

February 23, 2015

Debbie Cloud, Executive Director St. Francis Foundation of Santa Barbara 2323 De La Vina St., Room 104 Santa Barbara, CA 93105

Dear Ms. Cloud and Foundation Directors:

Thank you again for the very generous grant of \$15,000 from the St. Francis Foundation of Santa Barbara for general operating support of our organization last year. I would like to report on the use that we made of those grant funds during 2014:

- 1. At the Fellowship Club Recovery Learning Center (RLC), we provided safety net services to 300 very low income clients, including 1,050 hours of Skills of Life classes and individual client sessions. We also served over 16,000 meals for the year - plus transportation to and from the RLC for those who needed it. Our all-peer staff did a great job in 2014, and served as excellent roll models for our clients - showing that recovery and the attainment of important employment is achievable.
- 2. There were 90 homeless clients among the 300 total clients that we regularly served during the year at the RLC.
- 3. Our Family Advocates assisted 400 family members with educational programs, advice, encouragement and referrals to help them in coping with the variety of challenges in dealing with the mental health disabilities of their loved ones.
- 4. We provided housing services to 70 low income residents at our three residential sites. The unfulfilled need for these units is evidenced by our waitlist of over 200 people!
- 5. We were able to provide over 40 jobs either in-house or out in the community for our clients.
- 6. Our Education Programs expanded and we had over 1,000 total attendees at our public offerings in the schools and other sites.

We are proud that our programs have significantly contributed to the progress of our clients in their pathway towards independence and recovery. In addition, we have continued to expand our services to their families, as well as the educational programs we offer to students and others in our communities of Santa Barbara and Goleta. Getting our message across more powerfully to the public was especially important in our success this year. Our expanded educational programs helped to increase our public visibility, and led to more volunteers as well as financial support.

Please let me know if there is any further information you may need about our organization, and I would be delighted to give you or any Board members of the St. Frances Foundation a guided tour of our beautiful facilities here on Garden Street.

Sincerely,

Annmarie Cameron

Annmarie Cameron

Chief Executive Officer



RECOVERY · EDUCATION · FAMILY SERVICES

February 19, 2015

Debbie Cloud, Executive Director St. Francis Foundation of Santa Barbara 2323 De La Vina St., Room 104 Santa Barbara, CA 93150-5580

Dear Ms. Cloud and Foundation Directors:

Thank you again for your grant of \$15,000 last year for our General Operations. We deeply appreciate your generous support over the years for these expenses.

Our organization is moving in dynamic new directions to assist and empower persons living with mental health disabilities, their families and our community. These activities increase the emphasis on prevention and wellness and move away from a focus only on treatment of illness or maintenance support. We focus on helping people to move forward in steps towards independence and recovery through staffing jobs within our organization and out in the community, and other activities on their own initiative and participation. In addition, our educational programs reach out to the public in schools, in the workplace and other sites to expand an understanding of mental illness that aims to reduce the stigma attached to this illness, and provide the information necessary of how and where to seek available help. We also have a new evening program for local residents to improve their well being here on our Garden Street site.

The onset of serious mental illness frequently begins in the middle teens up to the mid-twenties in many individuals, and the MWC is moving an important direction to provide services to these young people. Our Transitional-Aged Youth Wellness Project has begun as a pilot program within the Community Wellness Program, and we focus on early intervention for treatment, self-care education and supports to continue with education and vocational goals.

We hope the St. Francis Foundation will join in funding our General Operations and our newest programs described in our attached proposal with a \$25,000 grant this year that will be important part of the funding needed to accomplish our work and reach a new level of sustainable growth and strength.

Please let us know if we can answer any questions or supply you with any additional information. We hope our proposal meets with your approval, and look forward to hearing from you.

Sincerely,

Annmarie Cameron Chief Executive Officer

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Encl.: 2015 request in Common Grant Application format

The Foundation Roundtable: Common Grant Application

Cover Sheet

Foundation you are applying	ng to: St. Francis Founda	ation of Sant	a Barbara	
Legal Name of Applicant (Organization: Mental Health A	Assn. in Santa Ba	urbara County dba Mental Wellnes	s Center (MWC)
Project Name (if applicable	e): n/a			
Funds will pay for: Porti	on of General Operating E	xpenses of	our Core Programs	
Full Mailing Address: 6	17 Garden St., Santa Barb	ara, CA 931	01	
Location(s) if different from	n above:			
Executive Director: Ann	nmarie Cameron, CEO			
Phone: 884-8440		Fax:	884-8445	
Email: acameron@m	nentalwellnesscenter.org	Website:	www.mentalwellnesscer	nter.org
Contact Person & Title:	Annmarie Cameron, CEO	Phone:	884-8440	<u> </u>
Tax-exempt Status:(Most fou	ndations require 501(c)(3) state	us. You must c	check this requirement before	applying.)
501(c)(3) Granted ☑ T	ax I.D. Number: 95-19626	59 Ot	ther:	
Type of Request: Check w	vith individual foundations to	determine th	he types of accepted grant i	requests.
General Support 🗹 Pro	ogram Support S	Seed Funding	□ Research □	
Capital Endown	ment □ Multi-Year	☐ Oth	ner:	
This Grant Request: \$25,	000	Total Project	Budget: \$n/a	
Grant Period from: 1/1/1	15	To: 12/31/	15	3
Total Organizational Budge	et for Current Year: \$1,919	9,064	Fiscal year begins: 1/1/15	
Summarize the organizatio	n's mission statement (two t	to three senter	nces):	
of our clients, and to eradica	he advancement of mental we te the stigma of mental illness g with mental health disabilities	by providing a	and ensuring appropriate care	ate recovery e, services
	est (two to three sentences):		•	
include supervision and adm	our general operating expense ninistration for the Fellowship C ces, Family Services, Commur	Club Recovery	Learning Center, and these	core services programs:
Proposal Authorization				
	tion in this application is to the			d is
submitted with our Board of	f Directors'/Governing Body's	full knowledg	ge and endorsement:	
γ	laa Caanan Baard Obair			04045
Signatura	Joe Cooper, Board Chair	18	ro i ro	2/19/15
Signature	Name & Title of Authorized E	soard/Governi	ng Body Representative	Date
	Ned Emerson, Vice Chair	rman		2/19/15
Signature	Name & Title of Authorized E	Board/Governi	ng Body Representative	Date

1. Organization's History and Accomplishments. Founded in 1947, our organization brought together volunteers and families caring for members with mental illness where there was little help available. The name later changed to the Mental Health Association in Santa Barbara County, which remains the legal name. The advent of new medications led to the release of many people from psychiatric hospitals in the 1950's and 1960's, and increased the need for community-based services for these clients. In response to these needs, we opened a psychosocial rehabilitative day program, the Fellowship Club in 1959. Fifty years later, inside the Fellowship Club, the Recovery Learning Center (RLC) introduced further skills training and recovery activities. In 1985, our housing services began with Casa Juana Maria, a licensed board and care home with round-the-clock care, followed in 1999, with the Eleanor Apartments (eight two-bedroom apartments) for independent living. After a very successful capital campaign, our new consolidated Garden Street Center opened in 2008, including fifty-one units of affordable housing. Programs for employment were developed. Our Family Services joined with the National Alliance on Mental Illness (NAMI) Southern Santa Barbara Chapter in the 1980's and this collaboration continues strongly today.

On February 29, 2012, our organization launched its new name, the Mental Wellness Center (MWC), to emphasize a focus on recovery of wellness and to describe the array of practical mental health programs now offered. In fall 2013, evening programming for wellness was introduced for participation of the community at large, adding prevention and early intervention programs for mental and overall health. Just recently, we have expanded this program to include special offerings for young adults 18-25 – the ages where mental illness often begins to manifest itself.

2. Current Programs and Activities. Specific demographics of constituency served, and how they are involved in our organization and/or how they benefit from our organization's work.

The MWC has programs for recovery, housing, employment, education, and family services. Most programs are for adults -- although one education program (Mental Health Matters) is for youths twelve and older in schools. Our services are offered in Spanish and English and typically free of charge. We offer three housing projects; a psychosocial rehabilitative day-use program and associated activities; a Friendship Telephone Line for weekday evenings; supported and competitive employment assistance; Family Advocates to provide information and assistance with referrals to families with members who have serious mental illness; education programs for different populations; and our Community Wellness Program for local residents to manage and improve well being. In addition to Mental Health Matters, our education programs include Mental Health First Aid to help people recognize symptoms of mental illness and act in a crisis using a five-step action plan, and Family to Family in which trained family members teach others to help a loved one with mental illness. In August 2013, a new policy was instituted at the RLC: all staffing at the RLC, including the manager, would be identified as peers. In this case, peers are people who have lived experiences of the symptoms and stigma of mental illness and the recovery process, and are willing to share that experience to benefit others. The MWC served approximately 2,000 people overall in 2014, and many participants have very low incomes. In our RLC core program in 2014, 33 percent of 300 members were homeless. Other RLC demographics: 60percent male, 40-percent female; 65-percent Caucasian, 35-percent minority (primarily Latino/Hispanic). The MWC values the richness of lived experience, especially when coupled with a willingness to share the experience to benefit others, and applies that philosophy to its hiring process throughout our organization.

3. Organizational relationships with other organizations working to meet the same need. How our work differs from that of other organizations.

The MWC has over 65 years' experience in advocating on behalf of our clients and collaborating with other community providers to address basic and critical needs, such as hunger, housing, legal assistance, and medical care. Key organizations include the Santa Barbara County Alcohol, Drug, and Mental Health Services (ADMHS) which makes client referrals to our programs, and the Housing Authority agencies that manage affordable housing programs. We also work closely with the California Department of Rehabilitation for client referrals to our Employment Services. Other agencies such as Sanctuary Psychiatric Clinics, Transitions Mental Health, and Phoenix of Santa Barbara, Inc. provide programs serving people with serious mental health needs, as we do. Our comprehensive approach to overall wellness and accessibility within the community are unparalleled however, due to the breadth and diversity of our programming. The range of our education programs is not duplicated anywhere else in the county. Our new Community Wellness Program benefits a segment of the community that wants to improve well being without the prerequisite of a diagnosis, and this population is only tangentially served by health clinics and adult education courses currently.

1. What need or problem does your project address?

The MWC addresses the most pressing basic needs for those who live with mental health problems, including the very poor, the hungry, and the homeless. Core programs of the MWC focus on unemployment, housing, and social connection and life-skill competencies for our clients. About 33 percent of the members of the Recovery Learning Center live in shelters or on the streets, and 90 percent of the members are unemployed or underemployed. Many people seeking our services also cope with very poor health beyond their mental health diagnoses, and this vulnerable population's unmet healthcare needs cause them to overutilize high-cost emergency services. The MWC's programs address this crisis by providing mental wellness services leading to greatly improved outcomes, and, consequently, fewer high-cost emergency interventions.

Another community issue addressed by the programs and services of the MWC is the complex and inadequately funded public healthcare and legal systems. Families and clients are often overwhelmed by the barriers, qualifications, and forms required to access services. We address this issue by providing advocacy and information for both families and clients, and by networking closely with our service partners in government and other community agencies to negotiate these systems.

While many of our core programs provide a safety net to meet basic needs for a person experiencing the most serious and negative effects of mental illness, these same programs provide for the recovery process. In fact, the recovery aspect is integral to our services as we understand that every person has the right to work toward his or her optimal well being. We also offer critically needed programs for education and community wellness to prevent serious, mental health consequences from developing when they can be mitigated by early intervention with appropriate healthcare and practical assistance.

2. In a short paragraph, tell us your project's goals and the specific outcomes you project for the grant period.

The MWC's goals are directly related to its mission to advance mental wellness in Santa Barbara County. There are three goals: (1) to help adults recover their mental health and overall wellbeing subsequent to mental illness, (2) to educate the community regarding mental health and the importance and effectiveness of treatment, and (3) to support families when one or more members has a mental illness. All of our core programs provide services that meet objectives linked to one or more of these three goals. As a result, our outcomes include (1) adults with serious mental illness stabilizing their health and initiating and pursuing recovery (through the RLC, Employment Services, Housing, and the Friendship Phone Line), (2) expanding a community knowledgeable about mental health and its treatment (through education programs and the Community Wellness Program), and (3) strengthening important relationships that can function collaboratively for well being (through Family Services and education programs).

3. Describe your project/organization or the capital items requested including:

* Whether the programs are new, ongoing or an expansion:

All of our core programs are ongoing, and in the case of the RLC, there has been an expansion of 50 percent up to 300 clients served since mid-2012. We are also providing greater opportunities for employment for our clients within the organization, and our Employment Services in jobs out in the community at other organizations and companies. Our educational programs in the community are expanding with: Mental Health First Aid (for adults), Mental Health Matters (for students ages 12 and older), and our early-evening Community Wellness Program along with late afternoon new groups focused on young adults 18 to 25, and a Friendship Phone Line.

* Target audience, including specific demographic information:

Very-low-income persons with mental health disabilities are the MWC's main clients and their demographics are described in Background question 2 above, plus their family members. For our educational programs in public schools, students are primarily in the age range of 11 to 18; at colleges: ages are usually 18 to 35. The Community Wellness Program is open to all local residents, usually over the age of 18. Community presentations are primarily to adults 21 through 80 at social clubs, colleges, businesses, and other settings.

* Activities/strategies that will be used to meet your stated outcomes:

We provide the safe environment and assistance for clients to challenge themselves at the RLC, set goals, and take responsible risks in reaching out for recovery. Their individual success is demonstrated when they take leadership roles at the RLC through leading classes, getting work experience and earning pay for clerical jobs or

retail work at the "Care Closet" (where members obtain personal care items and clothing at no or nominal cost), get experience as cook's assistants, and training and pay to do cleaning and maintenance work in administrative offices and the RLC.

We have researched successful programs for employment services, and how to implement a program of this type for our particular clients. Our Employment Services team begins by assessing clients for their desire to find a job and their initial work and computer skills. Clients then participate in educational and training sessions on issues of hygiene, punctuality, interacting with peers and supervisors, accepting criticism, memory, appropriate work attire, and appropriate conversations. Next, those clients may begin to work through practice jobs inside our own organization, and continue with ongoing jobs here at the MWC or in the community.

Our English and Spanish-speaking Family Advocates reach out to families and community groups to facilitate helpful contacts for them and their loved ones with mental health disabilities. They make public presentations about mental illness, and encourage families to confer with them for help and referrals. They also help to coordinate our highly successful *Family to Family* educational program that covers aspects of mental illness and coping strategies and facilitate peer support groups for family members.

For our housing program, we have set up procedures to ensure the placement and safety of our clients. At our board and care facility (Casa Juana Maria), we have staff on duty throughout the day and night with supportive care, and to help our clients who share in meal preparation, house cleaning, and maintenance. At our independent-living Eleanor Apartments, there is an on-site manager in one of the units to supervise the building. At our large Garden Street Apartments complex, in addition to an on-site manager, we have a Tenant Liaison to connect tenants with resources and assist with concerns.

- * Timeline for this grant: January 1, 2015 December 31, 2015
- 4. If this is a request for General Support, what are your organization's most pressing needs? Our most pressing need is the maintenance of core services to our clients: particularly at the RLC where the numbers of our very-low-income clients are increasing (especially homeless clients), as is their participation in all the services offered there for recovery and not just symptom management. Other critical organization services include housing, employment services, educational programs, and family services. These programs protect our vulnerable clients, their families, and offer valuable services and information to our community.

Another pressing need we have expanded this year, addresses the importance of effective outreach to the community regarding mental health. Prevention and early intervention for better mental health are important – especially with young adults, since that is the age when mental illness often begins – and thus, we initiated special classes just for them. However, to prevent or intervene earlier in the course of a mental illness requires that people know what the signs and symptoms are, and how to ask for help. Both our education programs (especially Mental Health First Aid) and Community Wellness Program address these issues, and the MWC is emphasizing outreach that decreases the stigma of mental illness and confirms hope for the potential of recovery and wellbeing. If these barriers can be lowered, local residents will be more likely to inform themselves and each other regarding mental health issues.

5. How do you plan to evaluate the effectiveness or impact of the project?

Our Board of Directors (BOD) establishes the key policies and goals of the organization. Our executive staff works with committees and sub-committees of the BOD such as Finance, Fund Raising, Education, etc. in developing long-term financial goals, and a yearly budget. In each case, we have established which committee is responsible, and a time line for completion. These plans and budgets are reviewed and approved by the BOD. The staff implements the plans and prepares monthly reports on progress toward the yearly goals and the budget, which are reviewed by the BOD at their regular monthly meetings. These plans help us to determine our services, our budget decisions, and BOD and staffing needs. Short- and long-term indicators of success involve the comparison of actual results with the plans and specific goals.

We evaluate the progress and the impact of our outcomes on an on-going basis and use that information in future planning. Our Chief Executive Officer and Chief Operating Officer monitor all aspects of the RLC, Family Advocate, Community Wellness and Housing programs with regular scheduled monthly staff meetings and written reports, and other consultations as any issues of those activities arise, and to see that progress is being made throughout the year in our core programs. Success is measured by clients' reports of meeting their stated recovery goals, improved health, and decreased isolation. In addition, data is kept monthly of each client's ability to learn job skills and perform both volunteer activities and some paid work in maintenance at the RLC and administrative offices, clerical tasks, and assistance in the kitchen of the RLC. The Manager of Employment Services reports to our Chief Operating Officer on a weekly basis about the progress towards our goals as detailed in the program design and yearly targets planned.

We maintain on-going records of clients at our housing sites, and since the opening of the Garden Street Apartments in December 2008, almost 60 percent of our tenants are original tenants. This is significant since many of these tenants were homeless prior to moving into the Garden Street Apartments. At both Casa Juana Maria (our board and care facility), and Eleanor Apartments (for independent-living clients) the turnover is extremely low and for some clients, their residency has been for over 10 years.

6. Summarize the skills and relevant experience of key staff/volunteers essential to the project's success. If other organizations are collaborating on this project, note which ones and in what ways. Annmarie Cameron, Chief Executive Officer, has 24 years experience as a professional program administrator in community mental health, with 21 of those years as Chief Executive Officer of the MWC. She holds a B.S. in Family Studies. Mrs. Cameron is a board member of the Housing Trust Fund of Santa Barbara County, and a board member of the California Council of Community Mental Health Agencies. Throughout her career at the head of our organization, she has been a community spokesperson, team player and leader. Patricia Collins, Chief Operations Officer, MS in Quality Assurance, has 21 years experience in social services, with 19 years in management, and similar skills to our Chief Executive Officer. Lupe Luna, Recovery Learning Center Program Manager, trained and certified in legal advocacy, case management, crisis counseling, mediation, conflict resolution, healthcare interpreting, and self-defense instruction. Has 24 years of experience working with persons with disabilities; 20 of those years are in lowincome housing management. Well known Latino community leader and advocate for improved healthcare. Stacy McCrory, Clinical Director, M.A., MFT, CFC, has 17 years of diverse experience in counseling clients with marital & family problems, and evaluation and treatment of clients with mental illness. Numerous volunteers and our BOD are instrumental in the success of our organization. Our BOD is very helpful due to their diverse backgrounds and extensive professional experience. Several of our board members and other volunteers have family members with mental health disabilities, and thus they are highly motivated to help our association. They also provide valuable input in all our programs, as well as assist with fund raising events and community contacts. We also have approximately ninety other volunteers per year (including ten to twelve trainees/interns from graduate programs at Antioch University and other institutions) at the RLC and our other programs, and to assist with fundraising.

Collaborating Organizations: We have contracts with the Santa Barbara County ADMHS for our mutual work with RLC members, Family Advocates, and Employment Services, and with the City of Santa Barbara for the RLC. The California Department of Rehabilitation refers clients with mental health needs for community jobs, and funds Employment Services. We work with local agencies that meet basic and critical needs, to cross-refer clients. The Foodbank of Santa Barbara County helps us stretch our food budget for members' lunches at the RLC. Antioch University and other institutions of higher learning make arrangements with our agency to provide practicum opportunities for students in exchange for clinical supervision and defined work responsibilities with clients. Active Minds, a student-led organization whose local chapter is at University of California, Santa Barbara, is co-hosting our Walk for Mental Wellness this year. Active Minds is dedicated to reducing stigma and communicating about mental illness. The Housing Authority of the City of Santa Barbara works cooperatively with us to maintain affordability for our housing units. The Santa Barbara Unified School District (and other districts) hosts our program, Mental Health Matters, to introduce older children to mental health topics.

7. If full funding is not available, what is the contingency plan for securing additional support and/or how can you modify your proposal.

Grants funding represents 15 percent of our budget and since 2008, has become critical to our operating budget. Our programs are financially accessible to all clients, and we do not charge low income clients with fees for services. We are making a major effort to secure more donations (including at our special fund raising events – *Walk for Mental Wellness* and our *Annual Luncheon*), foundation grants, and governmental sources of funding at all levels than ever before to support our urgently needed programs for our vulnerable clients. Without St. Francis Foundation full grant funds or a reduced amount, we would try to work even harder for other sources of donations and grants – although we feel that we are already working at close to full capacity to raise those funds. Alternatively, we may have to cut back on the number of clients served, and/or reduce staff hours, or reduce organization program services.

2015 Board of Directors/Governing Body The Foundation Roundtable: Common Grant Application Mental Wellness Center

Name	City	Affiliation/Profession	Board Position	Years of Service
Bruce Anticouni	S.B. 93108	Attorney	(at large)	4
Heather Ayer	S.B. 93103	Community volunteer		1st year
Tracy Beard	Santa Ynez 93460	Fundraiser for nonprofit organization		က
Deborah Boswell	S.B. 93101	Attorney		3
Ted Campbell	S.B. 93108	Real Estate Agent		3
Andrea Carnaghe	Carpinteria 93013	Accountant	(at large)	3
Joe Cooper	S.B 93105	Director of Operations, Private Co.	Board Chair	3
Ned Emerson	S.B. 93103	Retired Sales and Business Executive	Vice Chair	4
Paul Erickson, M.D.	S.B. 93109	Psychiatrist		1st year
Alex Filippini	S.B. 93108	Financial Consultant	Secretary	3
Wes Gibson	S.B. 93108	Retired development professional		1st year
Chad Hine	S.B. 93111	Financial Executive	Treasurer	3
Jason Janzen	Goleta, 93117	CPA		1st year
Kristin Kirby	S.B. 93103	Accountant		1st year
Cindy Klempner	S.B. 93111	Attorney		3
Ann Lippincott, Ph.D.	S.B. 93101	Assoc. Dir., Teacher Ed. Program, UCSB		8
Pam Reeves, M.D.	S.B. 93109	Psychiatrist		1st year
Janis Spracher	S.B. 93109	Elementary School Teacher		2
Mack Staton	S.B. 93105	Attorney		1st year
Sabina White	S.B. 93105	Retired Dir. Health and Wellness, UCSB		2

How often does the Board / Governing Body meet? Monthly.

Mental Wellness Center staff that attends meetings: Annmarie Cameron, Chief Executive Officer, and Patricia Collins, Chief Operating Officer.

Mental Wellness Center Organization Financial Summary

Fiscal Year Dates:

1/1/15 - 12/31/15

INCOME

Possible categories: Government grants, foundation grants, individuals, business support, events, fees for service, etc.

Source	Prior Fiscal Year's Actual (\$) 2014	2015 Annual Budget (\$)	YTD Actual (\$) (1/31/15)
Donations	244,765	235,755	11,471
Operating Grants	289,381	320,500	75,000
Bequest	460,000		
S.B. County Contracts	638,193	656,388	52,958
Board & Care Contracts	64,980	70,000	6,165
CA Dept. of Rehab.	112,814	158,000	12,922
Rental Income	114,597	117,097	8,138
Property Mgmt. & Admin. Fees	136,171	169,420	12,302
Developer fee – Garden St.	2	50,000	
Capital Grant	43,970		
Program fees & Programs Spec. Inc.	24,249	4,074	1,102
Miscellaneous Income	9,157	5,102	110
TOTAL INCOME	2,138,277	1,786,336	180,168

In-Kind (non-cash) contributions: Over 100 volunteers (17 on the BOD) devote in excess of 6,000 hours a year at BOD and committee meetings, writing our newsletter, and helping with fund raising special projects. In addition, volunteers and board members teach classes at the Recovery Learning Center, counsel/advise clients, make community presentations, donate and help prepare food, decorate and socialize at holiday parties at the RLC, and write to and meet with state and local officials.

EXPENSES

Possible categories: Salaries, professional fees, rent and utilities, travel, publicity/outreach, events, etc.

Item	Prior Fiscal Year's Actual (\$) 2014	2015 Annual Budget (\$)	YTD Actual (\$) (1/31/15)
Salaries	999,199	1,050,920	88,153
Payroll Costs	236,901	257,647	9,578
Rent	209,892	189,510	16,666
Food	51,686	44,543	605
Supplies	44,140	44,088	2,181
Telephone & Utilities	49,373	52,261	3,786
Repairs/Maintenance	65,187	56,128	4,664
Transportation & Travel	5,849	7,037	103
Equipment/Furnishings	38,536	33,894	377
Insurance	37,537	39,521	2,430
Printing & Postage/Shipping	15,624	17,851	592
Professional Services	63,671	68,593	2,329
Training	8,833	4,115	1,414
Affiliations/NAMI/Dues & Subscrip.	10,367	17,367	403
Depreciation	9,996	9,917	833
Payroll Prep. Exp.	15,848	2,251	686
Interest Expense	11,989	12,000	984
Miscellaneous	30,087	11,421	909
TOTAL EXPENSE	1,904,715	1,919,064	136,693
NET PROFIT OR LOSS	233,506	(-132,728)	43,475

Total Capital Expenses	43,970	8,947	1,343
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Explanatory Note: Remainder of the proceeds of the Bequest in 2014 will be used to cover any net loss in 2015 (if necessary by year end). If not needed there, will be added to our cash reserves that will be used to pay down our long term debt that was incurred in the construction of our Garden Street Center – payable in installments over the next five years.

Mental Wellness Center Organization Balance Sheet Summary

ASSETS	MOST CURRENT (\$) 1/31/15)	PRIOR YEAR CLOSE (\$) (12/31/14)
Current Assets		,
Cash and Equivalents	684,197	569,273
Accounts Receivable	237,704	251,585
Prepaid Expenses		
Inventory		
Grants/Pledges Receivable	-	
Other	32,624	36,660
Total Current Assets	954,526	857,518
Fixed Assets (Net)	,	,
Property - Total	865,139	866,805
Investments		
Inv. & Rec. Bldg. Hope II	4,687,071	4,687,071
Adv. to Garden St. Apts.	1,539,485	1,539,485
Loans & Accrued Int.	482,928	482,928
Developer Fee Rec.	747,433	747,433
Other Assets	857,756	896,906
TOTAL ASSETS	10,134,338	10,078,146
LIABILITIES		
Current Liabilities		
Accounts Payable	4,521	31,374
Accrued Expenses	25,676	29,247
Long Term Debt		
(Current Portion)	9,501	9,501
Short Term Debt		
Other	45,562	40,272
Other		
Long Term Debt (over a year)		
Loan	622,278	623,396
LT Deferred Income	161,806	161,806
TOTAL LIABILITIES	873,866	895,596
Net Assets	9,260,471	9,182,550
Unrestricted	9,063,938	8,911,017
Temporarily Restricted	150,000	225,000
Permanently Restricted	46,533	46,533
TOTAL LIABILITIES AND NET ASSETS	10,134,338	10,078,146

Explanatory Note: Large cash reserves are kept to pay off loans due in increments over the next five years (see note on previous Financial Summary Page).