



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: March 18, 2025

* = Mandatory, information must be provided

or Procurement Director Award: ☐

***Contractor/Vendor Name/Grantor (DBA):**

Connie Hillman Family Foundation

***Project Title/Description:**

Prosperity Initiative

***Purpose:**

The Prosperity Initiative consists of 13 policies and 3 cross-policy strategies adopted as Board of Supervisors Policy E 36.2 on December 5, 2023. On behalf of an anonymous donor, the Connie Hillman Family Foundation is contributing \$5,000.00 toward implementation of the Prosperity Initiative.

Indirect rate cost: 15%

Attachment: Award Letter

***Procurement Method:**

The grant award did not require Pima County Attorney Office review or signature.

***Program Goals/Predicted Outcomes:**

The goal for these funds is to provide support for involving community members in the work of the Prosperity Initiative implementation. The predicted outcome of involving community members would be in creating pathways for those most affected by poverty to offer the "expertise of lived experience" toward shaping the implementation effort.

***Public Benefit:**

These funds will be used to bolster capacity to engage community members and maintain ongoing bidirectional communication with prioritized communities.

***Metrics Available to Measure Performance:**

Qualitative evidence of engagement.

***Retroactive:**

No, the funds have not been spent and the grant is pending BOS approval.

6/11/2025
K Kelly for
2/28/25

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
Commencement Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____
☐ Expense Amount \$ _____ * ☐ Revenue Amount: \$ _____

***Funding Source(s) required:** _____

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No

If Yes, is the Contract to a vendor or subrecipient? _____

Were insurance or indemnity clauses modified? ☐ Yes ☐ No
If Yes, attach Risk's approval.

Vendor is using a Social Security Number? ☐ Yes ☐ No
If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
Amendment No.: _____ AMS Version No.: _____
Commencement Date: _____ New Termination Date: _____
Prior Contract No. (Synergen/CMS): _____

☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____

Is there revenue included? ☐ Yes ☐ No If Yes \$ _____

***Funding Source(s) required:** _____

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards)

☒ Award ☐ Amendment

Document Type: Grant Department Code: CWD Grant Number (i.e., 15-123): 78678
Commencement Date: 3/18/25 Termination Date: 3/19/26 Amendment Number: N/A
☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 5,000.00

***All Funding Source(s) required:** Connie Hillman Family Foundation

***Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ _____ % _____

***Match funding from other sources?** ☐ Yes ☒ No If Yes \$ _____ % _____

***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**
N/A

Contact: Helen Schaffer

Department: Community & Workforce Development

Telephone: 520-724-2639

Department Director Signature: [Signature] Date: 2/14/2025

Deputy County Administrator Signature: [Signature] Date: 3/3/2025

County Administrator Signature: [Signature] Date: 3/3/2025

Connie Hillman Family Foundation

3430 East Sunrise Drive, Suite 200

Tucson, AZ 85718-3210

Telephone: (520) 792-1181

October 3, 2024

Prosperity Initiative
Community Workforce Development
Mark Sullivan
Helen Schaffer
2797 W. Ajo Way
Tucson, AZ 85713

RE: Hillman Foundation - Awarding Grant Check

Dear Mark and Helen:

On behalf of an Anonymous Donor, the **Connie Hillman Family Foundation** is pleased to send you the enclosed \$5,000 check, payable to Pima County.

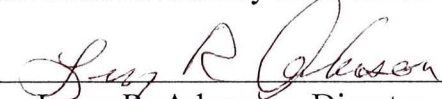
This grant is for *Workforce Development Program in Pima County* and to assist with the fine work that you do in our community.

For our tax records, please send a gift acknowledgement for this grant, which may be emailed to ladamson@duffieldlaw.com or mailed to my address on this letterhead. Please draft your acknowledgement letter/email with the necessary wording included below:

Pima County, for its Prosperity Initiative Program, received on [Date] a check for \$5,000 from an Anonymous Donor, in recognition and in honor of The Connie Hillman Family Foundation. No goods or services were received by the Anonymous Donor or the Connie Hillman Family Foundation in exchange for this grant.

We would be pleased to receive any additional information about your organization for our files.

Yours very truly,
Connie Hillman Family Foundation

By: 
Larry R. Adamson, Director

LRA:kg
Enclosure (check)

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