

**MONROE COUNTY
HUMAN SERVICES ADVISORY BOARD
Application for Funding
Fiscal Year 2013
October 1, 2012 – September 30, 2013**

RECEIVED
APR 24 REC'D
BY:

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Who should we contact with questions about this application?	Kim Romano, Executive Director

Amount received for prior fiscal year ending 09/30/11	\$70,000
Amount received for current fiscal year ending 09/30/12	\$75,000
Amount requested for upcoming fiscal year ending 09/30/13	\$120,000

CERTIFICATION

To the best of our knowledge and belief, the information contained in this application and attachments is true and correct. Monroe County is hereby authorized to verify all information contained herein, and we understand that any inaccuracies, omissions, or any other information found to be false may result in rejection of this application. This certifies that this request for funding is consistent with our organization's Articles of Incorporation and Bylaws and has been approved by a majority of the Board of Directors.

We affirm that the Agency will use Monroe County funds for the purposes as submitted in this Application for Funding. Any change will require written approval from the Monroe County Board of County Commissioners.

We understand that the agency must substantially meet the eligibility criteria to be considered for Monroe County funding and that any applicable attachments not included disqualify the agency's application.

We understand that all funding received through this opportunity must be spent for the benefit of Monroe County.

We further understand that meeting the Eligibility Criteria in no way ensures that the agency will be recommended for funding by the Human Services Advisory Board. These recommendations are determined by service needs of the community, availability of funds, etc. HSAB funding recommendations must be approved by the Monroe County Board of County Commissioners.

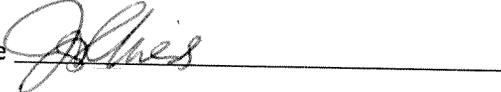
Typed Name of Executive Director: Kim Romano

Signature 

Title: Executive Director

Date: 4/23/12

Typed Name of Board President/Chairman: Janis Childs

Signature 

Title: Board President

Date: 4/23/12

Detailed instructions for each question appear in the separate instruction document.

1. Insert your agency's board-approved mission statement below.

Womankind's mission is to provide accessible, affordable women's primary, gynecologic and mental healthcare to women that is safe, individualized and prevention focused, to women throughout the lifecycle, regardless of ethnicity or socioeconomic level.

2. List the services your agency provides.

- Annual gynecological exams and pap tests
- Reduced fees for those living at or below poverty level
- Breast exams, mammogram referrals and vouchers
- Weekly teen clinic
- School physicals
- Birth control methods
- Emergency contraception
- Testing and treatment for sexually transmitted infections
- Screening for diabetes and heart disease
- Colposcopy (diagnostic testing for cervical cancer)
- Human Papillomavirus (HPV) testing and vaccine to prevent cervical cancer
- Menopausal counseling
- Minor illness treatments
- Hormone replacement therapy & bioidentical hormone therapy
- Pre-conception and interconceptional (between pregnancies) care
- Pregnancy testing and options counseling
- Referrals to appropriate providers for prenatal care, abortion, and adoption services
- Human Immunodeficiency Virus (HIV) pre- and post-test counseling, and HIV testing
- Supportive counseling
- Hispanic outreach and translation
- Wellness classes, educational forums
- Free or low cost contraceptives and antibiotics
- Free and low cost lab work
- Referrals to specialized or secondary care providers
- Outreach and education
- Private pay spa services and retail products to offset cost of services to low-income women
- *In Proportion* weight loss (anti-obesity) program

3. What specific services will be funded by this request?

Womankind is requesting a total of \$120,000 for FY 2013 to support the cost of delivering medical services to low-income, under/uninsured women and teens in the lower Keys. This will include program-related costs such as medical tests and procedures, salaries of existing medical staff, electronic medical records, and a portion of the rent and utilities for our clinical facility.

The salaries of staff members supported by the HSAB provide direct medical care and include Advanced Registered Nurse Practitioners, Registered Nurses, Medical Assistants and a bi-lingual

employee who serves as our Teen Outreach Coordinator. These positions provide the bulk of the medical services to teens and low-income, uninsured women at our Key West facility.

We are reintroducing a request this year, born out of our repeated experience with a frustrating and heart-breaking scenario: a low-income woman is able to access affordable healthcare at Womankind, but then leaves the office in tears because she cannot afford the follow-up care that is recommended when she is referred to a specialist because of an abnormality that the agency is not able to further diagnose or treat in-house. We would like to use a portion of HSAB funding to help low income, under/uninsured women "bridge the gap" when care is needed beyond the scope of what Womankind is able to provide. Secondary care funds, including assistance with procedures, consultations, medications and lab tests, will provide for low-income patients who require medical treatment beyond the training and expertise of Womankind nurse practitioners. These services will be funded through the use of vouchers, with payment provided by Womankind to the physician, lab or pharmacy (at **reduced fees**). Womankind will then submit proof of payment to the HSAB for reimbursement. Womankind used HSAB funds for this purpose until 2011, when we secured funding from the Susan G. Komen Foundation. However, Komen secondary care funds are restricted for breast health-related issues, and are insufficient to meet the identified patient need. Secondary care funding from the HSAB will grant potentially life-saving healthcare access to women who simply cannot afford to pay for diagnostics or treatment with a physician or hospital when a complex, possibly life-threatening issue is identified.

Finally, Womankind is making a new request to the HSAB, to help the agency meet the cost of acquiring and implementing electronic medical records (EMRs). The Affordable Care Act (i.e. – Health Care Reform) will require doctors' offices such as Womankind to have EMRs by 2014 and will penalize those who take Medicaid and Medicare and do not meet this deadline. EMRs make information available between facilities and doctors, reduce the risk of medical errors, streamline operations, maximize billing and insurance collections and ultimately reduce costs. EMRs can also help health care providers manage chronic disease, reduce the need for hospitalization, and improve patient health. Because of the small size of our community-based operation, Womankind does not qualify for federal rebate and incentive programs which make the acquisition of EMRs economically feasible for larger practices and health systems. Yet the agency will still be held responsible for meaningful use of EMRs by 2014. We hope that the HSAB will invest in this crucial piece of clinical infrastructure.

4. Funding category:

If you have been previously funded by HSAB, do you request to have the HSAB consider changing your funding category? Please circle yes or no: **No**

If yes, please circle the new category for which you would like to be considered: **N/A**

If you have not been previously funded, please circle the funding category that you believe best matches your services: **N/A**

5. Will County HSAB funds be used as match for a grant?

Yes

6. If you answered "yes" to Question #5, please specify the following for each grant:

- a. grant award title, granting agency, and purpose: "Meeting the Need" from the Blue Cross and Blue Shield of Florida Foundation IMPACT Grant. The Meeting the Need program improves health outcomes through increased program capacity and reduced barriers to care for low-income, uninsured residents in the Lower Florida Keys.
- b. grant amount: \$66,000
- c. match percentage requirement and amount: Womankind needs HSAB support in order to fulfill requirements of this grant. While there is not a dollar-for-dollar match requirement, the agency would not be able to deliver the services required by the grant without HSAB grant funding.
- d. expected award date: Awarded 2011

7. If your organization was funded with HSAB funds last year, please briefly and specifically explain:

a. how the funds were spent

The majority of HSAB funds were used in the 2011-2012 fiscal year to support the salary of an Advanced Registered Nurse Practitioner. In 2011, this medical provider **served 1,718 unique patients during the course of 3,841 family planning office visits**. Womankind's ARNPs provided **774 tests for sexually transmitted infections, 249 HIV tests and 666 pap tests - a life-saving early detection screening for cervical cancer**.

Additionally, HSAB funding supported our bi-lingual Teen Outreach Coordinator. In 2011, **181 teens were served over the course of 491 medical office visits**. Womankind provided teens with **169 tests for sexually transmitted infections** such as gonorrhea, chlamydia and syphilis, and **detected 5 cases of these serious infections** in 2011. The agency provided 152 urine pregnancy tests to teens, and combatted teen pregnancy not just through the distribution of condoms and other contraceptive methods, but through the provision of comprehensive sex education, counseling and support for healthy decision making.

b. how they were used to leverage additional funding

Support from the HSAB leveraged additional dollars from:

- The Susan G. Komen Foundation,
- The Avon Foundation,
- The Klaus-Murphy Foundation,
- The Dogwood Foundation,
- The American Cancer Society, Florida Division,
- The United Way of the Florida Keys,
- The Monroe County Sheriff's Shared Asset Forfeiture Fund,

- The Blue Cross Blue Shield of Florida Foundation.

These groups provided \$226,445 in grant support in 2011. Without HSAB support, the agency would not have been capable of offering services as they now exist through these funding sources.

8. Do you plan to allocate any part of this HSAB grant, if awarded, as a sub-grant to another organization? *If yes, please list the recipient(s), the purpose(s), and amount(s). Please make sure these are included on Attachment D, under "Grants to Other Organizations."*

No

9. Does your organization allocate sub-grants to other organizations using other sources (non-County) of funding? *If yes, please list the recipient(s), the purpose(s), and amount(s). Please make sure these are included on Attachment E, under "Grants to Other Organizations."*

No

10. Will you or have you applied for other sources of County funding? *If yes, please list source(s) and amount(s). Also be sure to reflect this information on Attachment F.*

- Monroe County Sheriff's Shared Asset Forfeiture Fund = \$9,100 out of a maximum of \$10,000 in 2012.

11. What needs or problems in this community does your agency address?

The story of Kris* illustrates just one of many needs that Womankind addresses every day:

Kris gave birth to her first child at 14, and now believes she wants to get pregnant with her new boyfriend. He is in jail, but due to be released soon, and has been pressuring Kris to consider having a second child. "I want us to have our own baby together" he tells Kris during their weekly phone call.

Kris's case manager at her alternative high school maintains a calendar of her medical appointments at Womankind, and communicates about contraception regularly during their sessions. However, Kris has expressed her intention to discontinue the Depo Provera contraceptive injections she's been getting to prevent pregnancy. "It makes me fat", she laments when her case manager reminds Kris that she is due for her next injection.

At her Womankind appointment, the Advanced Registered Nurse Practitioner (ARNP) reviews with Kris her contraceptive options. Acknowledging that weight gain is a potential side effect of great concern for a teen girl, the ARNP reviews the pros and cons of a myriad of contraceptive options, including pills, patches, rings and implants. Sensing Kris's ambivalence about using any hormonal contraception, prompted by her mixed feelings about having a second baby, the ARNP realizes that this is not just strictly a matter of information and education. She connects Kris with Womankind's

*All patient names and identifying details have been changed to protect patient confidentiality.

licensed mental health professionals. Through a series of individual sessions, and attendance at several Teen Clinic group sessions, the counselors at Womankind help Kris to explore the long-term consequences of having a second baby and the impact this decision will have on her future. The positive reinforcement from her peers at the goal-setting session during Womankind's Teen Clinic convinced Kris to at least reconsider having a second baby before graduating from her alternative education program.

Shortly after her boyfriend was released from jail, Kris discovered he was still sexually active with his first baby's mother. While angry and upset, Kris now describes enormous relief that she did not proceed with having a baby with this guy.

The case of Kris illustrates the **community problem of risky sexual behavior by teens, teen pregnancy, and a lack of resources for teens who are sexually active**, or considering becoming so. The story of Ileana illustrates another community need:

Ileana works as a housekeeper at a locally-owned guesthouse. She moved to the Keys from Cuba nearly a decade ago, and is still not accustomed to the concept of paying for health care, as doctors' visits and medicine were provided at no charge under the system in her native country. A single mother raising three children under the age of 10, Ileana simply does not have the disposable income to pay for routine and preventative healthcare visits. Last year Womankind's Hispanic Outreach Worker presented to the female parishioners at Ileana's church, discussing the importance of regular clinical breast exams and mammograms for those over the age of 40. Ileana felt so relieved to connect with a healthcare professional that spoke Spanish, and reassured to learn that a breast exam at Womankind would be free for her, given her family size and earnings. Womankind would also provide a Zonta voucher to cover the cost of her mammogram at Lower Keys Medical Center. These free and accessible services may have saved Ileana's life! Her first mammogram revealed a small nodule, in need of further evaluation through an ultrasound and biopsy. Womankind is providing funds from the Susan G. Komen for the Cure Foundation so that Ileana can obtain the secondary care she needs with two different specialists in the lower Keys. While she is anxious about the issues identified, she is grateful that Womankind was able to detect a potential breast health issue in its earliest stages, while chances of a full treatment and recovery are most likely.

Ileana's story demonstrates how Womankind addresses the problem of a lack of health insurance coverage and affordable health care for the working middle class and poor in our community. Access to healthcare can be even more challenging for non-English speaking immigrants.

History

Womankind was founded in 2001 to address these identified problems, and deliver safe, affordable and quality healthcare to women and teens just like Kris and Ileana in the Lower Keys community. Womankind's co-founders were two passionate, local nurse practitioners who worked extensively in local private practices, for the Monroe County Health Department and The Monroe County School District. They experienced first-hand through their clinical practice a true need for accessible healthcare in our geographically isolated region. Their vision for high quality healthcare for all women, combined with extremely hard work, spawned what is now a comprehensive healthcare agency. Womankind now provides accessible and affordable women's primary, gynecologic and mental health care that is safe, individualized, humanistic and

prevention focused, to women throughout the lifecycle, regardless of ethnicity or socioeconomic level.

12. What statistical data support the needs listed in Question #11?
(If applying for \$5,000 or less, a response is not required.)

Teens

The 2011 Florida Youth Risk Behavior Study revealed that approximately 350,000 (48.2%) of Florida public high school students have ever had sexual intercourse. That same study indicated that, among those who had engaged in sexual intercourse in the preceding three months, 35.7% did not use a condom the last time they had sexual intercourse. **This is an increase in unprotected sex among Florida students compared to the year before.** These behaviors put Florida teens at risk of unintended pregnancy and/or acquiring a sexually transmitted infection.

The 2010 Monroe County School-aged Child and Adolescent Profile indicates that our community rates extremely poorly in the percent of students who used alcohol in the past 30 days (47.4% Monroe County versus 38.0% State of Florida); percentage of students reporting binge drinking (27.7% Monroe County versus 19.6% State of Florida) and those using marijuana/hashish in the preceding 30 days (26.6% Monroe County versus 18.6% State of Florida). These are also behaviors put Monroe County teens at risk of unintended pregnancy and/or acquiring a sexually transmitted infection, as teens engaging in drug and/or alcohol use are more likely to engage in risky unprotected sex and have a greater number of sexual partners.

Risky behavior is evident when one looks at the data for reportable sexually transmitted infections (STIs) (including gonorrhea, chlamydia and syphilis):

- **In 2011, Womankind diagnosed 5 cases of reportable STIs among teens** seeking services at our clinic. Teens were responsible for 50% of all of the positive reportable STI tests at Womankind in 2011.
- Monroe County has seen an explosion in STIs over recent years with the most notable being a **171% increase in chlamydia between 2006 and 2010.**
- Nationally, while 15–24-year-olds represent only one-quarter of the sexually active population, they **account for nearly half (9.1 million) of the 18.9 million new cases of STIs each year.**¹

Womankind's teen clinic provides information about sexual decision-making, and our trained professionals help young people make healthy and informed decisions about their reproductive health.

¹ Facts on American Teens' Sexual and Reproductive Health, December 2011. <http://www.guttmacher.org/pubs/FB-ATSRH.html>

Womankind's success in working with our teen population is supported by agency and regional data:

- The Monroe County teen birth rate is one of the lowest in the state of Florida. Reporting 22.4 births to per 1,000 mothers aged 15-19, Monroe County is significantly less than the state rate of 37.0 during the same period (between 2008-2010), and is a reduction compared to the previous reporting period.²
- The rate of Monroe County births to teen mothers has decreased from 26.4 to 22.0 per 1,000 females.³
- The Monroe County reported cases of sexually transmitted infections for those between ages 15-19 is low compared to the rate of Florida overall (1,236 versus 2,539.3 per 100,000 in 2008-2010).⁴
- Womankind reduced the number of teens testing positive for a reportable sexually transmitted infections by 64% between 2010 and 2011.

These rates demonstrate the effectiveness of safe and accessible reproductive health services for this particularly vulnerable population, made available through Womankind's weekly Teen Clinic.

Low-income, uninsured women

Data also clearly supports the need for accessible and affordable health care services to low-income, uninsured women in Monroe County. ***Monroe County residents are twice as likely to be uninsured compared to the nation overall.*** It is well documented that being poor and uninsured makes one more vulnerable to major health issues, and puts one at higher risk of death. Data for our region clearly underscores that Monroe County desperately needs access to free and affordable healthcare, through facilities such as Womankind, for those who are most vulnerable in our community.

Being poor and uninsured makes one more vulnerable to major health issues, and puts one at higher risk of death. Lower income is linked with worse health outcomes. Compared with adults in the highest income group, ***low-income adults are nearly five times as likely to be in poor health.*** Additionally, lack of insurance compromises the health of the uninsured because they receive less preventive care, are diagnosed at more advanced disease stages, and once diagnosed, tend to receive less therapeutic care and have higher mortality rates than insured individuals. Resources such as the American Cancer Society also document that advanced-stage diagnosis leads to increased morbidity, decreased quality of life and survival and, often, increased costs.

13. What are the causes (not the symptoms) of these problems?
(If applying for \$5,000 or less, a response is not required.)

² School-aged Child and Adolescent Profile, Monroe County www.floridacharts.com

³ School-aged Child and Adolescent Profile, 2010 versus 2009.

⁴ School-aged Child and Adolescent Profile, Monroe County www.floridacharts.com

The problem of risky teen sexual activity is a national one, and contributing factors include peer pressure, abusive relationships, socioeconomic factors, the childhood environment and media influence. As we experience in situations with patients, teens need reliable access to accurate information, education and resources for potentially life-altering decision making around sexual activity. HSAB funding to Womankind provides just this access.

The problem of the lack of health insurance coverage and affordable health care for the working middle class and poor is a national issue, with major and systemic causes. However, these causes are exacerbated and intensified by conditions in our particular region. Monroe County has an extremely high cost of living, which presents a clear challenge for our target population. **The Key West Chamber of Commerce currently lists the overall Cost of Living Index for Monroe County as 141.8, well above the Florida's average of 100.** The extremely high cost of living and lack of affordable housing in the Florida Keys has created a setting where many **so many live and work simply to pay for housing and basic expenses.** Additionally, increasing business expenses, combined with a still suffering economy, creates a setting in which it is extremely difficult for employers to offer health insurance to their employees.

While property values have dropped, the cost of housing still remains high in relation to income. With so many residents financially strapped because of housing-related costs, many are unable to afford the cost of annual preventative gynecological examinations, and testing for the most life-threatening health risks at a private gynecologist or primary care practitioner. **Funding from the HSAB in support of accessible and affordable healthcare has allowed thousands of Keys residents to access life-saving medical screenings and treatments.**

The lack of affordable and accessible health care for teens and working middle class and poor has serious consequences for our community. In order to cut costs, low and middle income workers may opt to treat physical health care as an optional expenditure. Teens may forgo preventative measures altogether if they encounter embarrassment or numerous barriers to accurate and effective medical care. Sadly, when preventative healthcare is postponed, and medical care is sought when illness or disease has progressed, or when a teen is pregnant and opting to drop out of school, the following is true: outcomes are poorer, and treatment and future care is more costly.

Women are often the caregivers in a community, taking care of children, husbands, and extended family. Ensuring that women have reliable access to affordable health care not only improves the lives of individuals, it ensures the welfare of our community as a whole. **Funding from the HSAB serves as an investment in the future of Monroe County** and supports both our residents of today and future generations.

14. Describe your target population as specifically as possible.

While Womankind serves individuals from diverse backgrounds, our target population is those who would otherwise be unable to obtain healthcare. Among Womankind's target population are the working middle class and poor, those who are uninsured, teens, racial and ethnic minorities, and those disproportionately impacted by disease and illness. We strive to serve all women of reproductive age from the teen years through menopause. Each year we deliver health care to over 1,500 women during the course of nearly 4,000 office visits.

Of Womankind clients in 2011:

- more than 1/3 of our patients had a high school degree/GED or less,
- 28.7% were born in a country other than the United States;
- 75.4% had a household income less than \$50,000 annually.

Womankind is designed to serve individuals across the economic spectrum. Womankind works to attract full-fee paying patients, who may even have private health insurance, but who choose to come to Womankind for our high quality care. These women, in paying our full fees, still benefit from excellent care at prices that are much less than any of the private gynecology offices in town. In paying our full-fees, these women also help to subsidize care for those women living at or below poverty level, who access our sliding scale. **This mix of full and sliding scale patients is part of Womankind's sustainability plan**, in providing office visit revenue from those patients who are able to pay the full value of their health care services. This strategy is discussed in greater detail in question #19: "What financial challenges do you expect in the next two years, and how do you plan to respond to them?"

Womankind's current Strategic Plan also includes an expansion of services to male clients, and we have recently increased our marketing and outreach to this population. Womankind offers education and medical treatment for the male partners of those Womankind patients who are diagnosed with an STI (sexually-transmitted infection). We also offer smoking cessation, mental health and reproductive health counseling for male clients. We plan to offer bioidentical hormone therapy for men in the fall.

15. How are clients referred to your agency?

Any individual may present for services at Womankind, and the agency works to reduce barriers so that our clients do not have to "jump through hoops" to access services. We do not require a formal referral, and we attempt to make entry into services as client-centered as possible.

Womankind's client intake forms repeatedly demonstrate that our number one referral source is word of mouth. Women and teens often hear about Womankind from friends, neighbors, classmates and co-workers. Since the founding of our grassroots, community-based agency over a decade ago, we have worked hard to establish the agency as a reputable and reliable resource. This message gets passed on from resident to resident, and produces our best marketing tool.

Womankind invests time and effort in outreach and community education.

For example:

- Recently, three staff members presented comprehensive sex education to five science classes at Horace O' Bryant Middle School in Key West. Students submitted anonymous questions for a frank and open discussion with nonjudgmental adults, including "Can a girl still get pregnant if she has her period?" and "Can someone feel it if they have HIV?" Staff members were able to provide honest and scientifically accurate answers to these young folks, who might not have any other channel to obtain factually correct information.
- In 2011, the American Cancer Society (ACS) funded a Hispanic Breast Health Outreach worker, who met with non-English speaking women in their workplaces, presented information and circulated written materials (in both English and Spanish) about our breast health program. In 2012, ACS is now funding a Bahama Village Breast Health Outreach Worker for women in the African-American community of Key West.
- Womankind has hosted widely-attended, regularly scheduled, low-cost educational forums on topics such as Alzheimer's Disease, Stress, and Diets.
- Additionally, Womankind staff members consistently attend community events and health fairs to educate the public about prevention and early detection, and to distribute information about the availability of services at Womankind.

Teens who exhibit high-risk behavior are frequently referred to our center by school counselors, nurses and other community advocates. The counselor at the Keys Center Academy (formerly PACE) routinely accompanies several students at a time to Womankind for healthcare. Both the Key West Housing Authority and the Domestic Abuse Shelter (DAS) have recently established arrangements to bring teens to our weekly Teen Clinic. **Many parents also bring their teens to the clinic for abstinence, contraceptive and risk reduction counseling, as well as for healthcare and screening.**

Clients are also referred to Womankind from many agencies throughout the community. Top among referring social service agencies are:

- ✓ The Keys Center Academy (formerly PACE),
- ✓ The Florida Keys Healthy Start Coalition and Healthy Start,
- ✓ The Domestic Abuse Shelter,
- ✓ The Guidance/Care Center,
- ✓ Wesley House,
- ✓ Monroe County Health Department,
- ✓ Samuel's House and
- ✓ AIDS Help, Inc.

All of the private gynecology offices in Key West are familiar with Womankind, and often refer patients who express an inability to pay private office fees to our facility. We often hear from patients, *especially teens*, that they prefer Womankind's all-female staff for sensitive and private gynecological exams over a male physician.

16. What steps are taken to be sure that prospective clients are eligible and that the neediest clients are given priority?

Womankind recognizes that the front office staff, from the receptionist to the medical assistants, serves as potential gatekeepers to care. To ensure that clients are eligible for free or reduced fee care, staff members are trained to screen all prospective clients when they make their initial phone call to Womankind. Those women who are uninsured, and who wish to apply for sliding scale fees, are asked to bring documentation of their financial situation. This could include a pay stub, a W-2 form, an unemployment or social security check stub, or a letter from their employer. While we request proof of income, our federal Title X regulations prohibit the agency from requiring documentation for clients to be eligible for sliding scale services.

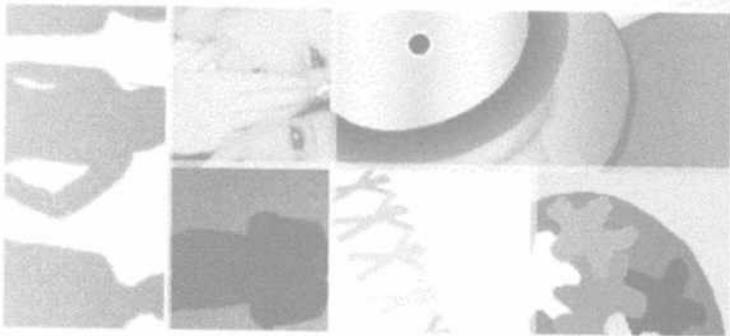
A staff member then meets with the client and discusses total household income and number of individuals supported by that income. Federal Poverty Guidelines are used to determine what percentage of full fee the client will pay. **No client is turned away based on an inability to pay for care.** Our neediest clients are given priority when assistance or vouchers are issued for secondary care services.

17. Describe any networking arrangements that are in place with other agencies.

Womankind has formed numerous networking arrangements with organizations, foundations and entities in order to secure the provision of important health outreach, education, screening, and follow-up care to women and teens in our community. Our linkages with collaborating organizations have facilitated the sharing of resources, leveraging of additional revenue and a reduction in service duplication. Outlined below are some of Womankind's key networking arrangements.

To see an interactive display of this diagram, please visit: www.bit.ly/wkkeywest

Networking Arrangements With Other Agencies

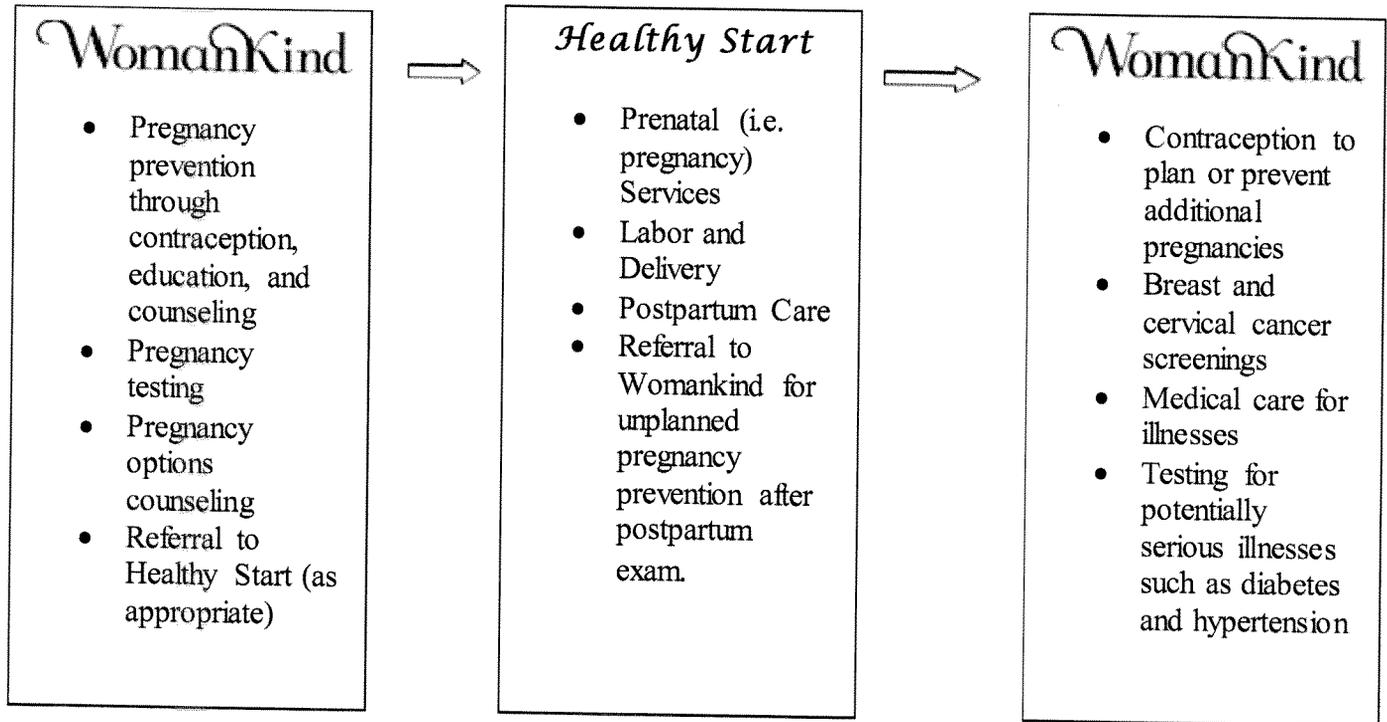


*All patient names and identifying details have been changed to protect patient confidentiality.

- **Monroe County Health Department (MCHD)** - The Monroe County Health Department (MCHD) contracts with Womankind to provide family planning services to qualifying low-income teens and individuals under the age of 25. Womankind provides the clinical facility, personnel and associated costs, while the Health Department provides free family planning related antibiotics (such as treatment for UTIs and STIs) and contraception. The MCHD provides reimbursement on a per capita basis for family planning services provided by Womankind. This arrangement also allows Womankind to send sexually transmitted infection (STI) specimens to the Florida Health Department laboratory. For our patients living at or below poverty level, the state lab processes and reports STI tests at no cost to the agency. Womankind uses LabCorps under the umbrella of the MCHD account, providing special, reduced, contracted rate for all others kinds of laboratory testing. The MCHD also provides some limited funding for HIV+ women to receive full gynecological examinations at Womankind. The MCHD also provides supplies, testing equipment and required trainings for Womankind staff to offer free and confidential HIV pre- and post-test counseling and testing.
- **Planned Parenthood of South Florida and the Treasure Coast** - Womankind networks with Planned Parenthood to provide women's healthcare on their behalf in the Lower Keys and Key West, as it was not economically feasible for this agency to provide services in this region. Planned Parenthood provides technical assistance, training and funding in return. Funding from Planned Parenthood is specifically for family planning services and supplies to low income, uninsured women aged 25 through menopause. Womankind, Planned Parenthood and the MCHD have established a system of reimbursement for low-income patients, separated by age, so that **there is a clear distinction between those served by each funding source.**
- **The Florida Keys Healthy Start Coalition** - Womankind works with the FKHSC to provide seamless preconception, prenatal, postpartum and interconceptional (between pregnancies) care to women in our community. Due to the high cost of professional liability insurance for medical providers who provide obstetrics, Womankind *does not provide prenatal care for pregnant women.* Our agency has determined that we would be unable to provide free and affordable breast and cervical cancer screenings, contraceptive management, pregnancy prevention, and basic primary care if we took on the greatly increased cost of malpractice insurance that included coverage for obstetrics.

When a woman tests positive for pregnancy at Womankind, our staff discusses pregnancy options with the patient. If she wishes to carry her pregnancy to term, the Womankind staff member connects the patient to Healthy Start. The Healthy Start program then provides many services free of charge, including assistance with applying for Medicaid, nutritional counseling, childbirth and breastfeeding education, and financial assistance to help pregnant women obtain prenatal care. After the birth of the child and the six-week follow-up postpartum exam, Healthy Start then refers the patient back to Womankind for interconceptional care. Womankind provides gynecological exams and birth control methods, so that women can appropriately space their pregnancies. We also offer longer-

term contraceptive methods, such as intrauterine devices, for women desiring significant spacing or who no longer wish to bear children. The following chart depicts Womankind referral relationship with Healthy Start:



- **Lower Keys Medical Center (LKMC)**– LKMC provides special pricing for women referred from Womankind. Womankind dedicates a portion of funding from its Susan G. Komen Foundation grant funding to be spent specifically on breast health secondary care, in order to provide breast diagnostics outside of the scope of Womankind’s practice. In order to leverage this funding, Womankind arranged a 50% price reduction from LKMC for those women presenting with a Womankind/ Komen voucher. This allows the agency to spread the funding twice as far, and serve a greater number of women in need of breast health medical services. Dr. Sandy Shultz has also generously agreed to provide a 50% discount for the radiology services he provides for patients referred by Womankind. Collaboration with local surgeons, Dr. Michael Klitenick and Dr. Rose Chan, also allows women referred for surgical consults and procedures to access this essential but often cost-prohibitive follow-up.
- Womankind networks with **Key West Diagnostics** to provide services such as Bone Density Scans and ultrasounds at a greatly reduced fee for low-income women referred by Womankind. For example, a qualifying **Womankind patient pays only \$200 for a pelvic and transvaginal ultrasound, while a patient referred by a private gynecologist would pay nearly \$900 for the same test.**

- **Zonta Club of Key West** - To cover the cost of **mammograms** for those who are uninsured and unable to afford the cost, Womankind has formed a partnership with the local chapter of Zonta, an international service organization that works to improve the status of women. Zonta members raise money through an annual fundraising 5k ABC Walk/Run, which generated \$50,423 in 2011, specifically to pay for mammograms for un/underinsured Lower Keys women. Zonta provides assistance to Womankind patients in the form of vouchers for mammograms, which are accepted by Lower Keys Medical Center (LKMC), the only provider of mammograms in the Lower Florida Keys. Womankind screens our uninsured patients for financial eligibility, and those who qualify are given a Zonta voucher to take to their scheduled mammogram appointment.

Recognizing a pressing and unmet need for education and screening, Zonta also provides Womankind with support to give local women with the tools they need in order to take charge of their **heart health** through an annual Women's Heart Health Initiative. The program provides education, screening, and diagnostics to women in our Lower Keys community. Generous funding by Zonta allows access to un/underinsured women without needed financial resources to simple, yet potentially lifesaving, screening tests for what is the #1 killer of women in the United States. In 2012, Zonta also provided funds for Womankind to purchase a portable Cardiocheck machine and all of the associated supplies, so that Womankind staff members can perform cholesterol screenings both in-house and at community health fairs and events.

- **The Florida Keys Area Health Education Center (AHEC)** - Womankind has a Memorandum of Agreement with AHEC to provide smoking cessation pharmaceuticals, screenings, counseling and referrals. In 2011 Womankind also collaborated with AHEC to carry out "The Keys to Women's Health" event. Together our agencies offered a morning of breast health information and actual clinical breast exams. Clinical breast exams were provided by Womankind Advanced Registered Nurse Practitioners (ARNPs).
- **The American Cancer Society (ACS)** - Womankind formed a new collaboration with ACS in 2011, and is continuing this partnership in 2012. Through the 2011 *Salud de los Senos* program we utilized a bi-lingual health worker to provide outreach and education to non-English speaking Hispanic women. In 2012, outreach and education will be provided to African American women who will be linked to Womankind for actual breast health screenings, coordination of any recommended follow-up care, and delivery of recommended interventions for breast cancer prevention and control. Finally, when a woman is diagnosed with a cancer through Womankind's early detection/ screening programs, we refer to the Florida Keys Chapter of ACS for patient services, including transport to and from cancer treatments.
- **Monroe County School District (MCSD)** – Womankind's Executive Director serves as a member of the School Health Advisory Committee (SHAC), which has revised the district's Wellness Policy and wrote and advocated for the school board's acceptance of a Comprehensive Sex Education Policy. Womankind staff members have partnered with

school health professionals and the Monroe County Health Department to provide sex education in local schools.

- **Keys Center Academy**– The Keys Center counselor schedules and tracks student appointments, regularly accompanies students from the program to Womankind, and communicates with Womankind staff members about medical care, contraceptive and pregnancy options for Keys Center students. Womankind staff members have presented to Keys Center students as part of their professional women mentoring program and will present the keynote speech at this year’s graduation.
- **KW Housing Authority** and the **Domestic Abuse Shelter (DAS)** have recently established arrangements to bring teens to our weekly Teen Clinic. **Guidance/Care Center (G/CC)** - The G/CC has provided mental health counselors for both individual therapy and teen clinic group sessions at Womankind. In a 2011 pilot program, a G/CC Licensed Mental Health Counselor (LMHC) facilitated teen discussions about topics such as setting goals, creating a budget, and navigating peer pressure.
- **Helpline** - Womankind is considering a partnership with Helpline, to provide an after-hours answering service to patients in need in the evenings and on weekends. We hope that this potential arrangement will help to address customer service issues, meet patient need and encourage follow-through with necessary medical care.
- **Glow Studios** – Womankind has implemented an earned income strategy, as recommended by the Health Foundation of South Florida, through a series of workshops in 2010 and 2011. The goal is to utilize innovative, entrepreneurial strategies and tools to transform organizations through the use of alternate revenue streams. To diversify revenue, Womankind has partnered with Glow Studios, a private business which rents space from Womankind and provides private spa and skincare services for a full-fee paying clientele. In theory, the income generated from Glow products and services would help to offset the cost of delivering very serious medical services to low-income, uninsured women and teens. In the infancy of this partnership, however, income from beauty services has been modest, at best. Glow Studios has been unable to pay rent and/or paid a reduced rent thus far for the year. Glow Studios will be leaving Womankind because of a lack of performance. As a result, Womankind will be looking to find a replacement for Glow Studios, and perhaps change the way we charge for the space.
- **Interagency Council** - Our Executive Director attends monthly meetings and has presented to the Council, whose purpose is to bring health and social service providers together to resolve issues of common concern, to improve coordination of services, and to identify and improve resources to support these services.
- **Community Foundation of the Florida Keys (CFFK)** – Several Womankind staff and board members have graduated from CFFK programs such as the Leadership Success

Academy and Leadership Monroe County. The Leadership Success Academy provides specific leadership and governance skill building programming and activities to individuals who serve as board members of local nonprofit organizations. Leadership Monroe seeks to build relationships for constructive alliances among Florida Keys leaders. The program is aimed at residents who are active in leadership roles in the private sector, government, or nonprofit community organizations. Womankind's grant writer also regularly uses CFFK's subscription to the Foundation Center database and search engine, which save the agency the cost of subscribing directly to this web-based service.

- **Susan G. Komen Foundation** - In 2010 Womankind formed a partnership with Susan G. Komen for the Cure Miami/Ft. Lauderdale to create *Womankind and Komen: Keys to Breast Health*. This program filled a serious gap in breast health resources in our region, providing funds for over 400 clinical breast exams, and more than 25 breast health vouchers annually for low-income, uninsured women in our community. Because of Komen support, these medically underserved women are not only able to access potentially life-saving breast cancer screenings, they are better able to follow through with needed tests and procedures including diagnostic mammograms, ultrasounds, spot compressions, and surgical consultations.
- **AIDS Help** – Womankind partnered for National Women and Girls HIV/AIDS Awareness Day to host a wildly successful *Makeover Day*. Two HIV+ women addressed the crowd of women waiting for free facials and beauty treatments, providing moving and compelling testimonials about the importance of reducing HIV risk factors, knowing one's HIV status and underscoring safer sex practices. Womankind's Executive Director also regularly participates in FKHCPP Prevention Committee Meetings, in order to meet the needs of HIV/AIDS patients and those at risk of HIV exposure.
- **Domestic Abuse Shelter (DAS)** – Womankind supported DAS Teen Conferences in 2011 by providing health care coupons for Womankind services.
- **Christina's Courage**- Christina's Courage, Center for Intervention, Advocacy, and Justice provides a safe and comfortable Key West location for law enforcement officers to bring victims of sexual assault and child abuse for forensic medical exams and interviews. Womankind refers those patients who present with a recent sexual assault to Christina's Courage, and patients return to Womankind for follow-up medical care, including HIV testing and testing and treatment for sexually transmitted infections. One Womankind staff member serves as a board member of Christina's Courage, helping to ensure seamless service delivery for rape victims and that neither center is duplicating services.
- **Wesley House** –Womankind is working with Wesley House to present information to the teen girls in foster care about birth control.
- Other common referring agencies: **Samuel's House/ Kathy's Hope; A Positive Step of Monroe County; Project Lighthouse; Wesley House; and the Domestic Abuse Shelter.**

- Other networking organizations in which Womankind staff participate: **The Key West Woman's Club; The Key West Chamber of Commerce; The Key West Business Guild; The Zonta Club of Key West.**

18. List all sites and hours of operation. Please note which of these sites will be using HSAB funding.

1511 Truman Avenue
Key West, FL 33040
Mon, Tues, Weds, Friday 8 a.m. – 5 p.m.
Thursdays 8 a.m. – 6 p.m.

19. What financial challenges do you expect in the next two years, and how do you plan to respond to them? *(If applying for \$5,000 or less, a response is not required.)*

One of Womankind's major grant supporters—and a key funder of our Breast Health Program-- is the Susan G. Komen for the Cure Foundation. Komen's well-publicized decision in February to pull funding from Planned Parenthood prompted accusations of anti-choice political motivations. Komen's actions stirred a massive public outcry, and Komen reversed its decision shortly thereafter. However, many speculate that this initial move will impact Komen enormously, perhaps resulting in a tremendous loss of fundraising dollars. If this occurs, Womankind anticipates that Komen will not be in a position to support our agency at the same funding level in the future. However, following our recent loss of a \$34,000 Avon grant for breast health, we asked Komen to make up the difference. While they were unable to do that, they did just recently strengthen their investment in Womankind by increasing their grant award by 25%.

The agency encounters several financial challenges as a result of the requirements and restrictions associated with several funding streams. For example, Womankind receives federal funding to provide family planning services on a sliding-scale basis for uninsured, low-income women. Title X imposes upon its grantees and delegate agencies a range of strict requirements and restrictions which impact our ability to generate revenue. One example includes the Title X requirement that **ALL** family planning related services, supplies and laboratory testing be provided on a sliding scale, regardless of whether the agency has a funding stream to reimburse for that service. For example, the agency offers a procedure called a "colposcopy", which is a more advanced method for diagnosing abnormal cervical cell changes associated with cervical cancer. These abnormalities are detected by a pap test, which is a first-line screening which is required and paid for by Title X funding. A colposcopy, however, is a necessary follow-up procedure that is not reimbursed by Title X. While not reimbursed for colposcopy, Womankind is required by Title X to charge for the procedure on a sliding fee scale, with equal price increments, down to \$0 for women below poverty level. The agency cost is \$480 per procedure, including the cost of biopsies, supplies and staff time. Raising the full-fee amount of this procedure enough to cover the cost for low-income women who pay nothing or a greatly reduced fee for a colposcopy, would be outrageously prohibitive for those at the upper end of the economic spectrum. ***This is where HSAB funding is crucial for bridging the gap! Womankind relies on HSAB funding to support the cost of service delivery to low-income, uninsured women and teens whose care is not supported by our fee-paying clientele alone.***

To address the real current and potential future deficits in our funding, Womankind is utilizing several strategies to increase revenues:

- After years of visioning, planning and strategically working towards the goal of acquiring a new space, in November of 2011 Womankind received a surprise gift. A Key West resident purchased the PERFECT building for Womankind's use. ***A single-story building with 2,963 square feet is now being leased to us at a good rate for 15 years.*** Womankind's new facility is centrally located on the island and is on one of Key West's most highly-travelled intersections. Everyone who drives in and out of Key West now passes by "WOMANKIND". The building features a warm, open reception area; a larger lab area with increased countertop space; a combined, centralized, accessible storage area; and a greater number of clinical examination rooms. This relocation allowed the organization to reconfigure our physical workspace to increase clinic efficiency, increase organizational capacity, and ultimately, increase the number of clients we serve each year.
- The move into our new clinical space also contributes to the success of our overall sustainability plan. In addition to increasing clinical capacity, Womankind's beautiful new space has allowed the agency to diversify services. Creative partnerships now add retail products and spa services, such as massages and facials, to Womankind's offerings. These complimentary services help to attract full-fee women to our facility, ensuring access to free and reduced-fee medical care for those at the lower end of the socio-economic scale. As discussed earlier in this application, investment in this earned income strategy has not yet produced notable income for the organization. ***We hope that revenue generated from these creative and complimentary partnerships will ultimately help Womankind to meet the costs associated with delivering our very serious mission: life-saving medical care to those who might not otherwise be able to afford it.***
- Womankind is transitioning from an entirely fee-for-service organization, to one that accepts Medicare and Medicaid. The Affordable Care Act will fundamentally change the landscape for publicly funded family planning services as 16 million people are expected to gain Medicaid eligibility and enter insurance exchanges beginning in 2014. Womankind's executive director will attend a national conference in order to learn about the increasing role of Medicaid and private insurance as payment sources for family planning services for the poor and low income and to help manage the transition.

While in many cases Medicaid reimbursement does not even cover the cost of laboratory tests or medical services, it is our desire to diversify revenue streams, increase the number of individuals served, and utilize our medical staff to its fullest capacity. We have secured provider numbers for both the agency and each individual medical provider, and are in the process of initiating medical billing and collection processes.

- The agency has retained a dedicated grant writer. This person is tasked with increasing government and non-government grant revenues and expanding foundation support of Womankind. Grant income was the largest single source of revenue for the agency at 36.9% of total income in 2011, an increase of 11.5% over the preceding year.

- Womankind has spearheaded new outreach and marketing efforts in order to increase our full-fee clientele. This includes a planned educational forum on bio-identical hormones, an identified topic of interest to our upper-income potential client base. In 2012, we have also launched *In Proportion*, a mind-body approach to achieving a balanced weight. This 16 week course brought potential patients into our facility for an introduction to our staff and care, while simultaneously addressing the pressing community problem of overweight/obesity.
- The agency recently changed our staffing structure in order to transition from full-time, salaried and benefits-eligible employees to an increased use of per-diem, benefits ineligible workers. We expect an annual cost savings of up to \$51,804 with the replacement of salaried positions with hourly employees.

20. What organizational challenges do you expect in the next two years, and how do you plan to respond to them? *(If applying for \$5,000 or less, a response is not required.)*

- As a result of Womankind's apparent increase in community support, and the clear and consistent need for our services in the Lower Keys, Womankind's Board of Directors has decided its next annual retreat (in May) will focus on the possibility of expanding into the Middle and Upper Keys. Exploring the idea of a service area expansion will include a needs assessment to determine what services already exist in the region. The agency wants to ensure that we will not be duplicating services if we were to open a center in the Middle and/or Upper Keys.
- As Womankind has succeeded in securing grant support from a greater number of funding sources, our data collection and reporting requirements have increased exponentially. Our current medical office software is extremely limited in its ability to collect and report data in the manner that several of our funding sources require. As a result, office staff invests much time in tracking data manually, through Excel spreadsheets and paper logs. Additionally, changes on the horizon due to health care reform will require that the agency transition to electronic medical records. To address this challenge, our staff is investigating alternate medical office software programs and our grant writer is researching funding options so that the agency can acquire this needed infrastructure. ***We hope that the HSAB will help Womankind meet the cost of acquiring and implementing desperately needed electronic medical records (EMRs).***
- A final organizational challenge relates to requirements imposed by the federal government via our Title X family planning funding. In years past, Womankind provided all family planning related services to teen patients completely free of charge. The federal government now requires a fee-assessment for teens, just as we have always performed with our adult patients. Within these guidelines, however, a teen seeking confidential family planning services who is unaware of their family income and/or does not have access to parental financial support, is fee-assessed based on their income alone. The benefit to this requirement is that those teens who present to Womankind with their mom and/or dad and who do have the ability to pay for services, are now charged their fair share for medical care. Those who do not have access to money are still seen for free. We have received

some feedback that some teens were hesitant to seek services when this policy was communicated. The agency is increasing outreach and education efforts so **that teens in the community fully understand that finances are never a barrier to care at Womankind.**

21. How are clients represented in the operation of your agency?

Most of our staff and board members are patients at Womankind, and support the agency as consumers of both physical and mental health care. Our staff and board support and use Womankind's services because we believe in the quality of the care that the agency delivers to the larger community. Additionally, many of our volunteers give their time to demonstrate their appreciation for services that they, or their friends or family members, have received.

22. Is your agency monitored by an outside entity? If so, by whom and how often?
(If applying for \$5,000 or less, a response is not required.)

Womankind was one of three organizations audited by the Internal Audit Department of the Monroe County Clerk of County Courts in 2011 as part of their review of HSAB Grants and Grants Policies and Procedures. The Internal Audit Department compared reimbursement requests made by Womankind with HSAB payment records for duplicity. ***No adverse findings were reported following the Internal Audit's December 12, 2011 site visit and subsequent review of Womankind's financial documents.*** The conclusions of this audit are included in *Attachment P: Copy of Summary Report of Most Current Evaluation/Monitoring.*

Additionally, Womankind is regularly monitored by several outside entities:

- ✓ Planned Parenthood - annually
- ✓ Florida Department of Health – annually
- ✓ U.S. Department of Health and Human Service Public Health Service Region IV – every three years.

Womankind is also monitored by numerous medical agencies for quality assurance and medical regulation compliance, including:

- ✓ Florida Department of Professional Regulation,
- ✓ Florida Board of Nursing,
- ✓ State of Florida Clinical Laboratory Improvement Amendments (CLIA), and
- ✓ The Agency for Healthcare Administration (AHCA).

Talk to me about these monitoring visits..

23. 255 hours of program service were contributed by 85 volunteers in the last year.

24. Will any services funded by the County be performed under subcontract by another agency? If so, what services, and who will perform them?

As mentioned earlier, Womankind will use a portion of HSAB funding to help low income, under/uninsured women “bridge the gap”, when care is needed beyond the scope of what Womankind is able to provide. Secondary care funds, including assistance with procedures, consultations, medications and lab tests, will provide for low-income patients who require medical treatment beyond the training and expertise of Womankind nurse practitioners. These services will be funded through the use of vouchers, with payment provided by Womankind to the physician, lab or pharmacy. Womankind will then submit proof of payment to the HSAB for reimbursement. We are reintroducing this request in FY 2012-2013, resulting from our repeated experience with a frustrating and heart-breaking scenario: a low-income woman is able to access affordable healthcare at Womankind, but then leaves the office in tears because she cannot afford the follow-up care that is recommended when she is referred to a specialist because of an abnormality that the agency is not able to diagnose or treat in-house. Secondary care funding from the HSAB will grant potentially life-saving healthcare access to women who simply cannot afford to pay for diagnostics or treatment with a physician or hospital when a complex or life-threatening issue is identified.

25. What measurable outcomes do you plan to accomplish in the next funding year?

Womankind will provide health care access to **low-income, uninsured Monroe County residents, predominantly teens and women of reproductive age. Our measurable outcomes will include a count of patient encounters**, including primary and gynecological medical care delivered to low-income uninsured women, during the grant period. This will include both a tally of those services of delivered to patients served at Womankind, and a count of the number of women referred for secondary care and issued a voucher for tests and diagnostics beyond the scope of Womankind.

Patient encounters will include primary and gynecological medical visits which screen for, and in some cases treat, the most prevalent and pressing health conditions including diabetes, cancers such as breast, cervical and colon, sexually transmitted infections (STIs) including HIV, and heart disease. The earlier these conditions are detected, the lower the cost for treatment, and the more positive the health outcomes.

26. How will you measure these outcomes?
(If applying for \$5,000 or less, a response is not required.)

To measure these outcomes, we will use several tools including our medical office scheduling software (MedStar Systems), weekly timesheets, the daily receipts registers, and the executive director’s monthly reports. Each of these tools will be used to track and measure identified indicators. We will adjust clinical schedules to meet client demand as needed.

27. Provide information about units of service below.
(If applying for \$5,000 or less, a response is not required.)

Service	Unit (hour, session, day, etc.)	Cost per unit (current year)
Nurse Practitioner	1 patient hour	\$40
Registered Nurse	1 patient hour	\$21
Teen Outreach Coordinator	1 patient hour	\$12

*All patient names and identifying details have been changed to protect patient confidentiality.

Secondary Care Voucher	Average/patient	\$200
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27. In 300 words or less, address any topics not covered above (*optional*).

Womankind’s newly leased building, redesigned and built-out for our use, is indicative the agency’s viability, sustainability, and ability to leverage funding through other sources. The move to our new physical space was only possible because of Womankind’s broad-based appeal and generous donor support. The agency witnessed people from ALL sectors mobilizing to make this long-awaited agency dream a reality. Gay men bought the building, established special lease terms well below market rate, and donated materials such as window treatments, at cost. Those touched by breast cancer sent in checks. Men who have teen daughters contributed sizable donations. Womankind experienced an explosion of support for our services, most notably for services to teens. **Judy Blume, award-winning children’s book author, recently donated \$5000 for our work with teens. The United Way of the Florida Keys is supporting Womankind’s Teen Clinic in our first time ever through a new grant.** Negotiations are also currently underway with local businesses that have agreed to donate \$1000 each towards a possible match.

During a community health fair in January 2012, a woman approached Womankind’s display table and handed a staff member \$300. “When my daughter was a teenager, we had no money. She received care for free from Womankind and made it through high school without any health problems or pregnancies. She’s now doing well in college and I just wanted to thank you very much.” Above any other health issue, the staff members at Womankind find that Monroe County community members enthusiastically support education to adolescents around the prevention of unintended pregnancy and sexually transmitted infections. HSAB funds have been instrumental in providing life-altering education about teen pregnancy prevention and sexually transmitted risk reduction, reducing issues that are central to the health and welfare of our community.

Required Attachments

Required attachments were distributed to you as a separate document. Be sure to include these with your application. Please note: the required attachments A through F are only available in Microsoft Excel format. We require that you use this format, since it will automatically expand rows, generate totals and percentages, and align figures for easier reading. Please label each attachment with your organization name and attachment letter.

ATTACHMENT CHECKLIST

LABEL AND ATTACH THE FOLLOWING IN THE ORDER SHOWN, AFTER THIS PAGE IF NOT APPLICABLE, PLEASE SO INDICATE AND EXPLAIN	ATTACHED?		COMMENTS You must explain any "NO" answers
	YES	NO	
A-1. Current Board Information Form	X		
B. Agency Compensation Detail	X		
C. Profile of Clients, Client Numbers and Services (Performance Report)	X		
D. County HSAB Funding Budget	X		
E. Agency Expenses	X		
F. Agency Revenue	X		
G. Copy of Audited Financial Statement from most recent fiscal year (2010) if organization's expenses are \$150,000 or greater.	X		
H. Copy of filed IRS Form 990 from most recent fiscal year (2010)	X		
I. Copy of current fee schedule	X		
J. Copy of IRS Letter of Determination indicating 501 C 3 status & Copy of GUIDESTAR printout	X		
K. Copy of Current Monroe County and City Occupational Licenses	X		
L. Copy of Florida Dept. of Children And Families License or Certification		X	N/A - We are not monitored by DCF.
M. Copy of any other Federal or State Licenses	X		
N. Copy of Florida Dept. of Health Licenses/Permits	X		
O. Copy of front page of Agency's EEO Policy/Plan	X		
P. Copy of Summary Report of most current Evaluation/Monitoring *	X		
Q. Data showing need for your program (See Question 12)	X		Sexual Behaviors Among Florida Public High School Students; Facts on American Teens' Sexual and Reproductive Health; School-aged Child and Adolescent Profile; Uninsured Rate - Monroe County Health Profile
R. Other (specify) TWO PAGE LIMIT	X		Womankind Photos

* must include summary of deficiencies and suggested corrective action; may include your responses and actions taken.

ATTACHMENT A 1 - BOARD INFORMATION

2012

You must have at least five directors.

Womankind

(enter your agency name in D-3 above and it will automatically appear in subsequent sheets)

Name/Board Position	Affiliation/Title	City/State	Telephone No.	Years Served	Current Term Expiration Date
Janis Childs, President	Artist & Owner SoDu Gallery	Key West, FL	296-4400	8	2014
The Honorable Peary Fowler, Vice President	Monroe County Judge	Key West, FL	292-3517	7	2014
Colleen Quirk, Treasurer	CFO, FishBusterz	Key West, FL	797-9283	8	2014
Amber Shaffer, Secretary	Owner, All Keys Construction	Cudjoe Key, FL	294-9119	2	2014
Elisa Levy	Consultant, Elisa Levy Seminars	Key West, FL	296-5437	5	2014
Michelle Maxwell, Esquire	MCSO, Internal Affairs	Key West, FL	240-3224	2	2014
Mona Clark	Retired School District; Utility Board Member	Key West, FL	304-8665	8	2013
Peter Moorecroft	Executive Producer/ Creative Director	Ramrod Key, FL	872-8980	1	2013
Cindy Emmet	Former board member, Planned Parenthood Federation of America	Key West, FL	295-1308	<1	2014
Kristina Welburn	Fundraiser	Key West, FL	295-0136	<1	2014

**** ATTACHMENT A 2 - EVIDENCE OF ANNUAL ELECTION OF OFFICERS** (Please attach a copy of the minutes of the meeting in which the most recent elections took place.) *Election of Officers and renewal of terms of office took place at BOD meeting on 4/16/12; please see attached.*

Attachment A-2
Evidence of Annual
Election of
Officers

Womankind Board Minutes – April 16, 2012

Present

Board: Janis Childs, Elisa Levy, Amber Shaffer, Mona Clark, Cindy Emmett, Kristina Welburn.

Staff: Kim Romano, executive director.

The meeting was called to order at 5:35 pm.

President's Report

- Kim introduced the new board members, Kristina Welburn and Cindy Emmet.
- The retreat will be on Saturday, May 12th at Womankind from 9:00 – 3:00pm.
- The patient load has increased and we have been very busy, so we are hiring one other person (NP) to work the Teen Clinic.
- We were asked to sign an “anti-trafficking” letter by Keys Coalition. Board agreed.

Treasurer's Report

- Colleen Quirk, treasurer, was not present but will email treasurers' report for distribution.

ED Report

- Board discussed report previously submitted by ED (attached to minutes).
- Elisa asked about the increase in primary care patients. Kim explained that this is a strength of the new NP. She also noted that word of mouth has been very good and is the reason for an increase in all of our numbers (including mental health patients).
- Elisa asked about the NP search. Kim responded that we have put the search on hold in order to determine whether or not we will hire any of our temporary ARNPs on a permanent basis. Kim is very happy with entire staff.
- Kim will be going to a National Family Planning and Reproductive Health Association conference that addresses the changes WK must make after the Affordable Health Care Act is fully implemented in 2014 (including information on Medicaid and Medicare reimbursement). The conference will pay for all travel costs and one hotel night, WK will pay for remaining hotel costs, Kim will cover any other expenses. The dates are April 28th – May 3rd.
- Kim and Cali prepared a draft pamphlet for potential donors. They are working on another one that is more specifically geared for potential patients.
- We received the United Way grant of \$4,000! The grant was given under the “youth development” criteria and will be used for our Teen Clinic.

- We are in the middle of our HSAB grant application period. Betsy has written a draft. We are asking for more money this year to help the agency meet the Healthcare Reform requirement to implement electronic health records. An improved data collection and reporting system is crucial to the agency's ability to track and report data as our services grow, our revenue sources diversify and our reporting requirements become more complex.
- Board agreed to discuss the expansion of Womankind up the Keys at our Board retreat. This is particularly important because 32% of the residents in the Keys are uninsured and neither the Middle nor the Upper Keys have a health center similar to Womankind.
- Kim asked Jon Allen for his expertise regarding fundraising. At his suggestion, Kim met with Dianna Sutton and has borrowed books on the Benevon system.
- Kim was asked to be the Keynote speaker at the Keys Center Academy for Girls for their 2012 graduation.
- During Leadership Success Academy, the suggestion was made that you do a "march" in front of a business that has helped you. Kim suggested that we do that for Salute and volunteered to organize it for May.
- We are doing a memorial for Doug Childs instead of the Survivors Reunion Concert this year.
- We were very surprised to discover that The Avon Foundation did not fund us again this year--surprising because we exceeded our mammogram goal for the very first time. We are now \$34,000 short on our grant line item. As a result, Kim called the Komen Foundation and requested additional funding. They said they had to reduce their grant awards to many other organizations this year due to Planned Parenthood fiasco--but then gave us \$31,000 (as opposed to our usual \$25,000)!
- National Women's Health Month is in May. WomanKind received a grant for Zumba in the Park to be held on Saturday, May 19th, in Bayview Park at 9:00 am and we are receiving a Proclamation from the County Mayor.

Old Business

- The Board discussed when we would begin Meet and Greets again and who would be in charge of organizing. Kim said she should be responsible. We will seek to begin again in June.
- Education: Education Forum is on April 28th. Elisa will get someone to film it so we can put it on the WK website. Elisa will get in touch with Jenny Whaley to confirm that she is comfortable presenting. Elisa will send e-flyer to the Board. Kim will do postcards. Cali will send out Constant Contact emails. Elisa and Kristina are giving out brochures to 13 hotels. Kim will have them ready by tomorrow. The committee will distribute to restaurants next.
- Fundraising/Croquet: Kristina reported that we made \$54,278. We made \$11,000 from the auction alone. The raffle made \$1,100. This is a \$3,000 increase from last year. Ed Knight took

Kim and Cali out to dinner afterwards and told us how happy he is with our organization. The Board thanked Amber and Kristina.

New Business

The Board elected new officers, as follows:

1. Mona nominated Janis as President. Elisa seconded. All were in favor.
2. Mona nominated Peary Fowler for Vice President. Janis second. All were in favor.
3. Janis nominated Amber Shaffer for Secretary. Mona seconded. All were in favor.
4. Mona nominated Colleen Quirk as Treasurer. Janis seconded. All were in favor.
5. Elisa nominated Michelle Maxwell for another term as a Board member. Janis seconded. All were in favor.

Amber noted that Zonta heart health initiative resulted in 60 patients receiving analyses and care.

Janis wants to donate \$1,000 per year in Doug Child's honor and asked the Board for ideas on what to do.

The meeting was adjourned at 6:50 p.m.

Respectfully submitted,

Elisa Levy

Secretary

Womankind

Executive Director's Report- Kim Romano
April 16, 2012

Staff:

Our new nurse-practitioners Carolyn Daly and Shui-Lin Klingbeil (working separate days) will be joined by Rachele Richardson, ARNP, who will be filling in for Lin this Thursday. The waiting room is always full, and we are booking out a week ahead. Very positive!

Entire staff participated in lunchtime Mandatory Reporting teleconference re: changes implemented by Oct. 2012. One potentially major piece of information: consensual sex between teenagers of certain ages is going to be considered a crime.

Mirena (IUD) insertion training took place in lobby of Womankind.

Jan Wallace, Office Manager, held a 2-1/2 hour meeting with front line staff designed to discuss patient flow, division of duties, customer service, filing, etc. Problems were identified and solutions created to many. Jan is doing a fantastic job of scheduling, especially given the recent staffing changes. Kim keeps reminding the staff: "This is all a process!"

Front desk phones are so tied up that our IT guru Sean Hayes from Engage forwarded the calls to Kim's phone and then Ginny's phone to help ease the load on the front desk. Cali Roberts, Asst. Director, graduated from CFFK's Leadership Success Academy. Cali continues her 5th year of mentoring a student in the Take Stock in Children program. Daniela wrote a fascinating editorial about the mental health services she provides; Mark Howell told Kim he'd publish it in Solares Hill next week.

Table Memoli, nursing student, wants to precept here next month.

On March 12th, a 4th year medical student, Elizabeth Laptham from NY, spent three weeks interning here and was extremely helpful.

Six staff members attended the mandatory "Title X Training: Cross cultural training" in Marathon.

Cali and Jan participated in a demonstration of yet another electronic medical records program. The cost of going electronic will be added to next year's budget and could be as much as \$20,000 for the first year.

Betsy Langan attended KW Business Guild meetings and all Zonta meetings (she is the President-Elect of Zonta)

Jan Wallace, Cali, Kim, and Ginny Barr accepted a check for \$5,000 from Tervis Tumblers on Front Street. The funds helped sponsor the Croquet Tournament that was

held on March 25th.

At the request of MCHD Administrator Bob Eadie, Kim, Cali and Betsy met with MCHD intern Vicki B. to discuss the health priorities in Monroe County related to the county wide MAPP process initiated by Christopher Tittel and Mary Vandebrook of the MCHD in the Fall of 2011.

Financial Information:

The MCHD clarified the fact that financially-screened eligible males would be covered under Title X for contraceptive counseling, and MCHD will cover the cost of their GC/Chlamydia, RPR and HIV lab testing!

March was the first month after the change in Nurse Practitioners from a single full-time staff member to two part-time independent contractors. We continue to make adjustments in order to improve the patient experience and optimize the performance of each staff member.

Upon initial examination of the number of visits each month, March was moderately strong with 310 total visits, compared with 352 total visits in March of 2011, and 274 total visits in February 2012. Total visits however, includes mental health visits, which are not relevant to our examination of the change in Nurse Practitioner staff. Removing mental health visits, there were 286 visits in March 2012, 242 in March 2011, and 258 in February 2012. This March begins to look brighter.

Breaking down the numbers further, we must look at the number of working days in each month. Under the new schedule, there were only 15 working days in March 2012, while March 2011 included 23 working days and February 2012 included 20 working days, both under the old schedule. Per working day, there were 19.07 visits in March 2012, 10.52 visits in March 2011, and 12.90 visits in February 2012.

The costs associated with our Nurse Practitioners have also changed. Independent contractors are paid per hour worked rather than a salary, and there are no additional costs of health insurance, FICA, SUTA, or other payroll related charges. The total cost of service for March 2012 was \$5,560¹, versus \$6,834.38 for each of March 2011 and February 2012.² Per visit, our cost in March 2012 was \$19.44 across all physical health visits, compared with \$28.24 per visit in March 2011 and \$26.49 per visit in February 2012.

¹ \$5,560 includes additional compensation for Carolyn Daly that is not reported in Quickbooks. Total compensation for Carolyn was calculated as 9 hours per day worked at \$40 per hour

² \$6,834.38 includes the salary paid to Gail Hardy and our monthly cost for her health insurance of \$534.38. Additional payroll expenses were not included

Office Visit Income

Examining physical health visits, our income source has changed due to our agreement with the Health Department. The Health Department is now compensating us for all patients under the age of 25, while they previously covered patients up to but not including 18. This was done specifically to draw a clear line between those patients funded through Planned Parenthood and those funded by the health dept.

We are receiving reimbursement based on the Medicare reimbursement rates for the services performed, less the amount paid by the patient. And given the changes to our screening process, more patients are screening into lower fee categories. The average fee paid for physical health visits in March was 41%. However, when we take into account the reimbursement that will be received from the Health Department for the 53 teens, this average increases to 65%.

	Mar-12	Mar-11	Feb-12
Total	310	352	274
Mental	24	110	16
Physical	286	242	258
Teens	53	16	38
Sliding	147	122	157
Working Days	15	23	20
NP Cost*	\$5,560.00	\$6,834.38	\$6,834.38
Visits Per Day	19.07	10.52	12.90
Cost Per Day	\$370.67	\$297.15	\$341.72
Cost Per Visit	\$19.44	\$28.24	\$26.49

*NP cost for March 2012 includes additional compensation for Carolyn Daly not reported in QB, calculated as 9 hours per day at \$40 per hour

* NP Cost for March 2012 and February 2012 include \$534.38 for medical insurance; not included are associated payroll expenses: FICA, SUTA, etc

** VPD only takes into account Physical Health visits as Mental Health visits are seen by a different practitioner

Our Services

Health Center:

Zonta Heart Health Program has been very successful with all 60 slots filled. Some women became new WK patients!

Given that the Affordable Health Care Act's implementation will radically alter our business (everyone will have insurance, and birth control and women's wellness exams

will be included), Kim will attend the National Family Planning & Reproductive Health Conference held in DC from April 29-May 2nd. The conference is designed to help centers exactly like Womankind make the transition successfully. The NFPRH organization will cover Kim's travel costs and one night at the hotel.

Kim met with a patient who was unhappy with the services due to the nurse practitioner being rushed; Kim addressed her customer service concerns and scheduled her to be seen again the following day.

Kelley Valle came over to provide colposcopies but neither patient that was scheduled showed up (one had a good excuse). Kelley said she would fire patients who did that more than once. We have instituted new safeguards due to this experience: half payment is required at the time of the booking and phone calls are made a week, and then again the day before the appointment.

Spa Services:

Michaela Meadows, Glow Studios, is going to buy back the skin care products we purchased at cost before their expiration date.

Mental Health:

Daniela Menardi, LMHC, will be in Italy from June 3-July 2nd. Kim is going to find a temporary replacement.

In Proportion (Weight loss) Program:

Facilitated by Betsy, Daniela and Bill Elkins & Liz Love (from Stay Fit), the group is lively and engaged in each week's session. Some have already lost weight and others report having a better attitude towards food.

BioIdenticals:

Kim met with Beth Moran to discuss her bioidentical practice in Sarasota and East Hampton.

Jennifer Whaley, our own illustrious PA-C, met with Kim to get our program started.

Grants/Contracts

United Way awarded us \$4000!

Komen awarded us \$31,000 this year (an *increase* from last year's \$25,000 award)! Kim had contacted them to explain that we'd lost \$34,000 in Avon Breast Health funding this year and Komen said they would try to make up the difference. However, due to their own lack of funding (re: Planned Parenthood public relations fiasco this year), they gave us \$6,000 more so we are still \$28,000 short compared to last year's breast health funding.

Sheriff's Asset Forfeiture Fund meeting in Marathon: Womankind was awarded \$9200!

American Cancer Society Community Education Grant: Lolade Agboola, outreach worker, has made breast health presentations at two churches in Bahama Village to date. Her job is to provide breast health outreach & coordination of services to Bahama Village women aged 40 and above. She is very energetic and excited about her job.

Blue Foundation Grant: In order to satisfy the conditions of this grant, we must make changes in our software so we can track our now separate providers (since we have more than one!). This will also allow us to track data more easily.

Events: Project, Community and Board Committee

National Women's Health Week takes place in May and the county will give Womankind the Proclamation this Wed at the county commission meeting in Key West.

Old Town Manor screened *The Help* as a fundraiser for WK, volunteers Malika Delgado and Lily Lapham attended and spoke on behalf of WK (Kim was at SAFF mtg and Betsy was running *In Proportion*).

Kim attended the Chamber of Commerce meeting.

WK was asked to participate in "Reading Festival" on Saturday, April 21st at Frederick Douglas Memorial Park. WK will have a booth.

WK donated gift certificates for pap tests and mental health counseling to Wesley House, and Chamber of Commerce golf event; and free teen exams to Domestic Abuse Shelter and Keys Housing Authority.

Kim was invited to meet President Barack Obama in Hollywood, Florida, and had her photo taken with him.



Zonta: Kim asked Amber if it would be possible to get Zonta funding for 2-4 women who needed diagnostic mammograms. Each one costs approx. \$850. Our Komen funding had run out and Dr. Shultz couldn't discount the fees any lower than what Medicaid reimburses; Kim has not heard back from LKMC to see if they would consider lowering their fees. The discussion is ongoing.

Kim also continued discussion with Dr. Shultz about LKMC's relationship with WK [and its preventive care which leads low-income women to hospital for mammograms], saying "it is not just a money issue; it's a medical liability issue. No doctor wants to be responsible for telling someone she/he has breast cancer, doing nothing about it, and getting nailed with a million dollar lawsuit." This is another reason why we need to inform patients about PCIP (pre-existing insurance protection).

Teens:

Staff participated in two teen-related webinars: "Teen Friendly Clinic Services" offered by Cicutelli Associates and "Teen Pregnancy Prevention."

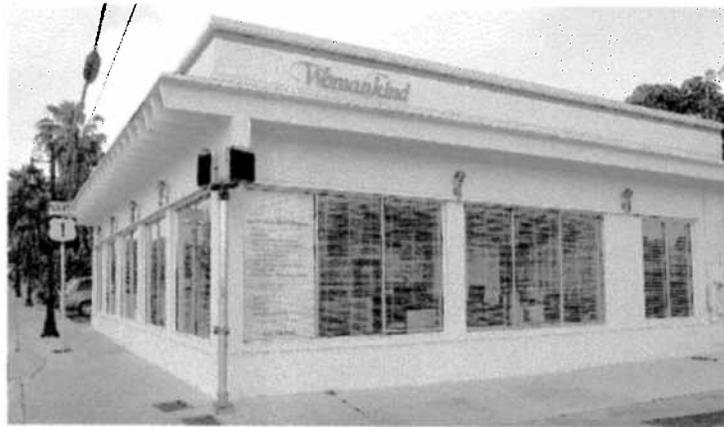
Kim got permission from George Cooper to advertise the fact that his wife, Judy Blume, donated \$5,000 to WK because she loved our facility and the care we give to teens.

Press / Radio/ PR:

April Locals Guide for KW Citizen featured Womankind's new addition Jennifer Whaley, PA-C. Article reflected the "serious women's health organization, mind/body, holistic" approach discussed at last month's board meeting.

Womankind's new building on Truman Avenue is just the tip of what's new at the Key West health care center.

MARK HEATLY
LOCAL GUIDE



Womankind continues to expand services

By Sara Matthis
Special Sections Editor

The Womankind of today is a totally transformed version of its predecessor. While it still concentrates on making health care for women affordable — not free, affordable — it has so many other services to offer.

Take bioidenticals, the softer version of hormone replacement therapy of yesteryear. Womankind now offers that service.

"I've had women calling for 18 months, asking when we could start offering it," said Kim Romano, executive director of Womankind.

The answer is now. Jennifer Whaley, a physician's assistant, is set to help local women cope with falling levels of estrogen. Conventional treatment, she said, was manufactured using horse hormones that came with lots of "weird" side effects and some serious risks such as heart disease, breast cancer and uterine cancer. Bioidentical hormones, on the other hand, replicates human estrogen

and, more importantly, are delivered in doses customized for each patient. It's gentler than conventional hormone therapy but, contrary to popular misconception, it's not "all natural." (It is, after all, made in a lab.)

Women seek out bioidentical therapy to combat mood swings, hot flashes, vaginal atrophy, decrease in sex drive, and high cholesterol levels — all associated with lower levels of estrogen typical of aging women.

"The most common thing I hear patients who take bioidenticals say is, 'I feel like myself again,'" Whaley said.

In traditional hormone replacement therapy, patients take the lowest dose for the shortest amount of time. With bioidenticals, there are no such limits.

"Take it for as long as you want it and it makes you healthy and happy," Whaley said. "Our bodies have produced estrogen for our whole lives with no side effects."

The bioidentical therapy at Womankind is not covered by insurance and some would consider it pretty pricey. It is not, however, at odds with

Womankind's mission.

"Our fee schedule has always been based upon the 'women helping women' model: women who can afford to pay for our more expensive services help offset the cost of basic screenings for women who can't," said Romano.

Family planning services — birth control, treatment of STDs, breast exams and pap tests — are available on a sliding fee scale that is mandated by the federal government through Title X. Primary care for men and women, colposcopies and mental health services are offered at low market rates. Clients pay full rate for a luxurious spa treatment from Glow Studios, bioidentical hormone therapy, or to join the weight loss seminars.

"One thing that I really think is important for the public to understand is that Womankind isn't only for those with low incomes. It's for women across the spectrum. The more women with means that pay for their health care, the more Womankind can provide health care to women that are uninsured or

Continued on the next page

womankind STAFF



Dr. Jerome Covington, Medical Director



Betty Langan, "In Pursuit" weight loss counselor



Tracy Bradach, Medical and HIV counselor



Monasia Meadows, owner of Glow Studios at Womankind



Jennifer Whaley, PA-C bioidentical & primary care



Shui-Lin Klingbell, ARNP nurse practitioner



Carolyn Daly, ARNP nurse practitioner



Denise Menard, LPHC, CAP mental health counselor

underinsured," said local attorney and Womankind supporter Ginny Stones.

Some things Womankind does for free, like educating 250 middle schoolers about sex. Romano said the staff's recent visit to Horace O'Bryant Middle School was a huge success based on feedback from teachers and parents.

"We told the kids that we were impossible to embarrass, so they could ask us any question they had about sexual health. After a few giggles, they listened to every single word we had to say. I think they appreciated the frank discussion," she said.

Womankind encourages the parents of teens to become involved in their sons' and daughters' reproductive health. It firmly believes that teenage pregnancy prevention and other health issues are easier to manage with a parent's help. There's a Catch 22, however; teens must arrive unaccompanied to be provided free services. If the parent and child arrive together, the patient will be charged according to the sliding fee.

"Our hands are tied on this. It has to do with the rules associated with government money we receive to fund these services," Romano said.

This holistic health center -- which includes a teen clinic -- relies upon partnerships with other local agencies such as Monroe County, Zonta, AIDS Help, the Guidance Care Center, and AHEC (Area Health Education Center). Womankind has also announced the appointment of Dr. Jerome Covington as medical director, two new ARNPs -- Carolyn Daly and Shui-Lin Klingbell, and bioidentical consultant Whaley, PA-C who comes to Womankind from Michigan and also works at the Key West hospital emergency room.

Romano said it's an exciting time at Womankind with many changes, new faces and a new facility. And, yet, the center's staff never loses sight of what's important.

"Let us take care of you," Romano said. "Make an appointment. It's that easy."

Womankind is located at 1151 Truman Ave., Key West. The phone number is 305-294-4004. It's open Monday through Friday.

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- All Styles
- Age 7 and Up
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- Slides
- Tubas

Check Us Out on Facebook!

Fundraisers/Donations

Joe Liszka donated Frank Romano's car to Womankind and we sold it for \$11,000.

CROQUET

Edith Amsterdam once again held a pre-croquet cocktail party for Womankind the night before the grand event.

Kristina Welburn did a FANTASTIC job with the silent auction.

Edward Knight had tournament-grade grass planted for this fundraiser, a most appreciated investment for our organization.

This year's croquet tournament net \$55,000, \$3,000 more than last year.

Ed Knight took Cali and Kim out to dinner two weeks later and continues to express great

interest in our work and mission.

Kim had a trophy made for Eileen Kawaler that reads: "Queen of Pap Smears." (WK funds were not used for this!)

The committee met to discuss ways to improve next year's event which will take place on Sunday, April 7th.

Executive Director Activities:

Coordinated "Take a Teen to the Doctor" Day with KW Housing Authority and Domestic Abuse Shelter.

Attended Chamber of Commerce General Membership Meeting as well as the Chamber's Economic Development Committee.

Met with Jon Allen from CFFK in order to discuss fundraising strategies; then met with Dianna Sutton and borrowed books from CFFK library.

Wrote grant for HIV Prevention money, targeting HIV+ women in Lower Keys Working with Shelia Butler from MCHD to provide Medicare for Womankind patients.

Continued to discuss Komen funding and diagnostic mammograms with Dr. Sandy Shultz from LKMC.

Attended Woman's Club meeting and announced Heart Health Month, Croquet Tournament, and WK in general.

Kim gave presentation to AARP group about Womankind's services.

Attended the Zumba on the Pier event, fundraiser for Relay for Life. Made contact with instructors WK will invite to May 19th "Zumba in the Park" morning for National Women's Health Week.

Kim attended the Women's Hope Concert fundraiser at TW FAC.

Kim attended BOCC meeting in Marathon regarding HSAB vote.

Kim baked several batches of brownies for the Willie Wonka Chocolate Festival (and successfully requested Doria Goodrich of First State Bank not to schedule the festival on the same day as our croquet tournament again).

Attended TSWK Patron brunch.

Attended HIV Planning and Prevention Partnership meeting.

Attended School Health Advisory Council meeting; discussed comprehensive sexual education curricula.

Supported Dr. Martin Luther King Scholarship Fund.

Attended 7 Artists Opening.

Attended Women of Integrity, Men of Valor fundraiser for Samuel's House.

Attended fundraiser for Monroe County Educational Coalition at Bottlecap.

Needs:

Seamstress to mass produce our "pursies."

Womankind is planning to register on KeysReuse.org.

We need a new copier!

Someone to buy frames and fill them with various articles & photos for lobby

Exam table that meets ADA guidelines: \$7400 with shipping!

New business:

Golf tournament-Kim and Cali are meeting with Heather Carruthers and Sue Srch to discuss logistics on 4/17/12.

Survivors/Doug Childs Memorial event in November at Salute.

**ATTACHMENT B - AGENCY
COMPENSATION DETAIL**

2012

Include each position in the entire agency.
Put an "X" next to each position directly
related

Womankind

to program for which funding is requested.
Please round all dollar amounts to the
nearest dollar; do not round FTE'S.
A 40-hour/week employee would be 1.00
FTE; a 20-hour/week employee would be .5
FTE, etc.

Indicate whether the position is
programmatic or administrative, with a "P"
or "A" next to that position.

		Proposed - Upcoming		Projected - Current		
		12/31/2013		12/31/2012		
Position Title	"X"	# FTE'S	Total Compensation Package	# FTE'S	Total Compensation Package	"P" or "A"
Bilingual Teen and Hispanic Outreach	X	1.00	28,180	1.00	28,180	P
RN - Breast Health Program		0.40	18,804	0.60	27,456	P
Advanced Registered Nurse Practitioners	X	0.80	74,880	0.60	58,470	P
Physician's Assistant		0.20	15,392	0.00	0	P
Licensed Mental Health Counselor		0.40	48,000	0.40	48,000	P
Social Worker/Grant Programs		1.00	65,300	1.00	65,300	P
Medical Assistant	X	0.60	17,472	0.63	18,200	P
Registered Nurse	X	0.80	40,244	0.80	40,244	P
Part-time Medical Office Support		0.80	18,804	0.60	14,228	P
Assistant Director		1.00	70,300	1.00	70,300	25% P- 75% A
Executive Director		1.00	90,300	1.00	90,300	10% P- 90% A
Totals	4	8.00	487,676	7.63	460,678	

ATTACHMENT C - PROFILE OF CLIENTS, CLIENT NUMBERS AND SERVICES (Performance Report)
2012

Delete or type over sample information shown.

Womankind

List Services Here	Target Population	# of Persons in Target Population	Area	Days/Hours	Total Number of Clients Served during most recent completed fiscal year	Current # of Clients ("snapshot") as of 2/16/12
Reproductive health/ family planning visits	Women who experience barriers to healthcare, including the low-income uninsured, teens and the working middle class and poor. Our target population includes all women of reproductive age, from the teen years through menopause	14,886	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	3,841	15
Prescribed contraceptive method	Women of reproductive age	6,120	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	481	12
Pap tests	Women: young adult through menopause	13,286	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	666	2
Management of abnormal pap smears (potentially pre-cancerous)	Women: young adult through menopause	13,286	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	38	0

Clinical breast exams	Women at highest risk of breast cancer: 40 and above	8,030	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		525		6
Mammogram referrals	Women at highest risk of breast cancer: 40 and above	8,030	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		334		0
Total breast abnormalities detected	Women at highest risk of breast cancer: 40 and above	8,030	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		84		0
Breast cancers detected	Women at highest risk of breast cancer: 40 and above	8,030	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		5		0
Testing for sexually transmitted infections (gonorrhea, chlamydia, HIV, syphilis)	Women teen through menopause	14,886	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		1,023		9
Teen office visits	Female teens	1,600	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)		491		6

Teen tests for sexually transmitted infections (STIs)	Female teens	1,600	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	169	1
Teens positive for an STI	Female teens	1,600	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	5	1
Teens tested for pregnancy	Female teens	1,600	Monroe County: Big Pine to Key West	Mon, Tues, Weds, Fri 8 a.m. to 5 p.m.; 8 a.m. to 6 p.m. Thursdays (Teen Clinic p.m.)	152	3
Hispanic Breast Health Outreach	Female Hispanic women aged 40+	1,606	Key West	Varied	138	0
Mental Health	Teens through elderly	37,293	Monroe County: Big Pine to Key West	Thursdays 8 a.m. - 6 p.m.	540	6
Unduplicated Clients for Entire Agency (see instructions - this is not a total of the numbers above)					1,718	

ADDITIONAL INFORMATION REQUIRED:

Please indicate the number of clients served who are Monroe County residents: 1701

Please list or describe achieved measurable outcomes for your target populations: The majority of HSAB funds were used in the 2011-2012 fiscal year to support the salary of an Advanced Registered Nurse Practitioner. In 2011, this medical provider served 1,718 unique patients during the course of 3,841 family planning office visits. WomanKind's ARNPs provided 774 tests for sexually transmitted infections, 249 HIV tests and 666 pap tests, which is a life-saving early detection screening for cervical cancer.

Additionally, HSAB funding supported our bi-lingual Teen Outreach Coordinator. In 2011, 181 teens were served over the course of 491 medical office visits. Womankind provided teens with 169 tests for sexually transmitted infections such as gonorrhea, chlamydia and syphilis, and detected 5 cases of these serious infections in 2011. The agency provided 152 urine pregnancy tests to teens, and combatted teen pregnancy not just through the distribution of condoms and other contraceptive methods, but through the provision of comprehensive sex education, counseling and support for healthy decision making.

ATTACHMENT D - COUNTY HSAB FUNDING BUDGET

2012
Womankind

Show the proposed budget detail for the County HSAB funds requested.
The total must match with the total funding requested.

	Proposed Expense Budget for Upcoming Year Ending:	
	12/31/2012	
Expenditures	Total	%
Salaries - Program	50,000	42%
Payroll Taxes - Program		0
Employee Benefits - Program		0
Salaries - Administrative		0
Payroll Taxes - Administrative		0
Employee Benefits - Administrative		0
Subtotal Personnel	50,000	41.7%
Postage		0
Office Supplies		0
Telephone		0
Professional Fees		0
Rent	30,000	25.0%
Utilities	6,000	5.0%
Repair and Maint.		0
Travel		0
Miscellaneous		0
Grants to Other Organizations		0
List others below		0
Secondary Care - Medical Tests and Procedures	14,000	11.7%
Electronic Medical Records	20,000	16.7%
Total Expenses	120,000	100.0%

ATTACHMENT E - AGENCY EXPENSES

2012

Complete this worksheet for the entire agency.
Please round all amounts to the nearest dollar.

Womankind

	Proposed Expense Budget for Upcoming Year Ending:		Projected Expenses for Current Year Ending:	
	12/31/2013		12/31/2012	
Expenditures	Total	%	Total	%
Salaries - Program	318,034	34%	306,428	35%
Payroll Taxes - Program	15,865	2%	18,824	2%
Employee Benefits - Program	24,555	3%	24,555	3%
Salaries - Administrative	125,250	13%	125,250	14%
Payroll Taxes - Administrative	12,236	1%	12,236	1%
Employee Benefits - Administrative	8,745	1%	8,745	1%
Subtotal Personnel	504,685	54%	496,038	56%
Postage	2,060	0%	2,000	0%
Office Supplies	7,931	1%	7,700	1%
Telephone	8,652	1%	8,400	1%
Professional Fees	11,845	1%	11,500	1%
Rent	60,000	6%	60,000	7%
Utilities	12,854	1%	12,480	1%
Repair and Maint.	8,240	1%	8,000	1%
Travel	1,030	0%	1,000	0%
Miscellaneous	0	0	0	0
Grants to Other Organizations	0	0	0	0
<i>List others below</i>				
Pharmaceuticals for Resale	32,545	3%	28,300	3%
Contingency	60,000	6%	60,000	7%
Contract Labor	78,212	8%	78,212	9%
Credit card commissions	5,150	1%	5,000	1%
Equipment Rentals and Purchases	2,163	0%	2,100	0%
Laboratory Fees	30,900	3%	30,000	3%
Licenses and Permits	1,545	0%	1,500	0%
Medical Supplies	11,356	1%	11,025	1%
Meeting Costs	1,030	0%	1,000	0%
Printing and Reproduction	5,150	1%	5,000	1%
Program Expenses	20,600	2%	20,000	2%
Program Promotion	15,450	2%	15,000	2%
Electronic Medical Records	20,000	2%	0	0
Subsidized Health Care	26,000	3%	12,000	1%

Data Storage	618	0%	600	0%
Donor Database	412	0%	400	0%
Dues and Subscriptions	515	0%	500	0%
Insurance (Liability, Malpractice, etc.)	3,928	0%	3,814	0%
Workmen's Comp	2,163	0%	2,100	0%
Total Expenses	935,035	100%	883,669	100%
Revenue Over/(Under) Expenses	(6,835)		(4,069)	

ATTACHMENT F - AGENCY REVENUE

2012

Complete this worksheet for the entire agency.
Please round all amounts to the nearest dollar.
In-Kind will not be included in percentages or total.

Womankind

	Proposed Revenue Budget for Upcoming Year Ending:			Projected Revenue for Current Year Ending:		
	12/31/2013			12/31/2012		
	Cash	In-Kind	%-age of Total	Cash	In-Kind	%-age of Total
Revenue Sources						
Monroe County (HSAB)	120,000		13%	75,000		9%
Children and Fam			0%	0		0%
M.C. Sheriff's Dept.			0%	0		0%
City of Key West			0%	0		0%
City of Marathon			0%	0		0%
Village of Islamorada			0%	0		0%
City of Layton			0%	0		0%
City of Key Colony Beach			0%	0		0%
Client fees	354,200		38%	322,000		37%
Donations	50,000		5%	47,500		5%
Sheriff Shared Asset	9,000		1%	9,100		1%
United Way	4,000		0%	4,000		0%
List all others below			0%			0%
Contracts	107,300		12%	107,300		12%
Benefits/ Special Events	107,500		12%	107,500		12%
Other Grants	91,400		10%	122,400		14%
Office Visits - Mental Health	62,400		7%	62,400		7%
Rental Income	10,400		1%	10,400		1%
Retail Beauty Sales	12,000		1%	12,000		1%
			0%			0%
			100%			100%
Total Revenue	928,200	0		879,600	0	

Attachment G:
Audited
Financial
Statements

WOMANKIND, INC.

Financial Statements with
Independent Auditors' Report Thereon and
Schedule of Financial Assistance

For the Year Ended December 31, 2010

SMITH, BUZZI & ASSOCIATES, LLC.
CERTIFIED PUBLIC ACCOUNTANTS
2103 CORAL WAY, SUITE 305
MIAMI, FLORIDA 33145
TEL. (305) 285-2300
FAX (305) 285-2309

JULIO M. BUZZI, C.P.A.
JOSE E. SMITH, C.P.A.

MEMBERS:
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Directors of
WomanKind, Inc.

We have audited the accompanying statement of financial position of WomanKind, Inc., (the "Company") (a non-profit organization) as of December 31, 2010, and the related statement of activities and cash flow for the year then ended. These financial statements are the responsibility of the Company's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America, Government Auditing Standards, issued by the Comptroller General of the United States, and the provisions of Office of Management and Budget Circular A-133, "Audits of States, Local Governments and Nonprofit Organizations". Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of WomanKind, Inc. as of December 31, 2010, and the results of its operations and its cash flows for the year then ended in conformity with generally accepted accounting principles.

In accordance with Government Auditing Standards, we have also issued a report dated May 25, 2011 on our consideration of WomanKind, Inc.'s internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations contracts and grants.

Our audit was performed for the purpose of forming an opinion on the basic financial statements of WomanKind, Inc. taken as a whole. The accompanying schedule of federal awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations", and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Smith, Buzzi & Associates, LLC.

May 25, 2011

WOMANKIND, INC.
Statement of Financial Position
December 31, 2010

Assets

Current assets	
Cash	\$ 122,980
Contracts and other receivables	35,901
Other assets	<u>4,264</u>
Total current assets	<u>163,145</u>
Assets restricted to investment in furniture and equipment	54,760
Accumulated depreciation	<u>(47,996)</u>
Net assets restricted to investment in furniture and equipment	<u>6,764</u>
Total assets	<u>\$ 169,909</u>

Liabilities and Net Assets

Current liabilities	
Accrued vacation	\$ 5,205
Accounts payable and accrued expenses	<u>21,527</u>
Total current liabilities	<u>26,732</u>
Net assets	
Unrestricted	136,413
Restricted to investment in furniture and equipment	<u>6,764</u>
Total net assets	<u>143,177</u>
Total liabilities and net assets	<u>\$ 169,909</u>

See accompanying notes to financial statements.

WOMANKIND, INC.

Statement of Activities

For the Year Ended December 31, 2010

Public support and revenue	
Grant revenue and contract fees	\$ 321,793
Contributions, including in-kind contributions	20,897
Benefits	<u>109,958</u>
	<u>452,648</u>
Revenue	
Prescription sales	43,709
Office visits	176,461
Other income	<u>11,795</u>
Total revenue	<u>231,965</u>
Total public support and revenue	<u>684,613</u>
Expenses	
Salaries and related costs	394,983
Contract labor	16,695
Insurance	21,957
Laboratory fees	31,469
Medical director	6,337
Medical supplies	10,564
Office supplies	6,626
Professional fees	13,275
Rent	43,848
Depreciation	1,788
Repairs and maintenance	5,380
Subsidized health care	4,627
Utilities and telephone	9,461
Program promotion	28,458
Interest expense	84
Office expense	12,969
Prescription purchases	<u>31,826</u>
	<u>640,347</u>
Increase in net assets	44,266
Net assets, beginning of year	<u>98,911</u>
Net assets, end of year	<u>\$ 143,177</u>

See accompanying notes to financial statements.

WOMANKIND, INC.

Statement of Cash Flows

For the Year Ended December 31, 2010

Cash flows from operating activities:	
Change in net assets	\$ 44,266
Adjustments to reconcile change in net assets to net cash provided by operating activities:	
Depreciation	1,788
Decrease in contracts, other receivables and other assets, net	(2,639)
Decrease in accounts payable	<u>16,721</u>
Net cash used by operating activities	<u>60,136</u>
Cash flows used by investing activities:	
Acquisition of equipment	<u>(5,179)</u>
Net cash used by investing activities	(5,179)
Cash flows from financing activities:	
Line of credit repayments, net	<u>-</u>
Net increase in cash and cash equivalents	54,957
Cash and cash equivalents, at beginning of year	<u>68,023</u>
Cash and cash equivalents, at end of year	\$ <u>122,980</u>
Interest paid during the year	\$ <u>84</u>
Income taxes paid during the year	\$ <u>-</u>

See accompanying notes to financial statements.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

1. Summary of Significant Accounting Policies

a) Organization

WomanKind, Inc. ("the Company") is a nonprofit organization developed to provide accessible and affordable primary, gynecological and mental health care that is safe, individualized, humanistic and prevention focused to women through the lifecycle, regardless of ethnicity or socioeconomic level. Key among the Company's target groups are women who experience barriers to healthcare, including racial and ethnic minorities, the indigent uninsured or underinsured, and the working poor. Services are provided in Monroe County. The Company's funding comes primarily from public and private grants, community partnerships and client fees. Since its inception, the Company has rapidly become a valuable resource and a leader in women's healthcare and education in Monroe Country. In 2009, the company served a total of 1,552 patients during 3,994 clinical visits.

b) Basis of Presentation

The Company's financial statements have been prepared on the accrual basis of accounting and in conformity with the standards promulgated by the American Institute of Certified Public Accountants. Net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Company and changes therein are classified and reported as follows:

- Temporarily restricted net assets - Net assets subject to donor-imposed stipulations that may or will be met, whether by actions of the Company and/or the passage of time. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.
- Permanently restricted net assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Company. Generally, the donors of these assets permit the Company to use all or part of the income earned on any related investments for general or specific purposes.

The primary sources of revenue for the Company consist of grants which, absent a specific restriction by the grantor, are considered to be available for unrestricted use, and contract fees. Included in contract fees is reimbursement on a fee for service basis with the State of Florida, Department of Health. Grant revenue includes only that portion of the grant that was earned prior to the statement of financial position date. All grant funds received as of the statement of financial position date which are considered to be applicable to future periods are reflected as deferred revenue on the Statement of Financial Position.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

1. Summary of Significant Accounting Policies - (Cont.)

b) Basis of Presentation - (Cont.)

The costs of providing the various programs and other activities have been detailed in the accompanying Statement of Activities.

Salaries and other expenses which are associated with specific program are charged directly to that program. Salaries and other expenses which benefit more than one program are allocated to the various programs based on the relative costs incurred. Administrative and other support expenses are allocated to the various programs based on each program's salary expense.

c) Assets Restricted to Investment in Furniture and Equipment

Assets restricted to Investment in Furniture and Equipment are stated at cost and include expenditures for improvements and betterment which substantially increase the useful lives of the assets.

Donated furniture and equipment with values in excess of \$1,000 represent "in-kind" donations to the Company from private organizations and are recognized as support when received.

Depreciation is computed on the straight-line method over the estimated useful life of the assets, which is principally five (5) years. Maintenance and repairs are charged to operation as incurred.

d) Contributions

Contributions are considered unrestricted unless otherwise stated by donor. Restricted donations are initially recorded as temporarily restricted net assets. When a donor restriction expires or purpose of restriction is accomplished. Temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

1. Summary of Significant Accounting Policies - (Cont.)

e) Restricted Revenues Received, Related Program Expense and Deferred Support

Contract revenues presented in the statement of activities are principally cost reimbursement contracts and are stated at amounts equivalent to the program expenses incurred. Related program expenses incurred in excess of contract revenue received on cost reimbursement contracts are reflected as receivables from governments, to the extent realizable, on the statement of financial position. Contract receipts in excess of related program expenses are deferred and recognized as revenue in the period in which the matching program expenses is incurred.

The Company records revenue when earned. The Company does not record any accounts receivable on office visits. As a result of significant delays or non-payment this income is recorded when received. All expenses are recorded on the accrual basis and are charged against operations when incurred. Donated materials are recorded at fair value on the date of donation as unrestricted support. Donated services have not been reflected in the financial statements. The impact of those services upon the financial statements is unknown as there is no objective basis available to measure the value of such services. However, because recognition of donated services as revenue would also involve recognition of corresponding expenses, there would be no effect on the net assets.

f) Income Taxes

The Company was organized as a non-profit organization and has received exemption under the provisions of Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes is provided for in the accompanying financial statements.

g) Allocation of Common Expenses

Certain common expenses which benefit more than one program are allocated based on estimates of time of employees involved and on percentages of assets utilized, and to the extent permitted in the funding source contracts.

h) Cash and Cash Equivalents

For purposes of the statement of cash flows, the Company considers all cash and other highly liquid investments with initial maturities of three months or less to be cash equivalents.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

1. Summary of Significant Accounting Policies - (Cont.)

i) Estimates

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

j) Long-Lived Assets

The Company reviews the carrying value of its long lived assets for possible impairment whenever events or changes in circumstances indicate that the carrying amount of the assets may not be recoverable. No adjustment has been provided for in the financial statements.

2. Summary of Funding, Accounts Receivable and Deferred Support.

The Company is funded through grants and contracts from various funding sources. The following summarizes major grant activity for the year ended December 31, 2010.

	<u>Support</u>	<u>Receipt</u>
Monroe County Health Dept.	\$ 11,073	7,855
Health Foundation	14,500	14,500
Board of County Commissioners - Monroe County, Florida (HSAB)	74,373	61,749
Zonta Club Grant	3,871	3,591
Planned Parenthood & Other (Contract Fee)	56,238	36,459
Avon Grant	34,600	34,600
Monroe County Sheriff Grant	8,750	8,750
Dogwood Foundation	60,000	60,000
Klaus Murphy Foundation	25,000	25,000
Florida Keys AHEC	7,938	7,938
Susan G. Komen Foundation	25,000	25,000
Other	450	450

Grant and contract fees for the year ending December 31, 2010 amounted to \$321,793. At December 31, 2010 contracts and other receivable amounted to \$35,901. Of this amount, \$13,021 represent grant receivables, \$3,101 represent contract receivables (Monroe County Health Department) and \$19,779 is due from contract fees.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

3. Assets Restricted to Investment in Furniture and Equipment.

Furniture and office equipment, at cost, and accumulated depreciation are summarized as follows at December 31, 2010:

Computer	\$ 11,926
Furniture and fixtures	17,934
Office equipment	10,966
Lease improvements	<u>13,934</u>
Total costs	54,760
Less accumulated depreciation	<u>(47,996)</u>
	<u>\$ 6,764</u>

Depreciation expense for the year ended December 31, 2010 amounted to \$1,788.

4. Line of Credit

On May 14, 2002 the Company entered into an unsecured line of credit facility agreement with a local bank. This agreement was for \$7,500 to be used for working capital purposes. In 2003 the amount was increased to \$25,000. The line of credit currently carries interest at 5.25% per annum. Draws outstanding at December 31, 2010 amounted to \$0.00. Interest expense for 2010 was \$84.

5. Facilities Cost

The Company's premises are located in Key West, Florida. Rent expense for the year amounted to \$43,848. The Company's monthly rent amounts to \$3,605.

WOMANKIND, INC.

Notes to Financial Statements

For the Year Ended December 31, 2010

6. Commitments and Contingencies

The costs and unexpended funds reflected in the accompanying financial statements relating to government funded programs are subject to audit by the respective governmental agencies (funding sources). The possible disallowance by the related governmental agencies of any item charged to the program or request for the return of any unexpended funds cannot be determined at this time. No provision, for any liability that may result, has been made in the financial statements.

WOMANKIND, INC.

Schedule of Financial Assistance
(Single Audit)

For the Year Ended December 31, 2010

Program Title	CFDA Number	Contract Number	Revenue Recognized	Program Receipts	Disbursements/ Expenditures	Accounts Receivable	Deferred Support
Zonta Club	-	-	\$ 3,871	3,591	3,871	280	-
Health Foundation of South Florida	-	2002-19	14,500	14,500	14,500	-	-
Board of County Commissioners of Monroe County, Florida	-	-	74,373	61,749	74,373	12,624	-
Avon Grant	-	-	34,600	34,600	34,600	-	-
Monroe County Sheriffs Department	-	-	8,750	8,750	8,750	-	-
Dogwood Foundation	-	-	60,000	60,000	60,000	-	-
Klaus Murphy Foundation	-	-	25,000	25,000	25,000	-	-
Monroe County Health Dept.	-	-	11,073	7,855	11,073	3,218	-
Florida Keys AHRC	-	-	7,938	7,938	7,938	-	-
Planned Parenthood	-	-	56,238	36,459	56,238	19,779	-
Susan G. Komen Foundation	-	-	25,000	25,000	25,000	-	-
Other	-	-	450	450	450	-	-
Total			\$ 321,793	285,892	321,793	35,901	-

SMITH, BUZZI & ASSOCIATES, LLC.
CERTIFIED PUBLIC ACCOUNTANTS
2103 CORAL WAY, SUITE 305
MIAMI, FLORIDA 33145
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FAX (305) 285-2309

JULIO M. BUZZI, C.P.A.
JOSE E. SMITH, C.P.A.

MEMBERS:
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT ON COMPLIANCE AND ON INTERNAL CONTROL
OVER FINANCIAL REPORTING BASED ON AN AUDIT OF
FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE
WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors of
WomanKind, Inc.:

We have audited the financial statements of WomanKind, Inc. (the "Company") as of and for the year ended December 31, 2010 and have issued our report thereon dated May 25, 2011. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and Government Auditing Standards, issued by the Comptroller General of the United States.

Compliance

As part of obtaining reasonable assurance about whether the Company's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants, 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 that are required to be reported under Government Auditing Standards.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Company's internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to provide assurance on the internal control over financial reporting. Our consideration of the internal control over financial reporting would not necessarily disclose all matters in the internal control over financial reporting that might be material weaknesses. A material weakness is a

condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over financial reporting and its operation that we consider to be reportable conditions as defined above.

This report is intended for the information of the Company's Board of Directors, management, and officials of applicable federal and state agencies. However, if this report is a matter of public record, its distribution is not limited.

Smith, Burgin & Associates, LLC.

May 25, 2011

SMITH, BUZZI & ASSOCIATES, LLC.
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MEMBERS:
AMERICAN INSTITUTE OF
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FLORIDA INSTITUTE OF
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INDEPENDENT AUDITORS' REPORT ON COMPLIANCE WITH
REQUIREMENTS APPLICABLE TO EACH MAJOR PROGRAM AND INTERNAL
CONTROL OVER COMPLIANCE IN ACCORDANCE
WITH OMB CIRCULAR A-133

To the Board of Directors of
WomanKind, Inc.:

Compliance

We have audited the compliance of WomanKind, Inc. (the "Company") with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement that are applicable to each of its major federal programs for the year ended December 31, 2010. The Organization's major federal programs are identified in the accompanying schedule of federal and State financial assistance. Compliance with the requirements of laws, regulations, contracts and grants applicable to each of its major federal programs is the responsibility of the Company's management. Our responsibility is to express an opinion on the Company's compliance based on our audit.

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 OMB Circular A-133 Audits of States, Local Governments, and Non-Profit Organizations. Those standards and OMB Circular A-133 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 the Company'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. Our audit does not provide a legal determination on WomanKind, Inc.'s compliance with those requirements.

In our opinion, the Company complied, in all material respects, with the requirements referred to above that are applicable to each of its major federal programs for the year ended December 31, 2010.

Internal Control Over Compliance

The management of the Company is responsible for establishing and maintaining effective internal control over compliance with requirements of laws, regulations, contracts and grants applicable to federal programs. In planning and performing our audit, we considered the Company's internal control over compliance with requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133.

Our consideration of the internal control over compliance would not necessarily disclose all matters in the internal control that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that noncompliance with applicable requirements of laws, regulations, contracts and grants that would be material in relation to a major federal program being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over compliance and its operation that we consider to be material weaknesses.

This report is intended for the information of the Company's Board of Directors, management, and officials of applicable federal and state agencies. However, if this is a matter of public record, its distribution is not limited.

Smith, Burgin & Associates, LLC.

May 25, 2011

Attachment H:

IRS Form 990

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047
2010
 Open to Public Inspection

A For the 2010 calendar year, or tax year beginning _____, and ending _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **WOMANKIND, INC.**
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address): **3142 NORTHSIDE DRIVE**
 Room/suite: **101**
 City or town, state or country, and ZIP + 4: **KEY WEST FL 33040**

D Employer identification number: **65-1003208**

E Telephone number: **305-294-4004**

G Gross receipts: **684,613**

F Name and address of principal officer: _____

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.WOMANKINDKEYWEST.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: _____ **M** State of legal domicile: _____

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: See Schedule O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	0
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	13
	6	Total number of volunteers (estimate if necessary)	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	
	b Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year: 438,312 Current Year: 377,081
	9 Program service revenue (Part VIII, line 2g)		220,586 231,965
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		75,567
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		658,898 684,613
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		361,762 394,983
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) 20,000		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		304,692 245,364
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		666,454 640,347	
19 Revenue less expenses. Subtract line 18 from line 12		-7,556 44,266	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year: 108,922 End of Year: 169,909
	21 Total liabilities (Part X, line 26)		10,011 26,732
	22 Net assets or fund balances. Subtract line 21 from line 20		98,911 143,177

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: *KIM ROMANO* Date: **4/2/12**
 Type or print name and title: **KIM ROMANO, Exec Dir**

Paid Preparer Use Only
 Print/Type preparer's name: **JULIO BUZZI** Preparer's signature: *[Signature]* Date: **03/27/12** Check if self-employed PTIN: **P00853282**
 Firm's name: **Smith, Buzzi & Associates, LLC** Firm's EIN: **80-0631935**
 Firm's address: **2103 Coral Way Suite 305 Miami, FL 33145** Phone no.: **305-285-2300**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **524,743** including grants of\$) (Revenue \$)
ACCESSIBILITY TO SAFE, HUMANISTIC AND PREVENTION ORIENTED HEALTHCARE FOR WOMEN

4b (Code:) (Expenses \$ including grants of\$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of\$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ **1,788** including grants of\$) (Revenue \$)

4e Total program service expenses ▶ 526,531

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<input checked="" type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<input checked="" type="checkbox"/>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Does the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		<input checked="" type="checkbox"/>
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	<input checked="" type="checkbox"/>	
8b	b Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		<input checked="" type="checkbox"/>
13	Does the organization have a written whistleblower policy?		<input checked="" type="checkbox"/>
14	Does the organization have a written document retention and destruction policy?		<input checked="" type="checkbox"/>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		<input checked="" type="checkbox"/>
15b	b Other officers or key employees of the organization		<input checked="" type="checkbox"/>
15c	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<input checked="" type="checkbox"/>
16b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **None**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ELIZABETH LANGAN**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MONA CLARK DIRECTOR	0.00						0	0	0	
(2) JANIS CHILDS PRESIDENT	1.00	X		X			0	0	0	
(3) PEARY FOWLER VICE PRESIDENT	1.00	X		X			0	0	0	
(4) COLLEEN M QUIRK TREASURER	1.00	X		X			0	0	0	
(5) ELISA LEVY SECRETARY	1.00	X		X			0	0	0	
(6) LU MOORE DIRECTOR	1.00	X					0	0	0	
(7) MICHELLE MAXWELL DIRECTOR	1.00	X					0	0	0	
(8) MARGIT BISZTRAY DIRECTOR	1.00	X					0	0	0	
(9) AMBER SHAFFER DIRECTOR	1.00	X					0	0	0	
(10) KIMBERLY FLOWERS DIRECTOR	1.00	X					0	0	0	
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	377,081				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			377,081			
Program Service Revenue	2a Program Service Revenue	Busn. Code	231,965	231,965			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			231,965			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6a Gross Rents		(i) Real	(ii) Personal				
b Less: rental exps.							
c Rental inc. or (loss)							
d Net rental income or (loss)							
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis & sales exps.							
c Gain or (loss)							
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a		75,567			
		b Less: direct expenses	b				
	c Net income or (loss) from fundraising events			75,567		75,567	
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code					
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			684,613	231,965	0	75,567	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	8,000			8,000
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	66,461	55,753	10,708	
7 Other salaries and wages	293,975	248,155	33,820	12,000
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	26,547	22,976	3,571	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	13,275	4,300	8,975	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	12,969	6,542	6,427	
14 Information technology				
15 Royalties				
16 Occupancy	43,848	34,848	9,000	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	84		84	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,788	1,788		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a PRESCRIPTION PURCHASES	31,826	31,826		
b LAB FEES	31,469	31,469		
c INSURANCE	21,957	13,174	8,783	
d PROGRAM EXPENSES	20,250	20,250		
e CONTRACT LABOR	16,695	16,695		
f All other expenses	51,203	38,755	12,448	
25 Total functional expenses. Add lines 1 through 24f	640,347	526,531	93,816	20,000
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	68,006	1	122,980
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	33,232	4	35,901
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	54,760		
	b	Less: accumulated depreciation	47,996	3,373	6,764
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	4,311	15	4,264
16	Total assets. Add lines 1 through 15 (must equal line 34)	108,922	16	169,909	
Liabilities	17	Accounts payable and accrued expenses	10,011	17	21,527
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	5,205
	26	Total liabilities. Add lines 17 through 25	10,011	26	26,732
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	95,538	27	136,413
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	3,373	29	6,764
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	98,911	33	143,177
34	Total liabilities and net assets/fund balances	108,922	34	169,909	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	684,613
2	Total expenses (must equal Part IX, column (A), line 25)	2	640,347
3	Revenue less expenses. Subtract line 2 from line 1	3	44,266
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	98,911
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	143,177

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

WOMANKIND, INC.

Employer identification number
65-1003208

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see Instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	564,196	631,857	755,002	438,312	342,690	2,732,057
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				220,586	231,965	452,551
3 Gross receipts from activities that are not an unrelated trade or business under section 513					75,567	75,567
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	564,196	631,857	755,002	658,898	650,222	3,260,175
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						3,260,175

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	564,196	631,857	755,002	658,898	650,222	3,260,175
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	564,196	631,857	755,002	658,898	650,222	3,260,175

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	100.00 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	100.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2010

▶ **Attach to Form 990, 990-EZ, or 990-PF.**

Name of the organization

Employer identification number

WOMANKIND, INC.

65-1003208

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization WOMANKIND, INC.	Employer identification number 65-1003208
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	KAWALAR FAMILY FOUNDATION	\$ 31,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	OTHER	\$ 23,788	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	..... ..... .....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization: WOMANKIND, INC. Employer identification number: 65-1003208

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Questions 1-9 regarding conservation easements, including a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Questions 1a, 1b, 2, a, b regarding art and historical treasures, including amounts reported under SFAS 116 (ASC 958).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ▶ %
- b** Permanent endowment ▶ %
- c** Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (Including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) ACCRUED VACATION	5,205	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	5,205	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open To Public Inspection

Name of the organization

WOMANKIND, INC.

Employer identification number

65-1003208

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		FUNDRAISING EVE (event type)	(event type)	None (total number)	(add col. (a) through col. (c))
	1 Gross receipts	75,567			75,567
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	75,567			75,567
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
11 Net income summary. Combine line 3, column (d), and line 10				75,567	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Combine line 1, column d, and line 7					

9 Enter the state(s) in which the organization operates gaming activities:
 a Is the organization licensed to operate gaming activities in each of these states? 9a Yes No
 b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a Yes No
 b If "Yes," explain:

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public
Inspection

Employer identification number
65-1003208

WOMANKIND, INC.

Amended Return Explanation

Prior return as issued did not include the number of voting members of the Board of Directors. Amended return reflects this updated information.

Form 990 - Organization's Mission or Most Significant Activities

OUR GOAL IS TO PROVIDE ACCESSIBLE AND AFFORDABLE WOMEN'S PRIMARY, GYNECOLOGICAL AND MENTAL HEALTH CARE THAT IS SAFE, INDIVIDUALIZED, HUMANISTIC AND PREVENTION FOCUSED TO WOMEN THROUGH THE LIFECYCLE, REGARDLESS OF ETHNICITY OR SOCIOECONOMIC LEVEL.

Form 990, Part III, Line 4d - All Other Achievements

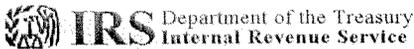
ACCESSIBILITY TO SAFE, HUMANISTIC AND PREVENTION ORIENTED HEALTHCARE FOR WOMEN

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

REVIEWED AND COMMENTED UPON BY EX. DIRECTOR AND TREASURER. APPROVED VERSION IS SENT TO FULL BOARD OF DIRECTORS FOR REVIEW AND APPROVAL FOR ISSUANCE.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

UPON REQUEST



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248132325
Mar. 21, 2012 LTR 4168C E0
65-1003208 000000 00

00024346

BODC: TE

WOMANKIND INC
1511 TRUMAN AVE
KEY WEST FL 33040



009753

Employer Identification Number: 65-1003208
Person to Contact: Paul M Perry
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Mar. 12, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 2000.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

ATTACHMENT J

0248132325

Mar. 21, 2012 LTR 4168C E0

65-1003208 000000 00

00024347

WOMANKIND INC
1511 TRUMAN AVE
KEY WEST FL 33040

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



S. A. Martin, Operations Manager
Accounts Management Operations

ATTACHMENT J

GUIDESTAR
Nonprofit Report

Generated on April 23, 2012, at 4:32 PM EDT

Womankind, Inc.

Also Known As:
 3142 Northside Dr , Ste 101
 Key West, FL 33040

Institutional funders should note that an organization's inclusion on guidestar.org does not satisfy IRS Rev. Proc. 2011-33 for verifying charitable status and identifying supporting organizations.

Contact Information

Womankind, Inc.
 Also Known As:
Physical Address: 3142 Northside Dr
 Ste 101
 Key West, FL 33040
Web Address: www.womankindkeywest.org
Telephone: 305- 294-4004
Contact: Ms. Kim Romano
kromano@womankindkeywest.org
 Executive Director
 305- 294-4004 (ext. 114) tel

At A Glance

Formerly Known As:
Category (NTEE): E Health—General & Rehabilitative /E42 Family Planning Centers
 E Health—General & Rehabilitative /E30 Health Treatment Facilities (Primarily Outpatient)
 F Mental Health, Crisis Intervention /F60 Counseling Support Groups
Areas Served: In a specific U.S. city, cities, state(s) and/or region.
Year Founded: 2001

Mission Statement

Primary and Gynecological health care for women provided by advanced registered Nurse Practitioners under the supervision of a Board Certified Gynecologist. Mental health counseling provided in English and Spanish by trained therapists.

Impact Statement

This organization has not provided an impact statement.

Background Statement

Financial Data [FAQs on Financial Data | Digitizing IRS Form 990 Data](#)

To see financial data from prior years, subscribe to [GuideStar Premium](#).

Revenue and Expenses

Revenue	
Contributions	--
Program Services	--
Membership Dues	--
Special Events	--
Other	--
Total Revenue	--
Expenses	
Program Services	--
Administrative Costs	--
Payments To Affiliates	--
Total Expenses	--
Assets & Liabilities	
Total Assets	--
Total Liabilities	--
Net Assets or Fund Balance at the end of year	--

Balance Sheet

Subscribe to [GuideStar Premium](#) to view this information, if available.

Forms 990 Received from the IRS

- [2010 Form 990](#)
- [2009 Form 990](#)
- [2008 Form 990](#)

Forms 990 Provided by the Nonprofit

Financial Statements

Subscribe to [GuideStar Premium](#) to view this information, if available.

Annual Reports

Formation Documents

Subscribe to [GuideStar Premium](#) to view this information, if available.

Program:

Budget: --

Category:

Population Served:

Program Description:

WomanKind is the largest provider of women's health care and health education in the Florida Keys. We provide gynecologic care, basic primary care and mental health counseling.

Program Long-Term Success:

WomanKind's Teen Clinic, which provides health care, education and counseling to adolescent girls in our community, has reduced the pregnancy rate among its patients to only 2.1% lower than the rate for both the county and state.

Program Short-Term Success:

Program Success Monitored by:

Program Success Examples:

Funding Needs

Volunteer Needs

Request for In-Kind Contributions

Organizational Statistics

Number of Full-Time Employees:	6
Number of Part-Time Employees:	5
Number of Volunteers:	85

Chief Executive

Ms. Elizabeth Langan

Chief Executive Profile:

Ms. Langan holds an MS in Social Work from the University of Pennsylvania and is a member of the National Association of Social Workers. She has worked in the area of women's health for over 10 years. Before ascending to the current position, Betsy was assistant Director at WomanKind for two years.

Board Chair

Board of Directors

Name	Institution Affiliation
Peary Fowler	
Leslie Leonelli	
Natileen Cassel	
Colleen Quirk	
Janis Childs	
Erica Hughes	
Mona Clark	

Officers for Fiscal Year

Subscribe to [GuideStar Premium](#) to view this information, if available.

Highest Paid Employees & Their Compensation

Subscribe to [GuideStar Premium](#) to view this information, if available.

News

CITY OF KEY WEST, FLORIDA

Business Tax Receipt

This Document is a business tax receipt
Holder must meet all City zoning and use provisions.
P.O. Box 1409, Key West, Florida 33040 (305) 809-3955

Business Name WOMANKIND / DALY CtlNbr:0018569
Location Addr 3142 NORTHSIDE DR
Lic NBR/Class 12-00026856 SERVICE - PROFESSIONAL
Issue Date: April 11, 2012 Expiration Date: September 30, 2012
License Fee \$25.00
Add. Charges \$0.00
Penalty \$0.00
Total \$25.00
Comments: NURSE PRACTITIONER

This document must be prominently displayed.

WOMANKIND INC

WOMANKIND / DALY
1511 TRUMAN AVE

KEY WEST FL 33040

Oper: CWALKER Type: DC Drawer: 1
Date: 4/12/12 51 Receipt no: 60744
2012 26856
OR LIC OCCUPATIO 1 \$25.00
Trans number: 2762105
CK CHECK 2019 \$25.00
Trans date: 4/12/12 Time: 9:40:09

ATTACHMENT K

**2011 / 2012
MONROE COUNTY BUSINESS TAX RECEIPT
EXPIRES SEPTEMBER 30, 2012**

RECEIPT# 47162-80456

Business Name: WOMANKIND INC

Owner Name: WOMANKIND INC
Mailing Address: 1511 TRUMAN AVE
KEY WEST, FL 33040

Business Location: 1511 TRUMAN AVE
KEY WEST, FL 33040
Business Phone: 305-294-4004
Business Type: MEDICAL OFFICES ()

Rooms Seats Employees Machines Stalls

3

Tax Amount	Number of Machines:		For Vending Business Only		Vending Type:			Total Paid
	Transfer Fee	Sub-Total	Penalty	Prior Years	Collection Cost			
22.00	0.00	22.00	0.00	0.00	0.00	0.00	22.00	

Paid 103-10-00002021 07/22/2011 22.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT
WHEN VALIDATED

Danise D. Henriquez, CFC, Tax Collector
PO Box 1129, Key West, FL 33041

THIS IS ONLY A TAX.
YOU MUST MEET ALL
COUNTY AND/OR
MUNICIPALITY PLANNING
AND ZONING REQUIREMENTS.

ATTACHMENT K



STATE OF FLORIDA
DEPARTMENT OF HEALTH
Operating Permit

For: Biomedical Waste - Medical Doctor

Issued To: WomanKind Inc.
1511 Truman Ave
Key West, FL 33040

Mailed To: Womankind, Inc.
1511 Truman Ave
Key West, FL 33040

Audit Control: 44-BID-1801630
Permit Number: 44-64-90307
County: Monroe
Issue Date: 10/01/2011
Amount Paid: 125.00
Date Paid: 09/16/2011
Permit Expires On: 09/30/2012


Issued By: Monroe County Health Department
1100 Simonton St
Ofc 242
Key West, FL 33040

Duplicate - CUSTOMER (Non-Transferable) DISPLAY CERTIFICATE IN A CONSPICUOUS PLACE

Cleveland Institute of Dental-Medical Assistants, Inc.



To all to whom these Presents may come, Greeting:
BEATI PATRI

TRACY FIORE

is a qualified

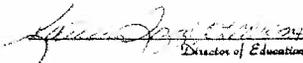
Medical Assistant

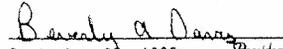
having honorably completed the Course of Study prescribed by this Institution and upon examination having given satisfactory evidence of student's knowledge of Medical Office Procedures, Office Management, Secretarial, Basic Laboratory Procedures, Electrocardiograms, X-Ray Techniques and Medical Terminology.

ATTACHMENT N

In Witness Whereof, we have caused this certificate to be signed by the officers of the school and the school seal to be affixed.




Director of Education


September 23, 1996
Lyndhurst, Ohio
President



FLORIDA DEPARTMENT OF HEALTH
DIVISION OF DISEASE CONTROL
BUREAU OF HIV/AIDS
CERTIFICATE OF REGISTRATION

Issued To

Womankind, Inc.
Site #01-301, #10-226

for the period of one year

to conduct HIV Prevention Counseling, Testing and Linkage Services.

EXPIRES October 27, 2012

Marlene LaLota, MPH, Program Administrator
Prevention Section, Bureau of HIV/AIDS

AC# 4773184

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

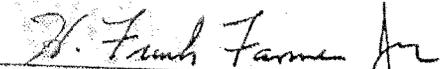
DATE	LICENSE NO.	CONTROL NO.
01/14/2012	ME 49975	378199

The **MEDICAL DOCTOR** named below has met all requirements of the laws and rules of the state of Florida.

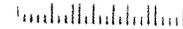
Expiration Date: **JANUARY 31, 2014**
JEROME EDWARD COVINGTON
ATTN: MECHELLE BURGOHY/DR. MARK WHITE
3134 NORTHSIDE DRIVE
KEY WEST, FL 33040

QUALIFICATION(S):
DISPENSING PRACTITIONER


Rick Scott
GOVERNOR


H. Frank Farmer, Jr., M.D., Ph.D., F.A.C.P.
STATE SURGEON GENERAL

DISPLAY IF REQUIRED BY LAW



AC# 4697867

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
12/08/2011	ARNP 2654132	1447327

The **ADV REG NURSE PRACTITIONER** named below has met all requirements of the laws and rules of the state of Florida.

Expiration Date: **JULY 31, 2012**
CAROLYN DEWEY DALY
ATTN: MCHD - ROOSEVELT SANDS CENTER
105 OLIVIA STREET
KEY WEST, FL 33040

QUALIFICATION(S):
FAMILY NURSE PRACTITIONER
DISPENSING PRACTITIONER
NURSE PRACTITIONER


Rick Scott
GOVERNOR


H. Frank Farmer, Jr., M.D., Ph.D., F.A.C.P.
STATE SURGEON GENERAL

DISPLAY IF REQUIRED BY LAW

ATTACHMENT N

STATE OF FLORIDA AC# 3867976
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
04/09/2010	ARNP 844312	1202414

The ADV REG NURSE PRACTITIONER
named below has met all requirements of
the laws and rules of the state of Florida.
Expiration Date: JULY 31, 2012

SHUI LIN NGAN KLINGBEIL



LICENSEE SIGNATURE

STATE OF FLORIDA AC# 4303750
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
03/01/2011	RN 9302593	1346281

The REGISTERED NURSE
named below has met all requirements of
the laws and rules of the state of Florida.
Expiration Date: APRIL 30, 2013

JANIS BERNIEN WALLACE



LICENSEE SIGNATURE

Equal Employment Opportunity

Policy:

Womankind's policy is to employ, retain, promote, layoff, eliminate positions, or terminate and otherwise treat all employees on the basis of behavior, competency, qualifications and overall work performance. Employment decisions are made without regard to age, race, sex, country of origin, religion, creed, color, ancestry, physical or mental disability, medical condition, sexual orientation, veteran status, marital status, or any other legally defined characteristic.

It is not only expected, but also demanded, that all employees shall cooperate to fulfill this commitment to the objective of equal opportunity for all. Anyone who uses language or displays conduct which reflects negatively on any of the above mentioned characteristics or any other legally defined characteristics may be subject to disciplinary actions up to and including discharge. Language or conduct given in jest or fun will be treated as though it was by intention.

Purpose:

To provide equal employment opportunities to all staff. To guarantee each employee and applicant for employment the right to be treated as an individual and to succeed in employment on the basis of each individual's efforts, qualifications, and abilities in performance.

Procedure:

1. Any employees with questions or concerns about any type of discrimination in the work place are encouraged to bring these issues to the attention of their immediate supervisor or the Executive Director. If the complainant is uncomfortable for any reason discussing such matters with either of these individuals or if the employee is not satisfied after bringing the matter to the attention of these individuals, then he or she may report the matter to the WomanKind Executive Committee.
2. WomanKind prohibits retaliation against anyone for having raised such a complaint or cooperation with an investigation of a complaint.
3. Anyone found to be engaged in any type of unlawful discrimination will be subject to disciplinary action, up to and including termination of employment.

ATTACHMENT P:
Most Recent
Evaluation/Monitoring

**AUDIT REPORT OF MONROE COUNTY HUMAN
SERVICES ADVISORY BOARD GRANTS AND
GRANT POLICIES AND PROCEDURES**

I. OBJECTIVES AND SCOPE

At the request of the Monroe County Clerk of the Circuit Court, the Internal Audit Department has completed an audit of the Human Services Advisory Board (HSAB) grants and policies and procedures for the Monroe County Board of County Commissioners (BOCC). The audit objectives were to assess compliance with the Monroe County Board of County Commissioners' policies, procedures, resolutions and agreements and the Human Services Advisory Board's policies and procedures. Other objectives were to evaluate the needs and areas of concern for the further development of HSAB policies and procedures.

II. METHODOLOGY

A. We interviewed the following personnel to obtain information about the County and HSAB's Policies and Procedures.

1. Lisa Tennyson, Grants Administrator
2. Suzanne Hutton, Monroe County Attorney
3. The Clerk's Finance Department personnel
4. Director and Staff of Womankind, Inc.
5. Chairperson, Director and Bookkeeper of Independence Cay, Inc.
6. Chairperson of Big Pine Athletic Association, Inc.
7. Big Pine Bookkeeping, Bookkeeper for Big Pine Athletic Association, Inc.

B. Internal Audit Department examined the following documents:

1. BOCC Resolutions.
2. BOCC Agenda Items.
3. BOCC Minutes.
4. BOCC Agreements.
5. HSAB Minutes.
6. HSAB Working Group Minutes and Recommendations.
7. HSAB Funding Recommendations.
8. Records obtained from individual organizations selected for audit by Internal Audit.

C. Internal Audit Department reviewed Administrative Resolutions, Agenda Items, Minutes and Agreements to ensure that all terms and conditions were being complied with as documented within the instruction.

D. Internal Audit Department reviewed and traced payments to Monroe County records.

E. Internal Audit Department compared reimbursement request made to other agencies with HSAB payment records for duplicity.

III. BACKGROUND INFORMATION

The Human Services Advisory Board was created by BOCC Resolution 077-1991. The Human Services Advisory Board purpose is "to evaluate County needs and agency performances using established guidelines so as to determine where the community will derive the greatest benefit from the tax dollars expended..." The HSAB "shall establish eligibility guidelines and application procedures which shall become effective upon approval by the BOCC. The HSAB shall (1) carefully evaluate the County's human services needs, (2) recommend the most cost effective way of obtaining needed services, (3) develop measures of the services provided, and (4) determine which of those services are appropriate for public funding." See Exhibit A – Monroe County Board of County Commissioners Resolution 077-1991, dated March 13, 1991.

BOCC Resolution No. 056-1992 states that the HSAB shall consist of five (5) members, each of who shall be appointed by each individual County Commissioner and limited to a term of two years or the termination of the respective appointing Commissioner's term. The original Resolution set the HSAB board at seven (7) members. ." See Exhibit B – Monroe County Board of County Commissioners Resolution 056-1992, dated January 8, 1992.

On June 16, 2010, the BOCC approved the creation of a committee "to examine and possibly modify the HSAB funding process and policies including funding categories, weighting of categories, etc." The committee will consist of 9 voting members including the 5 current HSAB members and 4 additional members to be appointed by each of the 4 commissioners, not including the Mayor. The committee will meet approximately 5 times and complete and forward a series of funding policy recommendations to the BOCC by November 2010, to be incorporated into the FY 2012 budget process. See Exhibit C – BOCC Agenda Item and Excerpt from BOCC Minutes from June 16, 2010. On November 17, 2010, the BOCC reviewed the recommendations of the committee and made several changes to the HSAB procedures. See Exhibit D - BOCC Agenda Item and Excerpt from BOCC Minutes from November 10, 2010. The following changes were made: "modify/streamline the application; elicit additional information about how prior year's funding was utilized; offer an opportunity for organization to change their funding category; eliminate the weighted percentages attached to each of the funding categories for two years; move several organizations that are not statutorily or otherwise required to be funded from BOCC line items to HSAB with the funding (these are: Big Pine Athletic Assoc., Heart of the Keys Youth, Kids Come First; Rural Health Network, Upper Keys YMCA and Keys to Recovery); and to make an explicit policy that the vast majority of HSAB funding granted to any agency must be spent in and directly benefit Monroe County.

According to the "Recommendations for County Funding for Health and Human Services Providers for FY 2012", the three categories of human services are: medical, core social services and quality of life services. The fiscal year 2012 HSAB budget is \$ \$2,221,777 (this total represents

\$1,768,200 in previous HSAB organizations budgets plus \$453,577 for the budgets of six organizations previously funded from BOCC line items to HSAB). This amount has remained the same since fiscal year 2010. The overall budget has decreased since its amount of \$2,326,581 in fiscal year 2006. See Exhibit E - Recommendations for County Funding for Health and Human Services Providers for FY 2012.

The HSAB reviews funding requests from nonprofit, human service organizations. Each year, the HSAB meets in February and May to discuss and review the applications and finalize its recommendations for funding to the BOCC. According to the "Recommendations for County Funding for Health and Human Services Providers for FY 2012", The HSAB prioritizes funding for organizations that; use HSAB funds to leverage outside funding, do not duplicate existing services, demonstrate need for services and demonstrate sound financial management. The HSAB uses categories and weighted percentages assigned to each category as a guideline to assist in making its funding recommendations. Medical Services category is weighted 65% and means the organization provides medical, mental and/or dental care for economically disadvantaged. Core Social Services category is weighted 30% and means the organization provides essential services such as food, clothing or housing; emergency disaster relief; family violence issues; adult and child daycare; end-of-life support for the disadvantaged. Quality of Life Improvement Services is weighted 5% and means the organization provides services created to improve the quality of life for individuals or community; educational, preventative, training, recreational and cultural services, etc. See Exhibit E - Recommendations for County Funding for Health and Human Services Providers for FY 2012.

IV. AUDIT CONCLUSIONS

A. BOCC Agreements for HSAB grant funding should contain specific information on which expenses qualify for funding and reimbursement by the County.

B. The HSAB needs written policies and procedures codified and formally approved by the Board of County Commissioners.

C. Monitoring and performance measures need to be established and utilized.

D. The HSAB needs to establish or adhere to existing term limits for board members to promote independence, accountability and transparency.

E. All organizations applying for HSAB grant funding should submit an IRS form 990 or a Statement of Functional Expenses, if they are only required to file IRS Form 990-EZ.

F. The organization's IRS Letter of Determination Indicating 501c3 status should be checked for current status.

G. Three individual HSAB grantees were chosen for audit: Big Pine Athletic Association, Independency Cay, Inc. and Womankind, Inc.

G1. The Big Pine Athletic Association, Inc. should be aware of reimbursements received and HSAB funding amounts available.

G2. The Big Pine Athletic Association, Inc. did not receive United Way funding in 2011.

G3. The Big Pine Athletic Association, Inc. operated a concession stand without entering it into their bookkeeping records or reporting it as project income on their application.

G4. Independence Cay, Inc. did not file the 2009 and 2010 IRS Return of Organization Exempt from Income Tax (Form 990) that was submitted with their HSAB applications.

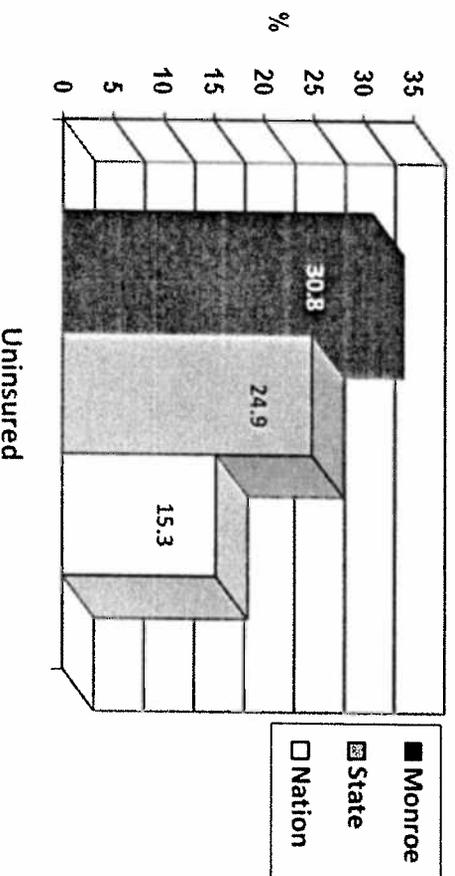
G5. Independence Cay, Inc. submitted that same bill for reimbursement to the HSAB and the Southernmost Homeless Assistance League (SHAL) for reimbursement.

Womankind
Attachment Q
Data
Showing
Need for Programs

Uninsured Rate

- Since many people gain health insurance benefits from their employer, the number of self-employed and hospitality workers account for the uninsured rate of the residents being 30.8%, which is greater than that of Florida (24.9%) and that of the Nation (15.3%) in 2007.

Uninsured Rate, 2007



Sexual Behaviors Among Florida Public High School Students



Results from the 2011 Florida Youth Risk Behavior Survey

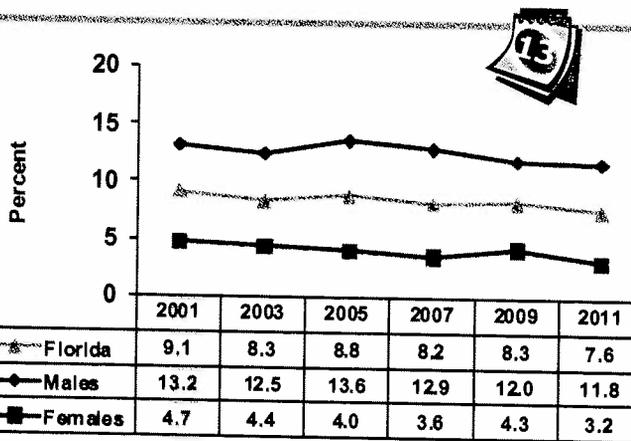
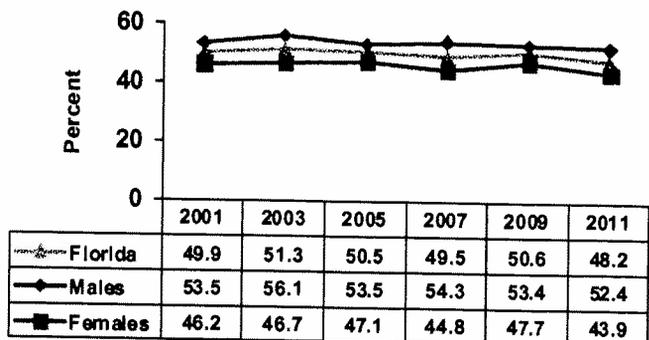
Fact Sheet 4

Introduction

The Florida Youth Risk Behavior Survey (YRBS) is a self-administered, school-based anonymous survey that has been conducted in Florida public high schools every two years since 1991. It is part of a national survey effort led by the Centers for Disease Control and Prevention (CDC) to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth in the United States. In 2011, 6,212 students in 78 public high schools in Florida completed the YRBS. The overall response rate was 75%. Since 2001, the response rate has been high enough for the data to be weighted to represent all Florida public high school students.

Ever had sexual intercourse

In 2011, approximately 350,000 students (48.2%) had ever had sexual intercourse. This prevalence decreased significantly by 3.4% from 2001 to 2011. Males consistently had a significantly higher prevalence of this behavior than females.

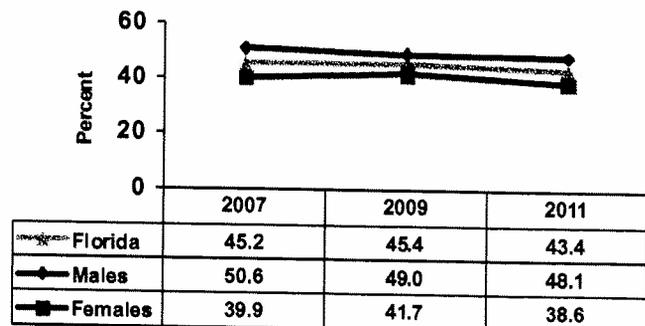


Had sex before age 13

In 2011, approximately 54,800 students (7.6%) had sexual intercourse for the first time before age 13. This prevalence decreased significantly by 16.5% from 2001 to 2011. Males consistently had a significantly higher prevalence of this behavior than females.

Ever had oral sex*

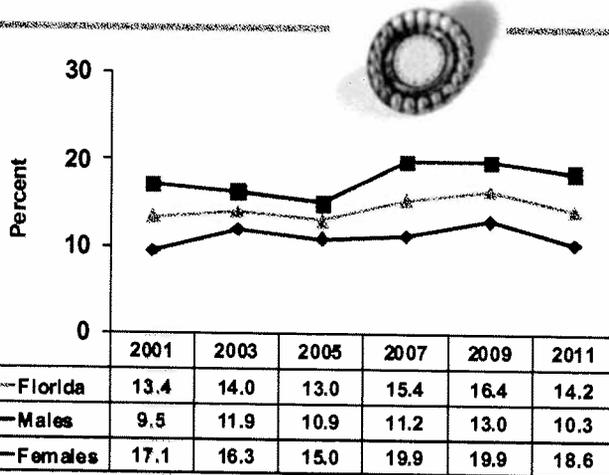
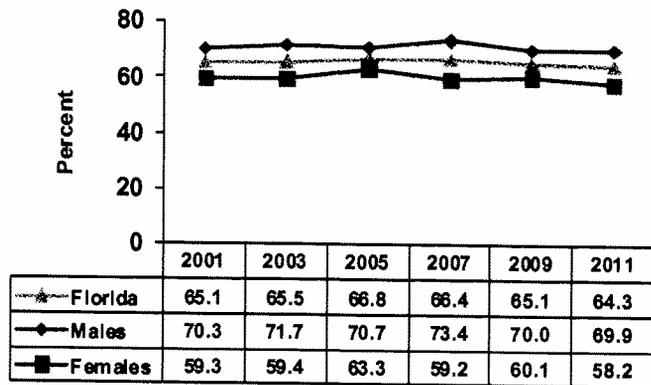
In 2011, approximately 322,100 students (43.4%) had ever had oral sex. This prevalence decreased significantly by 4.0% from 2007 to 2011. Males had a significantly higher prevalence of this behavior than females from 2007 to 2011.



*Question first asked in 2007

Used a condom

In 2011, among the approximate 245,400 students who had sexual intercourse during the past three months, approximately 154,700 of these students or their partners (64.3%) used a condom the last time they had sexual intercourse. This prevalence did not change significantly from 2001 to 2011. Males had a significantly higher prevalence of this behavior than females in all years except 2005.

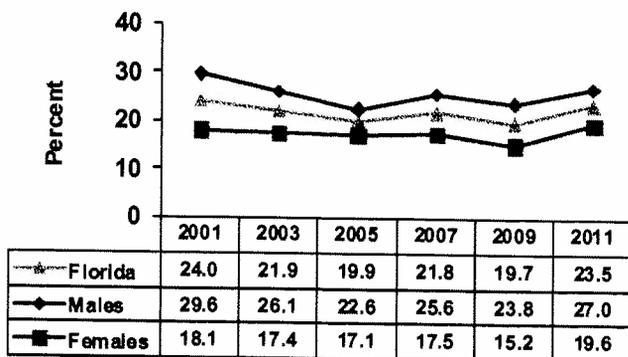


Used birth control pill

In 2011, among the approximate 245,400 students who had sexual intercourse during the past three months, approximately 33,000 students (14.2%) used birth control pills (or their partner used birth control pills) to prevent pregnancy the last time they had sexual intercourse. This prevalence did not change significantly from 2001 to 2011. Females had a significantly higher prevalence of this behavior than males in all years except 2003 and 2005.

Used alcohol or drugs before last sexual intercourse

In 2011, among the approximate 245,400 students who had sexual intercourse during the past three months, approximately 57,700 students (23.5%) drank alcohol or used drugs before having sexual intercourse. This prevalence has fluctuated from 2001 to 2011. Males had a significantly higher prevalence of this behavior than females in all years except 2005.



For more information about the YRBS, please contact the Chronic Disease Epidemiology Surveillance and Evaluation Section at (850) 245-4401, by e-mail at ChronicDisease@doh.state.fl.us, or visit our website at: <http://www.FloridaChronicDisease.org/YRBS/intro.htm>. For an interactive database of YRBS data, visit the CDC's YRBS web site at: www.cdc.gov/yrebs. This document was developed by the Bureau of Epidemiology for the Florida Department of Education's Office of Healthy Schools in Cooperation with the U.S. Centers for Disease Control and Prevention, Division of Adolescent and School Health Project Number U87/CCU001239-02.

Facts on American Teens' Sexual and Reproductive Health

SEXUAL ACTIVITY

- Although only 13% of teens have had sex by age 15, most initiate sex in their later teen years. By their 19th birthday, seven in 10 female and male teens have had intercourse.
- On average, young people have sex for the first time at about age 17, but they do not marry until their mid-20s. This means that young adults may be at increased risk for unintended pregnancy and STIs for nearly a decade or longer.
- Teens are waiting longer to have sex than they did in the recent past. In 2006–2008, some 11% of never-married females aged 15–19 and 14% of never-married males that age had had sex before age 15, compared with 19% and 21%, respectively, in 1995.
- However, after declining substantially between 1995 and 2002, the proportion of teens who had ever had sex did not change significantly from 2002 to 2006–2008.
- In 2006–2010, the most common reason that sexually inexperienced teens gave for not having had sex was that it was “against religion or morals” (38% among females and 31% among males). The second and third most common reasons for females were “don’t want to get pregnant” and “haven’t found the right person yet.”
- Among sexually experienced teens, 70% of females and 56% of males report that their first sexual experience was with a steady partner, while 16% of females and

28% of males report first having sex with someone they had just met or who was just a friend.

- Seven percent of young women aged 18–24 who had had sex before age 20 report that their first sexual experience was nonvoluntary. Those whose first partner was three or more years their senior were more likely to report this than were other women in the same age-group.
- Teens in the United States and Europe have similar levels of sexual activity. However, European teens are more likely than U.S. teens to use contraceptives generally and to use the most effective methods; they therefore have substantially lower pregnancy rates.

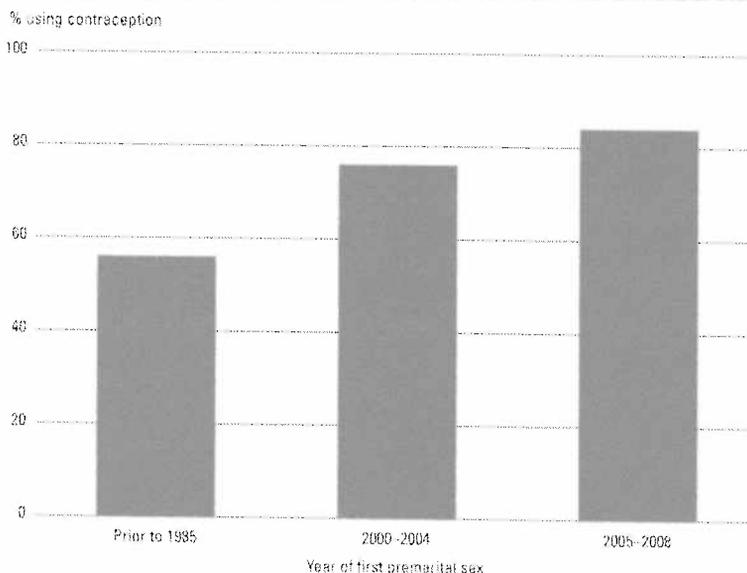
- Three percent of males and 8% of females aged 18–19 in 2002 reported their sexual orientation as homosexual or bisexual; the proportions reporting same-sex behaviors were similar.

CONTRACEPTIVE USE

- A sexually active teen who does not use a contraceptive has a 90% chance of becoming pregnant within a year.
- The majority of sexually experienced teens (78% of females and 85% of males) used contraceptives the first time they had sex.
- The use of contraceptives during first premarital sex has been increasing, rising from 56% among women whose first

Teen Contraceptive Use

Contraceptive use at first premarital sex is increasing.



Teen Pregnancy Outcomes, 2006

The majority of teen pregnancies end in birth.



premarital sex occurred before 1985, to 76% among those who first had sex in 2000–2004, to 84% among those whose first sex occurred in 2005–2008.

- The condom is the most common contraceptive method used at first intercourse; 68% of females and 80% of males use it the first time they have sex.

- In 2006–2010, some 96% of sexually experienced female teens had used a condom at least once, 57% had ever used withdrawal and 56% had used the pill. Smaller proportions had used other methods.

- In the same period, one in five sexually active female teens (20%) and one-third of sexually active male teens (34%) reported having used both the condom and a hormonal method the last time they had sex. Dual method use offers protection against both pregnancy and STIs.

- In 2006–2010, some 86% of female teens and 93% of male teens reported using contraceptives at last sex. These proportions represent a marked improvement since 1995, when only 71% of female teens and 82% of male teens had reported using a method at last sex. However, the proportions were

unchanged between 2002 and 2006–2010.

- Nearly one in five female teens at risk for unintended pregnancy (19%) were not using any contraceptive method at last intercourse.

ACCESS TO CONTRACEPTIVE SERVICES

- No state explicitly requires parental consent or notification for contraceptive services. However, two states (Texas and Utah) require parental consent for contraceptive services paid for with state funds.

- Twenty-one states and the District of Columbia explicitly allow minors to obtain contraceptive services without a parent's involvement. Another 25 states have affirmed that right for certain classes of minors, while four states have no law. In the absence of a specific law, courts have determined that minors' privacy rights include the right to obtain contraceptive services.

- In 2002, some 90% of publicly funded family planning clinics counseled clients younger than 18 about abstinence, the importance of communicating with parents about sex or both topics.

- Nearly two million women younger than 20 were served by publicly supported family planning centers in 2005; these teens represented one-quarter of the centers' contraceptive clients.

- In 2006, only 5% of American high schools made condoms available to students.

STIS

- Young people aged 13–24 made up about 17% of all people diagnosed with HIV/AIDS in the United States in 2008.

- Although 15–24-year-olds represent only one-quarter of the sexually active population, they account for nearly half (9.1 million) of the 18.9 million new cases of STIs each year.

- Human papillomavirus (HPV) infections account for about half of STIs diagnosed among 15–24-year-olds each year. HPV is extremely common, often asymptomatic and generally harmless. However, certain types, if left undetected and untreated, can lead to cervical cancer.

- Two HPV vaccines—Gardasil and Cervarix are currently available, and both prevent the types of infections most likely to lead to cervical cancer. The Centers for Disease Control now recommends HPV vaccinations for both girls and boys, starting at age 11.

- In 2009, 44% of females aged 13–19 had received one or more doses of the vaccine against HPV; 27% had completed the recommended three doses.

- All 50 states and the District of Columbia explicitly allow minors to consent to STI serv-

ices without parental involvement, although 11 states require that a minor be of a certain age (generally 12 or 14) to do so. Thirty-one states explicitly include HIV testing and treatment in the package of STI services to which minors may consent.

PREGNANCY

- Each year, almost 750,000 U.S. women aged 15–19 become pregnant. Two-thirds of all teen pregnancies occur among 18–19-year-olds.

- Overall, 68 pregnancies occurred per 1,000 women aged 15–19 in 2008. The 2008 rate was a record low and represented a 42% decline from the peak rate of 117 per 1,000, which occurred in 1990.

- The majority of the decline in teen pregnancy rates in the United States (86%) is due to teens' improved contraceptive use; the rest is due to increased proportions of teens choosing to delay sexual activity.

- Despite having declined, the U.S. teen pregnancy rate continues to be one of the highest in the developed world. It is more than twice as high as rates in Canada (28 per 1,000 women aged 15–19 in 2006) and Sweden (31 per 1,000).

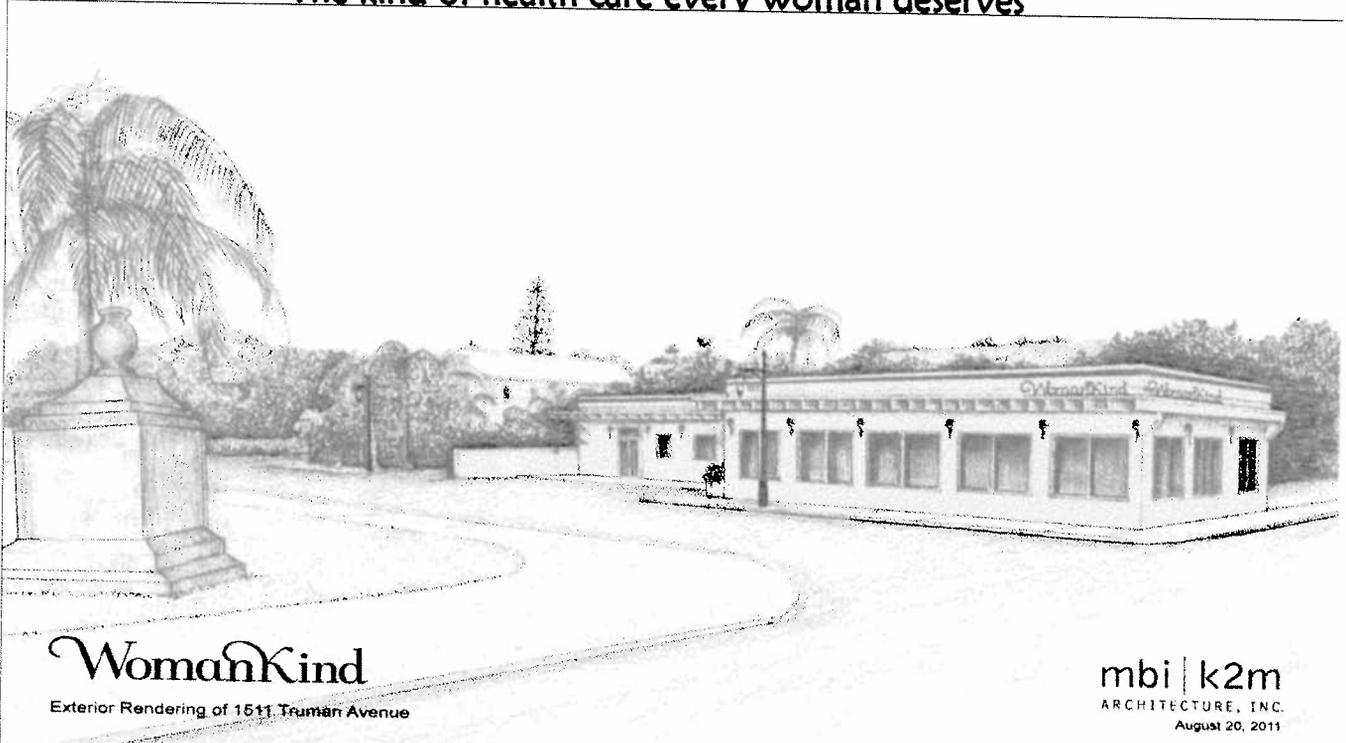
- In 2005, New Mexico had the highest teenage pregnancy rate (93 per 1,000); rates in Nevada, Arizona, Texas and Mississippi followed. The lowest rates were in New Hampshire (33 per 1,000), Vermont, Maine, Minnesota and North Dakota.

- Eighty-two percent of teen pregnancies are unplanned; teens account for about one-

School-aged Child and Adolescent Profile, Monroe County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Modifiable Behaviors Leading to Premature Death (continued)						
Tobacco Use						
Percent of students smoking cigarettes in the past 30 days						
Middle school	Percent	2010	3		5.3%	4.9%
High school	Percent	2010	3		19.8%	13.1%
High Risk Behaviors						
Sexual Activity						
Births to teenage mothers per 1,000 females (3-year rate)						
15-19	Per 1,000	2008-10	1	40	22.0	37.0
15-17	Per 1,000	2008-10	1	7	6.6	17.8
18-19	Per 1,000	2008-10	1	32	48.3	66.1
Percent of repeat births to teenage mothers (3-year rate)						
15-19	Percent	2008-10	2	6	16.5%	18.4%
15-17	Percent	2008-10	2	<2	8.7%(U)	9.5%
18-19	Percent	2008-10	2	4	14.3%	16.8%
Reported new HIV cases ages 13-19 (3-Year Rate) ⁴	Per 100,000	2008-10		<10		14.7
Reported STD cases ages 15-19 (3-Year Rate)	Per 100,000	2008-10	1	47	1236.0	2539.3
Substance Abuse						
Percent of students who used alcohol in past 30 days						
Middle school	Percent	2010	2		17.1%	18.8%
High school	Percent	2010			47.4%	38.0%
Percent of students reporting binge drinking						
Middle school	Percent	2010	2		7.1%	6.9%
High school	Percent	2010			27.7%	19.6%
Percent of students using marijuana/hashish in past 30 days						
Middle school	Percent	2010	3		7.0%	5.7%
High school	Percent	2010			26.6%	18.6%

Womankind

The kind of health care every woman deserves

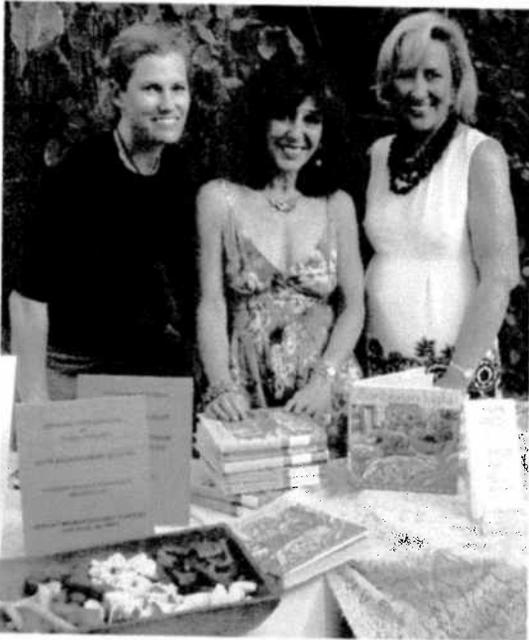


In November of 2011 Womankind moved to a new facility, centrally located and on one of Key West's most highly-travelled intersections. This relocation allowed the organization to reconfigure our physical workspace to increase clinic efficiency, increase organizational capacity, and ultimately, increase the number of clients we serve each year. Clinical expansion was made possible through a "Meeting the Need" grant from the Blue Cross and Blue Shield of Florida Foundation, which improves health outcomes through increased program capacity and reduced barriers to care for low-income, uninsured residents in the Lower Florida Keys. **Womankind needs HSAB support in order to fulfill requirements of this grant.** While there is not a dollar-for-dollar match requirement, the agency would not be able to deliver the services required by the grant without HSAB grant funding.



WOMANKIND

ATTACHMENT R



Womankind has spearheaded new outreach and marketing efforts. In order to increase our full-fee clientele, the agency produces educational forums. Recently, Donna Shields (above) presented on diet and nutrition, an identified topic of interest to a potential upper-income client base.

Outreach to teens (below) includes integration of social media such as Facebook and Twitter. Womankind staff meet with teens both at our clinical facility, and via outreach activities at local schools.

A graphic for the WomanKind Teen Advisory Board. On the left is a smartphone screen displaying a Facebook post titled "Gossip" with text about educating friends on safe sex using social media. To the right of the phone, the text reads: "Call us 305. 294. 4004 Find us" followed by Facebook and Twitter icons. At the bottom, it says "WomanKind Teen Advisory Board Email Chelsea at cnbristo@unca.edu".

Womankind staff and board work hard to produce fundraising events such as our Croquet Tournament (right) on the lawn of Ed Knight's Thompson Island, and the Survivor's Concert (above, right), on Higgs Beach. Funds raised through these annual events help to support the cost of services to low income un/underinsured women in our community.



To cover the cost of mammograms for those who are uninsured and unable to afford the test, Womankind has formed a partnership with the local chapter of Zonta, an international service organization working to improve the status of women. Zonta members raise money through an annual fundraising 5k ABC Walk/Run, which generated \$50,423 in 2011, specifically to pay for mammograms for un/underinsured Lower Keys women. Womankind staff and board came out in full force in 2011 to support Zonta's ABC Walk/Run.

