63		CEC for Elected Officials & Commissioners			0		0	0				
10.64		27th Payroll (ONE-TIME)			6,600		1,400	8,000				
10.65	OT	CEC for 27th Payroll Perm. Positions (ONE-TIME)			100		0	100				
11.00		**FY 2017 PROGRAM MAINTENANCE**		2.00	179,700	23,100	38,500	241,400				
		Line Items:										
12.04		Personnel Costs for Program Manager			15,000		3,100	18,100				
								0				
								0				
13.00		**FY 2017 TOTAL REQUEST**		2.00	194,700	23,100	41,600	259,500				

FIVE-YEAR FACILITY NEEDS PLAN, pursuant to IC 67-5708B

AGENCY INFORMATION

AGENCY NAME:	STEM Action Center		
Division/Bureau:	Office of the Governor		
Prepared By:	Matt Orem	**E-mail Address:**	matt.orem@dfm.idaho.gov
Telephone Number:	854-3063	**Fax Number:**	334-2438
DFM Analyst:	Adam Jarvis	**LSO/BPA Analyst:**	Paul Headlee
Date Prepared:	8/22/2015	**For Fiscal Year:**	**2017**

FACILITY INFORMATION (please list each facility separately by city and street address)

Facility Name:	Borah Building				
City:	Boise	**County:**	Ada		
Street Address:	305 N. 8th Street			**Zip Code:**	83702
Facility Ownership: (could be private or state-owned, use "X" to mark one):	**Private Lease (use "X" to mark):**		**State Owned (use "X" to mark):** X	**Lease Expires:**	

FUNCTION/USE OF FACILITY: Could be administrative use, client counseling, hearing rooms, field offices, etc. Address any specialized needs which require additional square feet.

Administrative Office Use

COMMENTS: Address reasons for expanding or relocating; amount of space leased to other state agencies, federal agencies, etc. & the amount of rent they pay for the use of your facility; or other comments which might be helpful.

SURPLUS PROPERTY: Facilities to be disposed of and funds re-utilized for building replacement or renovation of facilities. This could also include leased facilities if the leased facility is to be vacated prior to the expiration date of the lease.

FISCAL YR:	ACTUAL 2015	ESTIMATE 2016	REQUEST 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020
Use "X" to mark the year facility would be surplused.						

WORK AREAS: Work areas are areas occupied by full-time employees, contractors, seasonal employees, auditors, etc. (3 people working in one building would be 3 work areas)

FISCAL YR:	ACTUAL 2015	ESTIMATE 2016	REQUEST 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020
Total Number of Work Areas:	2	2	2	2	2	2
Full-Time Equivalent Positions:	2	2	2	2	2	2
Temp. Employees, Contractors, Auditors, etc.:						

SQUARE FEET: Use "net rentable" sq ft if in a facility leased from a private party; use "usable" sq ft if in a State-owned facility. Typically, this will be the figure shown in the Lease Agreement if leased from a private party or in the MOU if state-owned.

FISCAL YR:	ACTUAL 2015	ESTIMATE 2016	REQUEST 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020
Square Feet:	0	568	568	568	568	568

FACILITY COST: Include annual rent, plus any facility-related costs, such as utilities, janitorial service, property taxes or building maintenance which are not included in rent payment made to your Landlord. If improvements will need to be made to the facility and will be paid by the agency, this should be included as well. If the lease will be expiring and the future rent is not specified in the lease agreement, increase rent by 3%/yr. Increase all other facility-related costs by 3%/yr as well. Use "Calculation Sheet" if necessary. Do not include telephone costs or rent discounts. If you anticipate moving to a new facility, you need to take into account any increase in sq ft leased and estimate a new market rate for the new facility. Do NOT use your old rate per sq ft – it may not be a realistic figure.

FISCAL YR:	ACTUAL 2015	ESTIMATE 2016	REQUEST 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020
Total Facility Cost/Yr:	$0.00	$6,300.00	$6,300.00	$6,300.00	$6,300.00	$6,300.00

IMPORTANT NOTES:

1. **Please fill in the white sections only! If you have any questions, please call Tracy @ 332-1933.**
2. **Upon completion, please send to Tracy Whittington at the Division of Public Works. This can be emailed to him at Tracy.Whittington@adm.idaho.gov.**
3. **If you have five or more locations, please summarize the information on the Facility Information Summary Sheet and include this summary sheet with your submittal.**
4. **Attach a hardcopy of this submittal, as well as the Facility Information Summary Sheet, if applicable, with your budget request.**

AGENCY NOTES: