

# Agency Summary And Certification

## 440 -- Lottery, Idaho State

Original Submission \_\_\_ or Rev No. 1

FY2018 Request

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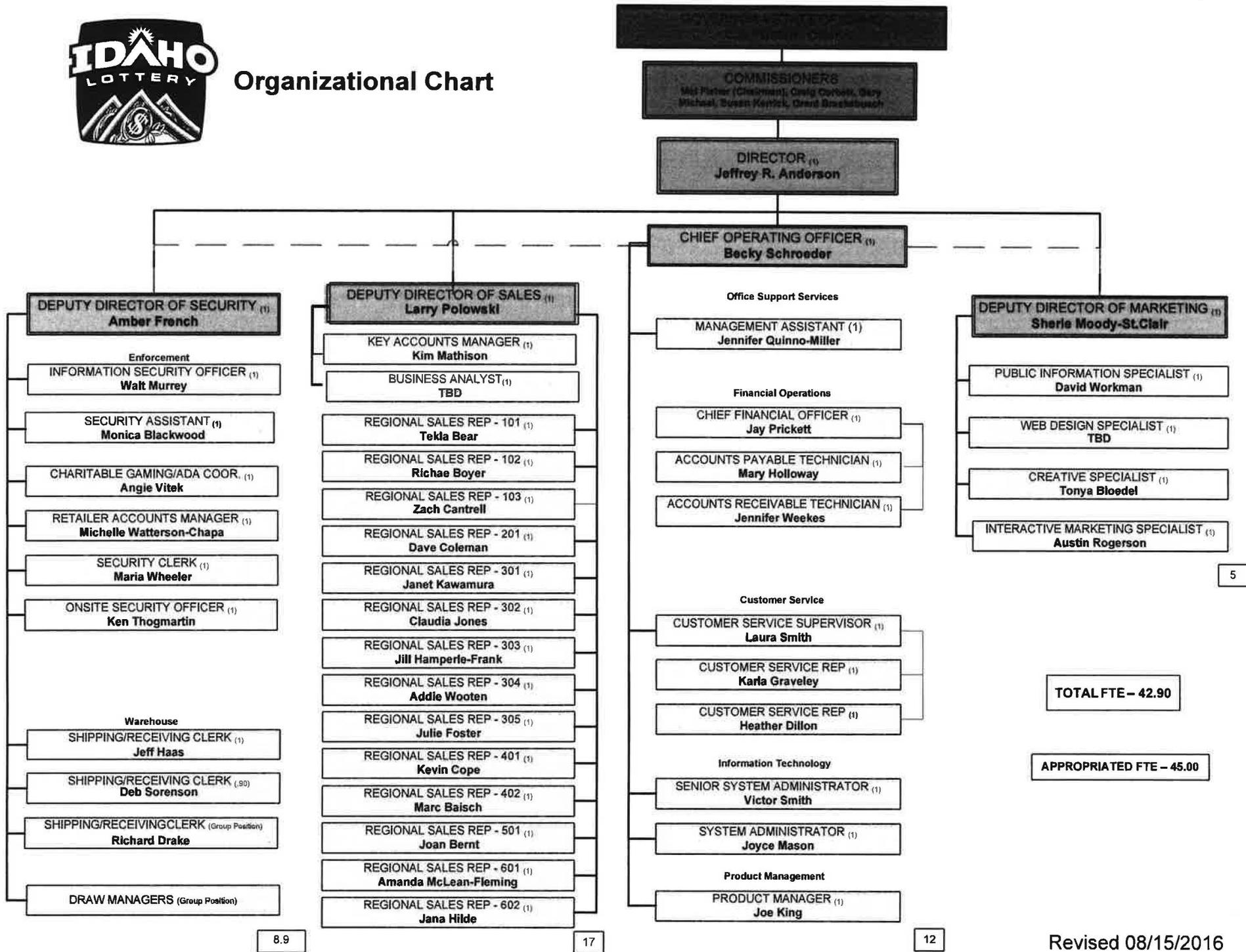
In accordance with 67-3503, Idaho Code, I certify the attached forms properly state the receipts and expenditures of the department (agency, office, or institution) for the fiscal years indicated. The summary of expenditures by major program, fund source, and standard class is indicated below.

Signature of Department Director :  Date: 11/22/16

Function/Activity	FY 2016 Total Appropriation	FY 2016 Total Expenditures	FY 2017 Original Appropriation	FY 2017 Estimated Expenditures	FY 2018 Total Request
Lottery Commission	5,696,000	5,067,700	5,902,600	5,902,600	6,178,000
<b>Total</b>	5,696,000	5,067,700	5,902,600	5,902,600	6,178,000
By Fund Source	Total Appropriation	Actual Expenditures	Original Appropriation	Estimated Expenditures	Total Request
D 0419-00 Lottery	5,696,000	5,067,700	5,902,600	5,902,600	6,178,000
<b>Total</b>	5,696,000	5,067,700	5,902,600	5,902,600	6,178,000
By Object	Total Appropriation	Actual Expenditures	Original Appropriation	Estimated Expenditures	Total Request
Personnel Costs	2,965,100	2,804,400	3,180,600	3,180,600	3,329,100
Operating Expenditures	2,648,200	2,184,400	2,635,400	2,635,400	2,728,800
Capital Outlay	82,700	78,900	86,600	86,600	120,100
Trustee And Benefit Payments	0	0	0	0	0
Lump Sum	0	0	0	0	0
<b>Total</b>	5,696,000	5,067,700	5,902,600	5,902,600	6,178,000
<b>FTP Total</b>	45.00	45.00	45.00	45.00	45.00



# Organizational Chart



8.9

17

12

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TOTAL FTE – 42.90

APPROPRIATED FTE – 45.00

## FY 2018 Agency Budget - Request

## Line Item Report

Agency: 440 Lottery, Idaho State

Decision Unit	Priority	Agency Request			
		FTP	General	Total	
<b>Lottery Commission</b>					
12.01 POST-Certified Detective	1	0.00	0	98,600	
12.02 Marketing Project Manager	3	0.00	0	68,200	
12.03 Operational - Training	2	0.00	0	30,000	
12.04 Operational - Leasehold Improvements	4	0.00	0	47,500	
		<b>0.00</b>	<b>0</b>	<b>244,300</b>	

**FORM B11: REVENUE**

Agency/Department: Idaho Lottery  
 Program (If applicable): \_\_\_\_\_

Request for Fiscal Year: 2018  
 Agency Number: 440  
 Budget Unit (If Applicable): SGCA  
 Function/Activity Number (If Applicable): 01

Original Request Date: 9/1/16      Revision Request Date: \_\_\_\_\_

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Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Summary Object Code	Revenue Source Description -Summary Level	FY 2014 Actual Revenue	FY 2015 Actual Revenue	FY 2016 Actual Revenue	FY 2017 Estimated Revenue	FY 2018 Estimated Revenue
0419		Lottery	1	3610	Lottery Revenue	208,892,594	210,194,748	236,079,627	225,800,000	230,100,000
0419		Lottery		3690	Data Line Charges	692,704	679,255	675,198	775,000	780,000
0419		Lottery		3690	Other Income	56,141	65,422	63,206	75,000	80,000
0419		Lottery		3690	Interest Income	1,450	698	1,386	2,000	2,000
<b>0419</b>		<b>Lottery</b>		<b>FUND TOTAL</b>		<b>\$209,642,889</b>	<b>\$210,940,123</b>	<b>\$236,819,417</b>	<b>\$226,652,000</b>	<b>\$230,962,000</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>FUND TOTAL</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
					<b>GRAND TOTAL</b>	<b>\$209,642,889</b>	<b>\$210,940,123</b>	<b>\$236,819,417</b>	<b>\$226,652,000</b>	<b>\$230,962,000</b>

Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Summary Object Code	Revenue Source Description -Summary Level	FY 2014 Actual Revenue	FY 2015 Actual Revenue	FY 2016 Actual Revenue	FY 2017 Estimated Revenue	FY 2018 Estimated Revenue
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**SIGNIFICANT ASSUMPTIONS**

Fund No.	Fund Detail No.	Fund Name	Significant Assumption Number	Provide Details for any Significant Assumptions Listed						FY 2018 Estimated Impact
0419		Lottery	1	1.9% Increase in Total Ticket Sales						\$4,310,000
										\$0
										\$0
										\$0
										\$0
										\$0

**FORM B12: ANALYSIS OF FUND BALANCES**

Request for Fiscal Year : 2018

Agency/Department: Idaho Lottery

Agency Number: 440

Original Request Date: September 1, 2016 or Revision Request Date: \_\_\_\_\_

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Sources and Uses:

FUND NAME:	State Lottery	FUND CODE:	0419	FY 2014 Actual	FY 2015 Actual	FY 2016 Actual	FY 2017 Estimate	FY 2018 Estimate
<b>1. Beginning Free Fund Balance</b>				48,645,004	46,792,328	43,287,612	49,991,714	48,200,000
2. Encumbrances as of July 1				211,800	(23,800)	47,700	(9,600)	(2,500)
2a. Reappropriation (Legislative Carryover)				NA	NA	NA	0	0
<b>3. Beginning Cash Balance</b>				<b>48,856,804</b>	<b>46,768,528</b>	<b>43,335,312</b>	<b>49,982,114</b>	<b>48,197,500</b>
4. Revenues (from Form B-11)				209,642,889	210,940,123	236,819,417	226,652,000	230,962,000
5. Non-Revenue Receipts and Other Adjustments				0	0	0	0	0
6. Statutory Transfers in:		Fund or Reference:		0	0	0	0	0
7. Operating Transfers in:		Fund or Reference:		0	0	0	0	0
<b>8. Total Available for Year</b>				<b>258,499,693</b>	<b>257,708,651</b>	<b>280,154,729</b>	<b>276,634,114</b>	<b>279,159,500</b>
9. Statutory Transfers Out:		Fund or Reference:	0419	48,200,000	49,000,000	45,000,000	49,500,000	48,000,000
10. Operating Transfers Out:		Fund or Reference:		0	0	0	0	0
11. Non-Expenditure Disbursements and Other Adjustments				1,151,076	(154,613)	(68,584)	0	0
12. Cash Expenditures for Prior Year Encumbrances				211,800	235,600	187,900	197,500	200,000
13. Original Appropriation				5,423,700	5,627,700	5,696,000	5,902,600	6,178,000
14. Prior Year Reappropriations, Supplementals, Rescissions				156,508,989	159,476,752	179,159,799	172,636,514	175,581,500
15. Non-cogs, Receipts to Appropriation, etc				0	0	0	0	0
16. Reversions				0	0	0	0	0
17. Current Year Reappropriation				0	0	0	0	0
18. Reserve for Current Year Encumbrances				235,600	187,900	197,500	200,000	200,000
19. Current Year Cash Expenditures				162,168,289	165,292,352	185,053,299	178,739,114	181,959,500
<b>20. Ending Cash Balance</b>				<b>46,768,528</b>	<b>43,335,312</b>	<b>49,982,114</b>	<b>48,197,500</b>	<b>49,000,000</b>
21. Prior Year Encumbrances as of June 30				211,800	235,600	187,900	197,500	200,000
22. Current Year Encumbrances as of June 30				(235,600)	(187,900)	(197,500)	(200,000)	(200,000)
22a. Current Year Reappropriation				NA	NA	0	0	0
23. Borrowing Limit				0	0	0	0	0
<b>24. Ending Free Fund Balance</b>				<b>46,792,328</b>	<b>43,287,812</b>	<b>49,991,714</b>	<b>48,200,000</b>	<b>49,000,000</b>
<b>25. Budgetary Basis Expenditures (CY Cash Exp + CY Enc)</b>				<b>161,932,689</b>	<b>165,104,452</b>	<b>184,855,799</b>	<b>178,539,114</b>	<b>181,759,500</b>
<b>26. Outstanding Loans (if this fund is part of a loan program)</b>								

Notes:

**FY 2018 Agency Budget - Request**

**Detail Report**

Agency: 440 - Lottery, Idaho State

Function: 01 - Lottery Commission

		<u>FTP</u>	<u>Personnel Cost</u>	<u>Operating Expense</u>	<u>Capital Outlay</u>	<u>Trustee/ Benefit</u>	<u>Lump Sum</u>	<u>Total</u>
<b>FY 2016 Total Appropriation</b>								
1.00 FY 2016 Total Appropriation								
SB 1130								
0419-00	Dedicated	45.00	2,965,100	2,648,200	82,700	0	0	5,696,000
<b>Total</b>		<b>45.00</b>	<b>2,965,100</b>	<b>2,648,200</b>	<b>82,700</b>	<b>0</b>	<b>0</b>	<b>5,696,000</b>
1.61 Reverted Appropriation Balances								
0419-00	Dedicated	0.00	(160,700)	(463,800)	(3,800)	0	0	(628,300)
<b>Total</b>		<b>0.00</b>	<b>(160,700)</b>	<b>(463,800)</b>	<b>(3,800)</b>	<b>0</b>	<b>0</b>	<b>(628,300)</b>
<b>FY 2016 Actual Expenditures</b>								
0419-00	Dedicated	45.00	2,804,400	2,184,400	78,900	0	0	5,067,700
<b>Total</b>		<b>45.00</b>	<b>2,804,400</b>	<b>2,184,400</b>	<b>78,900</b>	<b>0</b>	<b>0</b>	<b>5,067,700</b>
<b>FY 2017 Original Appropriation</b>								
3.00 FY 2017 Original Appropriation								
SB 1365								
0419-00	Dedicated	45.00	3,084,300	2,635,400	53,400	0	0	5,773,100
OT 0419-00	Dedicated	0.00	96,300	0	33,200	0	0	129,500
<b>Total</b>		<b>45.00</b>	<b>3,180,600</b>	<b>2,635,400</b>	<b>86,600</b>	<b>0</b>	<b>0</b>	<b>5,902,600</b>
<b>FY 2017 Total Appropriation</b>								
0419-00	Dedicated	45.00	3,084,300	2,635,400	53,400	0	0	5,773,100
OT 0419-00	Dedicated	0.00	96,300	0	33,200	0	0	129,500
<b>Total</b>		<b>45.00</b>	<b>3,180,600</b>	<b>2,635,400</b>	<b>86,600</b>	<b>0</b>	<b>0</b>	<b>5,902,600</b>
<b>FY 2017 Estimated Expenditures</b>								
0419-00	Dedicated	45.00	3,084,300	2,635,400	53,400	0	0	5,773,100
OT 0419-00	Dedicated	0.00	96,300	0	33,200	0	0	129,500
<b>Total</b>		<b>45.00</b>	<b>3,180,600</b>	<b>2,635,400</b>	<b>86,600</b>	<b>0</b>	<b>0</b>	<b>5,902,600</b>
<b>Base Adjustments</b>								
8.41 Removal of One-Time Expenditures								
OT 0419-00	Dedicated	0.00	(96,300)	0	(33,200)	0	0	(129,500)
<b>Total</b>		<b>0.00</b>	<b>(96,300)</b>	<b>0</b>	<b>(33,200)</b>	<b>0</b>	<b>0</b>	<b>(129,500)</b>
<b>FY 2018 Base</b>								
0419-00	Dedicated	45.00	3,084,300	2,635,400	53,400	0	0	5,773,100
OT 0419-00	Dedicated	0.00	0	0	0	0	0	0
<b>Total</b>		<b>45.00</b>	<b>3,084,300</b>	<b>2,635,400</b>	<b>53,400</b>	<b>0</b>	<b>0</b>	<b>5,773,100</b>

## FY 2018 Agency Budget - Request

## Detail Report

Agency: 440 - Lottery, Idaho State

Function: 01 - Lottery Commission

		FTP	Personnel Cost	Operating Expense	Capital Outlay	Trustee/ Benefit	Lump Sum	Total
<b>Program Maintenance</b>								
10.11	Change in Health Benefit Costs							
	0419-00 Dedicated	0.00	52,500	0	0	0	0	52,500
	<b>Total</b>	<b>0.00</b>	<b>52,500</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>52,500</b>
10.12	Change in Variable Benefit Costs							
	0419-00 Dedicated	0.00	(100)	0	0	0	0	(100)
	<b>Total</b>	<b>0.00</b>	<b>(100)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(100)</b>
10.31	Repair, Replacement Items/Alterations							
	OT 0419-00 Dedicated	0.00	0	0	66,700	0	0	66,700
	<b>Total</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>66,700</b>	<b>0</b>	<b>0</b>	<b>66,700</b>
10.41	Attorney General Fees							
	0419-00 Dedicated	0.00	0	16,100	0	0	0	16,100
	<b>Total</b>	<b>0.00</b>	<b>0</b>	<b>16,100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>16,100</b>
10.45	Risk Management Cost Increases							
	0419-00 Dedicated	0.00	0	1,100	0	0	0	1,100
	<b>Total</b>	<b>0.00</b>	<b>0</b>	<b>1,100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,100</b>
10.46	Controller's Fee Charge							
	0419-00 Dedicated	0.00	0	(700)	0	0	0	(700)
	<b>Total</b>	<b>0.00</b>	<b>0</b>	<b>(700)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(700)</b>
10.47	Treasurer's Fee Charge							
	0419-00 Dedicated	0.00	0	(600)	0	0	0	(600)
	<b>Total</b>	<b>0.00</b>	<b>0</b>	<b>(600)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(600)</b>
10.61	Salary Multiplier - Regular Employees							
	0419-00 Dedicated	0.00	25,300	0	0	0	0	25,300
	<b>Total</b>	<b>0.00</b>	<b>25,300</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>25,300</b>
10.62	Salary Multiplier - Group and Temporary							
	0419-00 Dedicated	0.00	300	0	0	0	0	300
	<b>Total</b>	<b>0.00</b>	<b>300</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>300</b>
<b>FY 2018 Total Maintenance</b>								
	0419-00 Dedicated	45.00	3,162,300	2,651,300	53,400	0	0	5,867,000
	OT 0419-00 Dedicated	0.00	0	0	66,700	0	0	66,700
	<b>Total</b>	<b>45.00</b>	<b>3,162,300</b>	<b>2,651,300</b>	<b>120,100</b>	<b>0</b>	<b>0</b>	<b>5,933,700</b>

**FY 2018 Agency Budget - Request**

**Detail Report**

**Agency:** 440 - Lottery, Idaho State  
**Function:** 01 - Lottery Commission

		<u>FTP</u>	<u>Personnel Cost</u>	<u>Operating Expense</u>	<u>Capital Outlay</u>	<u>Trustee/Benefit</u>	<u>Lump Sum</u>	<u>Total</u>
<b>Line Items</b>								
12.01 POST-Certified Detective								
POST Certified Detective: The Lottery requires a POST Certified position created to combat a nearly 250% increase in criminal cases related to fraudulent activities by the public and retailers.								
0419-00	Dedicated	0.00	98,600	0	0	0	0	98,600
<b>Total</b>		<b>0.00</b>	<b>98,600</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>98,600</b>
12.02 Marketing Project Manager								
Marketing Project Manager: The Lottery requests spending authorization to replace outsourced Strategic oversight and management from an agency to handle in house, instead. This change and the addition of this position will save over \$100,000.								
0419-00	Dedicated	0.00	68,200	0	0	0	0	68,200
<b>Total</b>		<b>0.00</b>	<b>68,200</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>68,200</b>
12.03 Operational - Training								
Operational: The Lottery has included in this area an increase in travel required to train employees and our 1200 retailers regarding the operation of a new gaming system.								
0419-00	Dedicated	0.00	0	30,000	0	0	0	30,000
<b>Total</b>		<b>0.00</b>	<b>0</b>	<b>30,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>30,000</b>
12.04 Operational - Leasehold Improvements								
Operational: The Lottery, along with the Division of Public Works, has negotiated an extension of the current Headquarters lease. The building owner has agreed to fund significant tenant improvements to facilitate an efficient work flow, reduce the lease amount and take back inefficiently used space. We have requested funding to facilitate CAT5 wiring in our newly constructed office space.								
0419-00	Dedicated	0.00	0	47,500	0	0	0	47,500
<b>Total</b>		<b>0.00</b>	<b>0</b>	<b>47,500</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>47,500</b>
<b>FY 2018 Total</b>								
0419-00	Dedicated	45.00	3,329,100	2,728,800	53,400	0	0	6,111,300
OT 0419-00	Dedicated	0.00	0	0	66,700	0	0	66,700
<b>Total</b>		<b>45.00</b>	<b>3,329,100</b>	<b>2,728,800</b>	<b>120,100</b>	<b>0</b>	<b>0</b>	<b>6,178,000</b>

**FORM B8.1: PROGRAM REQUEST BY DECISION UNIT**

Agency/Department: Idaho Lottery  
 Function/Division: State Lottery  
 Activity/Program:

Request for Fiscal Year : 2018  
 Agency Number: 440  
 Function/Activity Number: 01  
 Budget Unit: SGCA

Original Request Date: September 1, 2016  
 Revision Request Date:

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Decision Unit Number: 12.01 Descriptive Title:

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP) PERSONNEL COSTS:					
1. Salaries		70,000			\$70,000
2. Benefits		28,600			\$28,600
3. Group Position Funding					
<b>TOTAL PERSONNEL COSTS:</b>		<b>\$98,600</b>			<b>\$98,600</b>
OPERATING EXPENDITURES by summary object:					
1. Professional services					
2. Employee travel					
3.					
<b>TOTAL OPERATING EXPENDITURES:</b>					
CAPITAL OUTLAY by summary object:					
1.					
2.					
3.					
<b>TOTAL CAPITAL OUTLAY:</b>					
<b>T/B PAYMENTS:</b>					
<b>LUMP SUM:</b>					
<b>GRAND TOTAL</b>		<b>\$98,600</b>			<b>\$98,600</b>

Attach as many pages as necessary to respond to the following questions:

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?
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.
  - c. List any additional operating funds and capital items needed.
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.
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?

**B8.1 – Decision Unit Number: 12.01**

Attach as many pages as necessary to respond to the following questions:

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 Idaho Lottery requests the addition of a POST Certified Detective. The Lottery currently employs only one other POST Certified position, the Deputy Director of Security. The Lottery Security & Enforcement Division has experienced over a 250% increase in the criminal caseload since 2013.**
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.  
**POST Certified Detective**  
**Pay Grade: M**  
**Full-time, benefits**  
**Anticipated date of hire: February 2017**
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.  
**An existing, but unfilled, part-time Office Specialist position will be retired when this position is added.**
  - c. List any additional operating funds and capital items needed. **N/A**
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 will be an ongoing position and become a part of the Lottery's base.**
4. Who is being served by this request and what are the expectations of the funding requested? If this request is not funded who and what are impacted? **The Lottery has documented a 250% increase in criminal cases over the past three years. This percentage includes an increase in fraudulent activities by retailers which create a direct threat to the integrity and fairness of the games offered to players. Aside from the Director's position, the Director of Security is the only other Lottery position required by Idaho code (§67-7410). The Lottery Security Director oversees the Lottery Law Enforcement division and will retire in 2 years. It is imperative that we have a POST Certified Detective in house to actively work cases to prevent fraud, but also for effective succession planning.**

**FORM B8.1: PROGRAM REQUEST BY DECISION UNIT**

Agency/Department: Idaho Lottery  
 Function/Division: State Lottery  
 Activity/Program:

Request for Fiscal Year : 2018  
 Agency Number: 440  
 Function/Activity Number: 01  
 Budget Unit: SGCA

Original Request Date: September 1, 2016  
 Revision Request Date:

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Decision Unit Number: 12.02 Descriptive Title:

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP) PERSONNEL COSTS:					
1. Salaries		45,000			\$45,000
2. Benefits		23,200			\$23,200
3. Group Position Funding					
<b>TOTAL PERSONNEL COSTS:</b>		<b>\$68,200</b>			<b>\$68,200</b>
OPERATING EXPENDITURES by summary object:					
1. Professional services					
2. Employee travel					
3.					
<b>TOTAL OPERATING EXPENDITURES:</b>					
CAPITAL OUTLAY by summary object:					
1.					
2.					
3.					
<b>TOTAL CAPITAL OUTLAY:</b>					
<b>T/B PAYMENTS:</b>					
<b>LUMP SUM:</b>					
<b>GRAND TOTAL</b>		<b>\$68,200</b>			<b>\$68,200</b>

Attach as many pages as necessary to respond to the following questions:

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?
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.
  - c. List any additional operating funds and capital items needed.
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.
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?

**B8.1 – Decision Unit Number: 12.02**

Attach as many pages as necessary to respond to the following questions:

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 Idaho Lottery requests the addition of a position tentatively titled a Marketing Project Coordinator. We currently have the necessary FTP to add this position within our authorized number of 45 FTP, but require additional funding. The Lottery currently outsources this work to an Agency in Boise, but after critical review of the work required and the nearly \$200,000 paid for the service, feel that we would be better served bringing this work in house.**
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.  
**Marketing Project Coordinator**  
**Pay Grade: K**  
**Full-time, benefits**  
**Anticipated date of hire: July 2018**
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.  
**An existing, but unfilled, part-time Shipping & Receiving Materials clerk position will be retired when this position is added.**
  - c. List any additional operating funds and capital items needed. **N/A**
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 will be an ongoing position and become a part of the Lottery's base.**
4. Who is being served by this request and what are the expectations of the funding requested? If this request is not funded who and what are impacted? **The Lottery, and the State of Idaho, will benefit from saving more than 50% of the current budget required to support this effort. We feel this is an efficient and cost effective way to realize the same (or better) benefit while saving a significant amount of money. If spending authority is not approved, the savings will not be realized.**

**FORM B8.1: PROGRAM REQUEST BY DECISION UNIT**

Agency/Department: Idaho Lottery  
 Function/Division: State Lottery  
 Activity/Program: \_\_\_\_\_

Request for Fiscal Year : 2018  
 Agency Number: 440  
 Function/Activity Number: 01  
 Budget Unit: SGCA

Original Request Date: September 1, 2016  
 Revision Request Date: \_\_\_\_\_

Decision Unit Number: <u>12.03</u>		Descriptive Title: _____			
Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP) PERSONNEL COSTS: 1. Salaries 2. Benefits 3. Group Position Funding					
<b>TOTAL PERSONNEL COSTS:</b>					
OPERATING EXPENDITURES by summary object: 1. Employee travel 2. 3.		30,000			\$30,000
<b>TOTAL OPERATING EXPENDITURES:</b>		<b>\$30,000</b>			<b>\$30,000</b>
CAPITAL OUTLAY by summary object: 1. 2. 3.					
<b>TOTAL CAPITAL OUTLAY:</b>					
<b>T/B PAYMENTS:</b>					
<b>LUMP SUM:</b>					
<b>GRAND TOTAL</b>		<b>\$30,000</b>			<b>\$30,000</b>

Attach as many pages as necessary to respond to the following questions:

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?
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.
  - c. List any additional operating funds and capital items needed.
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.
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?

**B8.1 – Decision Unit Number: 12.03**

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?

**Employee Travel – Because the Lottery is in the midst of a bid process for a new Gaming System Vendor, we must anticipate a potential new vendor in the coming fiscal year, thereby necessitating an increase in Employee Travel for employee education, in-state travel to train our current 1200 retailers that must be anticipated for a possible new gaming system.**

What resources are necessary to implement this request? **No resources required, aside from funding/spending authorization requirements.**

- a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service. **N/A**
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted. **N/A**
  - c. List any additional operating funds and capital items needed. **N/A**
2. 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. **N/A**
  3. Who is being served by this request and what are the expectations of the funding requested? If this request is not funded who and what are impacted? **The requested items are a necessary cost of doing business for the Idaho Lottery. Employee travel for training with the new gaming system an anticipated necessity, if these were not given spending authority, reaching and training our 1200 retailers would be impaired.**

**FORM B8.1: PROGRAM REQUEST BY DECISION UNIT**

Agency/Department: Idaho Lottery  
 Function/Division: State Lottery  
 Activity/Program: \_\_\_\_\_

Request for Fiscal Year : 2018  
 Agency Number: 440  
 Function/Activity Number: 01  
 Budget Unit: SGCA

Original Request Date: September 1, 2016  
 Revision Request Date: \_\_\_\_\_

Decision Unit Number: 12.04 Descriptive Title: \_\_\_\_\_

Description	General	Dedicated	Federal	Other	Total
FULL TIME POSITIONS (FTP) PERSONNEL COSTS: 1. Salaries 2. Benefits 3. Group Position Funding					
<b>TOTAL PERSONNEL COSTS:</b>					
OPERATING EXPENDITURES by summary object: 1. Computer services 2. 3.		47,500			\$47,500
<b>TOTAL OPERATING EXPENDITURES:</b>		<b>\$47,500</b>			<b>\$47,500</b>
CAPITAL OUTLAY by summary object: 1. 2. 3.					
<b>TOTAL CAPITAL OUTLAY:</b>					
<b>T/B PAYMENTS:</b>					
<b>LUMP SUM:</b>					
<b>GRAND TOTAL</b>		<b>\$47,500</b>			<b>\$47,500</b>

Attach as many pages as necessary to respond to the following questions:

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?
2. What resources are necessary to implement this request?
  - a. List by position: position titles, pay grades, full or part-time status, benefit eligibility, anticipated dates of hire and terms of service.
  - b. Note any existing agency human resources that will be redirected to this new effort and how existing operations will be impacted.
  - c. List any additional operating funds and capital items needed.
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.
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?



7.00		FY 2017 ESTIMATED EXPENDITURES		45.00	2,189,000	532,500	459,100	3,180,600
		Base Adjustments:						
8.31		Transfer Between Programs		0.00	0	0	0	0
8.41		Removal of One-Time Expenditures		0.00	(19,200)	0	(17,100)	(36,300)
8.51		Base Reduction			0	0	0	0
9.00		FY 2018 BASE		FTP	FY 18 Salary	FY18 Health Ben	FY 18 Var Ben	FY 2018 Total
10.11		Change in Health Benefit Costs		45.00	2,109,800	532,500	442,000	3,084,300
10.12		Change in Variable Benefits Costs				52,500	(100)	52,500
		Subtotal CEC Base:						
		Indicator Code		45.00	2,109,800	585,000	441,900	3,136,700
10.51		Annualization			0	0	0	0
10.61		CEC for Permanent Positions			20,800		4,500	25,300
10.62		CEC for Group Positions		1.00%	300		0	300
10.63		CEC for Elected Officials & Commissioners		1.00%	0		0	0
11.00		FY 2018 PROGRAM MAINTENANCE		45.00	2,130,900	585,000	446,400	3,162,300
		Line Items:						
12.01		Post Certified Detective	1		70,000	13,500	15,100	98,600
12.02		Marketing Project Manager	1		45,000	13,500	9,700	68,200
12.03								0
13.00		FY 2018 TOTAL REQUEST		45.00	2,245,900	612,000	471,200	3,329,100



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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	<a href="mailto:BSCHROEDER@LOTTERY.IDAHO.GOV">BSCHROEDER@LOTTERY.IDAHO.GOV</a>
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	ADVANCED STORAGE CENTER				
<b>City:</b>	COEUR D'ALENE	<b>County:</b>	KOOTENAI		
<b>Street Address:</b>	6215 N GOVERNMENT WAY			<b>Zip Code:</b>	83815
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>	<b>Lease Expires:</b>	MONTH TO MONTH

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

STORAGE UNIT UTILIZED BY IDAHO LOTTERY SALES REPRESENTATIVES WHO WORK IN THE FIELD, FROM THEIR VEHICLES, AND WITHOUT OFFICE SPACE.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:						
Full-Time Equivalent Positions:						
Temp. Employees, Contractors, Auditors, etc.:						

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	300	300	300	300	300	300

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$1,400.00	\$1,442.00	\$1,485.26	\$1,529.82	\$1,575.71	\$1,622.98

- IMPORTANT NOTES:**
- Please fill in the white sections only! If you have any questions, please call Ruth @ 332-1933.
  - Upon completion, please send to Ruth Swan-Brown at the Division of Public Works via email to [Ruth.Swan-Brown@adm.idaho.gov](mailto:Ruth.Swan-Brown@adm.idaho.gov).
  - 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.
  - Attach a hardcopy of this submittal, as well as the Facility Information Summary Sheet, if applicable, with your budget request.

**AGENCY NOTES:**

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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	<a href="mailto:BSCHROEDER@LOTTERY.IDAHO.GOV">BSCHROEDER@LOTTERY.IDAHO.GOV</a>
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	AIRPORT RENT A SPACE		
<b>City:</b>	LEWISTON	<b>County:</b>	NEZ PERCE
<b>Street Address:</b>	3406 4TH STREET	<b>Zip Code:</b>	83501
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>
			<b>Lease Expires:</b>
			MONTH TO MONTH

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

STORAGE UNIT UTILIZED BY IDAHO LOTTERY SALES REPRESENTATIVES WHO WORK IN THE FIELD, FROM THEIR VEHICLES, AND WITHOUT OFFICE SPACE.

**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.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:						
Full-Time Equivalent Positions:						
Temp. Employees, Contractors, Auditors, etc.:						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	60	60	60	60	60	60

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$594.00	\$611.82	\$630.17	\$649.08	\$668.55	\$688.61

**IMPORTANT NOTES:**

1. Please fill in the white sections only! If you have any questions, please call Ruth @ 332-1933.
2. Upon completion, please send to Ruth Swan-Brown at the Division of Public Works via email to [Ruth.Swan-Brown@adm.idaho.gov](mailto:Ruth.Swan-Brown@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:**

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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	<a href="mailto:BSCHROEDER@LOTTERY.IDAHO.GOV">BSCHROEDER@LOTTERY.IDAHO.GOV</a>
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	COUNTRY CORNER RV & SELF STORAGE				
<b>City:</b>	IDAHO FALLS	<b>County:</b>	BONNEVILLE		
<b>Street Address:</b>	3480 E. 1ST STREET			<b>Zip Code:</b>	83401
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>	<b>Lease Expires:</b>	MONTH TO MONTH

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

STORAGE UNIT UTILIZED BY IDAHO LOTTERY SALES REPRESENTATIVES WHO WORK IN THE FIELD, FROM THEIR VEHICLES, AND WITHOUT OFFICE SPACE.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:						
Full-Time Equivalent Positions:						
Temp. Employees, Contractors, Auditors, etc.:						

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	120	120	120	120	120	120

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$708.00	\$729.24	\$751.12	\$773.65	\$796.86	\$820.77

**IMPORTANT NOTES:**

- Please fill in the white sections only! If you have any questions, please call Ruth @ 332-1933.
- Upon completion, please send to Ruth Swan-Brown at the Division of Public Works via email to [Ruth.Swan-Brown@adm.idaho.gov](mailto:Ruth.Swan-Brown@adm.idaho.gov).
- 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.
- Attach a hardcopy of this submittal, as well as the Facility Information Summary Sheet, if applicable, with your budget request.

**AGENCY NOTES:**

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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	<a href="mailto:BSCHROEDER@LOTTERY.IDAHO.GOV">BSCHROEDER@LOTTERY.IDAHO.GOV</a>
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	IDAHO LOTTERY HEADQUARTERS		
<b>City:</b>	BOISE	<b>County:</b>	ADA
<b>Street Address:</b>	1199 SHORELINE LANE, SUITE 100		<b>Zip Code:</b> 83702
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>
			<b>Lease Expires:</b> 12/31/2017

**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 OFFICES, CONFERENCE ROOMS, CUSTOMER SERVICE, WINNER CLAIMS AND PAYMENT.

**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.

OUR LEASE EXPIRES IN DECEMBER OF 2017 AND WE ARE SIMULTANEOUSLY RESEARCHING POTENTIAL PROPERTIES, WHILE NEGOTIATING AN EXTENSION WITH OUR BUILDING OWNERS AND THE DPW. WE ARE REQUESTING TENANT IMPROVEMENTS TO PROVIDE A MORE PRODUCTIVE WORK FLOW, MORE EFFICIENT HVAC AND A BETTER FIT FOR OUR BUSINESS NEEDS. WE ARE NOT CALCULATING SIGNIFICANT COST CHANGES AS WE ARE HOPING THROUGH EFFICIENCIES WITH LAYOUT, TO REDUCE THE SQUARE FOOTAGE REQUIRED, WHICH WILL POTENTIALLY CANCEL OUT ANY INCREASE IN LEASE PAYMENT.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:	30	30	30	30	30	30
Full-Time Equivalent Positions:	30	30	30	30	30	30
Temp. Employees, Contractors, Auditors, etc.:	0	0	0	0	0	0

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	14,707	14,707	14,707	14,707	14,707	14,707

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$276,264.45	\$284,552.38	\$293,088.96	\$301,881.62	\$310,938.07	\$320,266.21

**IMPORTANT NOTES:**

1. Please fill in the white sections only! If you have any questions, please call Ruth @ 332-1933.
2. Upon completion, please send to Ruth Swan-Brown at the Division of Public Works via email to [Ruth.Swan-Brown@adm.idaho.gov](mailto:Ruth.Swan-Brown@adm.idaho.gov).
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**AGENCY NOTES:**

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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	BSCHROEDER@LOTTERY.IDAHO.GOV
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	IDAHO LOTTERY WAREHOUSE		
<b>City:</b>	BOISE	<b>County:</b>	ADA
<b>Street Address:</b>	2740 SOUTH COLE ROAD, UNIT 310		<b>Zip Code:</b> 83709
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>
			<b>Lease Expires:</b> 6/30/2018

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

WAREHOUSE USED TO STORE AND DISTRIBUTE LOTTERY TICKETS, HARDWARE AND EQUIPMENT.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:	3	3	3	3	3	3
Full-Time Equivalent Positions:	2	2	2	2	2	2
Temp. Employees, Contractors, Auditors, etc.:	0.5	0.5	0.5	0.5	0.5	0.5

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	6,995	6,995	6,995	6,995	6,995	6,995

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$45,521.28	\$48,293.53	\$49,742.33	\$51,234.60	\$51,234.60	\$52,771.64

**IMPORTANT NOTES:**

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**AGENCY NOTES:**

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

**AGENCY INFORMATION**

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	BSCHROEDER@LOTTERY.IDAHO.GOV
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	IDAHO STORAGE CONNECTION (FORMERLY REPUBLIC STORAGE)				
<b>City:</b>	BOISE	<b>County:</b>	ADA		
<b>Street Address:</b>	11031 JOPLIN			<b>Zip Code:</b>	83714
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>	<b>Lease Expires:</b>	MONTH TO MONTH

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

STORAGE UNIT USED TO STORE IDAHO LOTTERY EVENT TRAILERS.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:						
Full-Time Equivalent Positions:						
Temp. Employees, Contractors, Auditors, etc.:						

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	700	700	700	700	700	700

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$3,708.00	\$3,819.24	\$3,933.82	\$4,051.83	\$4,173.39	\$4,298.59

**IMPORTANT NOTES:**

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**AGENCY NOTES:**

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

<b>AGENCY NAME:</b>	IDAHO LOTTERY		
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	BSCHROEDER@LOTTERY.IDAHO.GOV
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	MAGIC VALLEY STORAGE		
<b>City:</b>	TWIN FALLS	<b>County:</b>	TWIN FALLS
<b>Street Address:</b>	1574 ELM STREET NORTH	<b>Zip Code:</b>	83301
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>
			<b>Lease Expires:</b>
			MONTH TO MONTH

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

STORAGE UNIT UTILIZED BY IDAHO LOTTERY SALES REPRESENTATIVES WHO WORK IN THE FIELD, FROM THEIR VEHICLES, AND WITHOUT OFFICE SPACE.

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.						

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:						
Full-Time Equivalent Positions:						
Temp. Employees, Contractors, Auditors, etc.:						

FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:	100	100	100	100	100	100

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:	\$768.00	\$791.04	\$814.77	\$839.21	\$864.39	\$890.32

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**AGENCY NOTES:**

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

### AGENCY INFORMATION

<b>AGENCY NAME:</b>		IDAHO LOTTERY	
<b>Division/Bureau:</b>			
<b>Prepared By:</b>	BECKY SCHROEDER	<b>E-mail Address:</b>	<a href="mailto:BSCHROEDER@LOTTERY.IDAHO.GOV">BSCHROEDER@LOTTERY.IDAHO.GOV</a>
<b>Telephone Number:</b>	208.780.2501	<b>Fax Number:</b>	208.334.3522
<b>DFM Analyst:</b>	GIDEON TOLMAN	<b>LSO/BPA Analyst:</b>	KEITH BYBEE
<b>Date Prepared:</b>	8/19/2016	<b>For Fiscal Year:</b>	<b>2018</b>

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

<b>Facility Name:</b>	STORAGE PLUS				
<b>City:</b>	POCATELLO	<b>County:</b>	BANNOCK		
<b>Street Address:</b>	2065 HILINE ROAD			<b>Zip Code:</b>	83201
<b>Facility Ownership: (could be private or state-owned, use "X" to mark one):</b>	<b>Private Lease (use "X" to mark):</b>	X	<b>State Owned (use "X" to mark):</b>	<b>Lease Expires:</b>	MONTH TO MONTH

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

STORAGE UNIT UTILIZED BY IDAHO LOTTERY SALES REPRESENTATIVES WHO WORK IN THE FIELD, FROM THEIR VEHICLES, AND WITHOUT OFFICE SPACE.

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	FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Use "X" to mark the year facility would be surplus.							

**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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Number of Work Areas:							
Full-Time Equivalent Positions:							
Temp. Employees, Contractors, Auditors, etc.:							

	FISCAL YR:	ACTUAL 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Square Feet:		50	50	50	50	50	50

**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" tab below 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 2016	ESTIMATE 2017	REQUEST 2018	REQUEST 2019	REQUEST 2020	REQUEST 2021
Total Facility Cost/Yr:		\$648.00	\$667.44	\$687.46	\$708.09	\$729.33	\$751.21

#### IMPORTANT NOTES:

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#### AGENCY NOTES:

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## Part I – Agency Profile

### Agency Overview

The Idaho State Lottery is established by Title 67, Chapter 74, *Idaho Code* for the purpose of operating the state lottery at the least public expense and the smallest staffing possible. Organizationally, the Idaho Lottery is categorized as a Self-Governing Agency.

The five-members of the Idaho Lottery Commission are appointed by the Governor and confirmed by the Senate for staggered five-year terms. They are responsible for setting policy for the agency and approving all major procurements. Commission members are: Chairman, Mel Fisher (Boise), Craig Corbett (Grace), Gary Michael (Boise), Susan Kerrick (Lewiston) and Grant Brackebusch (Silverton). Administrative responsibility for the agency rests with the Director, who is appointed by the Governor. The Idaho Lottery Director is Jeffrey R. Anderson.

The agency is organized into four divisions: Administration/Operations, Sales, Marketing, and Security. The Security division oversees a warehouse in Boise used for the storage and distribution of Scratch™ tickets. Lottery headquarters are located at 1199 Shoreline Lane in Boise, with 45 authorized positions. These positions are currently distributed as follows: Lottery Headquarters – 27, Warehouse – 2, Regional Sales Representatives (located throughout the state) – 14, for a total of 43 at this time.

Lottery products and their percentage of total sales fall into three play styles; Draw style games (28%), Scratch™ games (58%), and PullTab games (14%). Draw game sales are comprised of eight games: Powerball PowerPlay (63.8%), Mega Millions Megaplier (15.6%), Wild Card (1.5%) [which ended with its last draw on 2/24/16], Hot Lotto Sizzler (3.4%), Pick 3 (3.3%), Idaho Raffle (3.7%), Weekly Grand (3.2%) and Lucky for Life (5.5%). Lottery tickets are sold by 1,189 contracted Lottery retailers statewide. These consist of convenience stores, supermarkets, and other retail locations. Retailers receive 5% of sales as a base commission and may earn additional payments in the form of sales and cashing bonuses. The total for such additional payments is limited by statute, §67-7414, to a statewide total of 1% of sales.

The Idaho Lottery recorded more sales, awarded more prizes, retailers earned more commissions, and the people of Idaho benefitted more than in any previous year in its history. Fueling the record-breaking year in sales was a world record advertised annuity jackpot of \$1.586 billion won on January 13, 2016. Five months later, Powerball reached \$429.6 million in early May, the 7<sup>th</sup> largest jackpot in the game's history. These two big jackpots re-invigorated Powerball sales in Idaho and nationwide, with Idaho realizing a 45.3% sales increase over FY2015. Powerball recorded its second largest selling year in Idaho Lottery history. As players joined the excitement of these large jackpots, other product lines increased as well, including Idaho's Scratch tickets and the new InstaPlay Scratch Games. As one of the most profitable games offered in Idaho, the success of Powerball's jackpots this past year delivered a record dividend of \$49.5 million. While exciting and fun for players, we cannot depend on having a billion dollar jackpot every year. Therefore, our business model for Powerball anticipates ticket sales to stabilize with a nominal increase over a traditional baseline of performance. With this factored, we still believe the game will continue to be a strong component of our overall portfolio of products to enhance our distributions to stakeholders.

Lottery net profits are returned to the State as an annual dividend. Beginning in 1989, the annual dividend was divided equally between the Department of Education's Public School Building Fund and the State's Permanent Building Fund. The Permanent Building Fund provides maintenance, repair, and capital projects for the State's permanent facilities, mostly college campuses. Historically, the Department of Education used Lottery dividends for school facility improvements. From FY 2007 through FY 2009, Lottery dividends were used as a school facility maintenance match. From FY 2010 through FY 2013, Lottery dividends were distributed as discretionary dollars within the Maintenance and Operations (M&O) budget. Since FY 2014, Lottery dividends are used for maintenance repairs of student-occupied buildings while a portion is used as discretionary dollars and for things within the M&O budget other than salaries. A 2009 statute change to the Lottery proceeds distribution formula fixed Public School and Permanent Building Fund dividends at FY 2008 funding levels. When proceeds surpass that mark, three-eighths goes to the building fund, three-eighths to schools, and one quarter to the Bond Levy Equalization Fund. Since 1989, the Lottery has made 27 annual dividend payments totaling \$744,000,000, with the latest dividend of \$49,500,000 going to the State in July 2016.

**Lottery, Idaho State** **Performance Measurement Report**

In addition to its Lottery responsibilities, Title 67, Chapter 77, *Idaho Code*, grants the Idaho State Lottery the responsibility and authority to license and regulate bingo and raffles conducted by charitable and non-profit organizations within the state. Also, Title 67, Chapter 7409 gives the Idaho Lottery Director responsibility for monitoring Class III gaming on Indian Reservations as may be required by compacts entered into by the state in accordance with state statutory law and pursuant to the Indian Gaming Regulatory Act, 25 U.S.C. section 2701 et seq. and 18 U.S.C. sections 1166-1168.

**Core Functions/Idaho Code**

The Idaho Lottery is established and regulated by Title 67, Chapter 74, *Idaho Code*. Among other things, the chapter defines the duties of the Commission and the Director, establishes the legal age for purchasing and selling lottery tickets, prescribes the uses of lottery proceeds, and places limits on certain agency expenditures.

Title 67, Chapter 77, *Idaho Code*, governs charitable and non-profit bingo and raffles within the state. Section 67-7711, *Idaho Code*, gives the Idaho State Lottery the authority to license organizations conducting bingo games or raffles and to regulate how those games or raffles are conducted.

**Revenue and Expenditures**

Revenue	FY 2013	FY 2014	FY 2015	FY 2016
<b>Lottery</b>	<u>\$198,169,600</u>	<u>\$209,642,900</u>	<u>\$210,939,400</u>	<u>236,818,000</u>
<b>Total</b>	<b>\$198,169,600</b>	<b>\$209,642,900</b>	<b>\$210,939,400</b>	<b>\$236,818,000</b>
Expenditures	FY 2013	FY 2014	FY 2015	FY 2016
<b>Appropriated*</b>				
Personnel Costs	\$2,697,600	\$2,665,700	\$2,595,000	\$2,804,400
Operating Expenditures	\$2,239,300	\$2,252,900	\$2,176,400	\$2,184,400
Capital Outlay	\$78,000	\$80,500	\$119,100	\$78,900
<b>Continuously Appropriated</b>				
Prizes	\$122,888,200	\$133,232,100	\$136,769,300	\$153,649,700
Commissions	\$11,493,500	\$12,140,200	\$12,480,200	\$13,840,200
Advertising	\$3,607,500	\$3,692,600	\$3,646,900	\$3,941,500
Tickets	\$3,727,900	\$4,040,700	\$3,917,500	\$4,169,700
Service Provider	\$3,868,100	\$4,039,800	\$3,738,400	\$4,617,500
<b>Total</b>	<b>\$150,600,100</b>	<b>\$162,144,500</b>	<b>\$165,442,800</b>	<b>\$185,286,300</b>

\*NO GENERAL FUND DOLLARS

**Profile of Cases Manages and/or Key Services Provided**

Cases Managed and/or Key Services Provided	FY 2013	FY 2014	FY 2015	FY 2016
Lottery Sales	\$197,449,200	\$208,892,594	\$210,194,748	\$236,080,377
Total Dividend Declared by Commission	\$48,200,000	\$49,000,000	\$45,000,000	\$49,500,000

**Part II – Performance Measures**

*Idaho Code* § 67-7401 directs the Idaho Lottery Director to operate the Lottery at the least public expense and the smallest staffing possible. Additionally, *Idaho Code* § 67-7403 directs that the Lottery be operated to produce the

**Lottery, Idaho State** **Performance Measurement Report**

maximum amount of net income to benefit the public purposes described in the chapter, consonant with the public good. As it relates to Peer Benchmark Performance Measures, the Director and the Lottery Management Team endeavor to be in the top quintile among their peer states in the areas of **Sales per Capita**, **Dividends as a Percentage of Sales**, and **Dividend Increase Percentage** and among the lowest quintile for **Administrative Costs as a Percentage of Sales**.

Performance Measure		FY 2013	FY 2014	FY 2015	FY 2016	Current Year
<b>Team Lottery Goals are: 1). to protect the security and integrity of our games, 2). to responsibly increase net revenues, 3). to rigorously manage costs and 4). to guard the honesty of charitable gaming</b>						
1. Total Revenue	<b>Actual</b>	<b>\$198,169,600</b>	<b>\$209,642,900</b>	<b>\$210,940,100</b>	<b>\$236,819,400</b>	-----
	Benchmark	\$183,850,000	\$210,900,000	\$221,150,000	\$216,300,000	\$226,650,000
2. Total Operating Expenses	<b>Actual</b>	<b>\$150,600,100</b>	<b>\$162,144,500</b>	<b>\$165,442,800</b>	<b>\$185,286,300</b>	-----
	Benchmark	\$141,350,000	\$160,900,000	\$171,650,000	\$170,300,000	\$178,650,000
3. Net Operating Income	<b>Actual</b>	<b>\$47,569,500</b>	<b>\$47,498,400</b>	<b>\$45,497,300</b>	<b>\$51,533,100</b>	-----
	Benchmark	\$42,500,000	\$50,000,000	\$49,500,000	\$46,000,000	\$48,000,000

**Performance Measure Explanatory Notes**

Peer Benchmark Performance Measures	FY2013		FY2014		FY2015		FY2016**	
	PEER GROUP*	IDAHO						
Sales Per Capita	\$113.50	\$123.74	\$113.04	\$127.30	\$115.36	\$127.01	-	\$140.94
Admin Costs as a Percentage of Sales	6.4%	6.4%	7.3%	6.3%	7.4%	6.0%	-	5.8%
Dividends as a Percentage of Sales	24.7%	24.4%	24.9%	23.5%	24.8%	21.4%	-	20.8%
Dividend Increase Percentage	5.7%	16.1%	-1.9%	1.7%	2.1%	-8.2%	-	11.0%

\*Peer Group includes states with marketplace and product portfolio similarity, not size of population or sales. This Peer Group includes: Kansas, Maine, Minnesota, Montana, Nebraska, New Mexico, South Dakota, Tennessee and Vermont.

\*\*This is a "previous year" looking Performance Measurement, as statistics for each state are not available at the time this document is published.

**For More Information Contact**

Jeffrey R. Anderson, Director  
 Idaho State Lottery  
 1199 Shoreline Lane, Suite 100  
 Boise, ID 83702  
 Phone: 208-780-2500  
 E-mail: [janderson@lottery.idaho.gov](mailto:janderson@lottery.idaho.gov)

**FY 2018 Budget Request Revision for Statewide Cost Allocation**

Fiscal Year: 2018

Revision No. 1

OCT 31 2016

Agency Code: 440

Agency: Idaho Lottery

Budget Unit	Program Name	Fund Number	Base	Attorney General	Risk Management	State Controller	State Treasurer	BU/Fund Total	Percent of Base	Percent of Fund
			SWCAP	DU 10.41	DU 10.45	DU 10.46	DU 10.47			
SGCA	Lottery Administration	0419	45,000	16,100	1,100	(700)	(600)	15,900	100.00%	100.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
			0					0	0.00%	0.00%
Decision Unit Total			45,000	16,100	1,100	(700)	(600)	15,900	100.00%	100.00%

I request that the FY 2018 Budget Request be revised to reflect the above adjustments for Attorney General fees, Risk Management fees, State Controller's fees, and State Treasurer fees.

Signed *Betsy Schuch* Title CHIEF OPERATING OFFICER Date 10/31/16

**Instructions**

Each year after the original budget submission deadline, the Division of Financial Management calculates the estimated amount of change from the current year to the budget year for certain Interagency Nonstandard Adjustment decision units related to the Statewide Cost Allocation Plan (SWCAP). It is your responsibility to distribute those changes equitably between programs (budget units) and fund sources.

- 1) Locate your agency on the Indirect Cost Recovery Budget Adjustments spreadsheet.
- 2) Sum the "FY Approp. Basis" columns for all categories (Treasurer, Controller Attorney General, Risk Management, and Facility Services) in cell E7.
- 3) Enter by budget unit and fund source the SWCAP appropriation basis in the column titled "Base SWCAP". The allocation should be the same as your actual expenditures by fund source for last year rounded to the nearest \$100.
- 4) Find "Request Adjustment" for each category noting "Statewide Accounting" and "Statewide Payroll" must be summed to calculate the Controller fees.
- 5) Identify the budget unit and fund source for each of the areas requiring adjustment.
- 6) Enter each budget unit in the column identified as Budget Unit. Flag any continuous budget units as "(Cont)". Repeat for each different fund.
- 7) In the column identified as Fund Number, place the number of the fund to which the increase or decrease in costs will be applied.
- 8) In the column identified as adjustment, place the dollar amount for each identified budget unit by fund. Round to nearest \$100.
- 9) Check that all totals match those on the Indirect Cost Recovery Budget Adjustment spreadsheet.
- 10) Sign and return a copy to each of your DFM and LSO analysts. *Thank you!*