

House District 24
Senate District 12

THE TWENTY-NINTH LEGISLATURE
APPLICATION FOR GRANTS
CHAPTER 42F, HAWAII REVISED STATUTES

Log No:

For Legislature's Use Only

Type of Grant Request:

GRANT REQUEST – OPERATING

GRANT REQUEST – CAPITAL

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Recipient" means any organization or person receiving a grant.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN):

STATE PROGRAM I.D. NO. (LEAVE BLANK IF UNKNOWN):

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization or Individual:
HAWAII MOTHERS' MILK, INC.

Db/a:

Street Address: 1319 Punahou Street, Honolulu, HI 96826

Mailing Address: 1319 Punahou Street, Honolulu, HI 96826

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name Patricia Ane

Title Executive Director

Phone # 808-763-2767

Fax # 808-983-6057

E-mail HMMI@kapiolani.org

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION INCORPORATED IN HAWAII
 FOR PROFIT CORPORATION INCORPORATED IN HAWAII
 LIMITED LIABILITY COMPANY
 SOLE PROPRIETORSHIP/INDIVIDUAL
 OTHER

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST:

HAWAII MOTHERS' MILK, INC. IS REQUESTING FUNDING TO SUPPORT OUR AGENCY IN THREE AREAS:

- A. EXPANSION OF SERVICES – TO BRING OUR STAFF TO FULL TIME TO EXPAND OUR HOURS OF OPERATION TO A FULL 40 HOUR WORK WEEK AND TO CREATE A PART TIME DIRECTOR OF DEVELOPMENT POSITION TO IMPROVE SUSTAINABILITY .
- B. TO SUBSIDIZE THE FIRST YEAR OF UNEXPECTED RENT OBLIGATION IN OUR NEW FACILITY AT KAPI'OLANI MEDICAL CENTER.
- C. TO UPGRADE OUR COMPUTERS AND THE PHONE SYSTEM THAT WILL NO LONGER BE PROVIDED BY KAPI'OLANI MEDICAL CENTER. ALSO TO REPLACE NON-FUNCTIONING /BROKEN FURNITURE.

4. FEDERAL TAX ID #: [REDACTED]

5. STATE TAX ID #: [REDACTED]

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2018: \$ 84,084.00

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
 EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ _____

FEDERAL \$ _____

COUNTY \$ _____

PRIVATE/OTHER \$ 46,434.00

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:

[REDACTED]
AUTHORIZED SIGNATURE

PATRICIA ANE, EXECUTIVE DIRECTOR
NAME & TITLE

JANUARY 20, 2017
DATE SIGNED



RECEIVED
1/20/17
[Signature]

Hawaii Mothers' Milk, Inc.
Helping Hawaii's Mothers and Babies Since 1975
1319 Punahou Street Honolulu, Hawai'i 96826
"Warmline" 763-2768, Business Line 763-2767

**BOARD OF
DIRECTORS:**

January 20, 2017

Dawn T. Sugihara, Esq.
President

Maile L. Kawamura
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Wendy McLain, P.E.
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Sherri M. Tisza, MD
Director

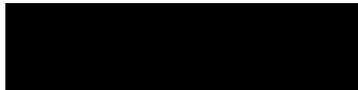
Aloha!

Please accept this Grant In Aid Application for fiscal year 2017-18.

We appreciate you consideration of our funding request.

Please contact me with any questions at 808-763-2767

Mahalo,



Patricia Ane
Hawaii Mothers' Milk, Inc.
Executive Director

EIN Tax Id: 99-0161419



Application for Grants

If any item is not applicable to the request, the applicant should enter "not applicable".

I. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Please include the following:

1. A brief description of the applicant's background;

Hawaii Mothers' Milk, Inc. (HMMI) is a private non-profit organization helping Hawaii's mothers and babies since 1975. HMMI's mission is to encourage and promote breastfeeding as the best source of nutrition for infants. HMMI provides comprehensive breastfeeding support and services to the entire State of Hawaii, helping families who choose to breastfeed their babies to enjoy a successful and healthy start.

2. The goals and objectives related to the request;

- A. Expansion of Services: Currently, our staff is all part-time and we would like to bring all staff to full time status to better service our clients and community. We would also like to include a new part-time employee, Director of Development, to seek grant funding, administer grants and to conduct fundraising/special events.

The demand for outpatient lactation services by HMMI has increased dramatically. Our current operating hours (M-F, 0900-1400) are inadequate to meet these demands as many new mothers wait several days to over a week for an appointment. In response, HMMI plans to expand operating hours by 30% over the next year so that clients' needs can be met promptly. For this application, HMMI is requesting funding assistance for the planned expansion of operating hours. The primary goal of expansion is to increase the number of face-to-face lactation consultations that can be done at the HMMI office. Secondary goals include: increased community breastfeeding rates and increased opportunities for education of to-be mothers, new mothers, and health care professionals. Once expanded operating hours are well established and publicized, it is anticipated that increased foot-traffic/office visits will result in increased retail sales, rental business, and donations that will sustain the expansion in the long-run.

Hawaii Mothers' Milk, Inc

- B. Rental Subsidy: Historically, HMMI has not paid rent for our space at Kapi'olani Medical Center for Women & Children (KMCWC). In 2016, KMCWC's moved our agency to their new building and have requested HMMI to start paying \$10,000 for rent in fiscal year 2017-18, with annual rental increases to \$29,000 by year 2026-27. We are including this unexpected rent expense of \$10,000 for the first year.
 - C. Upgrading Equipment: Currently HMMI has only one computer system for our executive director only. We would like to provide computer access to all employees so computer equipment, printers and laptops are needed. Our office furniture consists of used, collected furniture and we would like to acquire new lockable filing cabinets and working chairs.
3. The public purpose and need to be served;

Our office receives about 3,000 visits a year with 42% of those visits for Lactation Consultations while our breastfeeding lactation line handles close to 4,000 telephone consultations calls annually. Without this professional, individualized assistance, it is likely that many mothers would not continue to nurse after the first few days or weeks following birth. Home visits from a licensed lactation consultant on Oahu cost from \$100-\$125 per hour. HMMI is the only community lactation resource that provides consultation services free of charge to the women of Hawaii. By providing complimentary services, HMMI enables new mothers, regardless of economic status, to choose breastfeeding over formula feedings, providing their newborn infant with the best nutrition and healthiest start in life.

A growing body of research exists supporting the benefits of breastfeeding and use of human milk for infant feedings. The benefits of breastfeeding are far reaching, extending from child health to maternal health to community benefits. Since 2005, the American Academy of Pediatrics has been revising its policy statement regarding breastfeeding and how doctors, hospitals, and communities can support the breastfeeding mother-baby dyad.

Breastfed infants benefit from enhanced immunity, protection against certain life threatening diseases and better neurocognitive and social development when compared to formula fed counterparts. Human milk feedings have been shown to decrease the incidence of bacterial meningitis, bacteremia, necrotizing enterocolitis, urinary tract infections and late onset sepsis in preterm infants. Moreover, breast milk feeds impart protection to children from common childhood illnesses such as gastroenteritis ("stomach flu"), middle ear infections and upper respiratory tract infections. Rates of sudden infant death syndrome, type 1 diabetes mellitus, type 2 diabetes mellitus, lymphoma, leukemia, Hodgkin disease, obesity, hypercholesterolemia and asthma are also decreased in older children who were fed human milk. Studies have also suggested superior

Hawaii Mothers' Milk, Inc

performance on cognitive testing of breastfed babies, though additional research in this area is needed.

4. Describe the target population to be served;

The majority HMMI's clients are new or expecting mothers and babies who live on Oahu and seek lactation support, counseling, and supplies. Our population also serves the medical professionals and clinics who service these new mothers and families. HMMI does assist neighbor island mothers and families with education and telephone counseling and we also service these families while here on Oahu when their infants are hospitalized in the newborn special care unit at Kapiolani Medical Center for Women and Children.

5. Describe the geographic coverage.

HMMI provides one-on-one lactation counseling to mothers, families and health professionals on O'ahu and statewide phone counseling and breastfeeding products, breastpump equipment and support.

II. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities;

Our intent is to increase services to the community from 5 hours a day to 8 hours, so mothers can be seen in a timelier manner. The executive director will seek qualified individuals for the program. The director of development shall be filled by an individual with experience in grant writing, grant administration, donor development and special events.

2. Provide a projected annual timeline for accomplishing the results or outcomes of the service;

In Q1, HMMI will purchase the equipment, hire new staff and increase hours of operations to full time. Q2 – Q4, maintain full time hours, increase funding to support our ongoing lactation services.

3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; and
Currently our staff handles about 3,000 visits yearly with 42% of those visits for Lactation Consultations while our breastfeeding warmline handles close to 4,000 telephone consultation calls annually. Our lactation consultants are certified by the

Hawaii Mothers' Milk, Inc

highest standards, International Board of Lactation Consultant Examiners (IBLCE) to assure our clients are receiving quality and the best-practice services. Without this professional, individualized assistance, it is likely that many mothers would not continue to nurse after the first few days or weeks following birth. Through extended hours, we can service more mothers and families. New computers will help collect statistics on client services and improve the efficiency of the office staff.

4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the expending agency.

At year end, a report will be provided that will include a comparison of beginning and year-end figures for the number of hours of operation available to clients, the number of clients seen (in the year prior) for lactation counseling, a measure of the waiting time for clients to receive services, the number of calls taken on the warmline for lactation advice, and other measures of the impact of expanded hours of operation.

III. Financial

Budget

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.

See "Budget Request By Source of Funds" included in application.

2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2018.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$28,911.00	\$18,391.00	\$18,391.00	\$18,391.00	\$84,084.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2018.

Funding for operating expenses not covered by this grant will be requested from Aloha United Way and other private foundations, client donations, individual donations and will be generated through special events and the sales of breastfeeding products and equipment.

Hawaii Mothers' Milk, Inc

4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable.

Not Applicable

5. The applicant shall provide a listing of all federal, state, and county government contracts and grants it has been and will be receiving for program funding.

Not Applicable

6. The applicant shall provide the balance of its unrestricted current assets as of December 31, 2016.

Balance Sheet as of December 2016 is included with the application.

IV. Experience and Capability

A. Necessary Skills and Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request.

The Executive Director, Patricia Ane has a BBA from the University of Hawaii's Business College and has been the Executive Director of HMMI since October 2000. Both our licensed lactation consultants (LC) are IBCLC certified and have many years' experience working in and with breastfeeding mother's professionals servicing our mothers.

B. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities.

HMMI began at the original Children's Hospital located on Kuakini Street. The hospital later merged with KMCWC and our agency moved to our now current address on Punahou Street. Historically, KMCWC provided office spaced for our agency at no cost.

Hawaii Mothers' Milk, Inc

During the summer of 2016, HMMI moved into a 490 square foot office that is located in the newest building at KMCWC. This building offers state-of-the-art technology for KMCWC's Neonatal Intensive Care Unit (NICU) and Pediatric Intensive Care Unit (PICU) departments. HMMI's new office is beautifully designed and ideally located to help HMMI better provide breastfeeding counseling to our community and still be close to those patients requiring special care. However, starting in July of 2017, HMMI will be required to pay KMCWC an annual rental fee of \$29,000 a year. As a courtesy, KMCWC will begin phasing in our rent amount to start at \$10,000 in FY 2017-18 and will increase this amount annually to reach \$29,000 in year 2026 and beyond.

V. Personnel: Project Organization and Staffing

A. Proposed Staffing, Staff Qualifications, Supervision and Training

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request.

Executive Director (ED):

Currently, the ED is scheduled to work for 35 hours a week. The demands of the agency require a 40 hour work week. The current ED has a Bachelor of Business Administration degree and has been serving as ED since 1999. The grant will allow us to increase the hours to 40 per week.

Administrative Assistant:

Currently, the Administrative Assistant works 5 hours a day for only 4 days per week. With the expansion of our services there will be a need for full time staff support. The grant will allow us to expand the position to full time status and increase the pay to \$12 per hour which is still below a competitive rate. The current administrative assistant has a Bachelor of Arts degree in business management with experience in accounting and office management.

Lactation Consultant (LC):

Currently, two part-time LCs collectively work 5 hours a day, 5 days per week. The grant will allow us to expand the hours to provide the equivalent of one full 40 hour week. This expansion to a full time lactation program will allow HMMI to better accommodate the increasing demands for our lactation services. Both our licensed lactation consultants (LCs) are IBCLC certified and have many years of experience working in and with breastfeeding mothers and professionals providing services to our mothers.

Director of Development (DD):

This new position will provide HMMI the means to seek and gain new funding for our expanded hours of operations and to ensure our sustainability. This position will be part-time, maximum of 15 scheduled hours a week. The DD should have a background working with non-profits and experience in grant writing and administration of grant projects. The DD should also have experience with coordinating special events, including fundraisers.

B. Organization Chart

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organization chart that illustrates the placement of this request.

See attached Organization Chart for HMMI

C. Compensation

The applicant shall provide the annual salaries paid by the applicant to the three highest paid officers, directors, or employees of the organization by position.

Currently the three highest salaries are:

Executive Director: \$46,410 (35 hours a week at \$25.50)

Administrative Assistant: \$10,400 (20 hours per week at \$10)

Lactation Consultants: \$26,000 (total LC hours is 25 hours a week at \$20 an hour)

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain.

Not applicable

B. Licensure or Accreditation

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that the applicant possesses relevant to this request.

Our agency does not require any special licensing or accreditation. Our lactation consultants are certified internationally (IBCLC) which requires annual classes and re-certification of their certificate every 5 years.

C. Private Educational Institutions

The applicant shall specify whether the grant will be used to support or benefit a sectarian or non-sectarian private educational institution. Please see Article X, Section 1, of the State Constitution for the relevance of this question.

Not applicable

D. Future Sustainability Plan

The applicant shall provide a plan for sustaining after fiscal year 2017-18 the activity funded by the grant if the grant of this application is:

- (1) Received by the applicant for fiscal year 2017-18, but
- (2) Not received by the applicant thereafter.

The director of development, with the executive director, will create a sustainability plan that will include sufficient funding annually for budgeted salaries and programs. The sources of funds will include governmental grants, private donations from clients, foundations and special events. The director of development can also develop our existing annual event by broadening our donor campaign to target business leaders, health professionals, and individual donors to increase our revenues. A public education campaign can also be developed to emphasize the opportunity that donating to our program helps provide our babies with a healthy start. Also the director of development can help create and maintain a website with the ability to accept donations online. Lastly, establishing a list of targeted grant and funding opportunities will also help to expand and sustain our lactation services which is lacking in our community.

E. Certificate of Good Standing (If the Applicant is an Organization)

If the applicant is an organization, the applicant shall submit one (1) copy of a certificate of good standing from the Director of Commerce and Consumer Affairs that is dated no earlier than December 1, 2016.

See attached Certificate of Good Standing

BUDGET REQUEST BY SOURCE OF FUNDS

Period: July 1, 2017 to June 30, 2018

Hawaii Mothers' Milk, Inc.

BUDGET CATEGORIES	Total State Funds Requested (a)	Total Federal Funds Requested (b)	Total County Funds Requested (c)	Total Private/Other Funds Requested (d)
A. PERSONNEL COST				
1. Salaries	51,911			80,940
2. Payroll Taxes & Assessments	9,993			6,239
3. Fringe Benefits	0			6,111
TOTAL PERSONNEL COST	61,904			93,290
B. OTHER CURRENT EXPENSES				
1. Airfare, Inter-Island	0			0
2. Insurance	0			4,042
3. Lease/Rental of Equipment	0			0
4. Lease/Rental of Space	10,000			0
5. Staff Training	0			0
6. Supplies	0			1,500
7. Telecommunication	1,660			0
8. Utilities	0			0
9. Printing	0			2,000
10. Computers, printers and software	8,000			500
11. Filing cabinets & Chairs	2,520			0
12. Accounting & Audit Fees	0			5,000
13. Program Expenses	0			500
14.				
15.				
16.				
17.				
18.				
19.				
20.				
TOTAL OTHER CURRENT EXPENSES	22,180			13,542
C. EQUIPMENT PURCHASES				
D. MOTOR VEHICLE PURCHASES				
E. CAPITAL				
TOTAL (A+B+C+D+E)	84,084	0	0	106,832
SOURCES OF FUNDING		Budget Prepared By:		
(a) Total State Funds Requested	84,084	Patricia Ane 808-734-2767		
(b) Total Federal Funds Requested	0	Name (Please type or print) Phone		
(c) Total County Funds Requested	0	[REDACTED] January 20, 2017		
(d) Total Private/Other Funds Requested	106,832	Signature of Authorized Official Date		
TOTAL BUDGET	190,916	Patricia Ane, Executive Director Name and Title (Please type or print)		

BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Period: July 1, 2017 to June 30, 2018

Applicant: Hawaii Mothers' Milk, Inc.

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
Lateral file cabinet with lock (5 drawer)	2	\$1,100.00	\$ 2,200.00	\$ 2,200.00
Chairs, office	4	\$80.00	\$ 320.00	\$ 320.00
Desktop computer, monitor, software	2	\$2,000.00	\$ 4,000.00	\$ 4,000.00
Laptop computer, software	1	\$1,800.00	\$ 1,800.00	\$ 1,800.00
Ipad	2	\$800.00	\$ 1,600.00	\$ 1,600.00
Computer printers (2 color ink jet)	2	\$300.00	\$ 600.00	\$ 600.00
Telephone system (3 line key system, Internet)	1	\$1,660.00	\$ 1,660.00	\$ 1,660.00
TOTAL:	14		\$ 12,180.00	\$ 12,180.00

JUSTIFICATION/COMMENTS:

File cabinets for storage, office chairs, desktop computer for ED, laptops for Lactation Consultants and Director of Development; printers (networked), telephone system (3-line key system, with Internet at \$137.70/month; Hawaiian Telcom proposal).

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$ -	
			\$ -	
TOTAL:				

JUSTIFICATION/COMMENTS:

BUDGET JUSTIFICATION - CAPITAL PROJECT DETAILS

Period: July 1, 2017 to June 30, 2018

Applicant: Hawaii Mothers' Milk, Inc.

Not Applicable

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2015-2016	FY: 2016-2017	FY:2017-2018	FY:2017-2018	FY:2018-2019	FY:2019-2020
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

GOVERNMENT CONTRACTS AND / OR GRANTS

Hawaii Mothers' Milk, Inc.

Not Applicable

Contracts Total: -

	CONTRACT DESCRIPTION	EFFECTIVE DATES	AGENCY	GOVERNMENT ENTITY (U.S. / State / Haw / Hon / Kau / Mau)	CONTRACT VALUE
1					
2					
3					
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**DECLARATION STATEMENT OF
APPLICANTS FOR GRANTS PURSUANT TO
CHAPTER 42F, HAWAII REVISIED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant is awarded;
 - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
 - c) Agrees not to use state funds for entertainment or lobbying activities; and
 - d) Allows the state agency to which funds for the grant were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant.
- 2) If the applicant is an organization, the applicant meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is incorporated under the laws of the State; and
 - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant is awarded shall be conducted or provided.
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawaii Revised Statutes:
 - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
 - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawaii Revised Statutes, for grants used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Patricia Ane of Hawaii Mothers' Milk, Inc.
(Typed Name of Individual or Organization)


(Signature)

January 20, 2017

(Date)

Patricia Ane
(Typed Name)

Executive Director
(Title)

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01/19/17

Accrual Basis

Hawaii Mothers' Milk, Inc.
Balance Sheet
As of December 31, 2016

	Dec 31, 16
ASSETS	
Current Assets	
Checking/Savings	
First Hawaiian Bank	10,445.56
HomeStreet Bank	2,349.36
Morgan Stanley Dean Witter	
Morgan Stanley Dean Witter, MM	19,511.22
Morgan Stanley Dean Witter - Other	-1,488.40
Total Morgan Stanley Dean Witter	18,022.82
Petty Cash	48.00
Total Checking/Savings	30,865.74
Accounts Receivable	
Accts Receivable	-7.75
Total Accounts Receivable	-7.75
Other Current Assets	
Receivables	
Accounts Receivable	2,055.75
Total Receivables	2,055.75
Supplies for Sale or Use	11,448.90
Prepaid Expenses	2,070.75
Total Other Current Assets	15,575.40
Total Current Assets	46,433.39
Fixed Assets	
Leasehold Improvements	7,806.55
Furniture	9,871.31
Fixed Assets	
Equipment	13,106.30
Accumulated Depreciation	-20,180.50
Total Fixed Assets	-7,074.20
Total Fixed Assets	10,603.66
TOTAL ASSETS	57,037.05
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,705.32
Total Accounts Payable	2,705.32
Other Current Liabilities	
Accrued GET	-14.98
Deferred Income - Unrestricted	644.85
PRR-Deposit/Refunds	4,484.55
Payroll Liabilities	1,674.94
Total Other Current Liabilities	6,789.36
Total Current Liabilities	9,494.68
Total Liabilities	9,494.68
Equity	
Retained Earnings	44,429.21
Net Income	3,113.16
Total Equity	47,542.37
TOTAL LIABILITIES & EQUITY	57,037.05

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01/19/17

Accrual Basis

Hawaii Mothers' Milk, Inc.
Profit & Loss
 January through December 2016

	Jan - Dec 16
Ordinary Income/Expense	
Income	
Events	
Family Expositions	356.93
Total Events	356.93
Investment Income	
Interest Income	13.53
Dividend Income	15.56
Total Investment Income	29.09
Med/Supply Income	
Med/Supply Sales	24,948.80
ACA BreastPump Programs	
Other Private Insurance Co	565.00
VAMC Program	1,448.84
Ohana ACA Payments	
UPS Cost for Ohana clients	-27.65
AMEX Cost for Ohana Charges	-571.43
Ohana ACA Payments - Other	20,130.00
Total Ohana ACA Payments	19,530.92
HMSA ACA Payments	19,250.00
Cost of ACA Breastpumps	-17,953.49
ACA BreastPump Programs - Other	250.00
Total ACA BreastPump Programs	23,091.27
HMSA Employee Support Program	5,900.00
HMMI Gift Certificate	120.00
Cost of Med/Supply	
Coupons, Promotions	120.08
Charge Card Service Fee Charge	-35.25
Less Discounts/Promotions	11.40
Cost of Med/Supply - Other	-25,381.19
Total Cost of Med/Supply	-25,284.96
Total Med/Supply Income	28,775.11
Pump Rentals	
Pump Rental Income	
HMSA Pump Rental Coverage Pmts	1,480.00
Pump Rental Income - Other	25,953.35
Total Pump Rental Income	27,433.35
Pump Rental Service Fee	1,965.00
Scale Rental	35.00
Cost of Pump Rental	-3,440.69
Total Pump Rentals	25,992.66
Donations/Contributions Income	
Employee Corporation Programs	90.00
Contributions-Individual	2,955.00
Donation Box - For Service	12,260.50
Total Donations/Contributions Income	15,305.50
Fundraising Events	
Hydroflasks	35.00
Christmas Tree/Wreath Sales	
Habilitat Payment	-1,169.75
Christmas Tree/Wreath Sales - Other	1,690.00
Total Christmas Tree/Wreath Sales	520.25
Christmas Lettter Mailout	1,050.00
Foodland	
Foodland Give Aloha Donations	174.43
Foodland Customer Donations	567.97
Total Foodland	742.40
Silent Auction	
SA Event	
Credit Card Processing Fees	-226.15

5:14 PM

01/19/17

Accrual Basis

Hawaii Mothers' Milk, Inc.
Profit & Loss
 January through December 2016

	Jan - Dec 16
Wifi Service	-49.85
GG Fees	-520.00
Donations at Event	450.64
Fashion Show	390.00
Fukubukuro	594.75
Raffle	785.00
Auction Items	11,382.66
Total SA Event	12,807.05
Benefit Luncheon	
Table Ruby Sponsor	5,000.00
Table Gold Sponsor	3,000.00
Table Silver Sponsor	10,400.00
Individual Luncheon Sales	
GG Ticket Purchase Fees	-8.11
Individual Luncheon Sales - Other	1,875.00
Total Individual Luncheon Sales	1,866.89
Luncheon, Event Day Cost	
GG Fees	150.00
Lactation Gifts	-75.00
Favors	-320.85
Premium Favors	-623.00
Food Service Charge	-9,214.25
Gold & Silver Table Mimosas	-250.00
Gold & Silver Table Parking	-600.00
Luncheon, Event Day Cost - Other	0.00
Total Luncheon, Event Day Cost	-10,933.10
Total Benefit Luncheon	9,333.79
SA Monetary Donations	7,600.00
Cost of Silent Auction	-343.11
Total Silent Auction	29,397.73
Total Fundraising Events	31,745.38
Grants	
Kaiser Foundation Health Plan	500.00
Hawaiian Air Foundation	1,000.00
Silicon Valley Comm Foundation	195.00
Aloha United Way Grant	
AUW Designations	7,250.74
AUW Designations, Past Years	1,736.18
Combined Federal Campaign Desig	1,550.43
Total Aloha United Way Grant	10,537.35
HMSA	250.00
Grants - Other	90.00
Total Grants	12,572.35
Miscellaneous Income	
AmazonSmile Foundation	29.92
Credit Card Cash Rebate	224.56
Total Miscellaneous Income	254.48
Total Income	115,031.50
Gross Profit	115,031.50
Expense	
Salaries & Wages	80,940.00
Computer	
Software Support	542.36
Total Computer	542.36
Advertising	
Web page	86.20
Yellow Page Ad	126.22
Total Advertising	212.42
Credit Card Merchant Statement	

5:14 PM

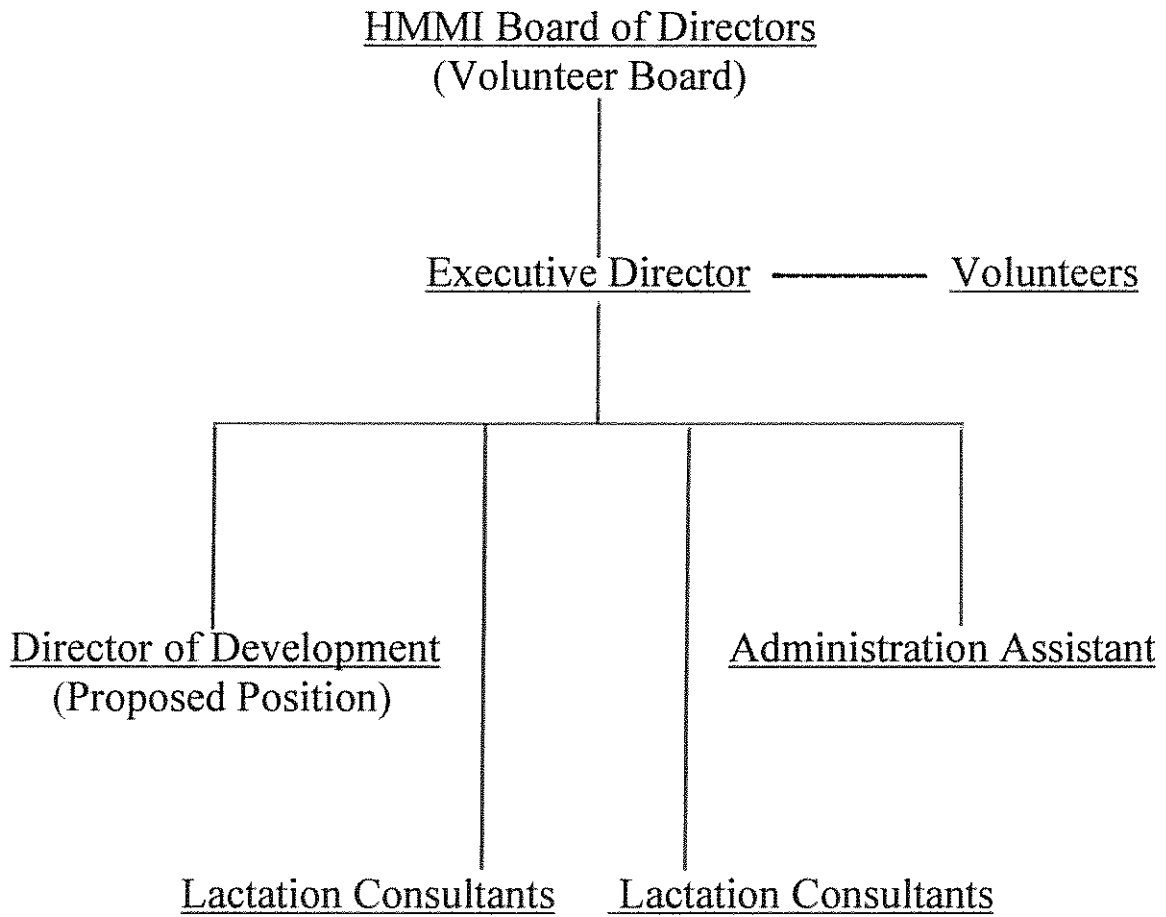
Hawaii Mothers' Milk, Inc.
Profit & Loss
 January through December 2016

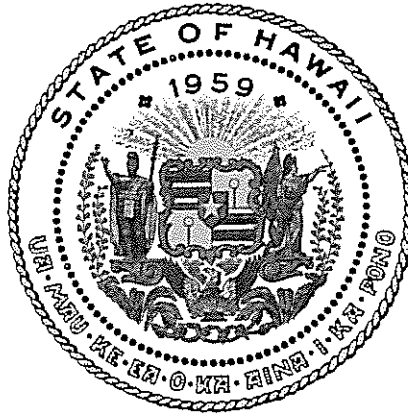
01/19/17

Accrual Basis

	Jan - Dec 16
Terminal Rental	110.70
Imprinter Fees	23.54
% Sales Discount Due	1,650.59
Fees Dues	340.84
Total Credit Card Merchant Statement	2,125.67
Bank Account Charges	
Bank Credit	0.00
MS Annual Service Fee	150.00
NSF Return Check Charges/Collec	7.00
Total Bank Account Charges	157.00
Employee Benefits	
Mileage	177.90
Bonus	0.00
Health Subsidy Payment	4,082.40
Parking	1,850.00
Employee Benefits - Other	0.00
Total Employee Benefits	6,110.30
Professional Fees	
Associations/Membership Dues	310.00
Accounting	1,044.45
Audit	2,976.49
Total Professional Fees	4,330.94
Insurance	
Pacific Gaurdian Life, TDI	319.49
D&O/EPLI	1,125.00
General Liability	567.00
Equipment Floater MXI98103057	1,270.00
Workmen's Compensation Insuranc	760.00
Total Insurance	4,041.49
Licenses and Permits	
Dept of Commerce&Consumer Affai	3.50
Total Licenses and Permits	3.50
Miscellaneous	-0.68
Payroll Expenses	6,238.85
Postage and Delivery	6.83
Printing and Reproduction	1,366.49
Program Expense	343.59
Supplies	
Office	1,137.16
Total Supplies	1,137.16
Taxes	
Federal	-18.53
State	
General Excise/Use Tax	1,591.16
Total State	1,591.16
Total Taxes	1,572.63
Telephone	2,789.79
Total Expense	111,918.34
Net Ordinary Income	3,113.16
Net Income	3,113.16

Hawaii Mothers' Milk, Inc. Organizational Chart





Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that

HAWAII MOTHERS' MILK, INC.

was incorporated under the laws of Hawaii on 06/17/1975 ; that it is an existing nonprofit corporation; and that, as far as the records of this Department reveal, has complied with all of the provisions of the Hawaii Nonprofit Corporations Act, regulating domestic nonprofit corporations.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: January 20, 2017

Cathleen P. Owaiki-Cole

Director of Commerce and Consumer Affairs

DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
BUSINESS REGISTRATION DIVISION
335 Merchant Street
Mailing Address: Annual Filing, P.O. Box 40, Honolulu, HI 96810

RO

DOMESTIC NONPROFIT CORPORATION ANNUAL REPORT AS OF April 1, 2016

CORPORATION NAME AND MAILING ADDRESS

HAWAII MOTHERS' MILK, INC.*
1319 PUNAHOU ST
HONOLULU HI 96826

Principal Office Address

1319 PUNAHOU ST
HONOLULU HI 96826

1. Nature of Activities

TO PROMOTE, ENCOURAGE & ADVOCATE BREASTFEEDING AS THE BEST SOURCE OF INFANT NUTRITION THAT BENEFITS THE WELFARE OF INFANTS, FAMILIES (*SEE AMENDMENT DATED 4/20/2001)

2. The name of the registered agent and the registered agent's street address of the place of business in Hawaii of the person to which service of process and other notice and documents being served on or sent to the entity represented by it may be delivered to.

PATRICIA ANE
HAWAII MOTHERS' MILK, INC.
1319 PUNAHOU ST
HONOLULU HI 96826

3. List all officers and directors.

Offices Held	Full Name	Address
P/D	SUGIHARA,DAWN ESQ	3011 OAHU AVE, HONOLULU HI 96822
D	WONG,BRENDA DUNG	1948 HALEKOA ST, HONOLULU HI 96821
D	TISZA,SHERRI M MD	1357 KAPIOLANI BLVD., SUITE 1250, HONOLULU HI 96814
D	KUO,SHEREE MD	1288 KAPIOLANI BLVD., #1608, HONOLULU HI 96814

CONTINUED ON OFFICERS ADDENDUM

NO CHANGES

Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.

CERTIFICATION

I certify under the penalties of Section 414D-12, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

April 18, 2016	PATRICIA H. ANE	PATRICIA H. ANE
Date	Signature of authorized officer, attorney-in-fact for an officer, or receiver or trustee (if the corporation is in the hands of a receiver or trustee)	Print Name

FILE NO. 28900 D2
Rev. 10/2013

2016 B18
B22
BSA



04/18/2016 41279

OFFICERS ADDENDUM

Offices Held	Full Name	Address
D	NAKAMURA,LINDA	2339 KAMEHAMEHA HWY., #439, HONOLULU HI 96816
V/D	KAWAMURA,MAILE L	ARTHRITIS FOUNDATION, 2752 WOODLAWN DRIVE, 5-204B, HONOLULU HI 96822
S/D	MCLAIN,WENDY P.E.	1204 LILO PLACE, HONOLULU HI 96822
T/D	CHING,JOYCE Y	236 NENUUE STREET, HONOLULU HI 96821
D	GAILLARD,SHERRY APRN-RX	2737 D BOOTH ROAD, HONOLULU HI 96813
D	KAKUNI,LOIS	11 AKILOLO STREET, HONOLULU HI 96821
D	PROCTOR,MARISA	949 WAIOHINU DRIVE, HONOLULU HI 96816

04/18/201641279

Internal Revenue Service
District Director

Department of the Treasury
LA-EO-78-337

Date: MAR 24 1978

Our Letter Dated: October 21, 1975

Person to Contact: W. E. Pure

Contact Telephone Number: (213) 688-578

▷ Hawaii Mothers Milk, Inc.
c/o Haukeilani Children's Hospital
226 North Kuakini Street
Honolulu, Hawaii 96817

Employer ID Number: XXXXXXXXXX

Gentlemen:

This modifies our letter of the above date in which we stated that you would be treated as an organization which is not a private foundation until the expiration of your advance ruling period.

Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Internal Revenue Code, because you are an organization of the type described in section 170(b)(1)(A)(vi)*. Your exempt status under section 501(c)(3) of the code is still in effect.

Grantors and contributors may rely on this determination until the Internal Revenue Service publishes notice to the contrary. However, a grantor or a contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 170(b)(1)(A)(vi)* status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 170(b)(1)(A)(vi)* organization.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,

XXXXXXXXXX
W. H. Connett
District Director

* and section 509(a)(1)



HAWAII MOTHERS' MILK, INC.

KAPI'OLANI Medical Center for Women and Children
1319 Punahou Street Honolulu, Hawaii 96826

Warmline: 763-2768, Business Line: 763-2767, Email: HMMI@kapiolani.org, Website: HIMothersMilk.org

2017 Board of Directors/Officers

<u>Title</u>	<u>Name/Address</u>	<u>Email/Phone Numbers:</u>
<u>President:</u> Business:	Dawn T. Sugihara, Esq. Goodsill Anderson Quinn & Stifel, LLP 999 Bishop Street, Suite 1600 Honolulu, Hawaii 96813	dsugihara@goodsill.com 547-5805 (office) 753-5461 (Cell)
<u>Vice-President:</u> Business:	Maile L. Kawamura, Executive Director Arthritis Foundation, Pacific Region 2752 Woodlawn Drive, Suite 5-204B Honolulu, Hawaii 96822	mailekawamura@gmail.com 596-2900 (office) 596-2904 (fax) 679-7966 (cell)
<u>Secretary:</u> Business:	Wendy McLain, P.E. SSFM International, Inc. 501 Sumner Street, Suite 620 Honolulu, Hawaii 96817	wmclain@ssfm.com 356-1254 (Office) 753-5195 (Cell)
<u>Treasurer:</u> Business:	Linda C. Nakamura First Hawaiian Bank 2339 Kamehameha Highway, #439 Honolulu, Hawaii 96816	lnakamura@fhb.com 844-3775 (office) 372-1923 (cell)
<u>Director:</u> Business:	Brenda Dung Wong SODEXHO General Manager Food & Nutrition Kapiolani Medical Center for Women's & Children 1319 Punahou Street Honolulu, Hawaii 96826	brendaD9@kapiolani.org 983-8669 (office) 778-8326 (Cell)
<u>Director:</u> Home:	Sherry Gaillard, APRN-Rx 2737 D Booth Road Honolulu, Hawaii 96813	sherry808@gmail.com 277-0999 (Cell)
<u>Director:</u> Home:	Roshni L. Koli, MD 1296 Kapi'olani Blvd., Apt. 2008 Honolulu, Hawai'i 96814	Roshni.koli@kapiolani.org (917) 903-7764 (Cell)
<u>Director:</u> Business:	Sheree Kuo, MD, Neonatologist Kapiolani Medical Specialists 1319 Punahou Street, 7 th Floor Honolulu, Hawaii 96826	sheree@kapiolani.org 983-8387 (office) 387-2457 (Cell)
<u>Director:</u> Home:	Louis H. Pinho 46-225 Punawai Street Kaneohe, Hawaii 96744	pinhol002@hawaii.rr.com 551-1226 (Cell) 235-2093 (home)
<u>Director:</u> Business:	Sherri M. Tisza, MD AlohaCare, Medical Director 1357 Kapiolani Blvd., Suite 1250 Honolulu, Hawaii 96814	drsherritizza@gmail.com 371-7594 (Cell)

HAWAII MOTHERS' MILK, INC.
Helping Hawaii's Mothers and Babies Since 1975
KAPI'OLANI Medical Center for Women and Children
1319 Punahou Street Honolulu, Hawaii 96826
"Warmline" 763-2768, Business Line 763-2767, Fax 983-6057, Email hmmi@kapiolani.org



OUR MISSION:

To promote, encourage, and advocate breastfeedings as the best source of nutrition for infants that benefits the welfare of infants, families and the community.

To facilitate each mothers' choice to breastfeed by providing professional counseling and education so that an informed choice can be made.

Make available to sell/rent and distribute the necessary breastfeeding supplies, equipment, education materials and others as appropriate.

To promote good health and parenting.

HAWAII MOTHERS' MILK, INC.
Helping Hawaii's Mothers and Babies Since 1975
KAPI'OLANI Medical Center for Women and Children
1319 Punahou Street Honolulu, Hawaii 96826
"Warmline" 763-2768, Business Line 763-2767,
Email hmmi@kapiolani.org, HIMothersMilk.org



ABOUT HAWAII MOTHERS' MILK:

We are a private 501 (c) (3) non-profit, Aloha United Way (Designation #96120) agency helping Hawaii Mothers since 1975. We promote, encourage and advocate breastfeeding as the healthiest source of nutrition that mothers can provide for their infants. Hawaii Mothers' Milk offers a number of services, which help families who choose to breastfeed their babies, to enjoy a successful and healthy start. Some of the services that we provide are:

- ♥ Health Education and Counseling for the nursing mother.
- ♥ Assistance with breastfeeding problems or questions.
- ♥ Assistance in special situations such as a hospitalized baby.
- ♥ Assist mothers returning to work and the proper use of breastpumps.
- ♥ Hospital grade breastpump rentals & purchases from Medela and Ameda.
- ♥ Large selection of breast pumps and parts from Medela and Ameda.
- ♥ ACA durable medical equipment participator with most Insurance Companies in Hawai'i.
- ♥ Sales of breast pumps & breastfeeding supplies such as nursing bras and pads, nursing tank tops and drapes, nursing pillows, freezer bags and a variety of other products from Medela, Ameda, Bravado, My Brestfriend, Motherlove and other leading nursing suppliers.
- ♥ Educational materials and information on breastfeeding.
- ♥ Prenatal Breastfeeding Information and Counseling
- ♥ Health Education classes and support for health care professionals, students and other health and family agencies.
- ♥ Telephone "Warmline" 763-2768

Assistance with breastfeeding questions is provided by our telephone Warmline. In-office counseling for breastfeeding problems and trying the various breastpumps is provided to all clients free of charge. Appointments are necessary to give our mothers ample time for questions.

Our office receives about 3,000 visits a year with 42% of those visits for Lactation Consultations while our warmline handles close to 4,000 phone calls annually.