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Frank Edelblut  
Commissioner

Christine Brennan  
Deputy Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF EDUCATION  
101 Pleasant Street  
Concord, N.H. 03301  
TEL. (603) 271-6133  
FAX (603) 271-1953

May 22, 2018

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the New Hampshire Department of Education Bureau of Student Wellness to exercise a renewal option on a **sole source** contract with National Alliance on Mental Illness New Hampshire, (NAMI NH), Concord, NH (vendor code 166630), by increasing the price limitation by \$80,623.70 from \$80,623.70 to \$161,247.40 to continue working in partnership with the NH Department Of Education, (NHDOE) in all levels of decision-making, including the development, implementation and evaluation of the System of Care (SOC), effective July 1, 2018 through June 30, 2019 upon Governor & Council approval. This contract was originally approved by Governor and Council on October 2, 2017 (Item #37). 100% federal funds.

Funds to support this request are available in the account titled System of Care (SOC);

06-056-056-562010-50600000-072-509073  
Grants – Federal

FY'19  
\$80,623.70

EXPLANATION

The DOE would like to exercise this renewal option on a **sole source** contract. This contract was originally sole sourced, due to the federal grant requirement that the agency identify the evaluation team prior to submitting the application. A request for a Letter of Commitment (RFC) was advertised on the Office of Student Wellness website and the Department of Education website, Office of Student Wellness on March 23 through March 31, 2016.

In FY'2018, NAMI NH's Lead Family Contact provided a one-to-one support to primary care givers of children and/or adolescents with serious emotional disturbance (SED) using the Family and Community Support peer-to-peer model. They also delivered a variety of trainings: Parents Meeting the Challenge, Family Leadership Training and Cultural Competency. Key Meetings were attended by the Lead family contact. Relationships were built with key players in all coverage areas of White Mountain Regional School District, Claremont School District, and Winnisquam School District. The Lead Family Contact worked in partnership with System of Care partners to ensure the family voice is embedded throughout the system.

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council

May 22, 2018

Page Two

The purpose of this contract renewal is to improve mental health outcomes for children and youth (birth to 21 years of age) with serious emotional disturbances (SED). This program supports the wide scale operation, expansion and integration of system of care (SOC) approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances. SOC supports the provisions of mental health and related recovery support services to children and youth with serious emotional disturbances and those with early signs and symptoms of serious mental illness first episode psychosis, and their families.

NAMI NH is evaluated by the Department through the monitoring of the services provided. In addition, they submit reports to the Department on the progress in meeting the objectives of the contract. There are two (2) more yearly options to renew on this contract then there will be a final report due from the vendor within six (6) months of ending services.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut  
Commissioner of Education

FE:TLS  
Enclosures

**AMENDMENT TO  
PROFESSIONAL SERVICES CONTRACT**

Now come the New Hampshire Department of Education, Bureau of Student Wellness, hereinafter "the Agency," and National Alliance on Mental Illness New Hampshire, Concord, NH, hereinafter "the Contractor", and, pursuant to an agreement between the parties that was approved by Governor and Council on October 2, 2017 (Item #37) hereby agree to modify same as follows:

1. Amend Section 1.7 by removing June 30, 2018 and replacing with June 30, 2019.
2. Amend Section 1.8 by removing \$80,623.70 and replacing with \$161,247.40.
3. Remove Exhibit B (Budget) and replace with Exhibit B-1 (Budget).
4. All other provisions of this agreement shall remain in full force and effect.
5. This renewal option shall be effective on July 1, 2018.

This modification of an existing agreement is hereby incorporated by reference to the existing agreement by the parties and must be attached to the said agreement.

IN WITNESS WHEREOF, the parties, hereto have set their hands as of the day and year first above written.

THE STATE OF NEW HAMPSHIRE  
Department of Education  
(Agency)

Division of Commissioner's Office

By: [Signature]  
Commissioner of Education Date

NAMI NEW HAMPSHIRE  
Name of Corporation (Contractor)

By: [Signature] Executive Director 5/12/18  
Signature, Title Date

STATE OF NEW HAMPSHIRE

County of MERRIMACK

On this the 12<sup>th</sup> day of MAY, 2018 before me, KENNETH NORTON, the undersigned officer, personally appeared before me known to me (or satisfactory proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereto set my hand and official seal.

[Signature]  
Notary Public/Justice of the Peace

July 10, 2018  
Commission Expires

Approved as to form, substance and execution by the Attorney General this 29<sup>th</sup> day of May, 2018.

[Signature]  
Division of Attorney General Office

Approved by the Governor and Council this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

By: \_\_\_\_\_

11. 11. 11



EXHIBIT B - 1  
Budget

Item	Description	FY'19
Lead Family Contact (LFC)	Lead Family Contact to work with the Family and Community Support Specialist (FCCS) staff in all levels of decision-making, including the development, implementation and evaluation of the SOC and providing support services for families receiving services through the cooperative agreement.	\$44,990.00
Lead Family Contract Fringe	Calculated at 33%	\$14,846.70
Travel/Meetings	Mileage reimbursement for Lead Family Contact estimated at 18,000 miles per year based on historical and statewide overseeing of (3) FCSS including North Country; and travel to the National Conference. Mileage is reimbursed at the GSA approved rate of 0.535/per mile.	\$10,200.00 ~ Local \$ 2,500.00 ~ National
Expenses	Wireless phone service @\$90/mo for Lead Family Contact. The wireless phone service includes the monthly fee including data and hotspot, and initial cost of phone. In addition, the LFC will have a tablet with data which will include connectivity costs.	\$1,620.00
Administrative Costs		\$ 6,467.00
<b>Totals</b>		<b>\$80, 623.70</b>

**Limitation on Price:** This Contract will not exceed \$ \$80,623.70

**Source of Funding:** Funding for this contract is 100% Federal Funds from the account titled System of Care (SOC), as follows:


Account: 06-056-056-562010-50600000-072-509073  
Grants – Federal

FY'19  
\$ 80,623.70

**Method of Payment:**

Payment will be made upon the submittal of an invoice that is received by the 10<sup>th</sup> of the following month which is supported by a summary of activities that have taken place in accordance with the terms of the contract.

Attn: Michelle Myler  
NH Department of Education  
Office of Student Wellness  
101 Pleasant Street  
Concord, NH 03301

Initial   
Date 5/12/18

# State of New Hampshire

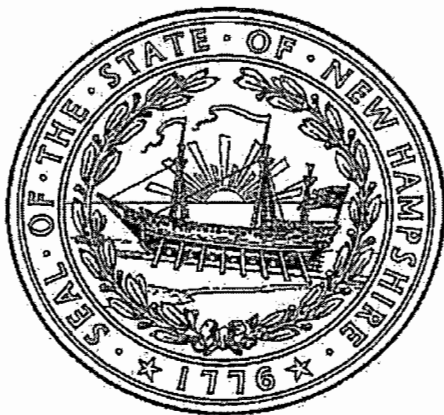
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that NAMI NEW HAMPSHIRE is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on September 24, 1982. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 62349

Certificate Number: 0004082315



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 16th day of April A.D. 2018.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

**CERTIFICATE OF VOTE**  
(Corporation without a Seal)

I, Richard A. Chevréfilis, do hereby certify that:  
(Name of the President of the Corporation, cannot be signatory)

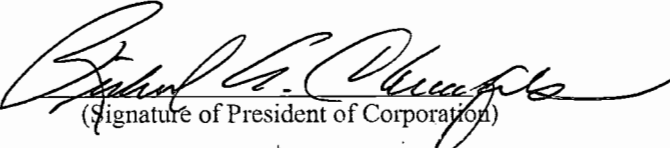
- (1) I am the duly elected President of NAMI New Hampshire.  
(Corporation Name)
- (2) The following are true copies of the resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on May 12, 2018.  
(date)

RESOLVED: That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Education.

RESOLVED: That Kenneth Norton – Executive Director,  
(Name of Contract Signatory) (Title of Contract Signatory)  
is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

- (3) The foregoing resolution(s) have not been amended or revoked, and remain in full force and effect as of the 12 day of May, 2018.  
(day, month, yr) (must be same date as the contract date)
- (4) Kenneth Norton is the duly elected Executive Director of the corporation.  
(name of contract signatory) (title of contract signatory)

IN WITNESS WHEREOF, I have hereunto set my hand as the Business Representative of the Corporation this 12<sup>th</sup> day of May, 2018.

  
(Signature of President of Corporation)

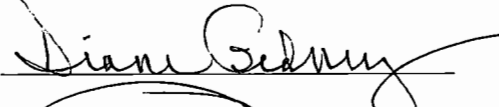
STATE OF NEW HAMPSHIRE

COUNTY OF Merrimack

On May 12, 2018, the foregoing instrument was acknowledged before me.

In witness whereof I hereunto set my hand and official seal.

My commission expires on: July 10, 2018

  
(Signature of Notary Public/Justice of the Peace)







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/16/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

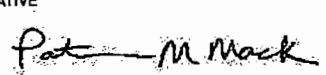
PRODUCER E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	CONTACT NAME: Pat Mack	
	PHONE (A/C, No, Ext): (603)293-2791 FAX (A/C, No): (603)293-7188 E-MAIL ADDRESS: pat@esinsurance.net	
INSURED National Alliance on Mental Illness, NAMI-NH 85 North State Street Concord NH 03301	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Great American Ins Group	
	INSURER B: Technology Insurance Co	42376
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL1841613260 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			MAC5464231-17	05/07/2018	05/07/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 AbMol Cnslr, CllsSpC \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED <input checked="" type="checkbox"/> AUTOS ONLY			MAC5464231-17	05/07/2018	05/07/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			UMB1898607-07	05/07/2018	05/07/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below		Y/N N	TWC3660236	10/10/2017	10/10/2018	E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  State of New Hampshire Department of Education 101 Pleasant Street  Concord NH 03301	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  

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Frank Edelblut  
Commissioner

Paul K. Leather  
Deputy Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF EDUCATION  
101 Pleasant Street  
Concord, N.H. 03301  
TEL. (603) 271-6133  
FAX (603) 271-1953

September 15, 2017

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the New Hampshire Department of Education, Bureau of Special Education, Office of Student Wellness to enter into a **sole source** contract with National Alliance on Mental Illness New Hampshire, (NAMI NH), Concord, NH (vender code 166630), in an amount not to exceed \$80,623.70, to work in partnership with the NH Department Of Education, (NHDOE) in all levels of decision-making, including the development, implementation and evaluation of the System of Care (SOC). This contract with an option to renew for 3 additional years will be effective upon Governor and Council approval, through June 30, 2018. 100% Federal funds.

Funds to support this request are available in the account titled System of Care (SOC).

06-056-056-562010-50600000-072-509073

FY'18

Grants – Federal

\$80,623.70

EXPLANATION

The DOE would like to enter into a **sole source** contract with the National Alliance on Mental Illness New Hampshire (NAMI, NH) who will partner with the DOE by providing a Lead Family Contact to work in partnership in the decision making, including the development, implementation and evaluation of the System of Care (SOC).

The purpose of this contract is to improve mental health outcomes for children and youth (birth to 21 years of age) with serious emotional disturbances (SED) and their families. This program will support the wide scale operation, expansion and integration of system of care (SOC) approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances. SOC will support the provisions of mental health and related recovery support services to children and youth with serious emotional disturbances and those with early signs and symptoms of serious mental illness first episode psychosis, and their families.

His Excellency, Governor Christopher T. Sununu  
And the Honorable Council  
Page Two

A Request for Letter of Commitment (RFC) was advertised on the Office of Student Wellness Website: [www.nhstudentwellness.org](http://www.nhstudentwellness.org); and the Department Of Education website ~Office of Student Wellness, on March 23 through March 31, 2016. The Office of Student Wellness only received one request which was submitted by NAMI NH. The grant required OSW to select an evaluator prior to submittal for the grant and to submit an evaluation plan. NAMI NH agreed to work with the New Hampshire Department of Education to fulfill the requirements of the grant. NAMI NH has been an active partner in the NH Children's Behavioral Health Collaborative steering committee and Safe Schools/Health Students and Project Advancing Wellness and Resilience in Education (AWARE) state management teams.

NAMI NH will be evaluated by the Department through the monitoring of the services provided. In addition, they will submit reports to the Department on the progress in meeting the objectives of the contract.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Frank Edelblut  
Commissioner of Education

FE:TLS  
Enclosures

## Attachment A

### Request for Commitment (RFC) Submittal

**Date Submitted:** Job description and resume submitted on April 13, 2016

**Submitted to:** Mary Steady, Administrator in the Office of Student Wellness

**Who Submitted:** NAMI, NH

When writing for this federal grant there was a requirement to submit a job description and resume for a Lead Family Contact. Since there is a very quick turnaround (typically 60 days or less) to complete the aforementioned task it doesn't allow for the full RFP process to be implemented. In addition, NAMI NH currently is the only family organization that provides the Family and Community Support peer-to-peer model, which is a requirement of the grant. To do our due diligence with the fair and competitive bidding process the OSW was instructed by the Commissioner's Office and Business Office to release a Request for Commitment (RFC- see attached). The RFC was advertised on the NH DOE website from March 23-31, 2016. NAMI NH was the only respondent to the RFC. They contacted the OSW via phone call to discuss the requirements of the RFC. The OSW took the following actions:

1. Discussed/interviewed NAMI NH on their experience with System of Care
2. Discussed with DHHS the role of NAMI NH in their SOC grant
3. Went into verbal agreement with NAMI NH to assist NH DOE with writing the deliverables of the Lead Family Contact, the job description of the Lead Family Contact, and identify and submit the resume of the Lead Family Contact.

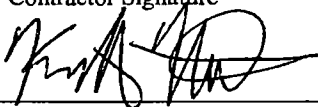
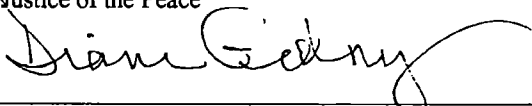
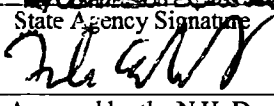
**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name NH Department of Education		1.2 State Agency Address 101 Pleasant Street, Concord, NH 03301	
1.3 Contractor Name National Alliance on Mental Illness New Hampshire, (NAMI NH)		1.4 Contractor Address 85 North State Street, Concord, NH 03301	
1.5 Contractor Phone Number (603) 225-5359	1.6 Account Number See Exhibit B	1.7 Completion Date June 30, 2018	1.8 Price Limitation \$80,623.00.70
1.9 Contracting Officer for State Agency Mary Steady, Administrator, Office of Student Wellness		1.10 State Agency Telephone Number (603)271-3730	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory Kenneth Norton, Executive Director ~ NAMI NH	
1.13 Acknowledgement: State of <u>NH</u> , County of <u>MERRIMACK</u>  On <u>September 13, 2017</u> before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace  <div style="text-align: center;">                       [Seal]                 </div>			
1.13.2 Name and Title of Notary or Justice of the Peace  DIANE GEDNEY, Notary Public My Commission Expires July 10, 2018			
1.14 State Agency Signature 		1.15 Name and Title of State Agency Signatory FRANK EDELBLUT, COMMISSIONER OF EDUCATION Date: <u>10-2-17</u>	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)  By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable)  By: <u>Eva B. McLarty</u> On: <u>10/5/17</u>			
1.18 Approval by the Governor and Executive Council (if applicable)  By: _____ On: _____			

**2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

#### 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied, terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

#### 9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

**10. TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

**11. CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

**12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.** The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

**13. INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

**15. WORKERS' COMPENSATION.**

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

**16. WAIVER OF BREACH.** No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

**17. NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

**18. AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

**19. CONSTRUCTION OF AGREEMENT AND TERMS.**

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

**20. THIRD PARTIES.** The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

**21. HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

**22. SPECIAL PROVISIONS.** Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

**23. SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

**24. ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

Contractor Initials

Date

*RM*  
9/13/17



## EXHIBIT A

### Scope of Services

NAMI NH will provide to the New Hampshire Department Of Education, Office of Student Wellness with the services of a Lead Family Contact to work in partnership with the awardee staff in all levels of decision making, including the development, implementation and evaluation of the System of Care (SOC).

A Lead Family Contact will:

- Provide one to one support to families/primary caregivers of children and/or adolescents with serious emotional disturbance (SED).
- Demonstrates in his/her work a commitment to the system of care values and guiding principles.
- Deliver Parents Meeting the Challenge Education Program (implementation, marketing and training).
- Assess the readiness of community and establish Parents Meeting the Challenge Support Groups.
- Identify, recruit family leadership candidates and connect them with a Family Leadership Training Program.
- Recruit, provide or ensure training/orientation and support to family leaders in a role of their choice.
- Work to eliminate stigma and end discrimination regarding mental health for all individuals and their families.
- Serve on work groups, advisory councils and committees as assigned.
- Collect and analyze all data related to the position.
- Build readiness for regional System of Care implementation family voice to assigned community planning meetings.
- Effectively outreaches and promotes education, leadership programs, and public policy advocacy.

NAMI will be required to work collaboratively with the Office of Student Wellness, and the System of Care evaluation team to collect and submit all SAMHSA required information. NAMI will submit monthly invoices to the NH Department Of Education, Office of Student Wellness.

**EXHIBIT B  
Budget**

Item	Description	FY'18
Lead Family Contact (LFC)	Lead Family Contact to work with the Family and Community Support Specialist (FCCS) staff in all levels of decision-making, including the development, implementation and evaluation of the SOC and providing support services for families receiving services through the cooperative agreement.	\$44,990.00
Lead Family Contract Fringe	Calculated at 33%	\$14,846.70
Travel/Meetings	Mileage reimbursement for Lead Family Contact estimated at 18,000 miles per year based on historical and statewide overseeing of (3) FCSS including North Country; and travel to the National Conference. Mileage is reimbursed at the GSA approved rate of 0.535/per mile.	\$9,000.00 ~ Local \$2,500.00 ~ National
Expenses	Wireless phone service @\$90/mo for Lead Family Contact. The wireless phone service includes the monthly fee including data and hotspot, and initial cost of phone. In addition, the LFC will have a tablet with data which will include connectivity costs.	\$1,620.00
Supplies	Laptop for Lead Family Contact Activities, purchase and set up.	\$1,200.00
Administrative Costs		\$ 6,467.00
<b>Totals</b>		<b>\$80,623.70</b>

**Limitation on Price:** This Contract will not exceed \$ \$80,623.70

**Source of Funding:** Funding for this contract is 100% Federal Funds from the account titled System of Care (SOC), as follows:

Account: 06-056-056-562010-50600000-072-509073  
Grants – Federal

FY'18  
\$ 80,623.70

**Method of Payment:**

Payment will be made upon the submittal of an invoice that is received by the 10<sup>th</sup> of the following month which is supported by a summary of activities that have taken place in accordance with the terms of the contract.

Attn: Mary Steady  
NH Department of Education  
Office of Student Wellness  
101 Pleasant Street  
Concord, NH 03301

Initial *MS*  
Date 9/13/17

EXHIBIT C

This contract contains a provision that allows the Department to add an option to renew for three additional years, contingent upon satisfactory delivery for services, available funding, agreement of the parties and approval of the Governor and Council.

Initial RM  
Date 9/13/17

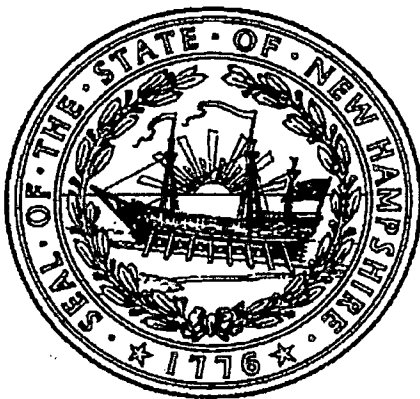
# State of New Hampshire

## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that NAMI NEW HAMPSHIRE is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on September 24, 1982. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 62349



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 25th day of August A.D. 2017.

A handwritten signature in black ink, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State

**CERTIFICATE OF VOTE**  
(Corporation without a Seal)

I, Russell Conte, do hereby certify that:  
(Name of the Clerk of the Corporation. Cannot be signatory.)

(1) I am the duly elected clerk of NAMI New Hampshire.  
(Corporation Name)

(2) The following are true copies of the resolutions duly adopted at a meeting of the Board of Directors of the Corporation duly held on September 13, 2017.  
(Date)

RESOLVED: That this Corporation enter into a contract with the State of New Hampshire, acting through its Department of Education.

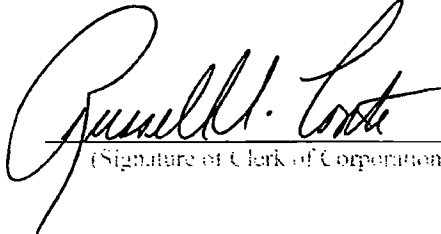
RESOLVED: That Kenneth Norton – Executive Director,  
(Name of Contract Signatory) (Title of Contract Signatory)

is hereby authorized on behalf of this Agency to enter into the said contract with the State and to execute and all documents, agreements and other instruments, and any amendments, revisions, or modifications thereto, as he/she may deem necessary, desirable or appropriate.

(3) The foregoing resolution(s) have not been amended or revoked, and remain in full force and effect as of the 13<sup>th</sup> day of September, 2017.  
(Date month (yr) must be same date as the contract date)

(4) Kenneth Norton is the duly elected Executive Director of the corporation.  
(Name of Contract Signatory) (Title of Contract Signatory)

IN WITNESS WHEREOF, I have hereunto set my hand as the Business Representative of the Corporation this 13<sup>th</sup> day of September, 2017.

  
(Signature of Clerk of Corporation)

STATE OF NEW HAMPSHIRE

COUNTY OF Merrimack

On September 13, 2017, the foregoing instrument was acknowledged before me.

In witness whereof I hereunto set my hand and official seal.



My commission expires on:

**DIANE GEDNEY, Notary Public**  
**My Commission Expires July 10, 2018**

Notary Public/Justice of the Peace



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
10/06/2017

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> E & S Insurance Services LLC 21 Meadowbrook Lane P O Box 7425 Gilford NH 03247-7425	<b>CONTACT NAME:</b> Pat Mack <b>PHONE (A/C, No, Ext):</b> (603)293-2791 <b>FAX (A/C, No):</b> (603)293-7188 <b>E-MAIL ADDRESS:</b> pat@esinsurance.net														
<b>INSURED</b> National Alliance on Mental Illness, NAMI-NH 85 North State Street Concord NH 03301	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A: Great American Ins Group</td> <td></td> </tr> <tr> <td>INSURER B: Technology Insurance Co</td> <td style="text-align: center;">42376</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Great American Ins Group		INSURER B: Technology Insurance Co	42376	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
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INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

**COVERAGES      CERTIFICATE NUMBER:** 2017 w new wc      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			MAC5464231-16	05/07/2017	05/07/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 AbMol Cnslr, ClssSpc \$ 1,000,000								
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			UMB1898607-07	05/07/2017	05/07/2018	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$								
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			TWC3660236	10/10/2017	10/10/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ \$								
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	TWC3660236	10/10/2017	10/10/2018	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">PER STATUTE</td> <td style="width: 50%;">OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$ 500,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 500,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	PER STATUTE	OTH-ER	E.L. EACH ACCIDENT	\$ 500,000	E.L. DISEASE - EA EMPLOYEE	\$ 500,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000
PER STATUTE	OTH-ER														
E.L. EACH ACCIDENT	\$ 500,000														
E.L. DISEASE - EA EMPLOYEE	\$ 500,000														
E.L. DISEASE - POLICY LIMIT	\$ 500,000														

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b> NH Department of Education 129 Pleasant Street Concord NH 03301	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE <div style="text-align: center; margin-top: 10px;"> </div>
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National Alliance on Mental Illness

**NAMI**

**New Hampshire**

## **MISSION & VISION STATEMENTS**

**Adopted 5/16/15**

### **MISSION**

NAMI New Hampshire is a grassroots organization working to improve the quality of life for all by providing support, education and advocacy for people affected by mental illness.

### **VISION**

We envision a future where people affected by mental illness have hope, help, and health, and are able to:

- access the supports and evidence-based treatment necessary for recovery,
- have a lifespan that is not cut short by their mental illness or co-morbid conditions, and
- reach their full potential, living in their communities free from discrimination and stigma.

*Find Help, Find Hope.*

NAMI New Hampshire • 85 North State Street • Concord, NH 03301  
InfoLine: 800-242-6264 • Tel. 603-225-5359 • Fax 603-228-8848 • [info@naminh.org](mailto:info@naminh.org) / [www.NAMINH.org](http://www.NAMINH.org)

**NAMI NEW HAMPSHIRE**  
**Financial Statements**  
**With Schedule of Expenditures of Federal Awards**  
**June 30, 2016 and 2015**  
**and**  
**Independent Auditor's Report**

**Report on Internal Control Over Financial Reporting  
and on Compliance and Other Matters Based on an Audit  
of Financial Statements Performed in Accordance  
With *Government Auditing Standards***

**Report on Compliance for Each Major Federal Program  
and Report on Internal Control Over Compliance  
Required by the Uniform Guidance**

**Schedule of Findings and Questioned Costs**



**NAMI NEW HAMPSHIRE**  
**FINANCIAL STATEMENTS**  
**June 30, 2016 and 2015**

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## **INDEPENDENT AUDITOR'S REPORT**

To the Board of Directors  
NAMI New Hampshire

### **Report on the Financial Statements**

We have audited the accompanying financial statements of NAMI New Hampshire (a nonprofit entity), which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### ***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of NAMI New Hampshire as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Other Matters***

#### ***Supplementary Information***

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules of functional expenses on pages 14 and 15 are presented for purposes of additional analysis and are not a required part of the financial statements. Additionally, the accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

### ***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated December 19, 2016, on our consideration of NAMI New Hampshire's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering NAMI New Hampshire's internal control over financial reporting and compliance.

*Vachon Chikoy + Company PC*

Manchester, New Hampshire  
December 19, 2016

**NAMI NEW HAMPSHIRE**  
**STATEMENTS OF FINANCIAL POSITION**  
For the Years Ended June 30, 2016 and 2015

ASSETS		2016	2015
<b>CURRENT ASSETS:</b>			
Cash		\$ 187,011	\$ 300,451
Investments		346,032	244,177
Accounts receivable		159,371	165,483
Prepaid expenses		6,970	11,050
TOTAL CURRENT ASSETS		<u>699,384</u>	<u>721,161</u>
<b>PROPERTY AND EQUIPMENT:</b>			
Land		164,000	164,000
Building and improvements		735,018	735,018
Equipment		8,218	8,218
Furniture and fixtures		604	604
		<u>907,840</u>	<u>907,840</u>
Less accumulated depreciation		<u>(63,988)</u>	<u>(43,498)</u>
PROPERTY AND EQUIPMENT, NET		<u>843,852</u>	<u>864,342</u>
<b>OTHER NONCURRENT ASSETS:</b>			
Investments		<u>357,101</u>	<u>372,400</u>
TOTAL OTHER NONCURRENT ASSETS		<u>357,101</u>	<u>372,400</u>
TOTAL ASSETS		<u>\$ 1,900,337</u>	<u>\$ 1,957,903</u>
<b>LIABILITIES AND NET ASSETS</b>			
<b>CURRENT LIABILITIES:</b>			
Accounts payable		\$ 67,087	\$ 71,261
Accrued expenses		50,712	86,636
Mortgage notes payable		16,889	15,570
TOTAL CURRENT LIABILITIES		<u>134,688</u>	<u>173,467</u>
<b>NONCURRENT LIABILITIES:</b>			
Mortgage notes payable		<u>337,196</u>	<u>371,290</u>
TOTAL NONCURRENT LIABILITIES		<u>337,196</u>	<u>371,290</u>
TOTAL LIABILITIES		<u>471,884</u>	<u>544,757</u>
<b>NET ASSETS:</b>			
Temporarily restricted		821	115,080
Unrestricted		<u>1,427,632</u>	<u>1,298,066</u>
TOTAL NET ASSETS		<u>1,428,453</u>	<u>1,413,146</u>
TOTAL LIABILITIES AND NET ASSETS		<u>\$ 1,900,337</u>	<u>\$ 1,957,903</u>

See notes to financial statements

**NAMI NEW HAMPSHIRE**  
**STATEMENTS OF ACTIVITIES**  
For the Years Ended June 30, 2016 and 2015

	<u>2016</u>	<u>2015</u>
<b>CHANGES IN UNRESTRICTED NET ASSETS:</b>		
Fees and grants from governmental agencies	\$ 1,296,647	\$ 1,098,761
Contributions	153,473	238,753
NH Charitable Foundation endowment income	8,950	8,758
Interest and dividends	17,990	11,903
Unrealized (losses) on investments	(27,160)	(8,905)
In-kind donations	10,085	22,818
Fundraising events	119,953	92,671
Training services	313,535	273,894
Membership dues	4,317	6,013
Other revenue	28,876	30,616
<b>TOTAL UNRESTRICTED REVENUES</b>	<u>1,926,666</u>	<u>1,775,282</u>
<b>NET ASSETS RELEASED FROM RESTRICTIONS:</b>		
Satisfaction of donor restrictions	115,080	99,878
<b>TOTAL NET ASSETS RELEASED FROM RESTRICTIONS</b>	<u>115,080</u>	<u>99,878</u>
<b>TOTAL UNRESTRICTED REVENUES AND OTHER SUPPORT</b>	<u>2,041,746</u>	<u>1,875,160</u>
<b>EXPENSES:</b>		
<b>PROGRAM SERVICES:</b>		
Community and Public Policy Relations	101,998	64,967
Connect Suicide Prevention Project	574,894	522,156
Public Education	845,463	837,862
<b>TOTAL PROGRAM SERVICES</b>	<u>1,522,355</u>	<u>1,424,985</u>
<b>SUPPORTING SERVICES:</b>		
Management and general	214,387	122,286
Fundraising and development	175,438	202,585
<b>TOTAL SUPPORTING SERVICES</b>	<u>389,825</u>	<u>324,871</u>
<b>TOTAL EXPENSES</b>	<u>1,912,180</u>	<u>1,749,856</u>
<b>TOTAL INCREASE IN UNRESTRICTED NET ASSETS</b>	<u>129,566</u>	<u>125,304</u>
<b>CHANGES IN TEMPORARILY RESTRICTED NET ASSETS:</b>		
Contributions	821	115,080
Net assets released from restrictions	(115,080)	(99,878)
<b>INCREASE (DECREASE) IN TEMPORARILY RESTRICTED NET ASSETS</b>	<u>(114,259)</u>	<u>15,202</u>
<b>INCREASE IN NET ASSETS</b>	15,307	140,506
<b>NET ASSETS, JULY 1</b>	<u>1,413,146</u>	<u>1,272,640</u>
<b>NET ASSETS, JUNE 30</b>	<u>\$ 1,428,453</u>	<u>\$ 1,413,146</u>

*See notes to financial statements*

**NAMI NEW HAMPSHIRE**  
**STATEMENTS OF CASH FLOWS**  
For the Years Ended June 30, 2016 and 2015

	<u>2016</u>	<u>2015</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Cash received from grants and contributions	\$ 1,896,808	\$ 1,901,715
Interest income received	17,990	11,903
Other income received	28,876	30,616
Cash paid to employees	(1,037,331)	(877,680)
Cash paid to suppliers and others	(868,508)	(764,030)
Interest paid	(11,784)	(12,966)
Net Cash Provided by Operating Activities	<u>26,051</u>	<u>289,558</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Purchase of investments	(113,716)	(125,228)
Purchase of property and equipment	-	(79,275)
Net Cash Used by Investing Activities	<u>(113,716)</u>	<u>(204,503)</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>		
Payments on mortgage notes payable	(25,775)	(24,594)
Net Cash Used by Financing Activities	<u>(25,775)</u>	<u>(24,594)</u>
Net increase (decrease) in cash	(113,440)	60,461
Cash, beginning of year	<u>300,451</u>	<u>239,990</u>
Cash, ending of year	<u>\$ 187,011</u>	<u>\$ 300,451</u>
<b>Reconciliation of Change in Net Assets to Net Cash</b>		
Provided by Operating Activities:		
Change in net assets	\$ 15,307	\$ 140,506
<b>Adjustments to Reconcile Change in Net Assets to</b>		
<b>to Net Cash Provided by Operating Activities:</b>		
Net unrealized losses on investments	27,160	8,905
Depreciation	20,490	14,868
Forgiveness of debt	(7,000)	
Change in assets and liabilities:		
Accounts receivable	6,112	67,785
Prepaid expenses	4,080	1,190
Accounts payable	(4,174)	11,599
Accrued expenses	(35,924)	44,705
Net Cash Provided by Operating Activities	<u>\$ 26,051</u>	<u>\$ 289,558</u>
<b>Supplemental Disclosure of Non-cash Transactions:</b>		
In-kind donations received	\$ 10,085	\$ 162,818
In-kind expenses	(10,085)	(22,818)
Forgiveness of debt	7,000	
Capitalized in-kind donations		(140,000)
	<u>\$ 7,000</u>	<u>\$ -</u>

*See notes to financial statements*

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS  
For the Years Ended June 30, 2016 and 2015**

**NOTE 1—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

***Organization and Purpose***

The National Alliance on Mental Illness, New Hampshire (NAMI New Hampshire) was founded as a nonprofit corporation in 1982. NAMI New Hampshire is a grassroots, statewide organization of families, consumers, professionals and other volunteers, dedicated to improving the quality of life of all people affected by mental illness and/or serious emotional disorders through education, training, support and advocacy.

NAMI New Hampshire provides education for families and community members to increase awareness and understanding of mental illness, promote research and the effectiveness of treatment and to instill hope and belief that recovery from mental illness is possible. NAMI New Hampshire provides training and consultation services to families, community members and providers who work with persons with mental illness to help them better understand the needs of these individuals so that their services are more effective and efficient. NAMI New Hampshire also works to address stigma and discrimination towards persons with mental illness. All these activities are carried out statewide, through a network of affiliate chapters, staff and volunteers that provide information, education and support to families and consumers and to the public at large. The financial support for these programs and activities comes from a variety of sources that include grants from foundations, contracts, gifts, donations and membership dues.

***Accounting Policies***

The accounting policies of NAMI New Hampshire conform to accounting principles generally accepted in the United States of America as applicable to non-profit entities except as indicated hereafter. The following is a summary of significant accounting policies.

***Basis of Presentation***

The financial statements have been prepared in accordance with the reporting pronouncements pertaining to Not-for-Profit Entities included within the FASB Accounting Standards Codification (FASB ASC 958-205). Under FASB ASC 958-205, the Entity is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets, based upon the existence or absence of donor-imposed restrictions.

***Basis of Accounting***

The financial statements have been prepared on the accrual basis of accounting.

Revenues from program services are recorded when earned. Other miscellaneous revenues are recorded upon receipt.

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

***Contributions***

The Entity accounts for contributions received in accordance with FASB ASC 958-605, *Accounting for Contributions Received and Contributions Made*. Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions.

***Recognition of Donor Restrictions***

Contributions are recognized when the donor makes a promise to give to the Entity that is, in substance, unconditional. Contributions that are restricted by the donor are reported as an increase in unrestricted net assets if the restriction expires in the reporting period in which the support is recognized. All other donor restricted support is reported as an increase in temporarily or permanently restricted net assets depending on the nature of the restriction. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

***Cash and Cash Equivalents***

For the purpose of the statements of cash flows, cash and equivalents consists of demand deposits, cash on hand and all highly liquid investments with an original maturity of 90 days or less.

***Investments***

Investments, which consist principally of money market accounts, mutual funds, and exchange traded funds, are carried at their market value at June 30, 2016 and June 30, 2015. Unrealized gains and losses on investments are reflected in the statement of activities.

***Property and Equipment***

Property and equipment are stated at cost. Donated property and equipment is recorded at fair value determined as of the date of the donation. The Entity's policy is to capitalize expenditures for major improvements with a cost in excess of \$1,000 and to charge to operations currently for expenditures which do not extend the lives of related assets in the period incurred. Depreciation is computed using the straight-line method at rates intended to amortize the cost of related assets over their estimated useful lives as follows:

	<u>Years</u>
Building and improvements	39
Equipment	5
Furniture and fixtures	7-10

Depreciation expense was \$20,490 and \$14,868 for the years ended June 30, 2016 and 2015, respectively.



**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

***Compensated Absences***

Full-time and part-time employees are entitled to paid vacation based on their length of employment. Employees are allowed to carry forward a maximum of 10 vacation days. Upon termination of employment, full-time employees will receive up to five days of accrued/unused vacation pay. Accrued vacation pay amounted to \$17,334 and \$16,644 as of June 30, 2016 and 2015, respectively.

***Donated Services, Materials and Facilities***

NAMI New Hampshire receives significant volunteer time and efforts. The value of these volunteer efforts, while critical to the success of its mission, is not reflected in the financial statements since it does not meet the criteria necessary for recognition according to generally accepted accounting principles.

Donated goods and professional services are recorded as both revenue and expense at estimated fair value. The Entity received donated supplies and professional services in support of fundraising activities totaling \$10,085 and \$22,818 during the years ending June 30, 2016 and 2015, respectively. Additionally, the Entity was the subrecipient of a \$140,000 federal grant (see Note 4) that was capitalized in accordance with the Entity's capitalization policy during the year ended June 30, 2015.

***Functional Allocation of Expenses***

The costs of providing the various programs and supporting services have been summarized on a functional basis. Accordingly, certain costs have been allocated on the statements of functional expenses among the programs and supporting services based on percentage allocations determined by the Entity's management.

***Fund Raising Activities***

Fund raising expenses represent the cost of preparing contribution appeals, running special events, and letters of appreciation by staff of the Entity and totaled \$175,438 and \$202,585 for the years ending June 30, 2016 and 2015, respectively.

***Advertising Costs***

Advertising costs are expensed as incurred. Advertising expense was \$10,842 and \$2,630 for the years ending June 30, 2016 and 2015, respectively.

***Bad Debts***

The Entity uses the reserve method for accounting for bad debts. No allowance has been recorded as of June 30, 2016 and 2015, because management of the Entity believes that all outstanding receivables are fully collectible.

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

*Estimates*

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

*Income Taxes*

The Entity has received a determination letter from the Internal Revenue Service stating that it qualifies for tax-exempt status under Section 501(c)(3) of the Internal Revenue Code for any exempt function income. In addition, the Entity is not subject to state income taxes. Accordingly, no provision has been made for Federal or State income taxes.

The FASB adopted Accounting Standards Codification Topic 740 entitled *Accounting for Income Taxes* which requires the Entity to report uncertain tax positions for financial reporting purposes. FASB ASC 740 prescribes rules regarding how the Entity should recognize, measure and disclose in its financial statements, tax positions that were taken or will be taken on the Entity's tax returns that are reflected in measuring current or deferred income tax assets and liabilities. Differences between tax positions taken in a tax return and amounts recognized in the financial statements will generally result in an increase in a liability for income tax payable or a reduction in a deferred tax asset or an increase in a deferred tax liability. The Entity does not have any material unrecognized tax benefits. As of June 30, 2016, the tax years ending June 30, 2015, 2014 and 2013 remain subject to possible examination by major tax jurisdictions.

*Fair Value of Financial Instruments*

Cash and equivalents, accounts receivable, accounts payable and accrued expenses are carried in the financial statements at amounts which approximate fair value due to the inherently short-term nature of the transactions. The fair values determined for financial instruments are estimates, which for certain accounts may differ significantly from the amounts that could be realized upon immediate liquidation.

**NOTE 2--CONCENTRATION OF CREDIT RISK**

The Entity maintains bank deposits at local financial institutions located in New Hampshire. The Entity's demand deposits are insured by the Federal Deposit Insurance Corporation (FDIC) up to a total of \$250,000. The Entity had \$-0- and \$63,240 of uninsured deposits as of June 30, 2016 and 2015, respectively.

**NOTE 3--INVESTMENTS**

*Fair Value Measurements*

The Entity reports under the Fair Value Measurements pronouncements of the FASB Accounting Standards Codification (FASB ASC 820) which establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs of valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described below.

**Level 1** - Inputs to the valuation methodology are unadjusted, quoted prices in active markets for identical assets or liabilities at the measurement date.

**Level 2** – Inputs to the valuation include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities that are not active;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

**Level 3** – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs at the closing price reported on the active market on which the individual securities are traded.

Following is a description of the valuation methodologies used for assets measured at fair value.

*Cash or cash equivalent money market mutual funds:* Valued at acquisition cost.

*Common stocks, unit investment equities, and fixed income securities:* Valued at the closing price reported on the active market on which the individual securities are traded.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Entity believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Entity's assets at fair value:

Assets at Fair Value as of June 30, 2016				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Money market mutual funds	\$ 297,706			\$ 297,706
Mutual funds	159,909			159,909
Exchange traded funds	196,823			196,823
Corporate debt securities	48,695			48,695
Total assets at fair value	<u>\$ 703,133</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 703,133</u>

**NAMI NEW HAMPSHIRE**  
**NOTES TO FINANCIAL STATEMENTS (CONTINUED)**  
**For the Years Ended June 30, 2016 and 2015**

Assets at Fair Value as of June 30, 2015				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Money market mutual funds	\$ 196,572			\$ 196,572
Mutual funds	214,369			214,369
Exchange traded funds	157,735			157,735
Corporate debt securities	47,901			47,901
Total assets at fair value	<u>\$ 616,577</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 616,577</u>

**Investment Valuation and Income Recognition**

The Entity's investments as of June 30, 2016 and June 30, 2015 are stated at fair value. Shares of the separate investment accounts are valued at quoted market prices, which represent the net value of shares held by the Entity at year-end.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Investments consist of money market investments, mutual funds, exchange traded funds, and corporate debt securities which are carried at market value (adjusted monthly). Realized and unrealized gains and losses are reflected in the Statements of Activities. Assets held in the investment accounts were as follows at June 30, 2016 and 2015:

	<u>Market Value</u> <u>2016</u>	<u>Market Value</u> <u>2015</u>
Money market mutual funds	\$ 297,706	\$ 196,572
Mutual funds	159,909	214,369
Exchange traded funds	196,823	157,735
Corporate debt securities	48,695	47,901
	<u>\$ 703,133</u>	<u>\$ 616,577</u>

**NOTE 4--MORTGAGE NOTES PAYABLE**

At June 30, 2016 and 2015, the mortgage notes payable consists of the following:

	<u>2016</u>	<u>2015</u>
\$348,000 mortgage note payable, secured by property, payable in monthly installments of \$2,297 including interest through April 2032. The variable interest rate on the note is 5.0% through April 2022. Thereafter, the interest rate will change to equal the 5 year Federal Home Loan Bank of Boston amortizing rate plus 3.0%. The interest rate change will not occur more often than each five years. The balance of the note is payable in full on April 2, 2032.	\$ 221,085	\$ 246,860

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

\$140,000 mortgage note payable to the City of Concord, New Hampshire is non-interest bearing and is secured by the property. The Entity is a subrecipient of Community Development Block Grant funds which were used to create an ADA compliant community education space. Repayment of the funds will be required in the event of noncompliance with the grant. The note will be forgiven over a period of 20 years through December 31, 2034.

<u>133,000</u>	<u>140,000</u>
<u>\$ 354,085</u>	<u>\$ 386,860</u>

Following are the maturities of the mortgage notes payable as of June 30, 2016:

Year Ending <u>June 30,</u>	<u>Amount</u>
2017	\$ 16,889
2018	17,753
2019	18,661
2020	19,616
2021	20,620
Thereafter	<u>260,546</u>
	<u>\$ 354,085</u>

**NOTE 5--TEMPORARILY RESTRICTED NET ASSETS**

Temporarily restricted net assets consist of the following donor restricted funding at June 30, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
NHCF grant - family support		\$ 21,319
NHCF grant - operations		75,000
Seacoast Women's Giving Circle		18,761
NIMH grant	<u>\$ 821</u>	
	<u>\$ 821</u>	<u>\$ 115,080</u>

**NOTE 6--UNRESTRICTED NET ASSETS**

Unrestricted net assets consist of the following at June 30, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Board designated:		
Investments held for capital improvements and debt service	\$ 357,101	\$ 372,400
Future building improvements	60,000	60,000
Undesignated	<u>1,010,531</u>	<u>865,666</u>
	<u>\$ 1,427,632</u>	<u>\$ 1,298,066</u>

**NAMI NEW HAMPSHIRE  
NOTES TO FINANCIAL STATEMENTS (CONTINUED)  
For the Years Ended June 30, 2016 and 2015**

**NOTE 7--CONCENTRATION OF REVENUE RISK**

The Entity's primary source of revenues is fees and grants received from the State of New Hampshire and directly from the federal government. During the years ended June 30, 2016 and 2015, the Entity recognized revenue of \$1,296,647 (67.27%) and \$1,098,761 (58.12%), respectively, from fees and grants from governmental agencies. Revenue is recognized as earned under the terms of the grant contracts and is received on a cost reimbursement basis. Other support originates from training services, contributions, in-kind donations, and other income.

**NOTE 8--BENEFICIAL INTEREST IN TRUST**

The Entity is the beneficiary of an endowment fund held by the New Hampshire Charitable Foundation. The Entity has no claim to the assets of the trusts, but is entitled to 4.03% of the income from the trusts. At June 30, 2016 and 2015, the fair value of the Entity's interest in the beneficial trust held by others is \$208,501 and \$226,282, respectively. The fair value is based upon the market value of the underlying investments based upon daily market information provided by the trust's agent. Income distributed from the trust to the Entity is unrestricted and recognized as endowment income on the Statements of Activities. Distributed income from the trust totaled \$8,950 and \$8,758 for the years ending June 30, 2016 and 2015, respectively.

**NOTE 9--PENSION PLAN**

The Entity has a deferred compensation pension plan under Section 403(b) of the Internal Revenue Code. Under the terms of the plan, employee contributions are made through a salary reduction plan. During the years ending June 30, 2016 and 2015, the Entity's contribution to the plan was equal to 2.0% respectively of each eligible employee's annual salary. The Entity contributed \$12,067 and \$10,960 for the years ended June 30, 2016 and 2015, respectively.

**NOTE 10--CONTINGENCIES**

The Entity participates in a number of federally assisted grant programs. These programs are subject to financial and compliance audits by the grantors or their representatives. The amounts, if any, of additional expenses which may be disallowed by the granting agency cannot be determined at this time, although the Entity expects such amounts, if any, to be immaterial.

**NOTE 11--SUBSEQUENT EVENTS**

Subsequent events have been evaluated through December 19, 2016, which is the date the financial statements were available to be issued.

NAMI NEW HAMPSHIRE  
SCHEDULE OF FUNCTIONAL EXPENSES  
For the Year Ended June 30, 2016

	Program Services				Supporting Services			Total Expenses
	Community and Public Policy Relations	Connect Suicide Prevention Project	Public Education	Total Program Services	Management and General	Fundraising	Total Supporting Services	
<b>SALARIES AND RELATED EXPENSES:</b>								
Salaries	\$ 59,701	\$ 213,456	\$ 498,613	\$ 771,770	\$ 154,229	\$ 86,479	\$ 240,708	\$ 1,012,478
Employee benefits	10,196	26,415	61,941	98,552	17,771	14,998	32,769	131,321
Payroll taxes	1,129	17,144	45,610	63,883	8,703	6,590	15,293	79,176
	<u>71,026</u>	<u>257,015</u>	<u>606,164</u>	<u>934,205</u>	<u>180,703</u>	<u>108,067</u>	<u>288,770</u>	<u>1,222,975</u>
<b>OTHER EXPENSES:</b>								
Accounting	387	2,359	2,556	5,302	763	352	1,115	6,417
Audit fees	892	4,335	7,096	12,323	824	1,223	2,047	14,370
Legal and membership fees	284	2,961	1,789	5,034	516	1,343	1,859	6,893
Contracted services	17,000	207,605	52,217	276,822	2,665	15,070	17,735	294,557
Client services/training	561	18,923	59,596	79,080	901	3,227	4,128	83,208
Occupancy	897	5,460	8,937	15,294	1,038	1,541	2,579	17,873
Office supplies	1	1,525	420	1,946	11,815	2,774	14,589	16,535
Maintenance	1,305	7,946	11,875	21,126	2,643	1,677	4,320	25,446
Fundraising/Event supplies			38	38		17,862	17,862	17,900
Depreciation	1,047	6,373	10,432	17,852	840	1,798	2,638	20,490
Food supplies	141		14,322	14,463	3,255	4,666	7,921	22,384
Equipment rental	366	2,228	3,647	6,241	424	629	1,053	7,294
Equipment maintenance	899	1,400	2,779	5,078	172	255	427	5,505
Advertising			10,127	10,127	185	530	715	10,842
Printing		750	351	1,101	1,552	5,597	7,149	8,250
Telephone and Communications	2,841	5,390	15,548	23,779	1,705	1,212	2,917	26,696
Postage and Shipping	2	2,739	258	2,999	1,910	1,332	3,242	6,241
Staff transportation	3,637	34,841	29,052	67,530	1	1,883	1,884	69,414
Insurance	578	3,520	5,762	9,860	669	993	1,662	11,522
Non-cash supplies	40	8,000		8,040	755	1,290	2,045	10,085
Other expenditures	94	1,524	2,497	4,115	1,051	2,117	3,168	7,283
Total	<u>\$ 101,998</u>	<u>\$ 574,894</u>	<u>\$ 845,463</u>	<u>\$ 1,522,355</u>	<u>\$ 214,387</u>	<u>\$ 175,438</u>	<u>\$ 389,825</u>	<u>\$ 1,912,180</u>

NAMI NEW HAMPSHIRE  
SCHEDULE OF FUNCTIONAL EXPENSES  
For the Year Ended June 30, 2015

	Program Services				Supporting Services			Total Expenses
	Community and Public Policy Relations	Connect Suicide Prevention Project	Public Education	Total Program Services	Management and General	Fundraising	Total Supporting Services	
<b>SALARIES AND RELATED EXPENSES:</b>								
Salaries	\$ 41,261	\$ 215,625	\$ 496,663	\$ 753,549	\$ 74,014	\$ 97,907	\$ 171,921	\$ 925,470
Employee benefits	1,855	35,269	71,598	108,722	3,434	11,971	15,405	124,127
Payroll taxes	3,033	15,852	37,262	56,147	5,732	6,566	12,298	68,445
	<u>46,149</u>	<u>266,746</u>	<u>605,523</u>	<u>918,418</u>	<u>83,180</u>	<u>116,444</u>	<u>199,624</u>	<u>1,118,042</u>
<b>OTHER EXPENSES:</b>								
Accounting	155	1,310	2,003	3,468	924	760	1,684	5,152
Audit fees	435	3,474	5,612	9,521	843	1,356	2,199	11,720
Legal and membership fees	267	1,685	2,840	4,792	1,363	1,068	2,431	7,223
Contracted services	8,500	158,689	40,645	207,834	8,160	20,837	28,997	236,831
Client services/training	85	23,312	66,749	90,146	694	1,430	2,124	92,270
Occupancy	815	7,708	10,948	19,471	1,579	2,542	4,121	23,592
Office supplies	62	2,762	13,595	16,419	6,557	3,040	9,597	26,016
Maintenance	821	6,561	15,472	22,854	1,592	2,563	4,155	27,009
Fundraising/Event supplies					804	10,473	11,277	11,277
Depreciation	592	4,407	7,646	12,645	373	1,850	2,223	14,868
Food supplies	133		2,784	2,917	4,829	5,846	10,675	13,592
Equipment rental	244	1,944	3,140	5,328	471	760	1,231	6,559
Equipment maintenance	666	3,644	4,373	8,683	564	1,595	2,159	10,842
Advertising			1,429	1,429	280	921	1,201	2,630
Printing			6,150	6,150	63	3,732	3,795	9,945
Telephone and Communications	2,735	5,220	12,223	20,178	2,075	2,052	4,127	24,305
Postage and Shipping	84	2,268	391	2,743	1,814	2,713	4,527	7,270
Staff transportation	2,679	28,090	29,714	60,483	139	2,660	2,799	63,282
Insurance	380	3,032	4,898	8,310	735	1,185	1,920	10,230
Non-cash supplies			439	439	4,400	17,979	22,379	22,818
Other expenditures	165	1,304	1,288	2,757	847	779	1,626	4,383
<b>Total</b>	<u>\$ 64,967</u>	<u>\$ 522,156</u>	<u>\$ 837,862</u>	<u>\$ 1,424,985</u>	<u>\$ 122,286</u>	<u>\$ 202,585</u>	<u>\$ 324,871</u>	<u>\$ 1,749,856</u>



SCHEDULE I  
 NAMI New Hampshire  
 Schedule of Expenditures of Federal Awards  
 For the Year Ended June 30, 2016

Federal Granting Agency/Recipient State Agency/Grant Program/State Grant Number	Federal Catalogue Number	Expenditures	Passed Through To Subrecipients
<b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>			
<b>Received directly from U.S. Treasury Department</b>			
Substance Abuse and Mental Health Services - Projects of Regional and National Significance	93.243		
#5U79SM061481-02		\$ 102,190	\$ 34,633
#5U79SM061481-03		<u>333,325</u>	<u>139,077</u>
		<u>435,515</u>	<u>173,710</u>
<b>Pass Through Payments from the New Hampshire Division for Children, Youth and Families</b>			
Substance Abuse and Mental Health Services - Projects of Regional and National Significance	93.243		
#42103802		<u>197,298</u>	
<b>Pass Through Payments from the New Hampshire Department of Health and Human Services</b>			
Medical Assistance Program	93.778		
#49053316		<u>143,879</u>	
<b>Total Department of Health and Human Services</b>		<u>776,692</u>	<u>173,710</u>
<b>Total Expenditures of Federal Awards</b>		<u>\$ 776,692</u>	<u>\$ 173,710</u>

*See notes to schedule of expenditures of federal awards*

**NAMI NEW HAMPSHIRE**  
**NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**  
June 30, 2016

**NOTE 1—BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards (the "Schedule") presents the activity of all federal financial assistance programs of NAMI New Hampshire. NAMI New Hampshire's reporting entity is defined in Note 1 to the Entity's basic financial statements.

The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of NAMI New Hampshire, it is not intended to and does not present the financial position, changes in net assets, or cash flows of NAMI New Hampshire.

**NOTE 2—BASIS OF ACCOUNTING**

The accompanying Schedule of Expenditures of Federal Awards is presented using the accrual basis of accounting. Such expenditures are recognized following, as applicable, either the cost principles in Office of Management and Budget Circular A-122, *Cost Principles for Non-Profit Organizations*, or the cost principles contained in Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), wherein certain types of expenditures are not allowable or are limited as to reimbursement.

NAMI New Hampshire has elected not to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

**NOTE 3—RELATIONSHIP TO FINANCIAL STATEMENTS**

The recognition of expenditures of federal awards is included in fees and grants from governmental agencies.

**REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING  
AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT  
OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE  
WITH GOVERNMENT AUDITING STANDARDS**

Independent Auditor's Report

To the Board of Directors  
NAMI New Hampshire

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of NAMI New Hampshire (a nonprofit entity), which comprise the statement of financial position as of June 30, 2016 and the related statements of activities and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated December 19, 2016.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered NAMI New Hampshire's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of NAMI New Hampshire's internal control. Accordingly, we do not express an opinion on the effectiveness of NAMI New Hampshire's internal control.

*A deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether NAMI New Hampshire's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Vachon Chikley + Company PC

Manchester, New Hampshire  
December 19, 2016

**REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM  
AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE  
REQUIRED BY THE UNIFORM GUIDANCE**

Independent Auditor's Report

To the Board of Directors  
NAMI New Hampshire

**Report on Compliance for Each Major Federal Program**

We have audited NAMI New Hampshire's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on NAMI New Hampshire's major federal program for the year ended June 30, 2016. NAMI New Hampshire's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

***Management's Responsibility***

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

***Auditor's Responsibility***

Our responsibility is to express an opinion on compliance for NAMI New Hampshire's major federal program based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about NAMI New Hampshire's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for the major federal program. However, our audit does not provide a legal determination of NAMI New Hampshire's compliance.

***Opinion on Each Major Federal Program***

In our opinion, NAMI New Hampshire complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2016.

## Report on Internal Control Over Compliance

Management of NAMI New Hampshire is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered NAMI New Hampshire's internal control over compliance with the types of requirements that could have a direct and material effect on its major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for its major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of NAMI New Hampshire's internal control over compliance.

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Vachon Cloutier & Company PC

Manchester, New Hampshire  
December 19, 2016

**NAMI New Hampshire  
Schedule of Findings and Questioned Costs  
Year Ended June 30, 2016**

**Section I--Summary of Auditor's Results**

**Financial Statements**

Type of auditor's report issued:	<u>Unmodified</u>	
Internal control over financial reporting:		
Material weakness(es) identified?	_____ yes	_____ <u>X</u> no
Significant deficiency(ies) identified not considered to be material weaknesses?	_____ yes	_____ <u>X</u> none reported
Noncompliance material to financial statements noted?	_____ yes	_____ <u>X</u> no

**Federal Awards**

Internal Control over major programs:		
Material weakness(es) identified?	_____ yes	_____ <u>X</u> no
Significant deficiency(ies) identified?	_____ yes	_____ <u>X</u> none reported

Type of auditor's report issued on compliance  
for major federal programs:

Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	_____ yes	_____ <u>X</u> no
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Identification of major programs:

<u>CFDA Number(s)</u>	<u>Name of Federal Program or Cluster</u>
93.243	Substance Abuse and Mental Health Services - Projects of Regional and National Significance

Dollar threshold used to distinguish between Type A and Type B program:	\$ <u>750,000</u>
--	-------------------

Auditee qualified as low-risk auditee?	_____ <u>X</u> yes _____ no
--	-----------------------------

**Section II--Financial Statement Findings**

There were no findings relating to the financial statements required to be reported by GAGAS.

**Section III—Federal Award Findings and Questioned Costs**

There were no findings and questioned costs required to be reported under 2 CFR 200.516(a).



**NAMI NH  
Board of Directors  
2016-2017**

<b>NAME</b>	<b>AFFILIATION</b>	<b>TELEPHONE</b>
Belcher, Frances	Licensed Marriage & Family Therapist	603/535-3270
Bloomfield, Lucy	Licensed Massage Therapist	603/531-3700
Brown, Donna	Wadleigh, Starr and Peters, PLLC	603/496-8558
Bunker, John	University of New Hampshire	603-862-1897
Carloni, Dr. Stacey	Greater Nashua Community Mental Health Ctr	603/727-8500
Chevréfiles, Richard	AARP Link	603/224-9077
Conte, Major Russell	New Hampshire State Police	603/223-8506
Cunningham, Ross	Merrimack County Department of Corrections	603/398-2246
Grant, Doug	Family Member	603/444-6982
Grennon, Michele	Family Member	603/436-6351
Griffin, Suellen	West Central Behavioral Health	603/448-0126
Janelle, Peter	Mental Health Center of Greater Manchester	603/493-3080
Paquette, Linda	New Futures	603/225-9540
Privé, Karen	Family Member	603/860-6629
Richardson, Rose	Merrimack County Savings Bank	603/491-6696
Wright, Michael	Private Practice Attorney	603/496-2196



## Overview of the Organization

NAMI New Hampshire is a grassroots organization working to improve the quality of life for all by providing support, education, and advocacy for people affected by mental illness. NAMI NH is comprised of a network of community-based affiliate chapters and support groups, staff and volunteers that provide information, education, and support to families across the lifespan and to NH communities affected by mental illness and suicide. We envision a future where people affected by mental illness have hope, help, and health, and are able to:

- access the supports and evidence-based treatment necessary for recovery,
- have a lifespan that is not cut short by their mental illness or co-morbid conditions, and
- reach their full potential, living in their communities free from discrimination and stigma.

NAMI NH offers programs that support and educate families affected by mental illness, co-occurring substance use disorders, and suicide. We provide leadership opportunities for youth and adults, and deliver mental health and suicide prevention education and trainings statewide in community and professional settings. We advocate for removing stigma and other barriers which impede access to mental health care and work to simplify the mental health service delivery system in NH so it is more easily navigated by individuals with mental illness and their caregivers. We teach and empower our members and volunteers to advocate for these important issues. Our programs enhance the effectiveness of the work of mental health service professionals and families.

*Find Help, Find Hope.*

NAMI New Hampshire • 85 North State Street • Concord, NH 03301  
InfoLine: 800-242-6264 • Tel. 603-225-5359 • Fax 603-228-8848 • [info@naminh.org](mailto:info@naminh.org) / [www.NAMINH.org](http://www.NAMINH.org)

**NAMI New Hampshire**  
**List of Personnel -SOC 2020-DOE**

<b>Name</b>	<b>Title</b>	<b>Annual Salary</b>
Brian Huckins	Director of Children & Youth Programs	\$ 56,500
Susan Stearns	Deputy Director	\$ 86,000
Ken Norton	Exectuive Director	\$ 96,340
Patrick Roberts	Program Evaluation and Improvement Coordinator	\$ 48,925
Tammy Murray	Chief Financial Officer	\$ 85,647

## KENNETH NORTON

### EDUCATION:

UNIVERSITY OF CONNECTICUT, Hartford, CT  
MSW, December 1985, Casework Major, Groupwork Minor

UNIVERSITY OF MAINE, Orono, ME  
BA, May 1980, Philosophy and Sociology - with High Distinction  
BSW in Social Welfare from the Council On Social Work Education (CSWE)

### CERTIFICATIONS:

NEW HAMPSHIRE BOARD OF MENTAL HEALTH PRACTICE  
LICSW – Licensed Independent Clinical Social Worker, November 1995

ACADEMY OF CERTIFIED SOCIAL WORKERS  
ACSW December 1987, Silver Springs, MD

EYE MOVEMENT DESENSITIZATION REPROCESSING (EMDR)  
Specialized Trauma Treatment. Trained in Level I EMDR, Nov. 2000

### WORK:

#### EXPERIENCE:

#### EXECUTIVE DIRECTOR

National Alliance On Mental Illness, NAMI NH, Concord NH  
Statewide organization dedicated to improving the lives of those impacted by mental illness and Connect Suicide Prevention Program. Responsible for all aspects of the organization including financial, personnel, program development and implementation, public policy, advocacy, grant writing and fundraising. Reports to the Board of Directors. May 2011-present.

#### DIRECTOR CONNECT SUICIDE PREVENTION PROGRAM

National Alliance On Mental Illness, NAMI NH, Concord, NH  
Responsible for development and implementation of the Connect Suicide Prevention Project including program design, community organization, and developing statewide protocols for responding to suicide incidents. Other duties involve grant writing, marketing, conducting trainings, providing technical assistance to military, communities, coalitions and key stakeholders. Serve as a member of NH Suicide Prevention Council which oversees implementation the NH Suicide Prevention State Plan. January 2003 – May 2011.

#### DIRECTOR OF DEVELOPMENT

Familystrength, Concord, NH  
Duties included fund-raising, grant writing, board development, marketing, public relations and publishing newsletter. Other responsibilities included participation on agency management team and program development. March 1999 - January 2003.

#### DIRECTOR OF SUPPORT SERVICES/DIRECTOR OF ADULT SERVICES

Genesis The Counseling Group, Laconia, NH  
Senior management position involving complete administrative and clinical responsibility for seven programs with a combined thirty five full time staff. Programs included residential, vocational, case management/outreach and office based treatment modalities. Responsibilities included establish and monitor program goals, develop and implement policy and procedures, oversee budget and personnel issues. Also supervised regional 24/7 psychiatric emergency services program covering Belknap and Southern Grafton County. July 1997- March 1999-

### COMMISSIONS & COMMITTEES:

#### GOVERNOR'S COMMISSION ON MEDICAID MANAGED CARE:

Appointed position on twelve member commission to review and advise the Governor on the implementation of Medicaid Managed Care in New Hampshire. April 2012- present

#### STEERING COMMITTEE MEMBER

National Suicide Prevention Lifeline, Mental Health Association of New York City

Steering Committee members provide the Lifeline's primary administrators with expert guidance on the issues that affect the network. Members provide recommendations and advice that support the Lifeline's mission and work to enhance its capacity to serve persons throughout the US who potentially could be suicidal. October 2008- present

**NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION:**

Member of the Military and Veteran subcommittee, Survivor of Suicide Loss Committee and Sustainability Committee examining and making recommendations for implementation of the National Strategy For Suicide Prevention November 2011- present

**VOLUNTEER  
EXPERIENCE:**

**CONCORD HOSPITAL MEDICAL ETHICS COMMITTEE**

Community member of a multidisciplinary hospital ethics committee reviewing policies and procedures as well as individuals case reviews to offer guidance and recommendations December 2011- present

**WINNIPESAUKEE RIVER TRAIL ASSOCIATION**

Member of a small steering committee that has secured over \$700,000 in funding for a Multi-use rail to trail that parallels the Winnepesaukee River. Assisted with community organization, landowner negotiations, publicity, special events, grants and fund-raising. October 1998- present

**FOUNDER.**

Friends of the Winnepesaukee River, Tilton, NH.

Established environmental advocacy group for the Winnepesaukee River Watershed.

Responsibilities include: community organizing, writing press releases, lobbying at state and local levels, attending public hearings organizing events etc. December 1987 – present.

**FOSTER PARENT.**

New Hampshire Division of Children Youth and Families, Laconia, NH

Licensed Foster Home. October 1997- July 2008.

**BOARD OF DIRECTORS.**

New Beginnings – A Woman's Crisis Center, Laconia, NH.

Member of the organizational steering committee, and Board of Directors for agency serving victims of domestic violence and sexual assault in Belknap County. Duties included grant writing, membership development, writing press releases, fund raising, and policy development, served as Board Vice Chair. December 1990- April 2001.

**AWARDS:**

**LEADERSHIP AWARD:** NH Psychiatric Society

For Leadership in service to people with mental illness May 2014

**SOCIAL WORKER OF THE YEAR:** National Association of Social Workers NH Chapter

For significant contributions to the profession and society. March 2009

**COIN OF EXCELLENCE:** NH National Guard Adjutant General Major Gen. Kenneth Clark

Presented for technical assistance and consultation in development of NH National Guard Suicide Prevention Program February 2009

**CASE MANAGER OF THE YEAR - NAMI NH National Alliance For The Mentally Ill.**

For outstanding services and advocacy for individuals with mental illness and their families.

October 1991

**SENIOR SKULL HONOR SOCIETY – University of Maine for outstanding leadership, scholarship and exemplary citizenship 1979.**

**REFERENCES:**

Available upon request.

Steering Committee members provide the Lifeline's primary administrators with expert guidance on the issues that affect the network. Members provide recommendations and advice that support the Lifeline's mission and work to enhance its capacity to serve persons throughout the US who potentially could be suicidal. October 2008- present

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**REFERENCES:**

Available upon request.

1. The first part of the document is a list of names and addresses.

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9. The ninth part is a list of names and addresses.

## **Brian S. Huckins**

### **Supervisor, Long Term Services and Supports**

Healthcare Professional with strong background in the development and delivery of services of proactive care for people who need assistance with behavioral health, developmentally disabilities, and/or medically frail conditions. Skills include development and implementation of policies, procedures, care methods, and care coordination. Unique understanding of broad services programs, state funding, provider network and waived services for all ages of population. Well regarded for recruiting and developing staff in all phases of care delivery including consumer outreach, service agreement development and data tracking.

#### **Experience**

##### **NAMI New Hampshire (National Alliance on Mental Illness)**

**Concord, New Hampshire**

*NAMI New Hampshire is a grassroots non-profit dedicated to improving the lives of people affected by mental illness.*

##### **Director of Children and Youth Programs**

**(12/16-Present)**

Provides overall leadership for the development, implementation, and evaluation of services for families of children and youth with Serious Emotional Disturbance (SED).

- Coordinates and promotes training and educational programs for children, youth and their families/caregivers.
- Promotes the “family perspective” and knowledge of SED through public presentations and professional trainings; provide educational materials and speak to various community groups about children’s mental health issues and NAMI NH’s position on the issues.
- Participates in programs that eliminate stigma and end discrimination regarding mental health for children, youth and their families.
- Services all contracts relating to the provision of mental health training which address the needs of children, youth and their families.
- Supervises the collection and organization of statistical data for the benefit/obligation of program quality improvement; grants and contract requirements; and assure required reports are timely and accurate.
- Serves as the liaison/spokesperson between NAMI NH and other organizations concerned with services to the SED population and promote the NAMI NH brand in all venues.
- In coordination with the Executive Director and CFO, develops and oversees a program budget and all relevant grants/contracts.
- Advocates on behalf of youth with SED and their families/caregivers at local, regional and state levels by actively participating on various committees and/or testifying at hearings.
- Represents NAMI NH and actively participate with the NH Children’s Behavioral Health Collaborative and various local, regional, state and national venues that pertain to health and mental health services for children with SED and their families.

##### **New Hampshire Healthy Families**

**Bedford, New Hampshire**

*NH Healthy Families ([www.NHhealthyfamilies.com](http://www.NHhealthyfamilies.com)) is underwritten by Granite State Health Plan, Inc. Granite State Health Plan is a wholly-owned subsidiary of Centene Corporation providing coordinated healthcare, behavioral health, pharmacy, vision, and transportation services to members in New Hampshire’s Medicaid Care Management Program.*

##### **Long Term Services and Support Care Coordination Supervisor**

**(9/15-11/16)**

Department responsibility to develop staffing to support Long Term Services and Supports for Medicaid eligible members. This Medicaid eligibility includes: CFI, DD, ABD, IHW, Nursing Homes and DCYF.

- Managed the High Touch Process for members who utilized NH Medicaid waived services connected with developmental disability services, elder services, and children’s special medical services.
- Participated and case presentation at weekly Medical Management Clinical Rounds for entire team, including medical and pharmacy directors.
- Completed Home Health Service Assessments in member’s homes in collaboration with home health service agencies.
- Management and documentation of cases through TruCare and CRM data systems, evaluating post discharge, hospitalization, prior authorization and utilization review.



- Participated in the development of practices and policies for submittal of NH Medicaid state planned autism treatment services.
- Developed the preliminary policies and procedures in anticipation of the start of Long Term Services and Supports.
- Played key role NCQA audits ensuring that quality standards and Federal Requirements are met.

**START (Systemic, Therapeutic, Assessment, Resources, and Treatment) Concord, New Hampshire**

*START ([www.centerforstartservices.org](http://www.centerforstartservices.org)) is a national initiative that strengthens efficiencies and service outcomes for individuals with intellectual/developmental disabilities and behavioral health needs in the community.*

**Central Collaborative Team Leader and START Coordinator**

**(4/10- 9/15)**

Provided clinical and systematic leadership in the development of START Services in NH. These services support individuals who experience developmental disabilities and co-existing behavioral health disorders.

- Supervised NH START Coordinator Collaborative (Concord, Manchester, Nashua and Keene)..
- Formalized preventative strategies to keep individuals with developmental disabilities out of crisis, emergency rooms and NH Hospital.
- Completed health screening tools as part of work with Dartmouth Medical Center and UMass Medical Center's IDD Clinics.
- Established community linkages and serves as liaison to mental health providers, local medical providers and other community partners.
- Worked in close collaboration with the Center for START Services and the Bureau of Developmental Disabilities to identify systems, trainings, service and other needs and insure that the fidelity to the START model.
- Provided clinical and systemic leadership to the Central Collaborative.
- Championed the development of the START Center in Boscawen, NH.
- Provided clinical on-call support.
- Developed implementation of START Center Outreach Supports.
- Tracked monthly statistics and data regarding START Center residency rates.
- Wrote START Center admission and discharge plans, Comprehensive Service Evaluations and Cross System Crisis Plans.

**New Hampshire Autism Council**

**Concord, New Hampshire**

*The New Hampshire Council on Autism Spectrum Disorders ([www.nhcouncilonasd.org](http://www.nhcouncilonasd.org)) was created by the NH Legislature in 2008 to coordinate supports and services for individuals and their families.*

**Chair**

**(9/08-8/16)**

Charged with providing state-wide coordinated leadership in addressing the healthcare, education, and service needs of individuals who experience autism or a related disability.

- Lead council meetings and agendas.
- Charged with yearly report out to NH State Legislation and Governor.
- Managed grant funding.
- Coordinated and testified for and against autism related laws in the NH State Government.
- Co-developed Connor's Law.
- Co-development the NH Autism Registry.
- Assisted in the coordination of the NH State Needs Assessment and State Plan for Autism.
- Hosted annual seminar on ASD for professional development to over 400 professionals.

**Community Bridges**

**Concord, New Hampshire**

*Community Bridges ([www.communitybridgesnh.org](http://www.communitybridgesnh.org)) advances the integration, growth and interdependence of people with disabilities in their home communities in ways that promote their ability to have positive control over the lives they have chosen for themselves.*

**Individual and Family Support Planning Specialist/Supervisor****(9/06– 1/11)**

Provided individual, group supervision and coaching to case management department.

- Ensured He-M 503 regulations were met by case management department.
- Ensured individual's Projected Service Needs (Bureau of Developmental Services) was maintained and update.
- Managed individual budgets, requests for proposals, and formal service needs for Community Participation Services, Supported Employment, and Residential Services.
- Participated in decision making for allocation of funding for DD, ABD, and IHS waivers.
- Participation and care coordination in Clinical Rounds for individuals in crisis, experiencing severe persistent mental illness and/or forensic support needs.
- Implemented orientation/training of staff, including designing group trainings for person centered planning, natural resources, service development, and respite.

**Education****Granite State College**

BA in Human Services, anticipated graduation 08/2017.

**Workshops**

- NH Leadership graduate, University of New Hampshire Institute on Disability
- NH Advanced Leadership graduate, University of New Hampshire Institute on Disability
- Education Advocate graduate, Parent Information Center
- Professional Presentations: Perspectives on Autism at the Carrier Art Center and NH Public Radio Interview on Autism Awareness Month (4/15) (<http://nhpr.org/post/diagnoses-rise-forum-explores-perspectives-autism>)

# Patrick A. Roberts

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## EDUCATION

**Counseling M.Ed.** University of New Hampshire, Durham, NH, May 2007 to May 2009

- Overall GPA 3.83/4.0
- **Relevant coursework:** Theory and Practice of Counseling, Psychology of Career and Personal Development, Group Counseling, Psychological Disorders – Human Development, Society and Culture in Counseling

**Justice Studies M.A.**, University of New Hampshire, Durham, NH, January 2005 to September 2006

- Overall GPA 3.90/4.0
- **Relevant coursework:** Violence in the Family, Children & the Law, Organizational Leadership, Evaluation of Social Programs, Quantitative Research Methods

**Psychology and Justice Studies B.A.**, University of New Hampshire, Durham, NH, August 2001 to May 2005

- Overall GPA: 3.42/4.0 Within Major: 3.75/4.0
  - **Relevant coursework:** Behavioral Analysis, Personality Psychology, Abnormal Psychology, Behavior Culture and Contemporary Society.
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## WORK EXPERIENCE

**Coordinator of Program Evaluation and Improvement** – National Alliance on Mental Illness: New Hampshire, Concord, NH, 2006 - Present

- Collect, enter, analyze, and manage program data
- Provide recommendations for program improvements based on evaluation results
- Develop new evaluation tools
- Ensure compliance with evaluation requirements of grants/contracts
- Conduct extensive literature reviews to support new and existing programs
- Coordinate with outside evaluators to ensure that data collection activities are in compliance with Institutional Review Board requirements
- Participate in state workgroups to improve the capacity of data surveillance systems

**Evaluation Consultation** - Antioch University New England Center for Behavioral Health Innovation, 2013 – Present

- Collaborate on evaluation of federal grants including Garrett Lee Smith Suicide Prevention, FAST Forward (System of Care), Safe Schools Healthy Students, and Project AWARE
- Collect and submit National Outcome Measure and Infrastructure Development, Prevention & Mental Health Promotion data on a quarterly basis
- Develop and maintain program data dashboards
- Interface with multi-site evaluation teams for federal grants and respond to data and reporting requests

**Office Assistant** –The Office of International Students and Scholars – UNH, Durham, NH, 2003-2006

- Performed general administrative duties i.e., Filing documents, data entry, preparation of correspondence, preparation of event materials, website maintenance, etc.
- Provided information to ensure that students maintained appropriate immigration status
- Assisted with training/supervision of new staff.
- Acted as International Student Orientation Leader for newly arrived international students

## RECENT PUBLICATIONS/PRESENTATIONS

- Co-author: Tremblay, G.C., Fauth, J., Erdmann, J., Roberts, P. (2015, November). *Maximizing Practitioner Utility of Data Dashboards*. Paper presented at the annual meeting of the American Evaluation Association, Chicago, IL.
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### ***Patrick Roberts, MA, MEd, Coordinator of Program Evaluation and Improvement:***

Patrick Roberts received his BA in Psychology and Justice Studies from the University of New Hampshire in May of 2005, his MA in Justice Studies from the University of New Hampshire in September of 2006, and his MEd in Counseling in 2009 from the University of New Hampshire. Since September 2006 he has been employed at NAMI NH. He oversees the internal evaluation and evaluation reporting of all NAMI NH programs, and coordinates with the state and national evaluators for the NH's Garrett Lee Smith, FAST Forward (System of Care), Safe Schools Healthy Students, and Project AWARE SAMHSA grants. Mr. Roberts also maintains the social media pages and websites for NAMI NH and NAMI NH's Connect Suicide Prevention Program. He is a member of the NH Research and Evaluation Group, a special member section of the NH Public Health Association, and chairs the NH Suicide Prevention Council Data Subcommittee.

# SUSAN L. STEARNS

*Mental Health Executive & Development Professional*

## QUALIFICATIONS

Solid background in non-profit development & administration

Proven leadership skills and advocacy experience

Recognized expert in development and grant writing

Excellent written and oral communicator

Knowledgeable in program development and evaluation

Experienced working with boards and volunteers

Ability to work well with diverse individuals and groups

Certified mediator and victim advocate

Professional educator/trainer

Broad understanding of abuse, poverty, disability and family issues

## WORK EXPERIENCE

- 2016- *Deputy Director*, NAMI New Hampshire, Concord.
- 2013-2016 *Director of Philanthropy*, NAMI New Hampshire, Concord.
- 2007-2013 *Director of Development*, Greater Nashua Mental Health Center at Community Council, New Hampshire.
- 2005-2007 *Director of Proposal Development*, Harbor Homes, Inc., Nashua, New Hampshire.
- 2004-2005 *Executive Director*, part-time position, Dress for Success New Hampshire, Concord.
- 2004-2010 *Trainer*, contracted part-time, Guardian *ad Litem* Board, Concord, New Hampshire.
- 2001-2006 *Director*, part-time position, Coalition for Family Law & Mental Health, Disabilities Rights Center, Concord, New Hampshire.
- 2000-2013 *Grant & Marketing Writer*, Independent Contractor.
- 2000-2004 *Grant Writer/Development Associate*, part-time position, New Hampshire Association for the Blind, Concord.
- 1998-2000 *Executive Director*, Whole Village Family Resource Center, Plymouth, NH.
- 1993-1998 *Program Specialist*, New Hampshire Coalition Against Domestic & Sexual Violence, Concord.
- 1988-1993 *Administrative Director*, Task Force Against Domestic & Sexual Violence, Plymouth, New Hampshire.
- 1986-1988 *Assistant Ombudsperson*, Ombuds Office, University of Massachusetts, Amherst.

## EDUCATION

- 1986-1987 *Graduate work*. Consulting & Counseling Psychology, School of Education, University of Massachusetts, Amherst.
- 1986 *B.A. in English*. University of Massachusetts, Amherst.

## PUBLICATIONS

- 2012 **Medicaid Contracts Raise Questions Galore**, *Concord Monitor*, (with H. Hafez), April 18, <http://www.concordmonitor.com/article/324208/medicaid-contracts-raise-questions-galore>.
- 2009 **Reclaiming Our Future: A Pathway for Treating Co-Occurring Mental Health and Substance Use Disorders in New Hampshire's Adolescents and Young Adults**, National Alliance on Mental Illness – New Hampshire (primary author), [www.naminh.org/documents/NAMIReclaimingOurFuture.pdf](http://www.naminh.org/documents/NAMIReclaimingOurFuture.pdf).
- 2008 **Raising Matthew: A Mother Reflects on Medicating Her Son**, *No Health without Mental Health*, Community Council of Nashua, (reprinted in *Genesis Times*, [www.genesisbh.org/pdf/Genesis%20Times%20-%202009.pdf](http://www.genesisbh.org/pdf/Genesis%20Times%20-%202009.pdf)).
- 2008 **Community Council – The Community's Mental Health Center**, Progress Edition, Nashua Telegraph, [www.print2webcorp.com/news/Nashua/HealthandEducation/20080304/p28.asp?ad=p28\\_a4.htm&t=a](http://www.print2webcorp.com/news/Nashua/HealthandEducation/20080304/p28.asp?ad=p28_a4.htm&t=a).
- 2007 **Coming in from the Cold: Creating Solutions to Homelessness for People with Disabilities**, *RAP Sheet: The Latest in Disability Research, Advocacy, Policy, and Practice*, (for P. Kelleher), [www.drcnh.org/RapSpring07.pdf](http://www.drcnh.org/RapSpring07.pdf).
- 2006 **Guidelines for Parents: Planning for Appropriate Care for your Children**, Coalition for Family Law & Mental Health.
- 2005 **The Struggle for Justice: Seeking Legal Equity for Parents with Mental Illness**, *RAP Sheet: The Latest in Disability Research, Advocacy, Policy, and Practice*, Winter Issue, [www.drcnh.org/rapsheetwinter05.pdf](http://www.drcnh.org/rapsheetwinter05.pdf).
- 2003 **Best Practice Standards for Adequate Assessment of Parenting Competency**, Coalition for Family Law & Mental Health, [www.drcnh.org/ParentalAssessment.pdf](http://www.drcnh.org/ParentalAssessment.pdf).
- 2003 **Pointers for Legal Professionals Regarding Family Law Issues and Parents with Physical or Mental Illness**, Coalition for Family Law & Mental Health, [www.drcnh.org/ParentalPointers.pdf](http://www.drcnh.org/ParentalPointers.pdf).
- 1998 **Stalking: A guide for victims**, New Hampshire Coalition Against Domestic & Sexual Violence.
- 1997 **Sexual Assault**, *A Legal Handbook for Women in New Hampshire*, New Hampshire Commission on the Status of Women, [www.unh.edu/womens-commission/legal-handbook/sexual-assault.html](http://www.unh.edu/womens-commission/legal-handbook/sexual-assault.html).
- 1994 **Mediation and Domestic Violence: Considerations for Mediators and Battered Women**, *New Hampshire Bar Journal*, Vol. 35, No. 2, p. 32, June.

## RECENT PROFESSIONAL ACTIVITIES

**Member, Governor's Commission on Disability**, appointed by New Hampshire Governor Hassan (since 2016).

**Member, Board of Trustees**, Taylor Community, Laconia (since 2016).

**Member, Justice Involved Veterans Task Force**, New Hampshire (since 2013).

**Facilitator, Coalition on Mental Health & Justice**, Hillsborough County (since 2009).

**Member & Past President, Board of Directors**, Genesis Behavioral Health, Laconia (2007-2016).

**Member, Criminal Justice/Mental Health Work Team**,  
Commission to Develop a Comprehensive State Mental Health Plan, Concord (2007-2008).

**Member, Task Force on Family Law**, appointed by New Hampshire Governor Shaheen (2002-2004).

# TAMMY E. MURRAY, CIA

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**SUMMARY:** Expertise in accounting systems development, fiscal management, financial reporting and strategic planning. Proven record of developing and implementing financial and operational controls that improve P&L performance. Successful track record in building strong organizational cultures, identifying business opportunities, and delivering positive results. Known for ability to conceptualize and successfully implement human resource systems for sustained business growth. Core competencies include:

Financial and strategic planning	Cash flow management
Auditing and compliance	Employee relations
Budget development and management	Business process improvement
Federal grant management	Numerous accounting software programs

## **PROFESSIONAL EXPERIENCE:**

### **Chief Financial Officer**

*NAMI New Hampshire, Concord, New Hampshire*

- Integral member of senior management team leading complex nonprofit organization with multiple funding sources including federal and state contracts and an affiliated structure with diverse program areas delivered nationally.
- Developed and utilized forward-looking, predictive models and activity-based financial analyses to provide insight into the organization's operations and business plans while managing organizational risk.
- Reorganized accounting functions, investigated and implemented sophisticated fund accounting software, and achieved balance sheet creditability through proper accounting policies and procedures.
- Implemented controls for A/P, A/R and G/L, ensuring accuracy, consistency and compliance with all funders requirements including the Office of Management and Budget Uniform Administrative requirements, cost principles and audit requirement for federal awards.
- Achieved unqualified audit opinions, with no material weaknesses or deficiencies during entire tenure of position.
- Developed a financial measurement standard and developed system to monitor performance against goals including budgeting, forecasting and business models.
- Engaged finance committee in investment, and asset management, growing activities by \$1M.
- Secured line of credit to meet short term cash flow deficiencies.
- Created the organizations first financial and human resources policies and procedures manuals.
- Led and executed real estate acquisition and renovation of organization's facilities, reducing overhead expenses and enhancing organization's visibility.
- Developed and administered employee benefits including 403(b) plans for all employees.
- Identified IT system upgrade requirements to accommodate expanding growth, and compliance.

**RELEVANT PRIOR EXPERIENCE:**

**Field Operations Manager**

*OfficeMax, Incorporated, Cleveland, Ohio.*

**Senior Internal Auditor**

*OfficeMax, Incorporated, Cleveland, Ohio.*

**Collection Services Manager**

*Balfour Company, Attleboro, Massachusetts.*

**Senior Auditor/Accountant**

*Balfour Company, Attleboro, Massachusetts.*

**Office Manager**

*C. Fisher Manufacturing, Smithfield, Rhode Island.*

**Staff Accountant**

*The Jan Companies, Cranston, Rhode Island.*

**EDUCATION & PROFESSIONAL DESIGNATION:**

*BRYANT UNIVERSITY, Bachelor of Science in Business Administration  
Major: Accounting*

*CERTIFIED INTERNAL AUDITOR*