

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: General Operating Support for Local Educational, Arts, and Cultural Television Program Production and Distribution.
2. Date of Submission: 11/13/2019
3. House Member Sponsor: Susan Valdes
Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					275,000	275,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? No
 - 5a. If yes, which state agency?
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Education
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.
Non payment of any kind, corrective action plan

6. Requester:

- a. Name: G. Scott Maiden
- b. Organization: Tampa Educational Cable Consortium, Inc d/b/a Tampa Bay Arts & Education Network (TBAE)
- c. Email: g.s.maiden@tbae.net
- d. Phone #: (813)254-2253

7. Contact for questions about specific technical or financial details about the project:

- a. Name: G. Scott Maiden
- b. Organization: Tampa Educational Cable Consortium, Inc d/b/a Tampa Bay Arts & Education Network (TBAE)
- c. Email: g.s.maiden@tbae.net
- d. Phone #: (813)254-2253

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of entity receiving funds:

- a. Name: Tampa Educational Cable Consortium, Inc
- b. County (County where funds are to be expended): Hillsborough
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The goal is to provide additional operational support for local, non-profit educational, arts and cultural television programming production and distribution. Specifically, the additional funding will allow TBAE to significantly increase the amount of annually produced, award-winning programs and to further assist TBAE in developing its free to use streaming service, which allows these programs to be viewed worldwide via the Internet.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Salaries for pre-production logistical support, videographers, video editors, and distribution support personal. In addition, adding two new full-time employees.	150,000
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Expenses will include general operating costs, computer software and hardware updates, and updating camera equipment. In addition, travel and supplies will be needed for producing programming.	50,000
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Contract services will be utilized for	75,000

	close-captioning and app development.	
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		275,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category “h. Fixed Capital Outlay” was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

Letters of Support and collaboration have been received from local non-profits, businesses and education institutions that support this mission of the organization, including Hillsborough County Public School District, Tampa Bay STEM Network, Museum of Science and Industry (MOSI), The Florida Aquarium, Gasparilla International Film Festival, Tampa Tiger Bay Club Forum, NAACP Hillsborough Branch, Film Tampa Bay, and Tampa Urban League.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

A marketing analysis was completed by students at University of South Florida's Muma College of Business in 2019. This study explained that TBAE would attract a larger viewer based by evolving its streaming service into a custom app available on multiple INTERNET connected devices and that TBAE should expand its original programming base to attract younger viewers.

17. Will the requested funds be used directly for services to citizens?

Yes

17a. What are the activities and services that will be provided to meet the purpose of the funds?

TBAE will program and operate (2) 24-hour educational cable access stations, produce more than 100 original television programs in support of the arts, educational and cultural communities and make it's programming available worldwide at no charge via a custom TV anywhere app.

17b. Describe the direct services to be provided to the citizens by the funding requested.

To provide workforce development for media arts students through TBAE's communications internships and to provide support for local arts, educational and cultural endeavors by creating specific programming designed to increase their awareness and reach.

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").

Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons
- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime

General (The majority of the funds will benefit no specific group)

Other (Please describe)

17d. How many in the target population are expected to be served?

< 25

25-50

51-100

101-200

201-400

401-800

>800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	An increased awareness of Tampa Bay's unique cultural heritage through the development and production of local television programming.	TBAE Network will track all programming streaming requests. Method in which citizens provide feedback will be received via a yearly survey. TBAE will completed a report with all data.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	To increase awareness and interest in all of TBAE Network's original programming.	TBAE Network will track all programming streaming requests. Method in which citizens provide feedback will be received via a yearly survey. TBAE will completed a report with all data.

<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Two additional full-time positions will be created in order to assist in video production and the management and training of interns.	The measurement tools used will be via a payroll report and an exit interview will be completed by each intern.
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2020-21 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of
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			funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	275,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	275,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much state funding would be requested after 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- >= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select "ongoing activity".

- ongoing activity – no total cost
- <1M

- 1-3M
- >3-10M
- >10M