1. Name and Address of Reporting Person
   Tayler Martin Clifford
   (Last) (First) (Middle)
   C/O THE FEMALE HEALTH COMPANY
   515 NORTH STATE STREET, SUITE 2225
   (Street)
   CHICAGO IL 60654
   (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
   FEMALE HEALTH CO [ FHCO ]

3. Date of Earliest Transaction (Month/Day/Year)
   09/30/2015

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
   X Exec. VP of Global Operations
   Director
   10% Owner
   Officer (give title below)
   Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
   X Form filed by One Reporting Person
   Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>3A. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock, par value $.01 per share</td>
<td>09/30/2015</td>
<td>A</td>
<td>11,178</td>
<td>A</td>
<td>20,511</td>
<td>D</td>
</tr>
</tbody>
</table>

Explanations of Responses:

James Bedore, Attorney-in-Fact
10/13/2015
** Signature of Reporting Person Date