

File No. 110258

Committee Item No. _____
Board Item No. 37

COMMITTEE/BOARD OF SUPERVISORS
AGENDA PACKET CONTENTS LIST

Board of Supervisors Meeting

Date March 8, 2011

Cmte Board

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Ethics Form 126 |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Correspondence |

OTHER

(Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Andrea Ausberry Date March 2, 2011

Completed by: _____ Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages.
The complete document is in the file.

1 [Gift Acceptance - ArtCare Program - \$10,000]

2
3 **Resolution authorizing the Arts Commission to accept and expend a donation from the**
4 **Arnhold Foundation in the amount of \$10,000 for general operating support of the**
5 **ArtCare Program.**

6
7 WHEREAS, The 1969 Art Enrichment Ordinance was adopted to enable up to two
8 percent of every San Francisco public works project to be allocated to the commissioning or
9 acquisition of artwork for that site-specific project; and

10 WHEREAS, No City funds are allocated to the maintenance, repair and restoration of
11 these artworks that compromise the Civic Art Collection; and

12 WHEREAS, The Civic Art Collection has 3,500 objects worth approximately \$93
13 million; and

14 WHEREAS, The Civic Art Collection's work includes 19th century historic monuments
15 as well as 40-year-old contemporary artwork located throughout San Francisco; and

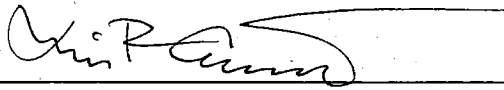
16 WHEREAS, If these artworks are not maintained the City will lose these asset; and

17 WHEREAS, ArtCare was launched in spring 2010 to raise individual and philanthropic
18 dollars to create a pool of funds for the maintenance, repair and restoration of the aging Civic
19 Art Collection; therefore be it

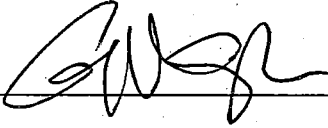
20 RESOLVED, That the Board of Supervisors allows accepting and expending of this
21 received Arnhold Foundation donation, which has no grant period restrictions, to the Arts
22 Commission, waiving inclusion of indirect costs; and, be it

23 FURTHER RESOLVED, That the Arts Commission has no ASO amendments, this
24 donation will be carried out in accordance with all grant requirements and may be spent and
25 reported upon accordingly.


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Recommended: 

Department Head: Luis R. Cancel, Director of Cultural Affairs

Approved: 

Mayor Edwin M. Lee

Approved: 

Controller



SAN FRANCISCO ARTS COMMISSION

TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: Luis R. Cancel, Director of Cultural Affairs
DATE: February 24, 2011
SUBJECT: Accept and Expend Resolution for Subject Grant

GAVIN NEWSOM
MAYOR

LUIS R. CANCEL
DIRECTOR OF
CULTURAL AFFAIRS

PROGRAMS

CIVIC ART COLLECTION
CIVIC DESIGN REVIEW
COMMUNITY ARTS
& EDUCATION
CULTURAL EQUITY GRANTS
PERFORMING ARTS
PUBLIC ART
STREET ARTISTS LICENSES

ARTS COMMISSION GALLERY
401 VAN NESS AVENUE
415.554.6080

WWW.SFARTSCOMMISSION.ORG

ARTSCOMMISSION@SFGOV.ORG

GRANT TITLE: Arnhold Foundation Donation for ArtCare

Attached please find the original and 4 copies of each of the following:

[X] Proposed grant resolution; original signed by Department, Mayor, Controller

[X] Grant information form, including disability checklist

[X] Grant budget

[n/a] Grant application

[X] Grant award letter from funding agency

[] Other (Explain):

Special Timeline Requirements:

None

Departmental representative to receive a copy of the adopted resolution:

Name: Rachelle Axel Phone: 415-252-2564

Interoffice Mail Address: 25 Van Ness Avenue, Suite 240

Certified copy required Yes [] No [X]

(Note: certified copies have the seal of the City/County affixed and are occasionally required by funding agencies. In most cases ordinary copies without the seal are sufficient).



CITY AND COUNTY OF
SAN FRANCISCO

File Number: 110258
(Provided by Clerk of Board of Supervisors)

Grant Information Form
(Effective March 2005)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **Arnhold Foundation Donation to ArtCare**

2. Department: **San Francisco Arts Commission**

3. Contact Person: **Rachelle Axel** Telephone: **415-252-2564**

4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$10,000**

6a. Matching Funds Required: **\$0**

b. Source(s) of matching funds (if applicable):

7a. Grant Source Agency: **Arnhold Foundation**

b. Grant Pass-Through Agency (if applicable):

8. Proposed Grant Project Summary:

The Arnhold Foundation has made a donation to ArtCare which is dedicated to the maintenance, repair and conservation of San Francisco's Civic Art Collection. Funds will be used to restore items in the collection, particularly the aging public sculptures which due to decades of exposure to natural and man-made elements are at risk of becoming lost City assets.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **N/A** End-Date: **N/A**

10a. Amount budgeted for contractual services: **\$10,000**

b. Will contractual services be put out to bid? **Yes**

c. If so, will contract services help to further the goals of the department's MBE/WBE requirements? **Yes**

d. Is this likely to be a one-time or ongoing request for contracting out? **One-time.**

11a. Does the budget include indirect costs? Yes No

b1. If yes, how much? \$

b2. How was the amount calculated?

c. If no, why are indirect costs not included?

Not allowed by granting agency

To maximize use of grant funds on direct services

Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs? **Staff time.**

12. Any other significant grant requirements or comments:

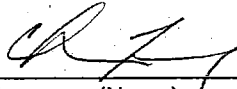
****Disability Access Checklist****

13. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Existing Site(s) | <input checked="" type="checkbox"/> Existing Structure(s) | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

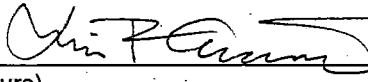
14. The Departmental ADA Coordinator and/or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:

Comments:

Departmental or Mayor's Office of Disability Reviewer: 
(Name)

Date Reviewed: 2-28-2011

Department Approval: Luis F. Cancel Director
(Name) (Title)


(Signature)

**San Francisco Arts Commission
Accept / Expend Documentation**

Arnhold Foundation Grant Budget

Income	
Arnhold Foundation	\$10,000
Total Grant Income	\$10,000
Expense	
Conservation Services	\$10,000
Total Grant Expenses	\$10,000
Balance	\$0

**Grant Code: AFG104
Index Code: 28COL104**

ARNHOLD FOUNDATION 09-01
1345 AVENUE OF THE AMERICAS
NEW YORK, NY 10105-4300
(212) 698-3203

THE BANK OF NEW YORK
NEW YORK CITY, NY 10286
1-1/210

4367

1/11/2011

PAY TO THE ORDER OF San Francisco Arts Commission / ArtCare

\$ **10,000.00

Ten Thousand and 00/100*****

San Francisco Arts Commission / ArtCare

DOLLARS  

MEMO

In honor of Ruth Braunstein



ArtCare

MAINTAINING PUBLIC ART
SAN FRANCISCO ARTS COMMISSION

ArtCare is a partnership between the San Francisco Arts Commission and the San Francisco Art Dealers Association committed to the restoration of aging and damaged public artworks that are among the City's cultural assets. The San Francisco Arts Commission is a non-profit public entity that maintains tax-deductible fund accounts and will administer the ArtCare fund.

In honor of the
INSPIRATION
Ruth Braunstein
with all our love &
for
Joey + John



Yes, I would like to make a gift in honor of Ruth Braunstein on behalf of the ArtCare program.

GIFTS OF HONOR:

\$10,000 \$5,000 \$2,500 \$1,000 \$500 \$ _____

Check enclosed, payable to:
San Francisco Arts Commission/ArtCare

Funds to be sent under separate cover

Visa MC Card # _____

Exp. Date _____ Signature _____

BBYE JOHN ALEXANDER

NAME
300 CENTRAL MARKET WEST -
ADDRESS
NY NY 10024
CITY STATE ZIP

EMAIL
PHONE 1212580-2995

FACEBOOK/TWITTER



Please return this form, along with your contribution, to: San Francisco Arts Commission/ArtCare
25 Van Ness Avenue, Suite 240, San Francisco, CA 94102
www.sfacommision.org/artcare

INTRODUCTION FORM

By a member of the Board of Supervisors or the Mayor

Time Stamp or
Meeting Date

I hereby submit the following item for introduction:

- 1. For reference to Committee:
 An ordinance, resolution, motion, or charter amendment.
- 2. Request for next printed agenda without reference to Committee
- _____ 3. Request for Committee hearing on a subject matter.
- _____ 4. Request for letter beginning "Supervisor _____ inquires...".
- _____ 5. City Attorney request.
- _____ 6. Call file from Committee.
- _____ 7. Budget Analyst request (attach written motion).
- _____ 8. Substitute Legislation File Nos.

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- | | |
|---|--|
| <input type="checkbox"/> Small Business Commission | <input type="checkbox"/> Youth Commission |
| <input type="checkbox"/> Ethics Commission | <input type="checkbox"/> Planning Commission |
| <input type="checkbox"/> Building Inspection Commission | |

Note: For the Imperative Agenda (a resolution not on the printed agenda), use a different form.]

Sponsor(s): Supervisor David Chiu

SUBJECT: Resolution authorizing the San Francisco Arts Commission to accept and expend a donation in the amount of \$10,000 from the Arnhold Foundation for general operating support of the ArtCare program.

Signature of Sponsoring Supervisor: _____



For Clerk's Use Only: