

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:¹¹⁻¹⁴⁻²⁰²² | 16:22:46 PST

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File #: 221058

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: https://sfethics.org/compliance/city-officers/contract-approval-city-officers

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 DEP	PARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER	
Crezia Tano		415-554-5185	
FULL DEPARTN	MENT NAME	DEPARTMENT CONTACT EMAIL	
021	Office of Economic & Workforce Dev.	crezia.tano@sfgov.org	

5. CONTRACTOR				
NAME OF CONTRACTOR		TELEPHONE NUMBER		
Mid	d-Market Foundation		562-243-	3389
STREE	ET ADDRESS (including City, State and Zip Code)		EMAIL	
20	Galli Drive Suite A Novato CA 94949			
6. CC	NTRACT			
DATE	CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/	RFP NUMBER	FILE NUMBER (If applicable)
11,	/08/2022			221058
DESC	RIPTION OF AMOUNT OF CONTRACT			
\$20	0,490,000			
NATU	IRE OF THE CONTRACT (Please describe)			
Grant agreement between the Office of Economic and Workforce Development and Mid-Market Foundation, for management of the Mid-Market /Tenderloin Community-Based Safety Program; to increase the grant amount by \$11,490,000 for a total not to exceed amount of \$20,490,000 for the period of July 1, 2022, through June 30, 2023, with an option to extend the grant to June 30, 2024, at an increased grant amount of \$12,400,000, for a total not to exceed amount of \$32,890,000				
7. COMMENTS				
7. 00	NVIIVILIA 13			
	NTRACT APPROVAL			
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 ELECTIV	/E OFFICER(S) II	DENTIFIED ON THIS FORM SITS

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.

cont	contract.					
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ			
1	Slance	кеlly	Board of Directors			
2	Tyree	Hilary	Board of Directors			
3	Vartanian	Ani	Board of Directors			
4	Bailard	Rhiannon	Board of Directors			
5	Young	Max	Board of Directors			
6	Robinson	Kate	Board of Directors			
7	Robinson	Allison	Board of Directors			
8	Hull	Amy	Board of Directors			
9	Gibson	Steve	Other Principal Officer			
10	Pujals	Fernando	Other Principal Officer			
11	Urban Alchemy		Subcontractor			
12	Urban Place Consulting	Group, Inc.	Subcontractor			
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			contract.				
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ				
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9. A	FFILIATES AND SUBCONTRACTORS			
List t exec who	the names of (A) members of the contractutive officer, chief financial officer, chief has an ownership interest of 10 percent tract.	operating officer, or other perso	ns with similar titles; (C) any i	ndividual or entity
#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ	
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Check this box if you need to include add Select "Supplemental" for filing type.	itional names. Please submit a separate	form with complete information.

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 Docusigned by: 988C8F42C3084B5 Angela Calvillo	11-14-2022 16:22:46 PST	