

File No. 231012

Committee Item No. 6

Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Committee Date November 8, 2023

Board of Supervisors Meeting Date _____

Cmte Board

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

OTHER (Use back side if additional space is needed)

- | | | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>US HUD Environmental Review 6/22/2023</u> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>US HUD Letter 8/21/2023</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | _____ |
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Completed by: Brent Jalipa Date November 2, 2023

Completed by: Brent Jalipa Date _____

1 [Accept and Expend Grant - Retroactive - U.S. Department of Housing and Urban
2 Development - Housing Opportunities for Persons with AIDS Permanent Supportive Housing
3 Renewal - FY2023-2026 - \$1,510,695]

4 **Resolution retroactively approving the Fiscal Year (FY) 2022 Housing Opportunities for**
5 **Persons with AIDS (HOPWA) Permanent Supportive Housing Renewal Grant; and**
6 **authorizing the Mayor, on behalf of the City and County of San Francisco, to accept**
7 **and expend the City’s FY 2022 HOPWA Permanent Supportive Housing Renewal Grant**
8 **from the U.S. Department of Housing and Urban Development in the amount of**
9 **\$1,510,695 for the period of June 1, 2023, through May 31, 2026.**

10
11 WHEREAS, The U.S. Department of Housing and Urban Development (HUD), under
12 the renewal authority provided by the Consolidated Appropriations Act, 2020, P.L. No. 116-94,
13 and the renewal or replacement authority provided by both the Consolidated Appropriations
14 Act, 2022, P.L. No. 117-103 and the Consolidated Appropriations Act, 2021, P.L. 116-260,
15 issued the Procedural Guidance for Fiscal Year (FY) 2022 Housing Opportunities for Persons
16 with AIDS (HOPWA) Permanent Supportive Housing Renewal application on June 13, 2022;
17 and

18 WHEREAS, The Mayor’s Office of Housing and Community Development (MOHCD)
19 submitted an application on August 1, 2022, on behalf of the City and County of San
20 Francisco, to request an allocation of \$1,510,695 in HOPWA Permanent Supportive Housing
21 Renewal funding for the Second Start Program; and

22 WHEREAS, The City and County of San Francisco was awarded \$1,510,695 in
23 HOPWA funding for the Second Start Program as evidenced by the FY 2022 HOPWA
24 Permanent Supportive Housing Grant Award dated December 8, 2022, a copy of which is
25 located in Board File No. 231012; and

1 WHEREAS, The committed leveraging for the term of the three year agreement
2 includes \$300,000 in HOPWA entitlement funding; and

3 WHEREAS, The proposed grant does not require an Annual Salary Ordinance
4 amendment; and

5 WHEREAS, The funding agency (HUD) does not allow use of grant on indirect costs;
6 and

7 WHEREAS, An Environmental Review Record has been prepared by MOHCD and
8 approved by the Certifying Officer for the Second Start Project with the National
9 Environmental Policy Act (NEPA) and other applicable statutes and authorities, in particular
10 those cited in 24 CFR Part 58 §§5 and 6, a copy of which is located in Board File No. 231012;
11 and

12 WHEREAS, The Certifying Officer shall follow the provisions of NEPA to confirm and
13 ensure that all projects funded under the HOPWA Program are in compliance with applicable
14 federal regulations and requirements; now, therefore, be it

15 RESOLVED, That the Mayor of the City and County of San Francisco is hereby
16 authorized to accept and expend the City's FY 2022 HOPWA Permanent Supportive Housing
17 Grant from HUD, in accordance with the purposes and goals for the funding as generally set
18 forth in the FY 2022 HOPWA Performance Grant Agreement and the Expenditure Schedule;
19 and, be it

20 FURTHER RESOLVED, That the Board of Supervisors does hereby approve the
21 purposes and goals for FY 2022 HOPWA Permanent Supportive Housing Grant funding as
22 set forth in the Expenditure Schedule for recipient agencies and departments; and, be it

23 FURTHER RESOLVED, That the Board of Supervisors hereby waives inclusion of
24 indirect costs in the grant budget; and, be it

25

1 FURTHER RESOLVED, That the Mayor is hereby authorized to enter into and execute
2 agreements between the City and County of San Francisco and the various agencies
3 consistent with the FY 2022 HOPWA Permanent Supportive Housing Grant and the
4 Expenditure Schedule; and, be it

5 FURTHER RESOLVED, That the Mayor is hereby authorized to submit documentation
6 and certifications as may be requested or required by HUD, and to take such additional
7 actions as may be required to apply for, accept and expend the FY 2022 HOPWA Permanent
8 Supportive Housing Grant funds consistent with this Resolution and the goals of the FY 2022
9 HOPWA Permanent Supportive Housing Grant Program and all applicable legal requirements,
10 and any such actions are solely intended to further the purposes of this Resolution, and are
11 subject in all respect to the terms of this Resolution, and any such action cannot increase the
12 risk to the City, or require the City to expend any resources, and that the Mayor shall consult
13 with the City Attorney prior to execution and provided that within 30 days of the agreements
14 approved by this Resolution being executed by all parties, such final documents (showing
15 marked changes, if any) shall be provided to the Clerk of the Board, for inclusion in the official
16 file, together with a brief explanation of any actions from the date of the adoption of this
17 Resolution and, be it

18 FURTHER RESOLVED, That all actions heretofore taken by the officers of the City
19 with respect to the acceptance or expenditure of, FY 2022 HOPWA Permanent Supportive
20 Housing Grant funds as consistent with the documents herein and this Resolution, are hereby
21 approved, confirmed and ratified.

22
23
24
25

File Number: 231012
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

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: Housing Opportunities for Persons with AIDS Performance Renewal Grant

2. Department: Mayor's Office of Housing and Community Development

3. Contact Person: Benjamin McCloskey Telephone: 415-701-5575

4. Grant Approval Status (check one):

Approved by funding agency Not yet approved

5. Amount of Grant Funding Approved or Applied for: \$1,510,695

6a. Matching Funds Required: N/A

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

7a. Grant Source Agency: US Department of Housing and Urban Development

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

8. Proposed Grant Project Summary: Expenditure Schedule attached

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

Start-Date: June 1, 2023 End-Date: May 31, 2026

10a. Amount budgeted for contractual services: None; attached expenditure schedule details grant to be made to nonprofit agency.

b. Will contractual services be put out to bid? N/A

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? N/A

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

b1. If yes, how much? \$

b2. How was the amount calculated?

c1. 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?

12. Any other significant grant requirements or comments: CFDA 14.241

MOHCD will leverage HOPWA entitlement funds of \$100,000 annually for 3 years for a total of \$300,000.

Note: Leverage funds is non-match cash committed to making program fully operational. Leverage funds may be used to support any program related cost.

****Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor’s Office of Disability)**

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 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 disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor’s Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

Comments:

Departmental ADA Coordinator or Mayor’s Office of Disability Reviewer:

Lorena Guadiana
(Name)

Acting Compliance Coordinator - MOHCD Data, Evaluation and Compliance
(Title)

Date Reviewed: 06/22/2023

Lorena Guadiana
(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Eric D. Shaw
(Name)

Director
(Title)

Date Reviewed: 6/23/2023 | 11:25 AM PDT

DocuSigned by:
Eric Shaw
(Signature Required)

Grant AgreementHousing Opportunities for Persons With AIDS (HOPWA)
Program

Assistance Listing Number 14.241

**U.S. Department of Housing and Urban
Development**Office of Community Planning and
Development

1. Grantee Name (and Administering Agency or Department, if applicable), and Address: Mayor's Office of Housing City of San Francisco 1 South Van Ness Avenue, Floor 5 San Francisco, CA 94106-5416	2. Grant Number/Federal Award Identification Number (FAIN): CAH220008
5. Applicable Funding Notice: CPD-22-08	3. Tax Identification Number: 94-6000417
7. Period of Performance/Budget Period Start Date (date listed in box 16) (mm/dd/yyyy) / /	4. Unique Entity Identifier: MYM4VNNBN6T9
9. Special Conditions (check applicable box) <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Attached	6. Grant Amount: \$1,510,695 8. Period of Performance/Budget Period End Date (36 months after the date in box 16) (mm/dd/yyyy) / / 10. Grant Type (check applicable box) <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Replacement

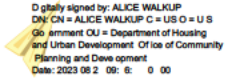
- I. This Grant Agreement is made and entered into by and between the U.S. Department of Housing and Urban Development (“HUD”) and the Grantee identified in Box 1 of this Grant Agreement, pursuant to the AIDS Housing Opportunity Act, codified, as amended, at 42 U.S.C. §§ 12901-12912 (the “Act”), and regulations for the Housing Opportunities for Persons With AIDS (“HOPWA”) program at 24 CFR part 574 (the “HOPWA Regulations”).
- II. The Grantee must comply with the applicable requirements at 2 CFR part 200, as may be amended from time to time. Where any previous or future amendments to 2 CFR part 200 replace or renumber sections of part 200 that are cited specifically in 24 CFR part 574, activities carried out under the grant after the effective date of the part 200 amendments will be governed by the part 200 requirements as replaced or renumbered by the part 200 amendments.
- III. The Applicable Funding Notice listed in Box 5 of this Grant Agreement; the Grantee’s approved grant application, which is attached to this Grant Agreement; and any special conditions attached to this Grant Agreement are hereby incorporated into this Grant Agreement; however, in the event of a conflict between a provision of the grant application and any provision of this Grant Agreement, the latter shall control.
- IV. Subject to the provisions of this Grant Agreement, HUD will make grant funding in the amount specified in Box 6 above (“Grant Funds”) available to the Grantee upon execution of this Grant Agreement by the Grantee and HUD.
- V. The Grantee and each Project Sponsor that receives Grant Funds must (1) comply with the HOPWA Regulations (as now in effect and may be amended from time to time at 24 CFR part 574), other applicable HUD regulations, and such other terms and conditions as HUD may establish for purposes of carrying out HOPWA activities in an effective and efficient manner; (2) conduct an ongoing assessment of the housing assistance and supportive services required by the participants in HOPWA activities; (3) assure the adequate provision of supportive services to the participants in HOPWA activities; (4) cooperate and coordinate in providing assistance under HOPWA with the relevant state- and local-government agencies responsible for services for eligible persons in the area served by the Grantee and

with other public and private organizations and agencies providing services for eligible persons; (5) prohibit any fee, except rent, from being charged of any eligible person for any housing or services provided with Grant Funds; (6) ensure the confidentiality of the name of any individual assisted through HOPWA activities and any other information regarding individuals receiving assistance with Grant Funds; and (7) maintain and make available to HUD for inspection financial records sufficient, in HUD's determination, to ensure proper accounting and disbursing of Grant Funds.

- VI. The Grantee must complete the attached "Indirect Cost Rate Schedule" and return it to HUD with this Grant Agreement. The Grantee must provide HUD with a revised schedule when any change is made to the rate(s) included in the schedule. The schedule and any revisions HUD receives from the Grantee will be incorporated into and made part of this Grant Agreement, provided that each rate included satisfies the applicable requirements under 2 CFR part 200, including appendices.
- VII. The Grantee may only provide Grant Funds to Project Sponsors pursuant to legally binding agreements that contain all terms and conditions required by 2 CFR 200.332(a) and state each commitment to which the Project Sponsor must agree under 24 CFR 574.500(b)(1)-(4).
- VIII. The Grantee must draw down Grant Funds no less than quarterly. A request by the Grantee to draw down Grant Funds under any payment system constitutes a representation by the Grantee that it and all participating parties are in compliance with this Grant Agreement.
- IX. The Grantee must comply with HUD instructions regarding use of and reporting in the Integrated Disbursement and Information System ("IDIS") or its successor.
- X. If the Grantee uses homelessness or chronic homelessness as primary client eligibility criteria, the Grantee is encouraged to use a Homeless Management Information System ("HMIS") to track services for homeless clientele, provided that medical information and HIV status are not shared with providers that do not have direct involvement in the eligible person's case management, treatment, and care in line with their signed release of information.
- XI. If the amount in box 6 above exceeds \$500,000, the Grantee must comply with the award term and condition for reporting of matters related to recipient integrity and performance at Appendix XII to 2 CFR part 200.
- XII. The Grantee must submit an Annual Progress Report (APR) in accordance with 24 CFR 574.520(b). The APR is due to HUD within 90 days of the end of each 12-month operating period until all Grant Funds are expended.
- XIII. The Grantee must use at least 51 percent of Grant Funds to undertake eligible program activities that provide permanent supportive housing to HOPWA eligible persons for the planned annual outputs.
- XIV. The Grantee must commit program income to the Grant in accordance with the addition method as provided in 2 CFR 200.307(e)(2).
- XV. If Grantee is a State or Unit of General Local Government and is the responsible entity pursuant to 24 CFR part 58, the Grantee agrees to assume the responsibility for environmental review, decision-making, and action that would otherwise apply to HUD in accordance with 24 CFR 58.4 and 24 CFR 574.510. If Grantee is a State and distributes funds to a responsible entity, the Grantee agrees to provide for appropriate procedures by which the responsible entity will evidence its assumption of

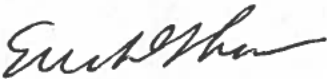
environmental responsibilities. This Article does not apply to a Grantee that is a nonprofit organization.

- XVI. The Grantee and each Project Sponsor that receives Grant Funds are encouraged to obtain certificates of completion of the Getting to Work, HOPWA Oversight, and CPD Financial Management training curriculums by at least one of its employees within 12 months of the execution of this Grant Agreement.
- XVII. The Grantee must update client eligibility records no less than annually.
- XVIII. This Grant is not for research and development (R&D), as defined at 2 CFR 200.1.
- XIX. A default shall occur when the Grantee fails to comply with the provisions of this Grant Agreement. In the event of a default, HUD may take one or more of the actions provided in 2 CFR 200.339 after providing the Grantee with an opportunity for informal consultation in accordance with 24 CFR 574.500(c). Nothing in this Grant Agreement shall limit any remedies otherwise available to HUD in the case of a default by the Grantee. No delay or omissions by HUD in exercising any right or remedy available to it under this Grant Agreement shall impair any such right or remedy or constitute a waiver or acquiescence in any Grantee default.

<p>11. For HUD (Name and Title of Authorized Official)</p> <p>Alice Walkup</p> <p>Director for CPD</p>	<p>12. Signature</p> <p>ALICE WALKUP</p> 	<p>13. Date (“Federal Award Date”) (mm/dd/yyyy)</p> <p>8/21/2023</p>
<p>14. For the Grantee (Name and Title of Authorized Official)</p> <p>Eric D. Shaw, Director, Mayor's Office of Housing and Community Development</p>	<p>15. Signature</p>	<p>16. Date (mm/dd/yyyy)</p> <p>08/23/2023</p>

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- XVI. The Grantee and each Project Sponsor that receives Grant Funds are encouraged to obtain certificates of completion of the Getting to Work, HOPWA Oversight, and CPD Financial Management training curriculums by at least one of its employees within 12 months of the execution of this Grant Agreement.
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<p>11. For HUD (Name and Title of Authorized Official)</p> <p>Alice Walkup Director for CPD</p>	<p>12. Signature</p> <p>ALICE WALKUP</p> <p><small>Digitally signed by ALICE WALKUP DN: cn = ALICE WALKUP C = US O = U.S. Government OU = Department of Housing and Urban Development, Office of Community Planning and Development Date: 2023.08.21 09:16:11 -0700</small></p>	<p>13. Date ("Federal Award Date") (mm/dd/yyyy)</p> <p>8/21/2023</p>
<p>14. For the Grantee (Name and Title of Authorized Official)</p> <p>Eric D. Shaw, Director, Mayor's Office of Housing and Community Development</p>	<p>15. Signature</p> 	<p>16. Date (mm/dd/yyyy)</p> <p>08/23/2023</p>

**Indirect Cost Rate Schedule
(To be added as attachment to HOPWA Grant Agreement)**

INDIRECT COST RATE SCHEDULE

Agency/department/major function	Indirect cost rate (%)	Type of Direct Cost Base
	%	
	%	
	%	

Instructions: This schedule must include each indirect cost rate that will be used to calculate the Grantee’s indirect costs under the grant. The schedule must also specify the type of direct cost base to which each included rate applies (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rate information for project sponsors.

For government entities, enter each agency or department that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414), and the type of direct cost base to which the rate will be applied.

For nonprofit organizations that use the Simplified Allocation Method for indirect costs or elect to use the de minimis rate of 10% of Modified Total Direct Costs in accordance with 2 CFR §200.414, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

For nonprofit organizations that use the Multiple Allocation Base Method, enter each major function of the organization for which a rate was developed and will be used under the grant, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

To learn more about the indirect cost requirements, see 2 CFR part 200, subpart E; Appendix IV to Part 200 (for nonprofit organizations); and Appendix VII to Part 200 (for state and local governments).

HOPWA Competitive Application & Renewal of Permanent Supportive Housing Project Budget Summary

**U.S. Department of Housing and Urban Development
Office of Community Planning and Development
Office of HIV/AIDS Housing**

The information collection requirements pertain to grant application submission requirements which will be used to rate applications, determine eligibility, and establish grant amounts. Selections of applications for funding under the HOPWA Program are based on the criteria established in the published Notice of Funding Availability (NOFA) for new competitions or annual HOPWA renewal notice for grantees seeking renewal funding for eligible permanent supportive housing projects. HUD's information collection requirements are supported by 42 U.S.C. § 12903(d) and HUD's regulations at 24 CFR § 574.240.

The public reporting burden for the collection of information for a HOPWA Renewal Application (including this form, narratives, and other requirements listed in the renewal notice) is estimated at 15 hours. The public reporting burden for the collection of information for a new HOPWA Competitive Application (including this form, narratives, and other requirements listed in the applicable NOFA) is estimated at 45 hours. The information collected on this form is required to obtain a benefit. This agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a currently valid OMB control number. While confidentiality is not assured, HUD generally only releases this information as required or permitted by law. **OMB Approval No. 2506-0133** (Expiration Date: 11/30/2023)

WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Application Budget Summary (all applicants)

Applicant Name	City and County of San Francisco	Number of Project Sponsors	1	Plan dates for grant agreement and activities	6/1/2023-5/31/2026 (mo./yr.)
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A.	Eligible Activity	HOPWA Request				Leveraged Funds
		A. Year 1	B. Year 2	C. Year 3	D. Total	
Facility Development (new applications only)	1. Acquisition					
	2. Rehabilitation, Repair & Conversion					
	3. New Construction (for Community Residences and SRO dwellings only)					
Facility Operations	4. Operating Costs for Housing Facility					
	5. Leasing					
TBRA	6. Tenant-based Rental Assistance					
STRMU	7. Short-term Rent, Mortgage, & Utility Payments to Prevent Homelessness					
Support Services	8. Supportive Services	\$64,450	\$64,450	\$64,450	\$193,350	
Other Program Expenses	9. Housing Information Services	\$20,000	\$20,000	\$20,000	\$60,000	\$300,000
	10. Permanent Housing Placement					
	11. Resource Identification to Establish, Coordinate & Develop Housing Assistance					
	12. Other Housing Activity (Approved by HUD)	\$369,816	\$369,816	\$369,817	\$1,109,449	
13. Total Program Costs: (total of lines 1-12)					\$1,362,799	
Administrative Expenses	14. Grantee's Administrative				\$45,320	
	15. Project Sponsor's Administrative Costs				\$102,576	
16. Total HOPWA Request (total of lines 13-15)					\$1,510,695	

Detailed Project Budget & Housing Outputs (each organization)

Name of organization:	City and County of San Francisco			
Type:	Grantee: <input checked="" type="checkbox"/> ; Project Sponsor: <input type="checkbox"/>	If applicable:	Faith based: <input type="checkbox"/>	Grassroots: <input type="checkbox"/>

B.	Eligible Activity	HOPWA Request				
		Yr. 1	Yr. 2	Yr. 3	Totals:	
Facility Development (new applications only)	1. Acquisition Description:	Budget				
		# of Units				
	2. Rehabilitation/Repair/Conversion Description:	Budget				
		# of Units				
	3. New Construction (Community Residences & SRO dwellings only) Description:	Budget				
		# of Units				
	Type of Facility: Short-term shelter <input type="checkbox"/> ; Transitional housing <input type="checkbox"/> ; Community residence <input type="checkbox"/> ; SRO dwelling <input type="checkbox"/> ; or other permanent supportive housing <input type="checkbox"/>					
Facility Operations	4. Operating Costs for Housing Facility Description:	Budget				
		# of Units				
TBRA	5. Leasing Description:	Budget				
		# of Units				
STRMU	6. Tenant-Based Rental Assistance Payments Description:	Budget				
		# of Households				
Support Services	7. Short-Term Rent, Mortgage & Utility Payments to Prevent Homelessness Description:	Budget				
		# of Households				
Other Program Expenses	8. Supportive Services Costs Description:	Budget				
		# of Households				
	9. Housing Information Services Description:	Budget				
		# of Households				
	10. Permanent Housing Placement Services Description:	Budget				
		# of Households				
Administrative Expenses	11. Resource Identification to Establish, Coordinate, & Develop Housing Assistance Description:	Budget				
	12. Other Housing Activity (Approved by HUD) Description:	Budget				
		# of Units				
	13. Grantee's Administrative Costs Description: See previously approved budget narrative	Budget	\$15,106	\$15,107	\$15,107	\$45,320
14. Project Sponsor's Administrative Costs Description:	Budget					

15. Total HOPWA Request for this Organization

\$45,320

Note: Activity/Service delivery costs such as salary and overhead costs directly relating to carrying out a particular eligible activity in a budget line item should be represented in the funding amount requested for that particular budget line item.

Detailed Project Budget & Housing Outputs (each organization)
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Name of organization:	Catholic Charities CYO of the Archdiocese of San Francisco			
Type:	Grantee: <input type="checkbox"/>	Project Sponsor: <input checked="" type="checkbox"/>	If applicable:	Faith based: <input type="checkbox"/> Grassroots: <input type="checkbox"/>

B.	Eligible Activity	HOPWA Request				
		Yr. 1	Yr. 2	Yr. 3	Totals:	
Facility Development (new applications only)	1. Acquisition Description:	Budget				
		# of Units				
	2. Rehabilitation/Repair/Conversion Description:	Budget				
		# of Units				
	3. New Construction (Community Residences & SRO dwellings only) Description:	Budget				
		# of Units				
	Type of Facility: Short-term shelter <input type="checkbox"/> ; Transitional housing <input type="checkbox"/> ; Community residence <input type="checkbox"/> ; SRO dwelling <input type="checkbox"/> ; or other permanent supportive housing <input type="checkbox"/>					
Facility Operations	4. Operating Costs for Housing Facility Description:	Budget				
		# of Units				
TBRA	5. Leasing Description:	Budget				
		# of Units				
STRMU	6. Tenant-Based Rental Assistance Payments Description:	Budget				
		# of Households				
Support Services	7. Short-Term Rent, Mortgage & Utility Payments to Prevent Homelessness Description:	Budget				
		# of Households				
Support Services	8. Supportive Services Costs Description: See previously approved budget narrative	Budget	\$64,450	\$64,450	\$64,450	\$193,350
		# of Households	83	83	83	125
Other Program Expenses	9. Housing Information Services Description: See previously approved budget narrative	Budget	\$20,000	\$20,000	\$20,000	\$60,000
		# of Households	19	19	19	29
	10. Permanent Housing Placement Services Description:	Budget				
		# of Households				
	11. Resource Identification to Establish, Coordinate, & Develop Housing Assistance Description:	Budget				
		# of Units				
Administrative Expenses	12. Other Housing Activity (Approved by HUD) Description: See previously approved budget narrative	Budget	\$369,816	\$369,816	\$369,817	\$1,109,449
		# of Units	70	70	70	105
Administrative Expenses	13. Grantee's Administrative Costs Description:	Budget				
		# of Units				
	14. Project Sponsor's Administrative Costs Description: See previously approved budget narrative	Budget	\$34,192	\$34,192	\$34,192	\$102,576

15. Total HOPWA Request for this Organization	\$1,465,375
--	--------------------

Note: Activity/Service delivery costs such as salary and overhead costs directly relating to carrying out a particular eligible activity in a budget line item should be represented in the funding amount requested for that particular budget line item.

Application for Federal Assistance SF-424

* 1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	* 2. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	* If Revision, select appropriate letter(s): <input type="text"/> * Other (Specify): <input type="text"/>
---	---	--

* 3. Date Received: <input type="text" value="08/01/2022"/>	4. Applicant Identifier: <input type="text"/>
---	---

5a. Federal Entity Identifier: <input type="text"/>	5b. Federal Award Identifier: <input type="text" value="CA-H190011"/>
---	---

State Use Only:

6. Date Received by State: <input type="text"/>	7. State Application Identifier: <input type="text"/>
--	--

8. APPLICANT INFORMATION:

*** a. Legal Name:**

* b. Employer/Taxpayer Identification Number (EIN/TIN): <input type="text" value="94-6000417"/>	* c. UEI: <input type="text" value="MYM4VNNBN6T9"/>
---	---

d. Address:

*** Street1:**
Street2:
*** City:**
County/Parish:
*** State:**
Province:
*** Country:**
*** Zip / Postal Code:**

e. Organizational Unit:

Department Name: <input type="text" value="Mayor's Office"/>	Division Name: <input type="text" value="Housing &Community Development"/>
--	--

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: *** First Name:**
Middle Name:
*** Last Name:**
Suffix:

Title:

Organizational Affiliation:

*** Telephone Number:** **Fax Number:**

*** Email:**

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

C: City or Township Government

Type of Applicant 2: Select Applicant Type:

B: County Government

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

U.S. Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Number:

14-241

CFDA Title:

Housing Opportunities for Persons With AIDS (HOPWA)

*** 12. Funding Opportunity Number:**

CPD-22-08

* Title:

Procedural guidance for Fiscal Year 2022 HOPWA Permanent Supportive Housing Renewal and Replacement Grant Applications

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**


City and County of San Francisco HOPWA PSH Competitive Program - Second Start Program

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424	
16. Congressional Districts Of:	
* a. Applicant: <input type="text" value="CA 12"/>	* b. Program/Project: <input type="text" value="CA-12"/>
Attach an additional list of Program/Project Congressional Districts if needed.	
<input type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
17. Proposed Project:	
* a. Start Date: <input type="text" value="06/01/2023"/>	* b. End Date: <input type="text" value="05/31/2026"/>
18. Estimated Funding (\$):	
* a. Federal	<input type="text" value="1,510,695.00"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="1,510,695.00"/>
* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?	
<input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input type="text"/>	
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.	
<input checked="" type="checkbox"/> c. Program is not covered by E.O. 12372.	
* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes", provide explanation and attach	
<input type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)	
<input checked="" type="checkbox"/> ** I AGREE	
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.	
Authorized Representative:	
Prefix: <input type="text" value="Mr."/>	* First Name: <input type="text" value="Eric"/>
Middle Name: <input type="text" value="D."/>	
* Last Name: <input type="text" value="Shaw"/>	
Suffix: <input type="text"/>	
* Title: <input type="text" value="Director, MOHCD"/>	
* Telephone Number: <input type="text" value="415 701 5500"/>	Fax Number: <input type="text" value="415 701 5501"/>
* Email: <input type="text" value="eric.shaw@sfgov.org"/>	
* Signature of Authorized Representative: 	* Date Signed: <input type="text" value="08/11/2022"/>

FY 2019-2022 Proposed Expenditure Schedule

Agency Name	Expenditure Description	Approved HUD Funding (3 Years)
Mayor's Office of Housing and Community Development	Grantee's administrative costs	\$45,320
Catholic Charities	Partial rental subsidy program for people with HIV/AIDS	\$1,465,375
	Total Grant Amount	\$1,510,695



U.S. Department of Housing and Urban
Development
451 Seventh Street, SW
Washington, DC 20410
www.hud.gov
espanol.hud.gov

**Environmental Review
for Activity/Project that is Exempt or
Categorically Excluded Not Subject to Section 58.5
Pursuant to 24 CFR 58.34(a) and 58.35(b)**

Project Information

Project Name: Catholic-Charities-990-Eddy-St---HOPWA

HEROS Number: 900000010333770

State / Local Identifier: California

Project Location: 990 Eddy St, San Francisco, CA 94109

Additional Location Information:

N/A

Description of the Proposed Project [24 CFR 50.12 & 58.32; 40 CFR 1508.25]:

This HOPWA program funding will be utilized for purposes of non-construction related activities such as supportive services, housing information services, and rental subsidies for people living with HIV/AIDS and to cover administrative costs.

Level of Environmental Review Determination:

Activity / Project is Categorically Excluded Not Subject to per 24 CFR 58.35(b):
58.35(b)(2)

Funding Information

Grant Number	HUD Program	Program Name
TBD	Community Planning and Development (CPD)	Housing Opportunities for Persons With AIDS (HOPWA)

Estimated Total HUD Funded Amount: \$1,510,695.00

Estimated Total Project Cost [24 CFR 58.2 (a) (5)]: \$1,510,695.00

Mitigation Measures and Conditions [CFR 1505.2(c)]:

Summarized below are all mitigation measures adopted by the Responsible Entity to reduce, avoid or eliminate adverse environmental impacts and to avoid non-compliance or non-conformance with the above-listed authorities and factors. These measures/conditions must be incorporated into project



OFFICE OF COMMUNITY PLANNING
AND DEVELOPMENT

U.S. DEPARTMENT OF HOUSING AND URBAN
DEVELOPMENT WASHINGTON, DC 20410-7000

December 8, 2022

Eric D. Shaw
Director, Mayor's Office of Housing and Community Development
City and County of San Francisco
1 S. Van Ness Ave
5th Floor
San Francisco, CA 94103-5416

Dear Mx. Eric D. Shaw,

Congratulations, your Fiscal Year (FY) 2022 Housing Opportunities for Persons With AIDS (HOPWA) Permanent Supportive Housing Grant application for City and County of San Francisco has been approved. The U.S. Department of Housing and Urban Development (HUD) is obligating a grant award in the amount of \$1,510,695.00 for the purpose of permanent supportive housing activities for low-income persons living with HIV/AIDS and their families in your community. This FY2022 HOPWA grant award is in response to your application submitted under Notice CPD-22-08: *Procedural Guidance for Fiscal Year 2022 HOPWA Permanent Supportive Housing Renewal and Replacement Grant Applications* issued on June 13, 2022.

The grant agreement for this award will be issued through your local HUD field office. You can expect to receive the grant agreement about one month before your current PSH grant is due to expire. HUD will sign the grant agreement first, and then the grant agreement will be sent to City and County of San Francisco for signature. The grant agreement is considered fully executed when both parties have signed the grant agreement. The period of performance for the FY2022 HOPWA grant award begins on the date that the grant agreement is executed by both parties and ends three years thereafter.

After the grant agreement is executed, OHH or a TA provider will reach out to begin the IDIS setup process for your new PSH award. We will reach out to the same contacts that we worked with during the application review. Please let us know if we should work with a different contact for the IDIS setup. As a reminder, you are required to draw against your HOPWA grants every 90 days. Therefore, you must complete the IDIS setup and complete the first draw on the new PSH award within 90 days of execution.

For the first time this year, OHH will host a start-up training for all FY22 PSH grantees to reiterate the requirements of the permanent supportive housing grants. This training will be held on December 19, 2022, from 2:30pm-4pm EST. A Microsoft Teams calendar invite for the training will be sent soon.

HUD looks forward to our continued collaboration as we strive to ensure that the investment of housing and supportive services effectively contributes to increased housing stability and better health outcomes for those living with HIV/AIDS. The permanent supportive housing programs,

such as those funded with this year's HOPWA funds, serve as models of great value to communities across the country. Thank you for your commitment to provide HOPWA housing and services in your community.

Again, congratulations on the award. If you have further questions, please contact Vanessa Larkin, Management Analyst, by email at Vanessa.T.Larkin@hud.gov, or Claire Donze, Program and Management Analyst, by email at Claire.L.Donze@hud.gov.

Sincerely,

Rita Harcrow
Director, Office of HIV/AIDS Housing

Mayor's Office of Housing and Community Development
City and County of San Francisco



London N. Breed
Mayor

Dan Adams
Acting Director

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Benjamin McCloskey, Deputy Director Mayor's Office of Housing and Community Development

DATE: March 27, 2023

SUBJECT: Accept and Expend Resolution for Housing Opportunities for Persons with AIDS (HOPWA) Performance Renewal Grant

GRANT TITLE: Housing Opportunities for Persons with AIDS (HOPWA) Performance Renewal Grant

Attached please find the original and 2 copies of each of the following:

- Grant information form
- Proposed resolution; original signed by Department, Mayor, Controller
- Proposed Expenditure Schedule
- Grant award letter from funding agency
- Other

Departmental representative to receive a copy of the adopted resolution:

Name: Benjamin McCloskey
Phone: 701-5575
Interoffice Mail Address: Benjamin.McCloskey@sfgov.org
Certified copy required Yes No

(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).



U.S. Department of Housing and Urban Development
San Francisco Regional Office Region IX
One Sansome Street, Suite 1200
San Francisco, CA 94104-4430
www.hud.gov
espanol.hud.gov

August 21, 2023

Mr. Eric Shaw
Director
Mayor's Office of Housing and Community Development (MOHCD)
1 Van Ness Avenue, Floor 5
San Francisco, CA 94103

Dear Mr. Shaw:

SUBJECT: Notification of Transmittal of HOPWA PSH Grant Agreement
Grant Number CAH220008

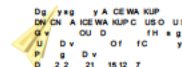
HUD is pleased to provide the city of San Francisco (city) with the Housing Opportunities for Persons With AIDS (HOPWA) program Permanent Supportive Housing Grant Agreement. As you know, the application was selected for funding under the 2022 PSH process to undertake housing activities in the city over the next three-year period.

Enclosed is the HOPWA PSH Grant Agreement. The city's new operating period will begin on the day the city signs the enclosed grant agreement. Sign the grant agreement and return an electronic copy to this office. From May 31, 2023, until the effective date of the new grant agreement, the city may be reimbursed for pre-award costs to the extent such costs are included in the HUD-approved application and would have been allowable if incurred after the effective date of the award. These funds must also be fully expended within three years after the grant agreement is executed upon your signature. If justified, the city may request an extension from HUD for up to one year from the grant expiration date.

This office is available to provide assistance regarding the administration of this grant as may be needed. If city staff has any questions, please contact Jean Richardson, Senior Community Planning and Development Representative, at jean.p.richardson@hud.gov. HUD looks forward to working with city staff on the successful implementation of this grant. Please let us know if we can be of further assistance.

Sincerely,

ALICE
WALKUP



Alice Walkup
Director
Community Planning
and Development Division

Enclosures

cc:

Brian Cheu, Deputy Director, Community Development
Andrea Gremer, Finance Director, Finance and Administration, MOHCD
Benjamin McCloskey, Deputy Director, Finance and Administration, MOHCD
Gloria Woo, Director of Data, Evaluation and Compliance, MOHCD
Helen Hale, Director of Residential and Community Services, MOHCD



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:

File #: 231012

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 <i>(for amendment only)</i>
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
Arata Goto	415-701-5500
FULL DEPARTMENT NAME	DEPARTMENT CONTACT EMAIL
MYR Mayor's Office of Housing & Comm. Dev.	commdevRFP@sfgov.org

5. CONTRACTOR	
NAME OF CONTRACTOR Catholic Charities CYO of the Archdiocese of San Franc	TELEPHONE NUMBER 415-972-1200
STREET ADDRESS (including City, State and Zip Code) 990 Eddy St. San Francisco, CA 94109	EMAIL

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable) 231012
DESCRIPTION OF AMOUNT OF CONTRACT \$1,465,375		
NATURE OF THE CONTRACT (Please describe) \$1,465,375 in HOPWA funds for partial rental subsidy program for people with HIV/AIDS (135254-19)		

7. COMMENTS

8. CONTRACT APPROVAL	
This contract was approved by:	
<input type="checkbox"/>	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
<input checked="" type="checkbox"/>	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES Board of Supervisors
<input type="checkbox"/>	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED 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.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	TYPE
1	Cordileone	Salvatore	Board of Directors
2	Hammerle	Ellen	CEO
3	Boerio	Joe	Board of Directors
4	Borromeo	Ted	Board of Directors
5	Grogan	Kathleen	Board of Directors
6	Bojorquez	Diana	Board of Directors
7	Clark	Philip	Board of Directors
8	Dahik	Adriana	Board of Directors
9	O'Brien Frimel	Susie	Board of Directors
10	Ghilotti	Michael	Board of Directors
11	Gonzalez	Eleanor	Board of Directors
12	Hultman	David	Board of Directors
13	Ikeda	Lisa	Board of Directors
14	Kearney	Philip	Board of Directors
15	Landis	Scott	Board of Directors
16	Leupp	Jay Paul	Board of Directors
17	McInerney	Maureen	Board of Directors
18	Mirek	Lori	Board of Directors
19	Nascimento	Daniel	Board of Directors

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
20	Pohlman	Jack	Board of Directors
21	Reyes	Reymund	Board of Directors
22	Reynaud	Louis	Board of Directors
23	Sangiaco	Jim	Board of Directors
24	Smith	Barbara	Board of Directors
25	Woody	Patrick	Board of Directors
26	Bowen	Thomas	Board of Directors
27	Ewers	Cheryl	CFO
28			
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37			
38			

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			
<input type="checkbox"/>	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 CLERK <p style="text-align: center;">BOS Clerk of the Board</p>	DATE SIGNED
---	-------------

From: [Conine-Nakano, Susanna \(MYR\)](#)
To: [BOS Legislation, \(BOS\)](#)
Cc: [Paulino, Tom \(MYR\)](#); [Nickolopoulos, Sheila \(MYR\)](#); [Gremer, Andrea \(MYR\)](#)
Subject: Mayor -- Resolution -- Housing Opportunities for Persons with AIDS Permanent Supportive Housing Renewal
Date: Tuesday, September 26, 2023 4:46:09 PM
Attachments: [Mayor -- Resolution -- Housing Opportunities for Persons with AIDS Permanent Supportive Housing Renewal.zip](#)

Hello Clerks,

Attached for introduction to the Board of Supervisors is a Resolution retroactively approving the FY 2022 Housing Opportunities for Persons with AIDS (HOPWA) Permanent Supportive Housing Renewal Grant; and authorizing the Mayor, on behalf of the City and County of San Francisco, to accept and expend the City's FY 2022 HOPWA Permanent Supportive Housing Renewal Grant from the U.S. Department of Housing and Urban Development in the amount of \$1,510,695 for the period of June 1, 2023 through May 31, 2026.

Best,
Susanna

Susanna Conine-Nakano
Office of Mayor London N. Breed
City & County of San Francisco
1 Dr. Carlton B. Goodlett Place, Room 200
San Francisco, CA 94102
415-554-6147