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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 #: 240198

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 DEPARTMENTAL CONTACT	DEPARTMENT CONTACT TELEPHONE NUMBER
Leigh Lutenski	415 554-6679
FULL DEPARTMENT NAME	**DEPARTMENT CONTACT EMAIL**
ECN Office of Economic and Workforce Develo	leigh.lutenski@sfgov.org

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5. CONTRACTOR	
NAME OF CONTRACTOR Treasure Island Community Development, LLC	**TELEPHONE NUMBER** 415 905-5300
STREET ADDRESS (including City, State and Zip Code) 615 Battery St. Fl. 6 San Francisco, CA 94111	**EMAIL** charles.shin@tisf.com

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	**ORIGINAL BID/RFP NUMBER**	**FILE NUMBER (*If applicable*)** 240198
DESCRIPTION OF AMOUNT OF CONTRACT n/a		
NATURE OF THE CONTRACT *(Please describe)* Ordinance amending a Development Agreement between the City and County of San Francisco and Treasure Island Community Development (TICD), LLC, a California limited liability company, for the Treasure Island/Yerba Buena Island project, to amend the Financing Plan		

7. COMMENTS

8. CONTRACT 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**
☐	**THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS**

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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
1	TICD, LLC		Shareholder
2	TreasureIsland Series1 LLC		Shareholder
3	TreasureIsland Series2 LLC		Shareholder
4	TreasureIsland Series3 LLC		Shareholder
5	TreasureIslandHoldings LLC		Shareholder
6	KSWM Treasure Island LLC		Shareholder
7	Stockbridge TI CoInvestors		Shareholder
8	Jonathan	Jaffe	Other Principal Officer
9	Goldberg	Sandy	Other Principal Officer
10	Olin	Brian	Other Principal Officer
11	Sheaff	Thomas	Other Principal Officer
12	Jasso	Greg	Other Principal Officer
13	Fancher	Terry	Other Principal Officer
14	Renaudin	Kristin	Other Principal Officer
15	Drake	Darren	Other Principal Officer
16	Meany	Christopher	Other Principal Officer
17	Galovich	Alexandra	Other Principal Officer
18			
19			

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#	**LAST NAME/ENTITY/SUBCONTRACTOR**	**FIRST NAME**	**TYPE**
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#	**LAST NAME/ENTITY/SUBCONTRACTOR**	**FIRST NAME**	**TYPE**
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☐	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 BOS Clerk of the Board	**DATE SIGNED**