Docusign Envelope ID: D0FF3450-42F6-4955-8274-E9A01F5BEA81

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: 02-28-2025 | 10:24:02 PST
File #: 250102
Bid/RFP #: 217

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
Chris Corgas	415-554-6661
FULL DEPARTMENT NAME	**DEPARTMENT CONTACT EMAIL**
021 Economic & Workforce Development	christopher.corgas@sfgov.org

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5. CONTRACTOR	
NAME OF CONTRACTOR Mid-Market Foundation	**TELEPHONE NUMBER** 562-243-3389
STREET ADDRESS (including City, State and Zip Code) 32 7th Street, San Francisco, CA 94103	**EMAIL**

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S) 2/25/2025	**ORIGINAL BID/RFP NUMBER** 217	**FILE NUMBER (*If applicable*)** 250102
DESCRIPTION OF AMOUNT OF CONTRACT NTE $68,851,756		
NATURE OF THE CONTRACT *(Please describe)* Sixth amendment to the grant agreement ("Contract") between the Office of Economic and Workforce Development and Mid-Market Foundation ("Contractor") for management of the Mid-Market /Tenderloin Community-Based Safety Program; to increase the grant amount by $4,000,000 for a total not to exceed amount of $68,851,756 for the period of July 1, 2022, through June 30, 2025.		

7. COMMENTS
The fifth amendment to this contract (File No. 240994) was approved by the Board of Supervisors on December 10, 2024 for a total not to exceed amount of $64,851,756.

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** Board of Supervisors
☐	**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	De La Riva	Sara	Board of Directors
2	Young	Max	Board of Directors
3	Baillard	Rhiannon	Board of Directors
4	Sullivan	Andrew	Board of Directors
5	Robinson	Kate	Board of Directors
6	Maisel	Naomi	Board of Directors
7	Robinson	Allison	Board of Directors
8	Hilliard	Donna	Board of Directors
9	Urban Place Consulting		Subcontractor
10	Urban Alchemy		Subcontractor
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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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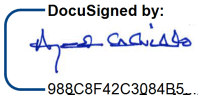
☐	Check this box if you need to include additional names. Please submit a separate form with complete information. Select "Supplemental" for filing type.		

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	DATE SIGNED
DocuSigned by:  988C8F42C3084B5... Angela Calvillo	02-28-2025 | 10:24:02 PST