

### San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org

Received On: 10-30-2025 | 14:48:31 PDT

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File #: 251011

Bid/RFP #:

# **Notification of Contract Approval**

SFEC Form 126(f)4
(S.F. Campaign and Governmental Conduct Code § 1.126(f)4)
A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <a href="https://sfethics.org/compliance/city-officers/contract-approval-city-officers">https://sfethics.org/compliance/city-officers/contract-approval-city-officers</a>

1. FILING INFORMATION				
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)			
Original				
AMENDMENT DESCRIPTION – Explain reason for amendment				

2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD NAME OF CITY ELECTIVE OFFICER	
Board of Supervisors	Members

3. FILER'S CONTACT		
NAME OF FILER'S CONTACT	TELEPHONE NUMBER	
Angela Calvillo	415-554-5184	
FULL DEPARTMENT NAME	EMAIL	
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org	

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Jennifer Collins		4152443243
FULL DEPARTM	MENT NAME	DEPARTMENT CONTACT EMAIL
MYR	Housing and Community Development	jennifer.m.collins@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
1979 Mission Street PSH Associates, L.P.	415-864-6432 ext 303
STREET ADDRESS (including City, State and Zip Code)	EMAIL
474 Valencia St # 280, San Francisco, CA 94103	cmelgoza@missionhousing.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
10/28/2025		251011
DESCRIPTION OF AMOUNT OF CONTRACT		
\$1 Annual Base Rent + Residual Receipts		
NATURE OF THE CONTRACT (Please describe)		
75 Year Ground Lease (\$1 per year plus residual receipts) by the 1979 Mission Street PSH Associates, L.P., to allow the develop homeless persons located in the Mission neighborhood at 2670	ment of a 136-unit multifamily	•

# 7. COMMENTS

1979 Mission Street PSH Associates, L.P. consists of Mission Housing Development Corporation and Mission Economic Development Agency entities. Description of Amount defined in 4.02 and 4.04 of the Draft Ground Lease attachment in File.

8. C	ONTRACT APPROVAL
This	contract was approved by:
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
K	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES  Board of Supervisors
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Bautista-Ong	Marizza	CFO
2	Moss	Sam	CEO
3	Contreras	Marcia	CEO
4	Gonzalez	Irving	Board of Directors
5	So	Musetta	Board of Directors
6	Gomez-Benitez	Fernando	Board of Directors
7	Rosales	Mara	Board of Directors
8	Layman	John	Board of Directors
9	Kosheleva-Coats	Julia	Board of Directors
10	Granados	Luis	CEO
11	Ceguerra	Berlina	coo
12	Ramirez	Carlos	CFO
13	Yaquian	Rafael	Other Principal Officer
14	Garcia	Teresa M	Other Principal Officer
15	Chavarin	Marco	Other Principal Officer
16	Vasquez	Teddy	Other Principal Officer
17	Cabrera	Ed	Board of Directors
18	Duron	Ysabel	Board of Directors
19	Gross	Rich	Board of Directors

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Jones	Whitney	Board of Directors
21	Marquez	Carina	Board of Directors
22	Martinez	Carolina	Board of Directors
23	Santamaria	Manuel	Board of Directors
24	Stein	Kevin	Board of Directors
25	Lopez	Bianca	Board of Directors
26	Slen	Joyce	Board of Directors
27	Isais	Antonio	Board of Directors
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# 9. AFFILIATES AND SUBCONTRACTORS List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract. LAST NAME/ENTITY/SUBCONTRACTOR **FIRST NAME** TYPE 39 40 41 42 43 44 45 46 47 48 49 50 Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.

10. VERIFICATION		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my		
knowledge the information I have provided here is true and complete.		
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR DATE SIGNED		
CLERK — Signed by:		
Angela Calvillo	10-30-2025   14:48:31 PDT	
988C8F42C3084B5 Angela Calvillo		



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Angela Calvillo	415-554-5184	
FULL DEPARTMENT NAME	EMAIL	
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org	

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEP	ARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Jennifer Collins		4152443243
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
MYR	Housing and Community Development	jennifer.m.collins@sfgov.org

5. CONTRACTOR		
NAME OF CONTRACTOR	TELEPHONE NUMBER	
1979 MISSION STREET PSH ASSOCIATES, L.P.	(415) 864-6432 ext.303	
STREET ADDRESS (including City, State and Zip Code)	EMAIL	
474 Valencia St # 280, San Francisco, CA 94103	cmelgoza@missionhousing.org	

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6. CONTRACT				
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)	
10/28/2025			251011	
DESCRIPTION OF AMOUNT OF CONTRACT				
NTE \$61,163,787				
NATURE OF THE CONTRACT (Please describe)				
This contract is for financing a 136-unit multifamily housing proj neighborhood at 2670 16th Street.	ect for formerly I	nomeless pers	sons located in the Mission	
7. COMMENTS				
7. COMMICNES				
1979 Mission Street PSH Associates, L.P. consists of Mission Housing Development Corporation and Mission Economic Development Agency entities.				
9 CONTRACT APPROVAL				
8. CONTRACT APPROVAL This contract was approved by:				
THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM				

# This contract was approved by: THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

cont	contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
1	Bautista-Ong	Marizza	CFO	
2	Moss	Sam	CEO	
3	Contreras	Marcia	CEO	
4	Gonzalez	Irving	Board of Directors	
5	So	Musetta	Board of Directors	
6	Gomez-Benitez	Fernando	Board of Directors	
7	Rosales	Mara	Board of Directors	
8	Layman	John	Board of Directors	
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n Envelope ID: 9F77754D-38DA-4B3F-981D-84C5E187719B			
9. AFFILIATES AND SUBCONTRACTORS  List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.			
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТУРЕ
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10. VERIFICATION			
I have used all reasonable diligence in preparing this statement.	I have reviewed this statement and to the best of my		
knowledge the information I have provided here is true and complete.			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR	DATE SIGNED		
CLERK — Signed by:			
Anacla Calvillo	10-30-2025   14:47:02 PDT		
988C8F42C3084B5			
Angela Calvillo			

Check this box if you need to include additional names. Please submit a separate form with complete information.

Select "Supplemental" for filing type.