Visiting Nurse Association Of Middlesex-East Inc

General Information

607 North Avenue, Suite 17
Wakefield, MA 01880 9816
(781) 224-3399 2340

Website
www.vnaofme.org

Organization Contact
Christine Hawrylak chawrylak@vnaofme.org

Year of Incorporation
1967
**Mission Statement**
To provide comprehensive home health and hospice care. We foster and promote the health of individual, family and community through education and compassionate, high quality services.

**Background Statement**
VNA of Middlesex-East was formed in 1902 when the Visiting Nurse Associations of Woburn, Reading, Wakefield, Stoneham, North Reading and Wilmington came together to serve their patients better. In 1982 we added Visiting Nurse Hospice to our services and in 2003 we opened the 10-bed Sawtelle Family Hospice House in Reading. Today we are a member of the Lahey Health network of providers.

Our professional team of nurses, therapists, social workers and home health aides deliver care to patients recovering from illness or injury, or dealing with chronic disease. We develop a plan of care for each individual focused on helping the patient remain safe and independent in their own home, without return trips to the hospital. Clinicians provide education and tools that help patients maximize their quality of life.

The agency also provides Hospice care in the home and at our Sawtelle Family Hospice House when a life-limiting illness no longer responds to curative treatment. Hospice staff gives comfort care to patients and emotional support to families at the end of life. Their goal is to provide care that will fill a person's final days with moments of grace, dignity, and compassion.

We serve adults of all ages; the majority of our patients are the elderly.

**Impact Statement**
VNA of Middlesex-East experienced a very successful year in 2015. During our first year as an affiliate of Lahey Health we saw an 18% increase in patient referrals with continued growth expected as we move forward. Most important, as a member of an integrated healthcare system we are playing an important role in improving quality and reducing the costs of healthcare in our community.

In 2015 we also began the process of combining with two other home care agencies owned by Lahey Health, Winchester Hospital Home Care and Lahey Health at Home. Leadership from all three organizations are working together to identify best practices, opportunities for savings, and how best to meet the growing demand for home health services into 2016.

VNA of Middlesex-East is consistently listed among the top 500 of the HomeCare Elite, an annual survey of the best performing homecare agencies in the nation. It has also received high marks - 4.5 and 5 Star ratings out of 5 - from the Center for Medicare and Medicaid Services which rates homecare agencies on a quarterly basis.

The agency and country have many challenges ahead as we try to make our healthcare better and affordable to all. We look forward to working together with our patients, staff, and new Lahey partners to achieve this goal.
Needs Statement
We have needs in the following areas:
• Support for maintenance and upkeep of our Sawtelle Family Hospice House
• Support for updating technology such as telemedicine units and desktop computers
• Support for our Free Care Fund to offset the costs associated with providing care to patients who are uninsured or underinsured.
• Support for special programs offered free to the community. These include a Child Bereavement Program, Memory Care Program, and Tools for Better Health Program.
• Support for new clinical initiatives aimed at improving patient outcomes and decreasing rehospitalizations

CEO/Executive Director Statement
Dear Friends,
VNA of Middlesex-East is a community based visiting nurse service that makes a positive difference in its patients' health and quality of life. We make over 75,000 visits a year serving nearly 7,000 patients. We help those suffering an illness or managing a chronic disease stay safe and independent in their own home. Our care can often mean the difference between preserving someone's independence or placement in a nursing home.

Our clinicians give exceptional care. Medicare regularly measures and compares our homecare patient outcomes with others across the country and we consistently place among the best in the nation.

Our hospice service has grown dramatically over the past decade as more and more people choose hospice when a life limiting illness no longer responds to curative treatment. Our nurses provide this type of compassionate and comfort care in the home or at our Sawtelle Family Hospice House. This facility, opened in 2003, has met a great need in the community for residential end of life care.

The homecare industry has become increasingly sophisticated and competitive. But as we strive to improve patient outcomes with technology and data analysis, VNA of Middlesex-East never loses sight of the importance of providing the personal and compassionate service that is the hallmark of the visiting nurse mission. As we look for ways to continually improve our care, we know a nurse's smile and gentle touch will always remain an integral part of our success.

Our agency greatly benefits from a generous family of donors. They have helped us provide care to all in need, regardless of the ability to pay for service. They have helped us stay current with technology so that our nurses are equipped with the latest computers and diagnostic tools available. And they have helped us build and maintain our beautiful Sawtelle Family Hospice House, a warm and caring place for patients with terminal illness. Please consider joining our family of donors with your charitable gift of support.

Thank you for visiting VNA of Middlesex-East on the Giving Common.

Sincerely,
Karen Agahigian, CEO
Board Chair Statement

Dear Friends,

VNA of Middlesex-East plays an important role in our community, providing services that help elders stay safe and independent in their own home while recovering from an illness or managing a chronic disease. It is a strong, highly regarded organization that has faced many challenges over the past years - declining reimbursement for services, nursing shortages, highly regulated care guidelines - with great success. The organization embraces change and understands the importance of improving care while containing costs. The agency boasts excellent clinical outcomes with solid financial performance.

I was elected to serve on the board in 2008. As president of Reading Co-operative Bank I was familiar with the agency’s good work. My bank was a major donor to its Sawtelle Family Hospice House capital campaign in 2003 and has continued its support through the years.

I experienced first hand the power of their service when a family member facing a terminal illness spent his last days at the Hospice House. Everyone involved with this beautiful facility - the nurses, the aides, and the volunteers - delivered care with the upmost respect and sensitivity. They gently and expertly helped our loved one and his family through this difficult time. One of our board members has noted that everyone deserves to leave this world the same way they came into this world --- with great care and love. Our Hospice House accomplishes this.

I am very proud to be a member of this organization’s Board of Directors and invite you to learn more about the agency’s work by visiting www.vnaofme.org and view the video about its Hospice House included in this Giving Common Entry. I think you will agree with me that their important work deserves your charitable support.

Sincerely,
Julie Thurlow, Board President

Service Categories

Home Health Care

Geographic Areas Served

We serve 62 Greater Boston communities in Essex and Middlesex counties.
Please review online profile for full list of selected areas served.
## Programs

### Home Care Services

**Description**
VNA of Middlesex-East provides a full range of home health services that promotes recovery after hospitalization, surgery, or a relapse of illness. We are also dedicated to improving our patients’ quality of life when living with a chronic illness. Our homecare services include skilled nursing, personal care/home health aides, social work, physical therapy, occupational therapy, speech therapy, and nutritional education. We also offer a number of specialty programs including cardio-pulmonary disease management, total joint replacement recovery, diabetic education, psychiatric nursing, wound care, telehealth monitoring, low vision program, Myomo therapy for stroke victims, and LSVT BIG and LOUD therapy for Parkinson’s disease patients, and palliative care.

**Budget**
$7,043,082.00

**Category**
Health Care, General/Other Home Health Care

**Population Served**
Adults, Aging, Elderly, Senior Citizens,

**Program Short Term Success**
Short term success is indicated by improved health of our patients, prevention of rehospitalizations, and high rates of patient satisfaction.

**Program Long Term Success**
VNA of Middlesex-East strives to be a provider of choice based on excellent patient outcomes and exceptional service. Our success depends on patients receiving care that improves their health while lessening the need for them to seek more complex and expensive care. More and more physicians, hospitals, and long term care facilities are choosing our agency to provide for their patient’s home health needs. Our referrals increased by 12% between 2008 and 2011, and a further 6% in 2012.

**Program Success Monitored By**
The Centers for Medicare and Medicaid Services collects data on our patient care and releases public reports on our patient outcomes on a quarterly basis. VNA of Middlesex-East also surveys patients and families to measure satisfaction. In addition, we use reporting software that enables us to analyze every aspect of our homecare data in real time. This allows us to see how we are performing in comparison with state and national industry averages on a timely basis. It allows us to quickly identify clinical services that may need attention or improvement.
Examples of Program Success

We demonstrate outstanding performance on all patient outcomes tracked by Medicare (www.medicare.gov/HHCompare) and are for the sixth year in a row among the Home Care Elite, a compilation of the top-performing home health agencies in the United States. We place in the top 500 agencies, out of more than 12,000 agencies nationwide, ranked by an analysis of quality outcomes, quality improvement process, and financial performance.
Hospice Program

Description
Hospice care is for those who have reached a point in terminal illness where the focus is on providing comfort care and support, and life expectancy is six months or less. Services include nursing care, social work, spiritual care, therapy to provide pain relief and comfort, complementary therapies such as Reiki and massage, and adult and child bereavement services.

Our Hospice care can be provided in the home or at our Sawtelle Family Hospice House. The 9-bed facility has met a great need for residential hospice care in our community. It is appropriate for patients who may live alone or have limited family caregiver support, patients with young families who prefer not to expose their children to the end of life process at home, and for those who prefer to receive care in a more structured environment. The House is located in Reading in a beautifully restored and expanded antique colonial home set on a private 2.2 acres.

Budget
$3,594,000.00

Category
Health Care, General/Other Hospice Care

Population Served
Adults, Aging, Elderly, Senior Citizens,

Program Short Term Success
Our staff is committed to creating an atmosphere and providing the care that will fill a person’s final days with moments of grace, dignity and compassion. The hospice experience respects a person’s individual beliefs and ensures that their wishes are honored in every way possible. We achieve success when our patients’ last days are comfortable and pain free and their families receive the compassionate support they need during this significant time.

Program Long term Success
The growth of hospice in this country has changed the way we approach end of life care. According to the Hospice and Palliative Care Federation of Massachusetts, hospice was introduced in this country in the 1970s ---before then, the vast majority of terminally ill died in the hospital, often alone and in pain. But that has changed with more and more people recognizing hospice as the right choice for end of life care. Some studies have recently concluded that hospice care can substantially lower costs for many terminal illnesses, and may often be more in line with what patients want. Billions of dollars are spent each year in the United States on intensive treatment of older patients in the last six months of their lives. Massachusetts ranks as one of the top 10 states for such intensive intervention, and below average in the number of hospice and palliative care programs. Long term success for our Hospice program will be reflected in our ability to help more patients and their families as well as physicians recognize the value of this type of care.
Program Success Monitored By

VNA of Middlesex-East sends satisfaction surveys to all families who use our hospice service. We also send out a bi-annual satisfaction survey to referring physicians asking them to rate our quality of care.

Examples of Program Success

We receive many letters of gratitude from families who have experienced our hospice care. We share a small selection of comments here:

“Thanks for all the outstanding care given to those in need, especially to those who have a short time left on earth. You allow dignity in their final hours. I cannot say enough about your work.”

“My uncle was very comfortable and felt safe. The Hospice House is beautiful and the grounds are beautiful. I could not be happier with the care my uncle received while he was there.”

“Words cannot describe how grateful my brothers and I are. Karen, one of the nurses, was truly a God-Send. She was so attentive and made every effort for my mom’s dignity to stay intact. Thank you so much”

“You could not improve on the service and devotion that I witnessed. Thank you very much for all that you did for my mom.”
Rehospitalization Prevention Program

Description
This program is focused on reducing preventable hospitalizations of elderly patients coping with chronic conditions such as cardio/pulmonary disease and diabetes. One in six Medicare patients returns to the hospital for care within a month after being discharged. These readmissions lead to more tests and treatment, decreased quality of life for elders and higher health care costs. Homecare services can play a critical role in preventing these returns. This program has been developed over the past five years. It provides patients identified for high risk of returning to the hospital for care with the following:
- Coordinated, detailed discharge planning with the hospital.
- More visits at the start of care to provide health assessment and disease management education.
- Nurses use the “teach back” method to determine if teaching was successful and that patient has the confidence to correctly follow their care plan.
- 911 Guidelines for posting so that the patient understands what symptoms require a call to the nurse and what symptoms require a 911 call.
- Distribution of medical items free of charge to prevent complications during recovery including urinary tract infection home testing kits, wrist blood pressure monitors, oximeters and nebulizers.
- Telemonitoring – a monitor is placed in the home that allows patients to take vital signs and transmit them to our main office for daily review

Budget
$190,140.00

Category
Health Care, General/Other Home Health Care

Population Served
Adults, Aging, Elderly, Senior Citizens,

Program Short Term Success
Patients have more confidence to manage their disease in the home and understand the importance of taking responsibility for one’s own well-being.

Program Long term Success
Our success is reflected in the reduction of repeat hospitalizations for those coping with chronic disease. Decreased hospitalizations result in greater independence, improved quality of life for patient and lower health care costs.

Program Success Monitored By
Both the VNA and Medicare continually track data for rehospitalization rates. The agency has software that tracts in real time; Medicare tracks statistics quarterly and compares them with other providers throughout the nation.
Examples of Program Success  
Over the past three years, VNA of Middlesex-East has maintained the lowest rehospitalization rate for homecare agencies in Massachusetts averaging 14 to 13%. The program’s success is also reflected in our patient satisfaction rates; 88% of our patients rate our service as a 10 or 9 (73%-10, 15%-9) with 10 being the highest, 0 the lowest.

Child Bereavement Program

Description  
This program is part of our Hospice and provides one-on-one counseling to children and adolescents who are grieving the loss of a parent, sibling, grandparent or significant other. It is offered free of charge.

Budget  
$30,000.00

Category  
Health Care, General/Other Hospice Care

Population Served  
Children and Youth (0 - 19 years),

Program Short Term Success  
The program helps children:
· Create meaningful “good-bye’s”
· Find ways to say good-bye when a person can’t talk or respond
· Provide means of understanding the death/dying process and loss in a developmentally appropriate manner
· Understand funerals and rituals

Program Long term Success  
Significant losses may hinder a child’s emotional growth. Long term success for this program is reflected in the child’s ability to remember their loved one in positive ways while adapting to an emotionally stable, new life without them.

Program Success Monitored By  
Families of our hospice patients are sent satisfaction surveys after the death of their loved one to rate their experience with all our services, including bereavement support.

Examples of Program Success  
Our Hospice cared for a young mother in the end-stages of breast cancer. After her death, our nurses were concerned for her children and introduced the Children’s Bereavement Program to her husband. Grieving the loss of his childhood sweetheart and faced with a new responsibility of raising three children alone, he welcomed our assistance. Our therapist began visits with 3 year old twins and their five year old sister. She helped them remember their mother in healthy ways and understand the permanency of death. She used art projects and play therapy to engage the children in conversations and self-expression. After several weeks of therapy, the children have demonstrated healthy coping skills and an ability to adapt to their new situation. The husband is extremely appreciative of the professional help they are receiving and now has a better understanding of how he can assist his children through this difficult time.
Memory Care Program

Description
Our Memory Care program provides one-on-one support to family members caring for a loved one with Alzheimer's or other forms of dementia. This support helps the dementia patient remain safely in his own home as long as possible. It includes home safety assessments, therapeutic intervention, education, and respite care. Members of our clinical team help caregivers understand the mental status changes in their loved one and how best to deal with them. They also focus on helping the caregiver learn how to balance the stressful and difficult responsibilities of caregiving with their personal needs. In addition, the program supplies safety and adaptive equipment to families and respite care when needed. All services are provided free of charge.

Budget
$45,600.00

Category
Health Care, General/Other Patient & Family Support

Population Served
Adults, Aging, Elderly, Senior Citizens, Families

Program Short Term Success
Individuals with Alzheimer's are able to maximize their remaining abilities to perform activities of daily living. The home becomes a safer environment for the Alzheimer's patient. Families see a decrease in the stress related to caring for their loved one.

Program Long term Success
The program works to help families maintain quality of life while keeping their loved one with Alzheimer's disease at home for as long as possible.

Program Success Monitored By
Memory Care Program clients' progress and challenges are discussed in monthly clinical team meetings. Phone surveys are conducted with families after discharge.

Examples of Program Success
Outcomes for most recent year of program:
106 patients and families served
85 support telephone calls taken
100 home visits made
1206 hours of private in-home respite care provided
40 days of adult day health provided
$2,000 in safety equipment provided to patients

Comments from patient surveys include:
"I look forward to the therapist coming to answer questions. She gives me hope."
"I know now that I could not do this alone. Words cannot express how highly I think about this program."
"We are very fortunate to have the services of these wonderful people. They have made our problems easier to bear."
Management

CEO/Executive Director

Executive Director
Ms. Karen Agahigian
Term Start
May 2015
Email
kagahigian@vnaofme.org

Experience
Karen has extensive experience in home health and hospice. She began her nursing career at Winchester Hospital as an administrative nursing coordinator, then joined VNA of Middlesex-East in 1993. At the agency she has been a case manager/triage nurse, clinical manager, hospice manager, and in 2009 was appointed our COO. Since then we have experienced 100% referral growth in our home health and hospice census. Karen played a major role in the opening of our Hospice House as well as the development of the many home specialty programs we offer to the community. She earned her BSN from Northeastern University and is a graduate of the Emerging Leader Program at Suffolk University. She was named Manager of the Year in 2003 by the Home Health Care Association of Massachusetts.

Co-CEO

Experience

Former CEOs

<table>
<thead>
<tr>
<th>Name</th>
<th>Term</th>
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Senior Staff

Ms. Karen Agahigian

Title
Chief Operating Officer

Experience/Biography

Ms. Michele Coullahan

Title
CFO

Experience/Biography

Staff Information

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<tr>
<th>Full Time Staff</th>
<th>65</th>
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<tr>
<td>Part Time Staff</td>
<td>88</td>
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Volunteers 50
Contractors 3

Staff Demographics - Ethnicity
African American/Black 0
Asian American/Pacific Islander 0
Caucasian 0
Hispanic/Latino 0
Native American/American Indian 0
Other 140

Staff Demographics - Gender
Male 0
Female 0
Unspecified 140

Formal Evaluations
CEO Formal Evaluation Yes
CEO/Executive Formal Evaluation Frequency Annually
Senior Management Formal Evaluation Yes
Senior Management Formal Evaluation Frequency Annually
NonManagement Formal Evaluation Yes
Non Management Formal Evaluation Frequency Annually

Plans & Policies
Organization has a Fundraising Plan? Yes
Organization has a Strategic Plan? Yes
Years Strategic Plan Considers N/A
Date Strategic Plan Adopted Dec 0
Does your organization have a Business Continuity of Operations Plan? Yes
Management Succession Plan? Yes
Organization Policy and Procedures Yes
Nondiscrimination Policy Yes
Whistleblower Policy Yes
Document Destruction Policy Yes
Directors and Officers Insurance Policy
Yes

Is your organization licensed by the Government?
Yes

Registration
Exempt


Directors and Officers Policy
Automobile Insurance
Commercial General Liability
Commercial General Liability and Medical Malpractice
Computer Equipment and Software
Directors and Officers Policy
Disability Insurance
General Property Coverage
Life Insurance
Medical Health Insurance
Medical Malpractice
Workers Compensation and Employers’ Liability

Awards

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<tr>
<td>Home Care Elite</td>
<td>National Research Corporation</td>
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External Assessments and Accreditations

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<td>Centers for Medicare and Medicaid Services (U.S. Department of Health and Human Services) - Medicare Certification</td>
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Affiliations

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<td>Massachusetts Association of Home Care and Area Agencies on Aging</td>
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<tr>
<td>National Hospice and Palliative Care Organization</td>
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Board Chair

Ms. Julieann Thurlow
Reading Co-operative Bank
Apr 2012 to Apr 2015
jthurlow@readingcoop.com

Board Members

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<tr>
<th>Name</th>
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<td>Pierre Ezzi</td>
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<td>Charles Furlong</td>
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<td>John Good</td>
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<tr>
<td>Richard Kalish</td>
<td>Internist</td>
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<tr>
<td>Doug McGregor CPA</td>
<td>Feely &amp; Driscoll</td>
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<td>Timothy O’Connor</td>
<td>Lahey Health System</td>
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<td>Hugh O’Flynn</td>
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<td>Joel Soloman</td>
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<td>David Spackman</td>
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<td>Julieann Thurlow</td>
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<td>Kenneth Williams</td>
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Board Demographics - Ethnicity

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Board Demographics - Gender

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<td>Male</td>
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Board Information
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<td>Board Term Lengths</td>
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<td>Board Term Limits</td>
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<td>Number of Full Board Meetings Annually</td>
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<td>Written Board Selection Criteria?</td>
<td>No</td>
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<td>Written Conflict of Interest Policy?</td>
<td>Yes</td>
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<td>Percentage Making Monetary Contributions</td>
<td>100%</td>
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<tr>
<td>Percentage Making In-Kind Contributions</td>
<td>16%</td>
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<tr>
<td>Constituency Includes Client Representation</td>
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**Standing Committees**

- Finance
- Ethics

**Comments**

**CEO Comments**
Financials

Fiscal Year

Fiscal Year Start: Jan 01, 2016
Fiscal Year End: Dec 31, 2016
Projected Revenue: $19,927,139.00
Projected Expenses: $16,867,672.00
Endowment?: No
Credit Line?: Yes
Reserve Fund?: Yes
Months Reserve Fund Covers: 0

Detailed Financials

Revenue and Expenses

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<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
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<td>Total Revenue</td>
<td>$16,893,358</td>
<td>$15,334,446</td>
<td>$21,239,175</td>
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<td>Total Expenses</td>
<td>$14,442,988</td>
<td>$13,038,825</td>
<td>$10,998,524</td>
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Revenue Sources

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<td>Government Contributions</td>
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<td>Individual Contributions</td>
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<td>Earned Revenue</td>
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<td>Investment Income, Net of Losses</td>
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<td>Special Events</td>
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<td>--</td>
<td>--</td>
<td>$6,669,900</td>
</tr>
<tr>
<td>Other</td>
<td>$2,403</td>
<td>$3,958</td>
<td>$2,488</td>
</tr>
</tbody>
</table>
Expense Allocation

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Expense</td>
<td>$11,875,001</td>
<td>$10,591,435</td>
<td>$8,735,616</td>
</tr>
<tr>
<td>Administration Expense</td>
<td>$2,495,213</td>
<td>$2,370,837</td>
<td>$2,182,062</td>
</tr>
<tr>
<td>Fundraising Expense</td>
<td>$72,774</td>
<td>$76,553</td>
<td>$80,846</td>
</tr>
<tr>
<td>Payments to Affiliates</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Total Revenue/Total Expenses</td>
<td>1.17</td>
<td>1.18</td>
<td>1.93</td>
</tr>
<tr>
<td>Program Expense/Total Expenses</td>
<td>82%</td>
<td>81%</td>
<td>79%</td>
</tr>
<tr>
<td>Fundraising Expense/Contributed Revenue</td>
<td>23%</td>
<td>17%</td>
<td>18%</td>
</tr>
</tbody>
</table>

Assets and Liabilities

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Assets</td>
<td>$27,091,334</td>
<td>$24,447,142</td>
<td>$22,211,869</td>
</tr>
<tr>
<td>Current Assets</td>
<td>$24,738,239</td>
<td>$4,857,392</td>
<td>$13,195,592</td>
</tr>
<tr>
<td>Long-Term Liabilities</td>
<td>--</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>$662,481</td>
<td>$641,742</td>
<td>$789,152</td>
</tr>
<tr>
<td>Total Net Assets</td>
<td>$26,428,853</td>
<td>$23,805,400</td>
<td>$21,422,717</td>
</tr>
</tbody>
</table>

Short Term Solvency

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Ratio: Current Assets/Current Liabilities</td>
<td>37.34</td>
<td>7.57</td>
<td>16.72</td>
</tr>
</tbody>
</table>

Long Term Solvency

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long-Term Liabilities/Total Assets</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Top Funding Sources

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>2014</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top Funding Source &amp; Dollar Amount</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Second Highest Funding Source &amp; Dollar Amount</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Third Highest Funding Source &amp; Dollar Amount</td>
<td>--</td>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

Capital Campaign

- Currently in a Capital Campaign? No
- Capital Campaign Anticipated in Next 5 Years? No

Comments

**Foundation Staff Comments**

Financial summary data in the charts and graphs above are per the organization's IRS Form 990s. Contributions from foundations and corporations are listed under individuals when the breakout was not available. The organization provided a breakout of revenue from Foundations and Corporations for fiscal year 2011.

Please note, in fiscal year 2012 the organization received a non-cash bequest, which is reflected in the In Kind revenue category above for that year.