

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



OMB No 1545-0052

**Return of Private Foundation** 

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2015, or tax y	year beginning 01-0	01-2015	, aı	nd ending 1	2-31-2015	
	e of four					A Employer id	entification numb	er
		OF MENTAL HYGIENE TY OF NEW ORLEANS				72-0446138		
Num	ber and	street (or P O box number if mail is	not delivered to street address;	) Room/suite		<b>B</b> Telephone nur	nber (see instruction	is)
10	55 ST CI	HARLES AVENUE				(504) 566-1852		
		state or province, country, and ZIP o	or foreign postal code			<b>C</b> If exemption	application is pendin	ng, check here 🕨 🦵
<b>G</b> CI	neck al	that apply	∏Initial return of a f ∏Amended return ge ∏Name change	ormer public charity		<b>2.</b> Foreign oi	ganizations, check h ganizations meeting k here and attach co	the 85%
		pe of organization				E If private for	indation status was n 507(b)(1)(A), chec	terminated
<b>I</b> Fair	r marke year <i>(fi</i>	et value of all assets at end rom Part II, col. (c), \$ 19,740,825	JAccounting method Other (specify) (Part I, column (d) must	Cash ▼Accrual			ntion is in a 60-mont n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue a (The total of amounts in columns	(b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach					
	2	schedule)						
	3	Interest on savings and temp	onrary cash investments					-
	4	Dividends and interest from s	•	256,700		256,700		
	5a	Gross rents		,		<u> </u>		
	Ь	Net rental income or (loss) _						
Revenue	6a	Net gain or (loss) from sale o	f assets not on line 10	1,725,040			İ	
	ь	Gross sales price for all asse	ets on line 6a					
ě	7	Capital gain net income (fron	n Part IV, line 2)			1,725,040		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	Ь	Less Cost of goods sold.						
	C	Gross profit or (loss) (attach	·	<b>6€</b> 14.726		14 426		
	11	Other income (attach schedu	•			14,436		
	12	Total.Add lines 1 through 11		1,996,476 129,417		1,996,176 32,354		97,063
	13 14	Compensation of officers, dir Other employee salaries and		51,500		32,334		51,500
.0	15	Pension plans, employee ben		18,713		2,262		16,451
φ	16a	Legal fees (attach schedule).		·		·		,
Expenses	ь	Accounting fees (attach sche				3,020		9,058
	c	Other professional fees (atta				109,337		2,643
ĕ	17	Interest						
rat	18			<b>%</b> 18,935				
and Administrative	19	Taxes (attach schedule) (see Depreciation (attach schedul	•					
₫	20	Occupancy						21,243
A	21	Travel, conferences, and mee						11,425
ğ	22	Printing and publications.	-	4,276				4,276
	23	Other expenses (attach sche		27,618		893		26,725
Operating	24	Total operating and administ		_				1
ě		Add lines 13 through 23	-	408,830		147,866		240,384
ŏ	25	Contributions, gifts, grants p		1,730,687				1,499,512
	26	Total expenses and disburser	nents.Add lines 24 and	2,139,517		147,866		1,739,896
	27	Subtract line 26 from line 12		2,139,51/		147,000		1,/39,896
	a	Excess of revenue over expe		-143,041				
	"   b	Net investment income (If ne				1,848,310		
	c	Adjusted net income(if negat	- '					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		(a) Fam Manhat Value
$\equiv$	1	Cash—non-interest-bearing	(a) Book Value 99,103	<b>(b)</b> Book Value 125,583	(c) Fair Market Value 125,583
		Savings and temporary cash investments			
	2	Accounts receivable	3,010,730	770,302	770,302
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	_	Less allowance for doubtful accounts -			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts 🟲			
ا د	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	18,769	3,750	3,750
AS	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	18,391,376	17,699,718	17,699,718
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	329,451	905,339	905,339
	14	Land, buildings, and equipment basis 🕨 21,995			
		Less accumulated depreciation (attach schedule) ▶ 17,888	5,752	4,107	4,107
	15	O ther assets (describe 🟲)	8,937	11,966	11,966
	16	<b>Total assets</b> (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	22,464,326	19,740,825	19,740,825
$\Box$	17	Accounts payable and accrued expenses	25,240	27,233	
	18	Grants payable	1,482,833	1,714,008	
<u>~</u>	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
ᄀ	22	Other liabilities (describe 🛌)			
	23	Total liabilities(add lines 17 through 22)	1,508,073	1,741,241	
$\neg$		Foundations that follow SFAS 117, check here 🕨 🔽			
8		and complete lines 24 through 26 and lines 30 and 31.			
릙	24	Unrestricted	20,956,253	17,999,584	
훘	25	Temporarily restricted			
	26	Permanently restricted			
틧		Foundations that do not follow SFAS 117, check here			
or Fund Balances		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
휫	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
₹	30	Total net assets or fund balances(see instructions)	20,956,253	17,999,584	
	31	Total liabilities and net assets/fund balances(see instructions)	22,464,326	19,740,825	
Pa	rt III				
1		Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must a	aree	
_		with end-of-year figure reported on prior year's return)	, ,,		20,956,253
2		Enter amount from Part I, line 27a		<u> </u>	-143,041
3		Other increases not included in line 2 (itemize)		3	113,071
4		Add lines 1, 2, and 3			20,813,212
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	2,813,628
		Decreases not increace in tille & (Itellike) F			_,0 _ 0 _ 0

Part IV Capital Gains and Losses for Tax on Investment Income

		ınd(s) of property sold (e g , re e, or common stock, 200 shs	,	How acquired P—Purchase (b) D—Donation	ט ן	ate acquired no , day, yr )	Date sold (d) (mo , day, yr )
1 a	PUBLICLY TRADED SECU	JRITIES		Р	20	15-06-30	2015-06-30
b	PUBLICLY TRADED SECU	JRITIES		Р	20	14-06-30	2015-12-31
d							
e							
	e) Gross sales price	Depreciation allowed  (f) (or allowable)		or other basis expense of sale			n or (loss) (f) minus (g)
a	839,24	0		647,17	5		192,065
b	5,847,53	10		4,314,55	5		1,532,975
d							
	mnlete only for accets show		d by the foundation	on 12/31/69	+	Counc (Col	(h) gain minus
		A djusted basis		ess of col (ı)	ے 🖯		(h) gain minus ot less than -0-) <b>or</b>
(i)	FMV as of 12/31/69	(j) as of 12/31/69		col (j), if any	(1)		(from col (h))
a							192,065
b							1,532,975
d							
		+			1		
2	Capital gain net income or		If gain, also enter i If (loss), enter -0- ns 1222(5) and (6)	in Part I, line 7	2		1,725,040
J	· -	, line 8, column (c) (see instru			3		192,065
Part	V Qualification Unde	r Section 4940(e) for R	educed Tax on	Net Investme		come	1,2,000
(For opt If section Was the	tional use by domestic privat on 4940(d)(2) applies, leave e foundation liable for the sec	e foundations subject to the se	ection 4940(a) tax	on net investment	ıncom		┌ Yes ┌ No
<b>1</b> E n	ter the appropriate amount in	each column for each year, se	ee instructions befo	re making any ent	ries		
	(a) e period years Calendar or tax year beginning in)	(b) djusted qualifying distributions	(c) Net value of nonchar	itable-use assets	ı	(d) Distributio (col (b) divideo	n ratio
	2014	1,347,028		22,465,219			0 05996
	2013	1,092,858		20,880,466			0 05234
	2012	1,432,431		19,832,437			0 07223
	2011	831,751		18,050,798			0 04608
	2010	1,012,278		17,299,077	-		0 05852
2					2		0 289121
3		for the 5-year base period—div undation has been in existence			3		0 057824
4		charitable-use assets for 2015			4		21,420,475
5			•		5		1,238,618
6		nt income (1% of Part I, line 2		<b>—</b>	6		18,483
-	= /5 5		,		~		10,703

the Part VI instructions

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

1,257,101

1,739,896

7

	990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4040(-)	or 4049		10 -6	4ha ina			age <b>4</b>
			, or 4948—see p	age	18 01	tne inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	<b>-</b>							
	Date of ruling or determination letter			}					
b	Domestic foundations that meet the section 4940(e) requirements in Part	V, check	<		1			18	3,483
	here 🕨 🔽 and enter 1% of Part I, line 27b			1					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organ Part I, line 12, col (b)	ızatıons	enter 4% of						
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								
3	3 Add lines 1 and 2						18	3,483	
4	enter -0-) 4								
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less	, enter - (	0	L	5			18	3,483
6	C redits/P ayments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	18,7	69					
b	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6с	20,0	00					
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d			L	7			3.8	3,769
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here $\overline{\mbox{$arphi$}}$ if Form	n 2220 ı	s attached 🥵	L	8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed			▶	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amo	unt over	paid	•	10			2 (	0,286
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	20,286	Refunded	•	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, sta	ate, or lo	cal legislation o	r dic				Yes	No
	it participate or intervene in any political campaign?			•			1a	$\sqcup$	No
b	Did it spend more than \$100 during the year (either directly or indirectly) fo	r politica	al purposes (see	e Ins	truction	ons			
	for definition)?			•		•	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activiti	es and c	opies of any mate	erials	5				
	published or distributed by the foundation in connection with the activities.								
_	Did the foundation file Form 1120-POL for this year?			• •		•	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imp		= -						
_	(1) On the foundation  \$ (2) On foundation manager	. –							
е	Enter the reimbursement (if any) paid by the foundation during the year for p	onticale	expenditure tax	Шрс	seu				
2	on foundation managers <b>&gt;</b> \$ Has the foundation engaged in any activities that have not previously been in	raported	to the IDS2				2		No
2	If "Yes," attach a detailed description of the activities.	reported	to the INS.	•					NO
3	Has the foundation made any changes, not previously reported to the IRS, ii	n ite dov	erning instrume	nt a	rticles				
,	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a co	=	=		rtities	•	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more						4a	Yes	
. <u></u> Ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_					4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction						5		No
_	If "Yes," attach the statement required by General Instruction T.		,	-					
6	Are the requirements of section 508(e) (relating to sections 4941 through	4945)sa	atisfied either						
	By language in the governing instrument, or	,							
	• By state legislation that effectively amends the governing instrument so	that no	mandatory dırec	tion	S				
	that conflict with the state law remain in the governing instrument? . $$ .						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year	ar? <i>If "Ye</i>	s," complete Part	t II,	col. (c)	),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	d (see ın	structions)						
=	► LA			-					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form		·		1		0.1		
_	General (or designate) of each state as required by General Instruction G?		•				8b		No
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015  If "Yes," complete Part XIV	(see ins	cructions for Pal	ıt XI	v ) r		9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,	· · ·	h a schedule lict	una t	heir n	· · ·	<b> </b>	$\vdash$	140
	and addresses.	•	u sancadie iisti	y L	110		10		No
		-				-			

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address Neww imhno org		•	
14	The books are in care of ►RONALD McCLAIN Telephone no ►(504	1566	-1852	
	Located at ►1055 ST CHARLES AVENUE NEW ORLEANS LA  ZIP+4 ►70130	, , , , ,	1002	
			<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	• •	-	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	16		Na
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
_	Organizations relying on a current notice regarding disaster assistance check here			
·	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		NO
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
-	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V			
	If "Yes," list the years > 20			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2015.)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4ь	1	No

Pai	Statements Rega	rding Activities for	· Wr	nich Form 4720	May	Be Required ( <i>Cont</i>	tinue	ed)		
5a	During the year did the foundatio	n pay or incurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e	))?	√ No			
	(2) Influence the outcome of any	specific public election (	(see	section 4955), or to	carı	ry				
on, directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individu	al for travel, study, or otl	ners	ımılar purposes?		┌ Yes रि	√ No			
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organization de	scrib	ped				
	in section 4945(d)(4)(A)? (s	ee instructions)				\ Yes \	√ No			
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No			
b	If any answer is "Yes" to 5a(1)-(	5), did <b>any</b> of the transac	tions	s fail to qualify under	r the	exceptions described in				
	Regulations section 53 4945 or	n a current notice regard	ling d	disaster assistance	(see	instructions)?		5b		No
	Organizations relying on a currer	t notice regarding disast	eras	ssistance check her	e		_			
С	If the answer is "Yes" to question									
	tax because it maintained expend	liture responsibility for th	he gr	ant?		T Yes [	√ No			
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	niums on				
	a personal benefit contract?						- No			
b	Did the foundation, during the yea	ar, pay premiums, directl	y orı	ndirectly, on a perso	onall	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter tı	ransaction? <b>\( Yes</b> \)	√ No			
b	If yes, did the foundation receive	•	-	•				7b		No
	Information Abou	t Officers, Director						l Emp	loyee	s,
	and Contractors	·		<u>,                                      </u>						
1	List all officers, directors, trustee	s, foundation managers a	nd t	heir compensation (	see i	nstructions).				
		Title, and average	(c)	Compensation( <b>If</b>		(d) Contributions to		Evnens		unt
	(a) Name and address	hours per week		not paid, enter	e	mployee benefit plans		•	e accou Illowanc	
		(b) devoted to position		-0-)		deferred compensation	L`´			
See	Additional Data Table									
		1								
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE.	,	
	(a)	Title, and aver	.2.00			Contributions to				
Nar	me and address of each employee		_	(c) Compensation	n	employee benefit			se acco	
	more than \$50,000	(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	otnera	illowand	es
NON	IE									
		<del></del>								
							1			
		<del> </del>								
							-			
<b>.</b>	I mumb an affect	<u> </u>				<u> </u>	-			
LOTA	I number of other employees paid of	vers50000.	_		_		1			

Part VIII Information About Officers, Directors, Trusto and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (		E"
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the number	of Expenses
rganizations and other beneficiaries served, conferences convened, research papers prod	uced, etc	Lxpelises
1		
2		
3		
4 Part IX-B Summary of Program-Related Investments (	see instructions)	
Describe the two largest program-related investments made by the foundation during	•	A mount
1	the tax year on lines I and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>•</b>

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	7	
	purposes		
а	A verage monthly fair market value of securities	1a	17,487,865
Ь	A verage of monthly cash balances	1b	4,232,169
c	Fair market value of all other assets (see instructions)	1c	26,641
d	<b>Total</b> (add lines 1a, b, and c)	1d	21,746,675
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	21,746,675
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	326,200
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	21,420,475
6	Minimum investment return. Enter 5% of line 5	6	1,071,024
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ► and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	1,071,024
2a	Tax on investment income for 2015 from Part VI, line 5   2a   18,483		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	18,483
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,052,541
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,052,541
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,052,541
Par	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		l
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,739,896
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,739,896
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	18,483
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,721,413
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

Ŀ	art XIII Undistributed Income (see insti	uctions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7		,		1,052,541
	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only			472,575	
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	From 2011				
c	From 2012				
d	From 2013				
е	From 2014				
f	<b>Total</b> of lines 3a through e				
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$1,739,896				
а	Applied to 2014, but not more than line 2a			472,575	
b	Applied to undistributed income of prior years (Election required—see instructions)				
C	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2015 distributable amount				1,052,541
	Remaining amount distributed out of corpus	214,780			
	Excess distributions carryover applied to 2015				
_	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	214,780			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7	Amounts treated as distributions out of				
Ī	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2010 not				
٥	applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2016.				
9	Subtract lines 7 and 8 from line 6a	214,780			
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014				
е	Excess from 2015 214,780				

	Private Operating Foundat	•			19)		
1a	If the foundation has received a ruling or determ						
	foundation, and the ruling is effective for 2015,						
b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2a	Enter the lesser of the adjusted net	omo from Part I or the minimum					
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total	
	year listed						
<b>b</b> 8	35% of line 2a						
c	Qualifying distributions from Part XII,						
	line 4 for each year listed						
d	Amounts included in line 2c not used						
	directly for active conduct of exempt activities						
e	Qualifying distributions made directly						
•	for active conduct of exempt activities						
	Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the						
	alternative test relied upon						
а	"Assets" alternative test—enter						
	(1) Value of all assets		1				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b	"Endowment" alternative test— enter 2/3		1				
-	of minimum investment return shown in						
	Part X, line 6 for each year listed						
C	"Support" alternative test—enter						
	(1) Total support other than gross						
	investment income (interest, dividends, rents, payments						
	on securities loans (section						
	512(a)(5)), or royalties)						
	(2) Support from general public						
	and 5 or more exempt organizations as provided in						
	section $4942(j)(3)(B)(iii)$						
	(3) Largest amount of support						
	from an exempt organization						
	(4) Gross investment income						
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in	
	assets at any time during the	<u>year—see ins</u>	tructions.)				
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation	
	before the close of any tax year (but only if they					ideloli	
b	List any managers of the foundation who own 10				large portion of th	е	
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest			
	Total Control Control Control City	Cabalanak	:t- B				
2	Information Regarding Contribution, Grant, Gift						
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation						
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei	
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed		
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed		
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e		
C	Any submission deadlines						
_	A						
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ	

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount			
Name and address (home or business)	or substantial contributor	recipient	Contribution				
a Paid during the year SEE SCHEDULE 1	NONE	501C3	MENTAL HEALTH	1,499,512			
VARIOUS NEWORLEANS,LA 70130			RESEARCH & SERVICES				
Total			▶ 3a	1,499,512			
<b>b</b> Approved for future payment							
SEE SCHEDULE 2	NONE	501C3	MENTAL HEALTH	1,088,767			
VARIOUS NEWORLEANS,LA 70130			RESEARCH AND SERVICES				
Total			▶ 3b	1,088,767			

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ring Activitie	•			Page <b>12</b>
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See
	Business code	Amount	Exclusion code	Amount	ınstructions )
a b					
c					
d e					
f					
g Fees and contracts from government agencies					
<ul><li>2 Membership dues and assessments</li><li>3 Interest on savings and temporary cash investments</li></ul>					
4 Dividends and interest from securities			14	256,700	
5 Net rental income or (loss) from real estate a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	211110	8,060	14	22,496	
<b>8</b> Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events			18	1,725,040	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a Other Income					300
b					333
c					
d e					
12 Subtotal Add columns (b), (d), and (e).		-8,060		2,004,236	300
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			:	13	1,996,476
Part XVI-B Relationship of Activities to	the Accom	=			
Line No. Explain below how each activity for wh the accomplishment of the foundation's instructions )					
11A Income associated with a charitable pro	gram related to	the Institute's exe	empt purpose		

Part X	VII	Information Re Noncharitable					nsactio	ns and	Relationship	s With			
		nization directly or in	ndirectly e	engage	ın any of	the following v						Yes	No
organı	zations	5?											
<b>a</b> Trans	fers fro	m the reporting foun	dation to	a noncl	harıtable	exempt organ	ızatıon of	f					
<b>(1)</b> C	ash.										1a(1)		No
<b>(2)</b> 0	theras	ssets									1a(2)		No
<b>b</b> Other	transa	ctions											
<b>(1)</b> S	ales of	assets to a noncha	rıtable exe	empt or	ganızatıo	n					1b(1)		No
<b>(2)</b> P	urchas	es of assets from a	noncharit	able ex	empt orga	anızatıon				•	1b(2)		No
<b>(3)</b> R	ental o	f facilities, equipme	nt, or othe	rasset	s						1b(3)		No
<b>(4)</b> R	eımbur	sement arrangemen	ts								1b(4)		No
<b>(5)</b> L	oans o	r loan guarantees.									1b(5)		No
<b>(6)</b> Pe	rformaı	nce of services or m	embership	or fun	draising s	olicitations.					1b(6)		No
<b>c</b> Sharır	g of fa	cilities, equipment, r	maılıng lıs	ts, oth	er assets,	, or paid emplo	yees.				<b>1</b> c		No
of the	goods, transa	r to any of the above other assets, or selection or sharing arra b) Amount involved	rvices giv angement	en by tl , show i	he reportı n column	ng foundation	If the fo	oundation in ods, other	received less th	an fair mark rices receive	et value ed		nts
(		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0)				. (-,	, , , , , , , , , , , , , , , , , , , ,			9		
	_						-						
	+												
	+												
	_												
	-												
descri	bed in s," con	Ation directly or indir section 501(c) of th nplete the following s (a) Name of organization	e Code (d schedule		an sectio		or in sect			 nption of relati	. ┌Ye	s V	No
1	he bes	penalties of perjury, it of my knowledge a ition of which prepar ****	nd belief,	ıt ıs tru	ie, correc		te Decla			nan taxpaye May t return	r) is bas he IRS di	sed on	all
	Sıg	nature of officer or ti	rustee			Date	— <b>,</b>	Title		below	he prepai nstr )२ 🗸		
_		int/Type preparer's Kirth M Paciera	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ►	PTIN P	002454	177	
Paid Prepar Use	er PA	rm's name ► ACIERA GAUTREAU	J & PRIES	T LLC	CPAS				Firm's EIN ►	1			
Only	3 2	rm's address ► 209 RIDGELAKE DR 30024982	. STE 200	META	IRIE, LA				Phone no (50	4)486-55	7 3		

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID FRANCIS	Director 0 00	0		
365 CANAL ST SUITE 3100 NEW ORLEANS,LA 70130				
J STOREY CHARBONNET	President & CEO	0		
639 LOYOLA AVENUE SUITE 2775 NEW ORLEANS,LA 70113	0 00			
ADRIAN L MORGAN	Director 0 00	0		
507 PACIFIC AVENUE NEW ORLEANS, LA 70114	0 00			
HON BERNADETTE D'SOUZA	Director 0 00	0		
421 LOYOLA AVENUE NEW ORLEANS,LA 70112	0 00			
JUDITH KIEFF	Director 0 00	0		
387 CROSS GATES BLVD SLIDELL,LA 70461	0 00			
MARTIN DRELL MD	Director 0 00	0		
1542 TULANE AVENUE RM 236 NEW ORLEANS,LA 70112	0 00			
Mahlon D Sanford	Director 0 00	0		
3501 N Causeway Blvd Ste 810 Metairie, LA 70002	0 00			
JILLA K TOMBAR	Director 0 00	0		
132 S MURAT ST NEW ORLEANS,LA 70119	0 00			
BEVERLY R NICHOLS	Treasurer	0		
7301 BURTHE ST NEW ORLEANS,LA 70118	0 00			
JULIUS E KIMBROUGH JR	Vice President	0		
4014 ORLEANS AVE NEW ORLEANS, LA 70119	0 00			
QI WIGGINS	Director 0 00	0		
610 ST ANDREW ST NEW ORLEANS, LA 70130				
SARAH NEWELL USDIN	Director 0 00	0		
3034 URSULINES AVENUE NEW ORLEANS, LA 70119	0 00			
RONALD McCLAIN	Executive Dir 40 00	115,500	13,917	
1055 ST CHARLES AVE STE 350 NEW ORLEANS, LA 70130	40 00			
AYANNA BUTLER	Director 0 00	0		
1010 COMMON ST SUITE 1400A METAIRIE,LA 70003	0 00			
ALLISON BOOTHE	Director 0 00	0		
1440 CANAL STREET TB-52 NEW ORLEANS,LA 70112				
ALAN FRANCO	Director 0 00	0		
809 JEFFERSON HWY JEFFERSON,LA 70121	0 00			
CAROL WISE	Secretary 0 00	0		
1021 STATE ST NEW ORLEANS, LA 70118				

# **TY 2015 Accounting Fees Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	12,078	3,020	0	9,058

### TY 2015 Explanation of Non-Filing with Attorney General Statement

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

**Software Version:** 2015v2.0

**Statement:** Louisiana's Attorney General's office does not require a private

foundation to submit a copy of its Form 990PF to the state office.

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491197002156

# **TY 2015 Investments Corporate Stock Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITIES	14,973,539	14,973,539
MUTUAL FUNDS	2,726,179	2,726,179

#### **TY 2015 Investments - Other Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	FMV	905,339	905,339

# TY 2015 Land, Etc. Schedule

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	21,995	17,888	4,107	4,107

#### **TY 2015 Other Assets Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
ACCRUED INVESTMENT INCOME	8,937	11,966	11,966

#### DLN: 93491197002156

## **TY 2015 Other Expenses Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BOOKS AND PUBLICATIONS	338			338
COMPUTER SUPPLIES AND SERVICES	8,888			8,888
DATA PROCESSING	1,274			1,274
INSURANCE- D&O	3,573	893		2,680
INSURANCE- OFFICE	3,241			3,241
MEMBERSHIPS	3,750			3,750
MISCELLANEOUS	860			860
POSTAGE	19			19
REPAIRS/SERVICE CONTRACTS	300			300
SUPPLIES	2,063			2,063
TELEPHONE	3,312			3,312

#### **TY 2015 Other Income Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
O ther Income	300		
Other Investment Income	14,436	14,436	

#### **TY 2015 Other Professional Fees Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXTERNAL CONSULTANTS	3,291	648	0	2,643
MANAGEMENT/INVESTMENT ADV FEES	108,689	108,689	0	0

#### **TY 2015 Taxes Schedule**

Name: INSTITUTE OF MENTAL HYGIENE

OF THE CITY OF NEW ORLEANS

**EIN:** 72-0446138

**Software ID:** 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Tax on Net Investment Income	18,769			
Unrelated Business Income Tax	166			

INSTITUTE OF MENTAL HYGIENE 72-0446138 DECEMBER 31, 2015

#### SCHEDULE 2

GRANTS AND CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT (FORM 990PF, PART XV)

		FOUNDATION		
RECIPIENT'S NAME	RELATIONSHIP	STATUS	PURPOSE OF GRANT	AMOUNT
Family Service of Greater New Orleans	None	501 (c) (3)	Mental Health Research & Services	125,000
Orleans Public Education Network	None	501 (c) (3)	Mental Health Research & Services	150,000
Silverback Society Mentoring Program	None	501 (c) (3)	Mental Health Research & Services	137,500
Tulane Cornerstone Support	None	501 (c) (3)	Mental Health Research & Services	28,390
Boy Scouts -ScoutReach	None	501 (c) (3)	Mental Health Research & Services	25,000
Covenant House	None	501 (c) (3)	Mental Health Research & Services	80,000
Ellis Marsalis- Counseling Services	None	501 (c) (3)	Mental Health Research & Services	75,000
LINKS - Pontchartrain Chapter	None	501 (c) (3)	Mental Health Research & Services	30,000
LSUHSC- Autism Spectrum	None	501 (c) (3)	Mental Health Research & Services	25,277
Tulane	None	501 (c) (3)	Mental Health Research & Services	232,600
Via Link	None	501 (c) (3)	Mental Health Research & Services	30,000
YAYA- Family Arts	None	501 (c) (3)	Mental Health Research & Services	25,000
Bayou Steppers- Silence is Violence	None	501 (c) (3)	Mental Health Research & Services	125,000
		·		·
				1,088,767

#### INSTITUTE OF MENTAL HYGIENE 72-0446138 DECEMBER 31, 2015

#### SCHEDULE 1

CONTRIBUTIONS, GIFTS, GRANTS PAID (FORM 990 PF PART 1, LINE 25 AND PART XV)

		FOUNDATION		
RECIPIENT'S NAME	RELATIONSHIP	STATUS	PURPOSE OF GRANT	AMOUNT
Children's Bureau	None	501 (c) (3)	Mental Health Research & Services	91,032
Family Service of Greater New Orleans	None	501 (c) (3)	Mental Health Research & Services	87,500
LA Center for Children's Rights	None	501 (c) (3)	Mental Health Research & Services	100,000
LA Partnership for Children and Families	None	501 (c) (3)	Mental Health Research & Services	18,750
Orleans Public Education Network	None	501 (c) (3)	Mental Health Research & Services	125,000
Childhood and Family Learning Foundation	None	501 (c) (3)	Mental Health Research & Services	25,000
City Year- Student Support	None	501 (c) (3)	Mental Health Research & Services	15,000
Harriet Tubman Charter School	None	501 (c) (3)	Mental Health Research & Services	20,000
KIDsmART	None	501 (c) (3)	Mental Health Research & Services	32,000
New Orleans College Prep	None	501 (c) (3)	Mental Health Research & Services	25,000
Restorative Approaches	None	501 (c) (3)	Mental Health Research & Services	32,050
Rethinkers	None	501 (c) (3)	Mental Health Research & Services	12,500
Silverback Society Mentoring Program	None	501 (c) (3)	Mental Health Research & Services	37,500
St Benedict the Moor	None	501 (c) (3)	Mental Health Research & Services	14,200
The Good Shepherd School	None	501 (c) (3)	Mental Health Research & Services	10,000
Tulane Cornerstone Support	None	501 (c) (3)	Mental Health Research & Services	28,390
Boy Scouts -ScoutReach	None	501 (c) (3)	Mental Health Research & Services	25.000
Cafe Reconcile	None	501 (c) (3)	Mental Health Research & Services	12,500
Children's Health Fund	None	501 (c) (3)	Mental Health Research & Services	12,500
College Track	None	501 (c) (3)	Mental Health Research & Services	25,000
Covenant House	None	501 (c) (3)	Mental Health Research & Services	32,000
Deep South Center for Environmental Justice	None	501 (c) (3)	Mental Health Research & Services	14,200
Ellis Marsalis- Counseling Services	None	501 (c) (3)	Mental Health Research & Services	25,000
Jewish Family Services	None	501 (c) (3)	Mental Health Research & Services	15,000
Liberty City CDC	None	501 (c) (3)	Mental Health Research & Services	65,000
Liberty's Kitchen	None	501 (c) (3)	Mental Health Research & Services	10,000
LINKS - Pontchartrain Chapter	None	501 (c) (3)	Mental Health Research & Services	15,000
LSUHSC- Autism Spectrum	None	501 (c) (3)	Mental Health Research & Services	25,278
New Orleans Family Justice Alliance	None	501 (c) (3)	Mental Health Research & Services	65,000
New Orleans Police and Justice Foundation	None	501 (c) (3)	Mental Health Research & Services	25.000
New Orleans Kids Partnership	None	501 (c) (3)	Mental Health Research & Services	20.000
Project Homecoming	None	501 (c) (3)	Mental Health Research & Services	25,000
Reconcile New Orleans	None	501 (c) (3)	Mental Health Research & Services	30,000
Tulane	None	501 (c) (3)	Mental Health Research & Services	136,525
Via Link	None	501 (c) (3)	Mental Health Research & Services	30,000
YAYA- Family Arts	None	501 (c) (3)	Mental Health Research & Services	25,000
YMCA of GNO	None	501 (c) (3)	Mental Health Research & Services	6,737
Center for Development and Learning	None	501 (c) (3)	Mental Health Research & Services	37,500
Crescent City Schools	None	501 (c) (3)	Mental Health Research & Services	21.000
ECEC Center	None	501 (c) (3)	Mental Health Research & Services	12,350
NonProfit Knowledge Works	None	501 (c) (3)	Mental Health Research & Services	15,000
Policy Institute for Children	None	501 (c) (3)	Mental Health Research & Services	25.000
Bayou Steppers- Silence is Violence	None	501 (c) (3)	Mental Health Research & Services	75,000
bayou Steppers- Silence is Violence	1,0	00. (0) (0)		. 5,000
			†	1,499,512