

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

Grant Ordinance Information Form
(Effective July 2011)

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

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

1. Grant Title: The Andrew W. Mellon Foundation - San Francisco Public Library Jail and Reentry Services Program Grant

2. Department: San Francisco Public Library

3. Contact Person: Christine Murdoch Telephone: 415-557-4246

4. Grant Approval Status (check one):
[X] Approved by funding agency [] Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$2,000,000

6. a. Matching Funds Required: \$0
b. Source(s) of matching funds (if applicable):

7. a. Grant Source Agency: The Andrew W. Mellon Foundation
b. Grant Pass-Through Agency (if applicable):

8. Proposed Grant Project Summary: The Trustees of The Andrew W. Mellon Foundation granted \$2,000,000 to the San Francisco Public Library, for use over approximately 24 months, to support a research and training initiative devoted to building capacity for prison library services.

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

Start-Date: 1/1/2022 End-Date: 12/31/2023

10. Number of new positions created and funded: 3 Full-Time Positions

11. Explain the disposition of employees once the grant ends? The positions are term-limited to the project and will terminate at the end of the grant.

12. a. Amount budgeted for contractual services: \$632,224
b. Will contractual services be put out to bid? No services will be put out to bid, the Mellon Foundation awarded the grant amounts to SFPL, LRS, ALA, and Chelsea Jordan-Makley for their specific services.
c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements? N/A
d. Is this likely to be a one-time or ongoing request for contracting out? One-time request

13. a. Does the budget include indirect costs?
[] Yes [X] No
b. 1. If yes, how much? \$
b. 2. How was the amount calculated?
c. 1. If no, why are indirect costs not included?
[] Not allowed by granting agency [X] To maximize use of grant funds on direct services

Other (please explain):

c. 2. If no indirect costs are included, what would have been the indirect costs? There is not an indirect cost plan and we do not have an estimate of what these costs would be.

14. Any other significant grant requirements or comments: No

****Disability Access Checklist****

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

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

16. The Departmental ADA Coordinator 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 ADA Coordinator or Mayor's Office of Disability Reviewer:

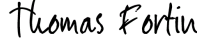
Tom Fortin

(Name)

Chief of Main

(Title)

Date Reviewed: 12/27/2021

DocuSigned by:

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 (Signature Required)

Overall Department Head or Designee Approval:


Michael Lambert

(Name)

City Librarian

(Title)

Date Reviewed: 12/27/2021

DocuSigned by:

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 (Signature Required)