2018 / 2019 ANNUAL REPORT

CHILDREN'S
Leukaemia & Cancer Research
Foundation (Inc.)

For over thirty nine years the Children's Leukaemia & Cancer Research Foundation (Inc.) has been raising funds for research into childhood cancers.

The Foundation relies on the generous support of the community to continue its vital research, as we do not receive State or Federal funding.

CONTENTS

Foundation History

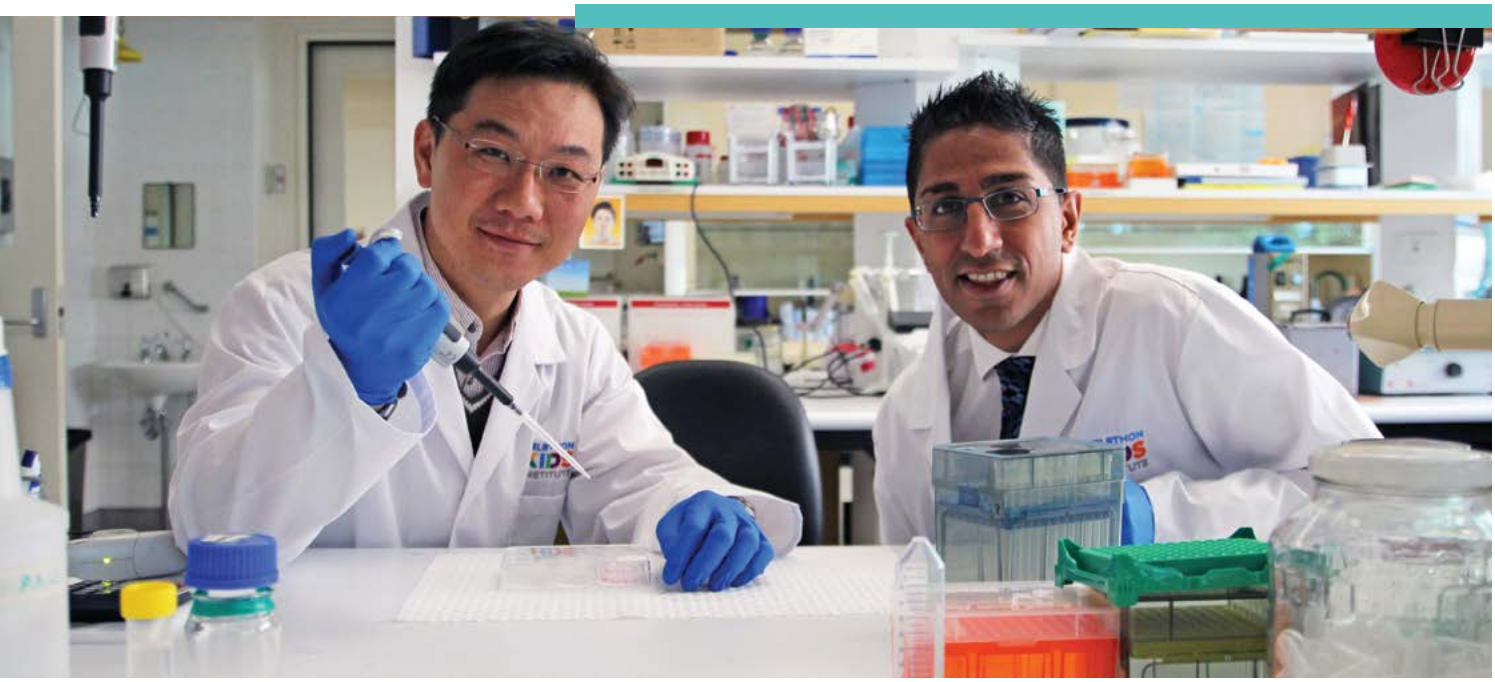
Australia has one of the highest incidences of childhood cancer worldwide. One in 500 Australian children will develop a cancer before 15 years of age – that's 600 Australian children diagnosed every year.

The creation of the Foundation was inspired by nine year old Jennifer Harper, who was diagnosed with leukaemia in 1977. When her father, Peter Harper, discovered that there was no research into children's leukaemia being done in Western Australia, he set out, together with other parents of children with cancer, to raise funds for this purpose. Sadly Jennifer passed away in 1978.

Childhood cancer is the single greatest cause of death from disease in Australian children, with three children losing their lives to cancer every week. In Australia, childhood cancer is second only to breast cancer in terms of the number of years of life lost by the disease.

The quest to find cures for childhood cancer is one of medicine's greatest success stories. Fifty years ago only two percent of children with cancer survived. Medical research alone has improved overall survival rates to 80 percent. With childhood cancer still the leading cause of death from disease in Australian children, there is more work to be done. There are still particular childhood cancers – such as brain tumours and neuroblastoma – with survival rates as low as 50 percent.

CLCRF has a commitment to ensure this ground-breaking research continues so that the future generations will be the ones to live cancer free. The Foundation relies on the generous support of the community to continue its vital research, as we do not receive State or Federal funding.



Committee of Management

As at 30/06/19

Mr Geoffrey CATTACH, AM
(Chairman)

Mr Philip BRUCE
(Vice Chairman)

Mr Kim WILLIAMSON
(Treasurer)

Mr Justin BRUCE
(Secretary)

Mr Kimon ANDERSON

Professor Ursula KEES

Mr Michael PARKER

Founder
Mr Peter HARPER

Life Members
Mr Philip BRUCE
Mr Geoffrey CATTACH, AM
Mr Peter FALCONER, OAM
Professor Ursula KEES
Mr Kim WILLIAMSON

Administration Staff

Mrs Andrea ALEXANDER
(Chief Executive Officer)

Mrs Wendy KEARNS
(Executive Officer)

Miss Katelyn LUSH
(Executive Assistant)

Chairman's Report

It is with pleasure that I once again report to members on the operations of the Children's Leukaemia & Cancer Research Foundation (Inc) for the year ended 30th June 2019.

The economy continues to challenge us in terms of both community and corporate support however we have managed to maintain and, in some instances, increase our research funding given our excellent accumulated fund position.

Finance

I am pleased to report that we have achieved a more than acceptable financial outcome for the year under review.

In fact we can report that the Foundation's financial position has enabled us to meet all our ongoing research funding commitments and, in some instances, increase the level of funding.

The Treasurer will go into more detail of both the reporting format and the financial outcomes in his report.

Funding of Grants

I am pleased to report that for the period under review our Foundation has been able to maintain the high level of research funding, a snapshot of the research grants currently being funded are as follows:

01

Triennial Block Grant (2019 - 2021) PRO 20728 **Total Expenditure: $443,741**

Researchers: Dr Rishi S Kotecha and Dr Laurence C Cheung

Titled: ***Improving Outcomes for Children with High-Risk Leukaemia***

Module 1: *Novel Translatable Therapeutics for Infant Acute Lymphoblastic Leukaemias*

Module 2: *Understanding and Targeting the Bone Marrow Microenvironment.*

02

$1M Grant of Excellence PRO 12681 **Total Expenditure: $8,111**

Researchers: Dr Rishi S Kotecha and Dr Laurence C Cheung

Titled: ***Molecular Genetics in Childhood Tumours***

03

CLCRF Fellowship Grant PRO 20219 **Total Expenditure: $98,355**

Researcher: Dr Mark Cruickshank

Titled: ***Molecular and Immuno-Therapy Targets for High Risk Leukaemia***

04

CLCRF Dr M Cruickshank PRO 20221 **Total Expenditure: $54,785**

Researcher: Dr Mark Cruickshank

Titled: ***Molecular Targets for High-Risk Leukaemia***

05

Publication Costs PRO 20328 **Total Expenditure: $1,700**

Researcher: Associate Professor Alex H Beesley

Titled: ***Publication costs of NMC Manuscript (Genetics)***

06

CLCRF Ursula Kees Fellow PRO 20514 **Total Expenditure: $327,624**

Researcher: Dr Sebastian Malinge

Titled: ***To develop new tools to identify cancer cells resistant to current therapy and test a new drug therapy to destroy them.***

NB: Above research projects funded via the $1M Partner donation to Telethon.

07

CLCRF Cancer Centre – Professor T Johns PRO 20487-01 **Total Expenditure: $378,395**

08

Sarcoma Program – Cofunded by CLCRF and The Abbie Basson Sarcoma Foundation PRO 2057-01 **Total Expenditure: $100,763**

09

Telethon Grants Partnership PRO 20570 **Total Expenditure: $170,523**

NB: Research projects (vii) to (ix) have been supported by the additional funding of $500K from Telethon (enabled by CLCRF's $1M partnership) directly to the Telethon Kids Institute.

We are extremely grateful and accordingly would like to congratulate Professor Terrance Johns, and our dedicated team of researchers for their continued achievements both locally and internationally.

TELETHON KIDS INSTITUTE

Telethon Kids Institute

Once again we are proud to acknowledge the wonderfully cooperative working relationship we enjoy with the Telethon Kids Institute and, in particular, extend our thanks and appreciation to Professor Jonathan Carapetis AM, the Institute's Director, and Tim McInnis, Head of Development.

Regrettably, in October 2019, Tim McInnis moved on to new challenges at Curtin University. Tim was a great advocate of partnering relationships and was instrumental in furthering the relationship between CLCRF and TKI. Accordingly, we wish Tim our very best, in his new venture.

Telethon Trust

Our agreement with the Telethon Trust to be a MILLION DOLLAR PARTNER commenced in 2017 and subject to the terms of the agreement will conclude on the 31st December 2019.

We recently made our third million-dollar contribution to Telethon which as a result triggered in the first two years a further $250K and $500K research project funding which was mutually agreed to by CLCRF and TKI.

It should be noted that our overall brief is to support research into all forms of childhood cancers, our focus over the past 39 years has been primarily leukaemia, then brain tumours and other rare cancers.

With the additional $500K triggered by our partnership with Telethon we have been able to expand our research endeavours to continue paediatric brain cancer research as well as new funding for paediatric sarcoma research.

I would like to clarify to our own very generous and loyal donors that nothing has altered in our current research funding arrangements as we already contribute around $1M annually to research projects undertaken at the Telethon Kids Institute and it is these funds that represent the "Million Dollar Partnership".

Marketing Strategy & Development

Kylie Dalton and Michele Seymour of Absolute Edge Media (AEM) continue to create, manage and coordinate all of the Foundation's public relations, events management, social media, digital communications streams, marketing, branding and promotion since 2011.

AEM have been instrumental in creating new income streams and work closely with the CLCRF researchers and our Ambassadors to bring public awareness to our cause.

Community Activities

We continue to be amazed at the wonderful and diverse support we receive from benefactors, businesses and the community at large. Whilst such contributions will be individually acknowledged in our CEO's report, I would pay particular mention of the wonderful contribution of the South West Bike Trek which, in the past two years have raised in excess of $67,000.

I am also delighted to announce that the 2019 trek, which finished on the 19 October, has raised $29,283 (funds still coming in at time of writing report). Since its inception in 2002, this event has now raised in excess of $700,000.

In acknowledging the wonderful success of the South West Bike Trek over the past 17 years. I would like to specifically thank and congratulate Eric Maddock and his wife, Annette, for the tremendous effort and dedication that they have given to this event over the past three years.

I would also like to thank second time participant Katelyn Lush for competing and promoting the Foundation at many locations between Perth and Augusta during the 2019 ride. When not 'biking' Katelyn doubles as a most valued member of our administration team.

I congratulate members of our Community Fundraising Committee, under the chairmanship of Justin Bruce, who have worked closely with Kylie Dalton and our own Foundation staff together with the many volunteers who assisted in our fundraising endeavours.

I would like to acknowledge that it is not just monies that are raised from these events but the awareness created which in turn initiates even greater support of our research endeavours.

Patron

Justin Langer, AM - CLCRF Patron

We are extremely pleased that Justin Langer, our inaugural Patron, has, once again, agreed to continue in this role for the next appointment period of 2020.

We were extremely privileged to have Justin accept the position of our first Patron and it is no surprise that he still holds this position. Notwithstanding his many commitments he has always given his support to the Foundation whenever called upon.

Ambassadors

I am very pleased to advise that Dr Ros Worthington OAM and Radio personality, Lisa Fernandez are continuing in their role of Ambassadors to the Foundation, along with our Young Ambassador, Georgia Lowry.

Our CLCRF Ambassadors, who, together with our Patron, Justin Langer, help provide a public and community awareness of the Foundation.

We are excited that all our Ambassadors will support our Foundation in any way they can and help showcase the need for continued funding into childhood cancer research.

Foundation Staff

As a Foundation we are fortunate to have committed staff whose administrative efforts go far beyond a 9 to 5 environment.

To Andrea, our Chief Executive Officer, Wendy, our Executive Officer and Katelyn, our Executive Assistant I extend my personal appreciation for your dedication towards the Foundation, your expertise and efficiency, plus outstanding loyalty, in your collective administrative roles.

Committee of Management

We are fortunate to have very dedicated and enterprising members of our Committee of Management, all of whom give willingly of both their time and expertise as well as business acumen ensuring that our Foundation operates efficiently and effectively in their stewardship of our operations.

I am personally extremely grateful to each and every member of the Committee of Management, who certainly makes my role as Chairman a pleasure.

Conclusion

Our Foundation has now been in existence for 39 years, during this period of time we have raised in excess of $35.3M, the research we have funded has made wonderful advances in the treatment of childhood cancers, our membership continues to grow and best of all we have been able to save young lives and give them the opportunity of a future.

To all of our wonderful members who have supported and contributed to this success, please accept our sincere thanks and grateful appreciation.

I wish everyone a very Merry Xmas and look forward to an exciting and prosperous New Year.

Geoffrey R Cattach AM

CHAIRMAN December 2019

Chief Executive Officer's Report

I am pleased to report to the Members of the Children's Leukaemia & Cancer Research Foundation (Inc) for the financial year 2018/2019.

Corporate Benefactors

Beyond Bank - Community Reward

The Foundation is one of many organisations that are part of the Beyond Bank Community Reward program. This account allows supporters (both individual and businesses) to contribute to not-for-profits and community organisations.

In August 2018 the Foundation was presented with a donation of $3,160.93 from this program. We also received support from Beyond Bank for our Friends of Finlay Camp Out with volunteers on the day.

Our thanks to Beyond Bank for this support, we are delighted to be forging a great relationship with this organisation.

Greater Enfield Development Project (Technip Oceania Pty Ltd)

The Foundation received two donations totalling $11,081 from this project. The project set up a HSE Incentive scheme for the offshore construction and installation of vessels located 60km off Exmouth, WA. CLCRF was one of 5 charities supported by this project.

MSP Engineering Pty Ltd & AGC AusGroup Company

The Foundation received matching donations of $6,000 from the above-mentioned companies, made possible through an incentive scheme they ran in October 2018.

The Six Week Crunch was designed as a way for both companies to keep on track during the busy pre-Christmas period and was run at the CPG2 project for Talison Lithium in Greenbushes. The program was successfully completed with all targets met safely and the site employees chose the charity to benefit.

Toolmart

CLCRF was once again one of two beneficiaries to raise funds at the 2019 Toolmart's Tradie Expo. During the June weekend Foundation volunteers collected $6,135.15 from patron donations at the gate. Thank you to our volunteers and board members who gave up time on their weekend.

Additional donations of $1,630.85 were also received via the 'Toolmart's Loyalty Program' catalogue sales, proceeds from vending machine sales and donation tins at Toolmart locations. Toolmart continues to support the CLCRF Quiz night with donations of prizes for auction.

Benefactors

Mr John Hughan
$75,000

CLCRF is, once again, extremely grateful to receive this wonderful gift from Mr Hughan, who has been supporting the Foundation since 1998. His generosity continues to amaze us.

Tate Family Foundation
$25,000

This gift represents the eighth year of the Tate Family Foundation's amazing contribution to childhood cancer research. This continued support is greatly appreciated by CLCRF.

Stan Perron Charitable Foundation
$10,000

The Stan Perron Charitable Foundation has been a very loyal and generous supporter of this Foundation since 1996. CLCRF was saddened to learn of Mr Perron's passing in November 2018.

Pianta Family
$19,320

Marc & Michelle's little boy Jackson was diagnosed with both Acute Lymphoblastic Leukaemia (ALL) and Acute Myeloid Leukaemia (AML) at 7 months of age. A friend of the family created a Go Fund Me page to help them with medical costs.

The family very generously decided to donate the majority of the funds raised to the Foundation. The Pianta family have since become Ambassadors for CLCRF and participate in many of our media stories to further the awareness of the Foundation.

Gifts in Wills / Endowerment Funds

During the year under review the Foundation received, in total, $1,666,351 from the below-mentioned estates. CLCRF was unaware of these gifts until the benefactors had passed.

To these individuals and organisations, we extend our sincere thanks for their generous support of the Foundation. There were many others who have provided support and financial assistance during 2018/2019. Their generosity is greatly appreciated.

Due to the new Privacy Policy of FIA (Fundraising Institute of Australia), of which CLCRF is a member, we are not permitted to list donor names without permission, therefore we will not be publishing the list of donations $500+.

Deacon, Lindley A	Goodridge V
Harper, Lena M	Johnson, WR
Kendall, Annie	Leidl, Helen
O'Brien, Marie	Rae, David
Raiti, Maria	Stapley, Patricia
Stevenson, Margaret Endowment Fund	

Raffle Program / Western Charity Alliance (WCA)

There were three raffles completed during the year ending June 2019, in which WCA tickets were also sold. Revenue from these raffles totalled $274,996 which, after expenditure, resulted in a surplus of $83,165. Donations received via the raffles were included in the revenue figure. The surplus figure was up compared to last year.

Our raffles continue to increase our profile in the community around Australia. The Royal Life Saving Society WA (RLSSWA), through its call centres in Manjimup and Bridgetown, continue to undertake our telemarketing calls and the Hello Call Centre look after the administration of the raffle funds.

It should be noted, that these raffles are on a cost recovery basis and RLSSWA make NO profit from the services provided to the Foundation. We are extremely grateful to RLSSWA for their continued support of our cause; this relationship goes back well over 18 years to 2001.

Donation Appeal Campaigns

From each raffle campaign the Foundation has been able to establish a database of donors in addition to raffle supporters. Tax and Xmas donation appeals were sent to this donor database in 2018/19, as well as to a select number of donors from the Foundation database.

All four campaigns were successful and represent an effective complimentary fundraising program to the raffles. Net cash received from the campaigns was $177,578, which was more than twice the amount received last year.

This growth in revenue is partly due to our most recent tax appeal, where we decided to expand our reach through digital platforms.

We sent out a dedicated digital appeal through eDM and supported it with news stories and an appeal page on our website, along with social media postings. We raised over $72,000 from this combined campaign approach, which will do great things for our continued funding of childhood cancer research.

2018 Friends of Finlay Camp Out

The second Friends of Finlay Camp Out was held on Saturday 27 October 2018. A great experience for the whole family, this event saw 300 people camp out at Lathlain Oval.

The Camp Out kicked off at 2pm with the families arriving to set up their tents. The kids then enjoyed a day of fun games, bouncy castle, face-painting and footy drills with the Perth Demons Football Club.

A barbecue dinner was served and everyone kicked back to listen to musicians Sally Jane and Double Shots. The main lights were then turned off at 10pm.

The next morning, families were able to use the BBQ's to cook breakfast before packing up at 7.30am. Those that attended really appreciated the chance to turn off the technology and camp together as a family.

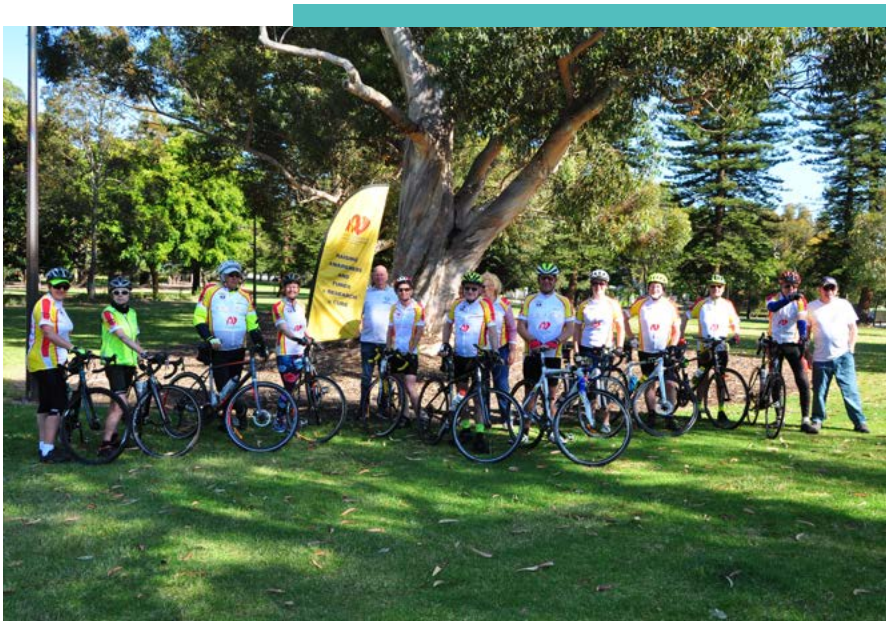
A total of $16,679 was raised from this event. A very special thanks to the Higgs Family and further thanks to Lotterywest for their support of the camp out, West Coast Eagles, Perth Demons Football Club, Corporate Security Australia, Absolute Edge Media and to our volunteers who helped on the weekend.

2018 South West Bike Trek

The Foundation's 16th South West Bike Trek kicked off at Mueller Park Subiaco on Sunday 7th October and finished in Augusta on Saturday the 13th, covering approximately 600 kilometres.

This event would not be possible without the support of the many service clubs, shires, companies and individuals and in particular our Bike Trek Organiser – Eric Maddock and his wife Annette.

Over $36,000 was raised (under community activities) from the trek. Our thanks to PEACH (Personnel Employed at Alcoa Charity Help) for their support of this event.



2019 Quiz Night

Our third Dance for a Cure Quiz Night was held on Friday 8 June, again at the Lathlain Function Centre with over $17,354 being raised. Thank you to the many wonderful people who gave generously, attended and supported the cause.

Thanks also to the many businesses who donated the prizes, to the team at Perth Demons Football Club for their support of the night, our wonderful volunteers who not only help run the event but procure the raffle and silent auction prizes.

Thank you also to our MC, Robbie Figg from the Happiness Co, who did a fantastic job keeping the room entertained.

Foundation Update / Appeals

Two editions of the Foundation Update and two donation appeals were designed during the period under review. Thank you to Michele Seymour from Absolute Edge Media for her expertise in this area of graphic design and support with the creation of stories.

We believe it is important for the members who receive these newsletters to be kept up to date with what we are working towards and achieving each month.

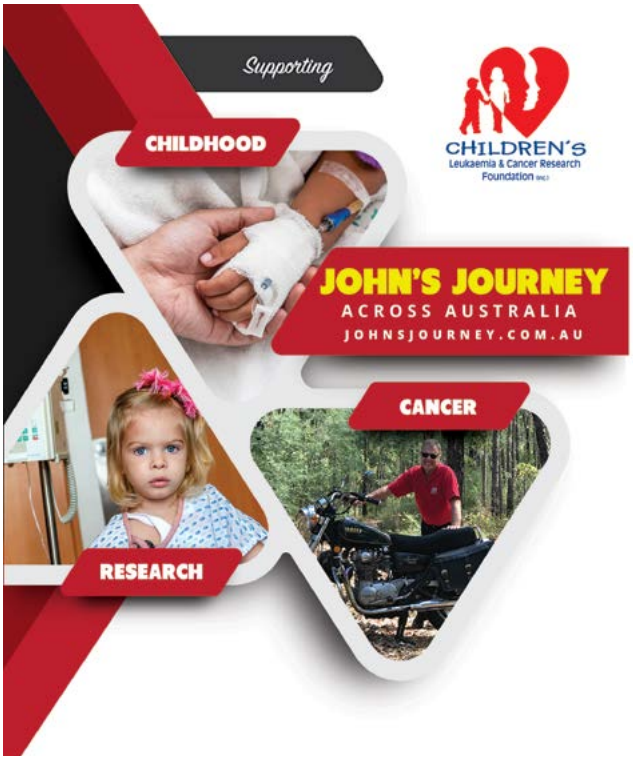
Community Activities

During the 2018/19 period $108,336 (excluding bike trek) was raised from community based activities.

This figure includes the 2019 Quiz Night, Bench to Bedside donations, Entertainment Book sales, Kai's Big Gold Ball 2019, merchandise, event sales, annual donation from NIBA and service club support.

There have been many other events raising awareness and funds for CLCRF from the annual Mandurah Over 55's Kayak Club and John's Buchanan's Journey Across Australia on A Vintage 1979 Yamaha XS650 Motorbike.

Along with The University of NSW Medical Society Medshow, safety initiative at Fulton Hogan Ltd, Rotary Club of Bunbury golf day, 2018 Nambung Country Music Muster, just to name a few. Our thanks to everyone for their enthusiasm and support in raising funds.



During the 2018/19 period $108,336 (excluding bike trek) was raised from community based activities.

Regular Giving

A number of CLCRF supporters chose to donate on a regular basis during 2018/19.

Donations received from these gifts totalled $20,575, an increase from last year (under community activities).

Workplace Giving

This area of support has increased since 2017/18. CLCRF is registered with Good 2 Give Workplace Giving which enables employees to make pre-tax donations to registered charities direct from their pay.

CLCRF also received donations directly from a number of companies for their employees. A total of $20,949 (under community activities) was received via this method of giving.

Membership

As at 23/10/19, the Foundation has 563 members of which 243 are financial for the 2018/19 period. Only financial members can attend the AGM and vote. Members of CLCRF are critical to the ongoing success of our Foundation.

Please help support the Foundation in its research efforts by encouraging your friends, family and colleagues to become members. CLCRF is a low maintenance, low involvement charitable organisation and as a member you can be confident that your financial support goes directly to research.

As a member you will be sent newsletters keeping you informed about the Foundation and what is happening. You will be invited to participate in our events each year to share with us as we grow. Each year you will have voting rights at the AGM and we encourage all of our members to participate.

Schools / Colleges

Romsey House – Christ Church Grammar

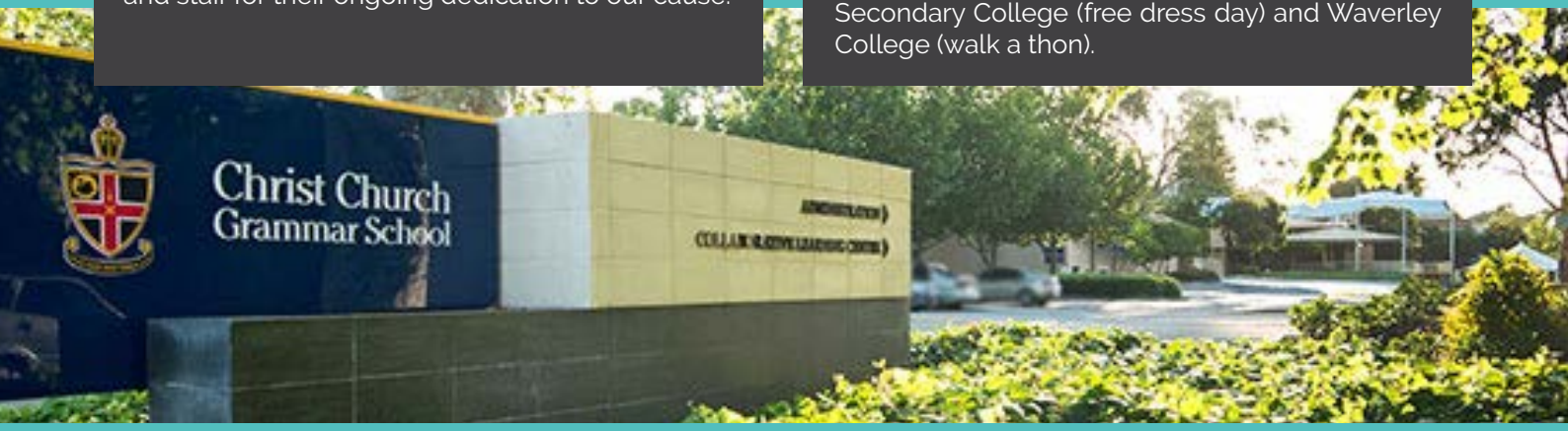
Romsey House at CCG have been supporting the Foundation for over 28 years. During the 2018/19 period Romsey House held a Quiz Night in November and a 'Bowling on the Green' fundraiser in April and raised a total of $17,569.

CLCRF is truly indebted to the students, parents and staff for their ongoing dedication to our cause.

Other Schools / Colleges

Other funds were raised by Comet Bay College (free dress day and teacher shaved his head), Harvey PS (bike trek) and International School of WA (donations from students instead of sharing Christmas cards).

Along with Katanning PS (local family with cancer diagnosis), Poseidon PS, Singleton PS, Wardle House at St Mary's Anglican Girls School, Yanchep Secondary College (free dress day) and Waverley College (walk a thon).

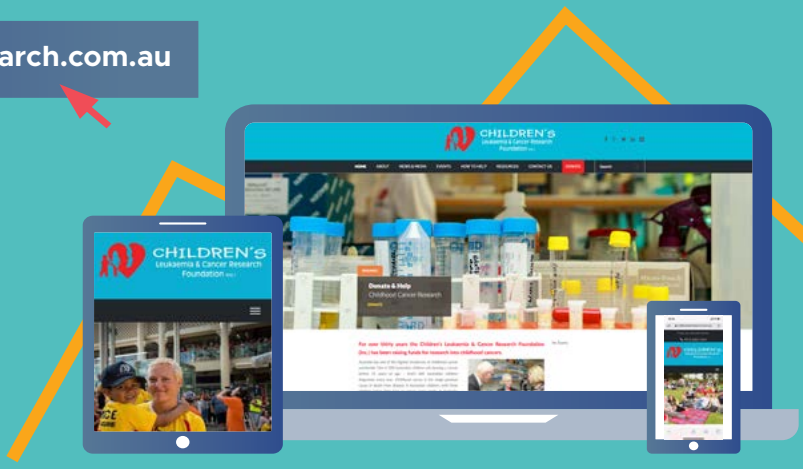


Website

childcancerresearch.com.au

Absolute Edge Media continue to update our website regularly with details of events, stories, etc.

During the period under review $5,015 was donated via the website. This is a reduction from last year's figure, but this would be because when a donation comes in via the website, if it's for the tax/xmas appeals etc – the donation is allocated to that campaign not the website.



Fundraising Platforms / PayPal Giving Fund

Support for the Foundation has continued to come from many people around the world. CLCRF's fundraising profile continues to be strong via the online fundraising entities such as Everyday Hero, Go Fundraise and My Cause.

Funds raised via these platforms totalled $18,723 during 2018/19. We have also been the beneficiary of donations from the PayPal Giving Fund totalling $3,454.

Social Media

Facebook

facebook.com/CLCRF

Currently CLCRF has 4,335 Facebook followers, compared to 3,882 last year. Facebook is used as a powerful tool to engage with our supporters and reach a wider audience.

We mainly use the platform to share photos, videos and stories about the Foundation, as well as news about developments in childhood cancer research. It is also an excellent way to encourage donations to the Foundation, especially with Facebook's new integrated donation feature.

Facebook has been a valuable asset to CLCRF, helping us to raise funds and awareness through a range of campaigns. Our Facebook content strategy includes the following: Information about events, Promotion of supporters who are choosing to fundraise for CLCRF, Donations received, Items relevant to childhood cancer, CLCRF Flashbacks - Stories from our over 39-year history, Competitions and Social content.

Twitter

We currently have 138 followers on Twitter. The Twitter account is mainly used when at events.

These social media platforms have proved to be of great benefit to the Foundation and we look forward to continue using them in the future.

Instagram

@CLCRF

Instagram has been used to further expand CLCRF's online presence. We use the platform as another effective way to communicate with and engage with our supporters. As this is a photo-sharing platform, we have been able to create a more human-side to the Foundation by giving our followers a more visual look at what's happening at CLCRF.

The platform has also been an excellent way to reach out to new supporters, especially through the platform's hashtag capabilities. When relevant, we use hashtags to ensure more people are able to find our content and learn more about the Foundation.

LinkedIn

CLCRF currently has 49 followers on LinkedIn which we utilise for more professional communications. We use the platform to share articles about childhood cancer research as well as our own stories and achievements. Through the platform, we are able to position ourselves as thought leaders in the industry and boost our reputation.

Since LinkedIn aggregates news that other professionals are sharing, we have been able to use the platform to stay up to date on what's happening in the industry and new developments in all types of cancer and leukaemia research.

Conclusion

According to the ACNC 2017 Australian Charities Report, there were 44,591 charities registered in Australia, with over 10.18% registered in WA.

This figure, in 2019, has now increased to 57,038. That is an increase of 12,447 new charities in two years. The 2017 report indicates that charities:

- a total revenue of $142.7B
- donations and bequests as a revenue source totalled $9.9B
- employ a total of 1,232,496 people
- 3.3M volunteers across Australia's charities

The call on the public to fund charitable work is getting increasingly harder, with the increase in charity numbers. CLCRF are very conscious of not fatiguing our current supporters but wanting to keep them engaged and connected with the Foundation's work and vision. Our goals for 2020 are to look for ways to be of higher value to our supporters with a continued understanding of their needs.

In March 2019 Wendy, Katelyn and I attended the Fundraising Institute of Australia's international conference in Melbourne. For not-for-profit organisations, attendance at these conferences is essential to stay in touch with the industry and to network with peers. Thank you to the Board for their support of this professional development.

My appreciation to Executive Officer, Wendy Kearns and Executive Assistant, Katelyn Lush for their tireless efforts, commitment and support.

Also to the entire team at Absolute Edge Media who go above and beyond for the Foundation, their support and expertise is invaluable.

In my second year as CEO, I would like to extend my thanks to the Board of Management for their continued support. Not many people can go to work each day loving what they do, I'm one of the lucky ones.

I would like to take this opportunity to wish everyone a very Merry Christmas and a safe and peaceful 2020.

Andrea Alexander

CHIEF EXECUTIVE OFFICER 28 October 2019

Children's Leukaemia & Cancer Research 2018/2019

Overview of the Telethon Kids Cancer Centre

I have just completed my second year as Head of the Telethon Kids Cancer Centre (TKCC). From the outset, I would like to thank the Children's Leukaemia & Cancer Research Foundation (CLCRF) for their valuable financial support, which has helped me establish a new paediatric brain cancer research program. In addition, alongside their ongoing long-term support of our Leukemia Program, I am grateful that CLCRF has allowed me to use their funds to grow and expand the TKCC, particularly for the establishment of a new sarcoma research program.

The Leukaemia Program continues to perform strongly, both in terms of publications and leverage of additional funding. This year, our Ursula Kees Research Fellow, Sébastien Malinge, was successful in obtaining a prestigious Senior Research Fellowship from the Cancer Council of Western Australia. This award will allow him to expand his leukemia research program.

Our sarcoma research program, led by Joost Lesterhuis, has also grown and developed significantly, succeeding in the acquisition of additional research funding. This program has also attracted public attention, with stories published on both Today Tonight and the Channel 7 news, helping raise the profile of TKCC and CLCRF.

During 2019, we again ran our competitive travel awards for students and junior staff. Here, successful researchers are required to visit an international/national laboratory relevant to their research and present at a conference. Five awards were given out and each recipient will attend a CLCRF Board meeting to briefly share their experience.

Immunotherapy is an emerging therapeutic strategy in adult cancer and has great potential in paediatric cancer. All research groups across the TKCC have at least one immunotherapy related research project in their portfolio. We have used CLCRF funds this year to help establish collaborations across the groups in this critical area of research, which is rapidly moving towards the clinic.

CLCRF's financial commitment underpins our world-class research program and the entire TKCC is appreciative of their ongoing support.

Your Sincerely,

Prof Terrance Johns

Funding: **$250,000 in 2019**
Researcher: **Professor Terrance Johns**
Title: **Oncogenic Signalling Laboratory**

The valuable support of the CLCRF has helped me establish the Oncogenic Signalling Laboratory, a world-class team of brain cancer researchers based in Perth.

During the past 12 months we have made 2 significant recruitments. First, Jeffreena Miranda, who joined the group in late 2018 after completing her PhD at Peter MacCallum Cancer Centre in Melbourne. Then, in May 2019, we were fortunate to have Emily Fletcher join us from Cambridge University as a senior Research Fellow.

Also this year, the first 2 PhD students joined our team, and looking ahead, several additional students will join us in 2020.

One of my personal goals during 2019 was to establish links with international paediatric brain cancer researchers, who can help further develop my planned world-class research program. Both, Professor Chris Jones (The Institute of Cancer Research, London) and Professor Michelle Monje (Stanford University, California), have agreed to provide key materials and cell lines as well as expert advice for our projects. It is particularly rewarding to have Chris on board, as he grew up here in Perth.

CLCRF funds have continued to support the ongoing pre-clinical development of CT-179, a novel drug that targets OLIG2. OLIG2 is a protein found in most adult and childhood brain cancers and has a central role in the growth of these tumours.

CT-179 has shown significant anti-tumour activity against medulloblastoma, diffuse intrinsic pontine glioma (DIPG) and ependymoma, both in the laboratory and animal models. We plan to submit 2 manuscripts describing this work during 2020.

Moving forward into 2020, the Oncogenic Signalling Laboratory will develop several new projects in paediatric brain cancer, and I look forward partnering with CLCRF on these new endeavours.

Additional Funding Leveraged

- Ethan Davies Foundation/Robert Connor Dawes Foundation ($100K)
- Perth Children's Hospital Foundation ($78K)
- Cure Starts Now ($73K)

Relevant Publications

Given that my paediatric brain cancer research program is relatively new, there have been no relevant publications yet.

Conference Presentation: International DIPG Symposium 2019, Invited Talk

Funding: **Triennial Block Grant (2019 - 2021)**
Researcher: **Dr Rishi S Kotecha and Dr Laurence C Cheung**
Title: **Identifying Novel Translatable Therapeutics for Infant Acute Lymphoblastic Leukaemia**

Leukaemia is a cancer of the blood and is the most common cancer in children. Leukaemia cells multiply uncontrollably, such that they crowd out healthy blood cells. Acute lymphoblastic leukaemia or ALL is the most frequently occurring type of childhood leukaemia. International research over the past sixty years has led to massively improved cure rates.

Around 90% of children and adolescents with ALL can expect to be cured of their disease. In sharp contrast, newborns and babies who are less than 12 months of age at diagnosis face a dismal outlook, with an event-free survival rate of less than 40%.

In an attempt to find better treatment for these infants, international study groups have conducted many therapeutic studies with more intensive therapy. Unfortunately, this led to a large number of toxic deaths and did not improve overall survival. We urgently require novel therapies. Understanding the biology of this disease holds the key.

To study the biology we investigated genetic features of the leukaemia cells from babies, and performed genetic analyses using state-of-the-art next generation sequencing technology. We gained novel insight into genes that are involved, their contribution to disease progression and resistance to chemotherapeutic drugs.

We confirmed that a gene called MLL is not in its normal position on chromosome 11 where it normally is located, but chromosome 11 is broken at the site and fused to part of another chromosome. We know that such fusions are only present in the leukaemia cells and not in the patient's normal cells, and confer poor prognosis for the patient.

We used the leukaemia specimens from the patients to generate cell lines, so that the cells can be kept alive in the laboratory. These cell lines allow us to determine which drugs are effective in killing the leukaemia cells. We have generated a panel of nine cell lines and used the same methods to analyse their genetic features, as was done for the leukaemia cells from the patients. This confirmed that the cultured cells showed the identical fusions of the MLL gene as present in the leukaemia cells from the patients.

We then screened the cell lines against more than 3600 approved cancer drugs, which is the first comprehensive assessment of drug response in leukaemia cells from babies.

The information obtained clearly showed that some of the currently used drugs are not very effective at killing the leukaemia cells in the test tube. However, some of the novel drugs were very effective yet are not used in contemporary protocols to treat patients.

In order to determine whether these new drugs would be able to enhance the efficacy of currently used drugs we conducted a large screening experiment. We tested each new drug in combination with the nine cytotoxic drugs that are currently used to treat babies with leukaemia. There were several drug

combinations that were shown to enhance the killing of the leukaemia cells. Several of these successful drug combinations were further tested in our preclinical model system. We could demonstrate that this therapeutic approach effectively reduced the leukaemia burden and improved survival in vivo – the drug combinations were more powerful than each drug alone.

Our studies have identified new drug combinations that could be of benefit for babies with leukaemia. Our results have been presented to the international infant acute lymphoblastic leukaemia study group and are currently being integrated into international clinical trials for infants with acute lymphoblastic leukaemia, thus findings from our research will directly benefit patients on a global scale.

Through this work, Dr Kotecha has been selected to lead the next international clinical trial for infants with acute lymphoblastic leukaemia.

These and other studies have generated a number of research publications and have allowed us to leverage additional funding to support the work. These details are provided below.

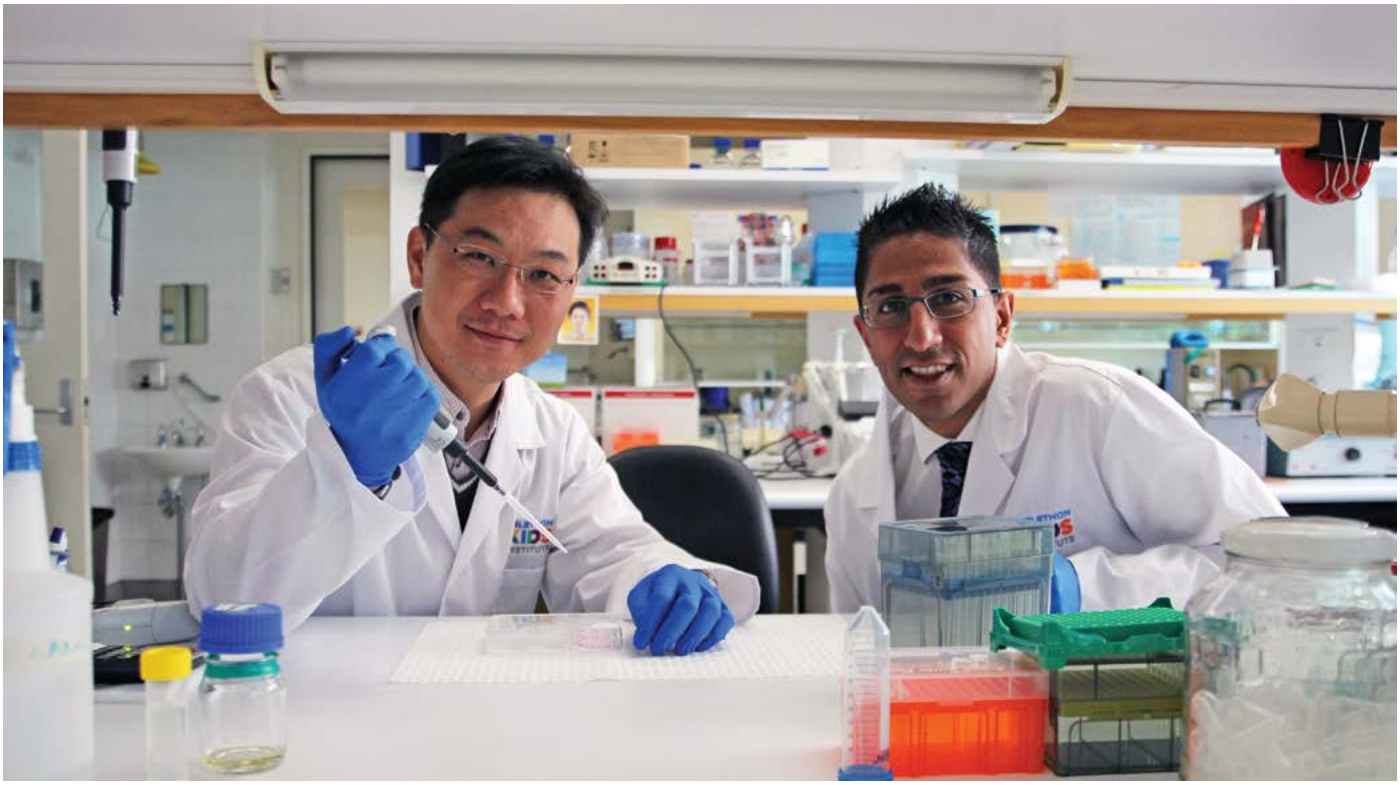
Additional Funding Leveraged

- The Kids' Cancer Project Grant (2019): Combinatorial Therapeutics in High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, $132,158)
- National Health and Medical Research Council Early Career Fellowship (2018-2021): Combinatorial Therapeutics in High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, $344,657)
- Tour de Cure Scott Canner Young Researcher Research Grant (2018-2019): Identifying Novel Translatable Treatments to Improve the Outcome for Infants with Acute Lymphoblastic Leukaemia (Kotecha RS, $125,000)
- The Royal Australasian College of Physicians Research Establishment Grant (2018-2019): Combinatorial Therapeutics in High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, $180,000)
- The Kids' Cancer Project Grant (2017): Combinatorial Therapeutics in High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, $133,537)
- Raine Medical Research Foundation Clinician Research Fellowship (2016-2018): Combinatorial Therapeutics in High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, $404,676)
- Department of Health WA Merit Award (2016): Evaluation of Demethylating Agents against Infant Acute Lymphoblastic Leukaemia Models In Vitro (Kotecha RS, $25,000)
- Telethon-Perth Children's Hospital Research Fund (2015-2017): Combinatorial Therapeutics In High-Risk Infant Acute Lymphoblastic Leukaemia (Kotecha RS, Kees UR, Cruickshank, MN, Lassmann T, $237,180)

Relevant Publications

- Cheung LC, Cruikshank MN, Hughes AM, Singh S, Chua GA, Ford J, Ferrari E, Oommen J, Malinge S, Lock RB, Kees UR, Kotecha RS. Romidepsin enhances the efficacy of cytarabine in vivo, revealing histone deacetylase inhibition as a promising therapeutic strategy for KMT2A-rearranged infant acute lymphoblastic leukemia. Haematologica 2019;104(7):e300-e303
- Pieters R, De Lorenzo P, Ancliffe P, Aversa LA, Brethon B, Biondi A, Campbell M, Escherich G, Ferster A, Gardner RA, Kotecha RS, Lausen B, Li CK, Locatelli F, Attarbaschi A, Peters C, Rubnitz JE, Silverman LB, Stary J, Szczepanski T, Vora A, Schrappe M, Valsecchi MG. Outcome of infants younger than 1 year with acute lymphoblastic leukemia treated with the Interfant-06 protocol: results from an international phase III randomized study. Journal of Clinical Oncology 2019;37(25):2246-2256.
- Cruickshank MN, Ford J, Cheung LC, Heng J, Singh S, Wells J, Failes TW, Arndt GM, Smithers N, Prinjha RK, Anderson D, Carter KW, Gout AM, Lassmann T, O'Reilly J, Cole CH, Kotecha RS, Kees UR. Systematic chemical and molecular profiling of MLL-rearranged infant acute lymphoblastic leukemia reveals efficacy of romidepsin. Leukemia 2017;31(1):40-50.
- Kotecha RS, Kees UR, Cole CH, Gottardo NG. Rare childhood cancers - an increasing entity requiring the need for global consensus and collaboration. Cancer Medicine 2015;4(6): 819-824.
- Kotecha RS, Gottardo NG, Kees UR, Cole CH. The evolution of clinical trials for infant acute lymphoblastic leukemia. Blood Cancer Journal 2014;4:e200.
- Kotecha RS, Ford J, Beesley AH, Anderson D, Cole CH, Kees UR. Molecular characterization of identical, novel MLL-EPS15 translocation and individual genomic copy number alterations in monozygotic infant twins with acute lymphoblastic leukemia. Haematologica 2012;97(9):1447-1450.
- Kotecha RS, Murch A, Kees U, Cole CH. Pre-natal, clonal origin of t(1;11)(p32;q23) acute lymphoblastic leukemia in monozygotic twins. Leukemia Research 2012;36(1):46-50.

Funding: Triennial Block Grant (2019 - 2021)
Researcher: Dr Laurence C Cheung and Dr Rishi S Kotecha
Title: Novel Therapeutics for Children with Leukaemia: Understanding and Targeting the Bone Marrow Microenvironment



Acute lymphoblastic leukaemia or ALL is the most commonly occurring childhood cancer. Seventy years ago a few clinicians pioneered the use of what we now call chemotherapy - drugs that are toxic and preferentially attack leukaemia cells. A tremendous international cooperation by clinicians and scientists identified drug combinations that can eliminate ALL cells and cure patients.

Steady progress has pushed the cure rate for favourable risk leukaemia subgroups to 90%; however, despite such advances leukaemia remains the second most frequent cause of death from cancer in children.

The burden of disease, calculated in "person years of life lost" due to disease, is 69 years for children with leukaemia, whereas for adult cancer it ranges from 9 to 35 years. Patients with leukaemia are treated with up to ten different chemotherapeutic drugs.

These regimens are also very toxic to normal cells of the patients, and lead to short and long-term sequelae. Children who survive leukaemia suffer from these side-effects throughout their lives. Sadly, in some patients the disease comes back and the patients relapse. Most relapses of ALL occur in the bone marrow where the disease originates.

At the time a patient is diagnosed, the bone marrow does not contain many normal cells, but instead is almost totally replaced by ALL cells.

The cause of relapse is often due to the fact that the chemotherapeutic drugs are no longer toxic to the leukaemia cells, as they have modified their genetic features and as a result have become resistant.

Leukaemia cells also use another escape method which is triggered by a response in the bone marrow by the normal cells and bone cells that surround the leukaemia cells. These surrounding cells are commonly referred to as the microenvironment. The response ultimately leads to protection of the leukaemia cells by the microenvironment.

Our work has discovered that ALL cells have the capacity to influence their environment.

Destruction of the bone is commonly seen in children with leukaemia, and many patients suffer from bone pain at diagnosis, yet little is known about the association of bone loss and the progression of leukaemia.

We have successfully developed a novel in vivo model that allows comprehensive investigation of the bone cells and surrounding normal cells in the bone marrow during leukaemia development. Importantly, this model faithfully replicates human disease and the clinical symptom of increased bone fragility and reduced bone mineral density in children with a diagnosis of ALL.

We first investigated development of the disease in our model system and monitored each population of the surrounding normal cells. We could clearly show that during the initial phases the leukaemia cells did not expand, however the environment was remodelled to

facilitate the subsequent support of the cancerous growth. Notably, the normal production of blood cells and immune cells in the bone marrow were affected during leukaemia development.

The combined reactions of the surrounding cells then appear to trigger expansion of the leukaemia cells, and this happens very rapidly. Understanding this cascade of events opens up new avenues to interfere with the disease process and to design new therapeutic approaches. Our goal is to find inhibitors of these mechanisms to stop the development of leukaemia.

We further discovered that bone-eating cells were highly active during the development of leukaemia. We tested an inhibitor of bone-eating cells, zoledronic acid, which has the capacity to reduce bone loss in patients with other conditions. We found that treatment reduced leukaemia progression and extended survival in our model. In addition, zoledronic acid improved treatment outcome when combined with currently used chemotherapeutic drugs. Unlike chemotherapeutic drugs, zoledronic acid is safe and well tolerated by children, and is already in clinical use in children for a wide variety of indications.

Our findings suggest restoration of the normal microenvironment in the bone marrow to control cancer progression as a promising therapeutic avenue. Currently, we are investigating the interactions between 'normal' bone marrow cells and leukaemia cells with the aim to identify additional new therapeutic targets for children with leukaemia.

These and other studies have generated a number of research publications and have allowed us to leverage additional funding to support the work. These details are provided below.

Additional Funding Leveraged

- Tour de Cure Young Researcher Research Grant (2019-2020): New therapeutic opportunities by targeting the bone marrow microenvironment of high-risk childhood leukaemias (Cheung LC, $98,020)
- Cancer Council WA (CCWA) Suzanne Cavanagh Early Career Investigator Grant (2018-2019): Unveiling the interaction between leukaemia cells and bone cells (Cheung LC, $34,723)
- Perth Children's Hospital Foundation Project Grant (2018-2020): Exploiting the use of zoledronic acid to improve the outcome in childhood leukaemia (Cheung LC, Kotecha RS, Tickner J, $78,554)
- Cancer Research Trust Single Cell Initiative (2018): Dissection of the non-haematopoietic bone marrow stromal cells in the acute lymphoblastic leukaemia microenvironment (Cheung LC, Kotecha RS, Lassmann T, $20,000)
- Telethon-Perth Children's Hospital Research Fund (2017-2019): Zoledronic acid to improve outcome of children with high risk leukaemia (Cheung LC, Kotecha RS, Tickner J, Kees UR, $242,470)
- Cancer Council WA (CCWA) Collaborative Cancer Grant Scheme (2017-2018): Dissecting the leukaemia microenvironment (Cheung LC, Mullin B, Tang D, Kotecha RS, Tickner J, $43,395)
- Telethon Kids Institute Competitive Working Group Project Grant (2016): The bone marrow microenvironment during leukaemogenesis (Cheung LC, Foley B, Tickner J, He B, Kees UR, Cole C, $25,000)

Relevant Publications

- Kotecha RS, Cheung LC. Targeting the bone marrow microenvironment: a novel therapeutic strategy for pre-B acute lymphoblastic leukemia. Oncotarget 2019;10(19):1756-1757.
- Cheung LC, Tickner J, Hughes AM, Skut P, Howlett M, Foley B, Oommen, J, Wells JE, He B, Singh S, Chua GA, Ford J, Mullighan CG, Kotecha RS, Kees UR. Dissecting the pre-B leukemia bone marrow microenvironment reveals new therapeutic opportunities. Leukemia 2018;32(11):2326-2338.
- Wells JE, Howlett M, Halse HM, Heng J, Ford J, Cheung LC, Samuels AL, Crook M, Charles AK, Cole CH, Kees UR. High expression of connective tissue growth factor accelerates dissemination of leukaemia. Oncogene 2016;35(35):4591-4600.
- Wells JE, Howlett M, Cheung LC, Kees UR, 2015. The role of CCN family genes in haematological malignancies. Journal of Cell Communication and Signaling 2015;9(3):267-278.
- Cheung LC, Strickland DH, Howlett M, Ford F, Charles AK, Lyons KM, Brigstock DR, Goldschmeding R, Cole CH, Alexander WS, Kees UR. Connective tissue growth factor is expressed in bone marrow stromal cells and promotes interleukin-7-dependent B lymphopoiesis. Haematologica 2014;99(7):1149-1156.

Funding: **CLCRF – Ursula Kees fellow (2017 - 2021)**
Researcher: **Dr Sébastien Malinge**
Title: **Development of preclinical models of childhood leukaemia to test new therapeutic approaches and improve outcomes**

Acute Leukaemia is the most common type of childhood malignancy, accounting for 30% of all paediatric cancers worldwide. In Australia, it is estimated that 241 children aged 0-14 years will be diagnosed with leukaemia in 2019 (data from the Australian Government - Cancer Australia).

Outcomes for paediatric leukaemia have significantly improved over the recent decades, with current 5-year overall survival approaching 85%. Nonetheless, despite this success, leukaemia remains the second cause of death by cancer in children.

Many children continue to have a poor prognosis, suffering from relapse or treatment related toxicity, which can lead to increased mortality and necessitate longer hospital admissions and ongoing care. Current therapeutic approaches have now reached their maximum potential, highlighting the need for new, efficacious, more targeted, and less toxic treatments.

Gain of chromosome 21 is one of the most common genetic alteration seen in childhood leukaemia but little is known about its role in leukaemia development. Children with Down Syndrome (DS) that carry an extra chromosome 21 (trisomy 21), have a 10 to 20-fold increased risk of developing acute myeloid leukaemia (known as DS-AMKL) and B-cell leukaemia (DS-ALL) during childhood.

DS children with B-cell leukaemia have inferior outcomes compared to other children with B-ALL (overall survival 74% vs 89%; event-free survival 64% vs 81%), 3-fold higher treatment-related mortality (TRM) and a higher rate of relapse (26% vs 15 %). Therefore, more specific therapy combinations with enhanced tumour-targeting capability are urgently needed to improve long-term outcomes for children with DS-ALL.

Moreover, a more complete understanding of the role of gain of the chromosome 21, in DS-leukaemia as well as in other blood cancer, will allow us to identify new actionable targets to improve long term outcomes for children with leukaemia. Nevertheless, new experimental models are required to assess the therapeutic impact of targeting the mechanisms altered by gain of chromosome 21.

Over the last few years, we reproduced the multi-step process of leukaemia development seen in Down syndrome children and showed that trisomy 21 acts in cooperation with other genetic alterations (such as GATA-1s and JAK3 mutations) to alter haematopoiesis during foetal life, providing new insights into leukaemia predisposition in Down syndrome children.

We also showed that trisomy 21 cooperates with JAK3 mutations after foetal life to progressively enhance the pool of T-cells in several organs (blood, lymph nodes, thymus, spleen and bone marrow) as observed in patients with an aggressive form of cutaneous T-cell lymphomas (CTCL).

This study revealed, for the first time, the critical role of gain of the

chromosome 21 in Blood cancer development in people without Down syndrome.

We have recently completed a study on several childhood B-cell leukaemia subtypes that have an extra chromosome 21 (including DS-ALL samples collected from biobanks in Western Australia).

We performed high-throughput sequencing analyses in a cohort of 44 patients to identify the genetic alterations that specifically act in cooperation with gain of chromosome 21. In parallel, we engrafted these primary patient samples in vivo to develop new and reliable models, suitable to analyse disease progression and response to treatments in a preclinical setting.

This study revealed that the activation of the RAS/MAPK pathway is a key player in B-cell leukaemia development. We tested the efficacy of several drugs targeting this pathway, alone or in combination with standard or care therapies, and showed that the integration RAS/MAPK inhibitors into current treatment protocols may be a promising strategy to improve outcomes for these children. Using the same framework, we are currently testing the efficacy of several drugs targeting the mechanisms altered by gain of chromosome 21 in a preclinical setting.

Through our ongoing collaborations with clinicians and several Australian biobanks, we are continuously extending this cohort of leukaemia samples, to build a comprehensive repository of preclinical models in Western Australia. From these models, we are developing B-ALL cell lines, which will serve as important tools for testing new therapeutic agents in test tubes, prior to be assessed in a preclinical setting with conventional chemotherapy.

This strategy will enable us to identify new drugs with strong efficacy tested directly on human leukaemia samples, to facilitate a rapid translation of our research into clinical trials, with the view of improving the outcomes of a significant number of children with leukaemia in Western Australia and across the world.

Additional Funding Leveraged

- 2019-2020 Jérome Lejeune Foundation: Targeting DYRK1A: a key player in Down syndrome Leukaemogenesis, CIA Malinge, 122,924 AUD
- 2019-2020 IMPACT Perpetual: Identify the treatment-resistant clones by single cell multi-omics, CIA Malinge, 8,500 AUD
- 2018 Building Excellence in Research Experimental Grant, Telethon Kids Cancer Centre, CIA Malinge, 11,200 AUD
- 2017 Lexus Ball, Development of new animal models to investigate leukaemia predisposition, CIA Malinge, 25,000 AUD
- 2016-2018 GEFLUC Foundation, Genetic of childhood B-cell leukaemia with gain of the chromosome 21, CIA Malinge, 20,800 EUR
- 2016-2019 Institut National du Cancer (INCa-PLBIO), Modeling of megakaryoblastic leukaemia from trisomy 21, CIC Malinge, 202,000 EUR
- 2016-2018 Jérome Lejeune Foundation, Development of new models to assess the impact of DYRK1A in Down syndrome leukaemia, CIA Malinge, 26,000 EUR

Relevant Publications

- Cheung LC, Cruikshank MN, Hughes AM, Singh S, Chua GA, Ford J, Ferrari E, Oommen J, Malinge S, Lock RB, Kees UR, Kotecha RS. Romidepsin enhances the efficacy of cytarabine in vivo, revealing histone deacetylase inhibition as a promising therapeutic strategy for KMT2A-rearranged infant acute lymphoblastic leukemia. Haematologica 2019;104(7):e300-e303
- Volk A, Liang K, Suraneni P, Li X, Zhao J, Bulic M, Marshall S, Pulakanti K, Malinge S, Taub J, Ge Y, Rao S, Bartom E, Shilatifard A, Crispino JD. A CHAF1B-Dependent Molecular Switch in Hematopoiesis and Leukemia Pathogenesis. Cancer Cell. 2018 Nov 12;34(5):707-723.e7.
- Rivera-Munoz P, Laurent A, Siret S, Lopez CK, Ignacimouttou C, Cornejo MC, Rameau P, Bernard OA, Dessen P, Gilliland GD, Mercher T and Malinge S. Partial trisomy 21 contributes to T cell malignancies induced by JAK3 activating mutations in murine models. Blood Advances 2018 Jul 10;2(13):1616-1627.
- Anso E, Weinberg SE, Diebold LP, Thompson BJ, Malinge S, Schumacker PT, Crispino J and Chandel N. Mitochondrial oxidative metabolism is essential for maintenance of hematopoietic stem cell function. Nature Cell Biology. 2017 Jun;19(6):614-625.
- Lopez CK, Malinge S, Gaudry M, Bernard OA, Mercher T. Pediatric Acute Megakaryoblastic Leukemia: Multitasking Fusion Proteins and Oncogenic Cooperations. Trends Cancer. 2017 Sep;3(9):631-642.
- Thirant C, Lopez C, Malinge S and Mercher T. Molecular pathways driven by ETO2-GLIS2 in aggressive pediatric leukemia. Molecular & Cellular Oncology. 2017(vol 4), e1345351.
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- Jeremy Wen Q, Yang Q, Goldenson B, Malinge S, Lasho T, Schneider RK, Breyfogle LJ, Schultz R, Gilles L, Koppikar P, Abdel-Wahab O, Pardanani A, Stein B, Gurbuxani S, Mullally A, Levine RL, Tefferi A, Crispino JD. Targeting megakaryocytic-induced fibrosis in myeloproliferative neoplasms by AURKA inhibition. Nature Medicine. 2015 Dec;21(12):1473-80.
- Thompson BJ, Bhansali R, Diebold L, Cook DE, Stolzenburg L, Casagrande AS, Besson T, Leblond B, Desire L, Malinge S and Crispino JD. DYRK1A controls the transition from proliferation to quiescence during lymphoid development by destabilizing Cyclin D3. Journal of Experimental Medicine. 2015 Jun 1;212(6):953-70.

Funding: **CLCRF**
Researcher: **Dr Joost Lesterhuis**
Title: **Sarcoma Research**

Sarcoma is the third most frequent cancer in children and young people. Soft tissue sarcoma is a group of cancers derived from muscle, fat or connective tissues, characterised by local aggressive growth.

Current treatments of sarcoma can have severe side effects; large surgical procedures are often required in order to get complete resection of all cancer tissue. For sarcomas in limbs this not infrequently involves amputation.

In addition, children will be treated with chemotherapy and/or radiotherapy to prevent relapse. Despite this aggressive treatment, the cancer recurs in approximately one third of the cases in high-risk soft tissue sarcoma in children.

In adults, these percentages are even higher, for example around 50% in retroperitoneal sarcoma, with chemotherapy and radiotherapy providing little benefit, if any. Sarcoma is a particularly under-investigated cancer because it is relatively rare in adults (1% of cancers), thus receiving little interest from pharmaceutical companies. In children, however, sarcoma is the third most common cancer, representing about 15% of all cancers. More research is urgently needed; sarcoma prognosis and treatments have not changed in the last 20 years.

Here, we aim to develop a biodegradable material that slowly releases immunotherapy drugs, which can be applied in the wound bed after surgical resection of soft tissue sarcoma. These drugs will attract and activate immune cells that can search and destroy remaining cancer cells, thus preventing the cancer from recurring.

This is a unique approach that tackles a particular important problem in sarcoma; local recurrence after intensive surgery, despite aggressive treatments with sometimes severe long-term side effects.

If effective, our therapy provides hope for a treatment that is easy to use, that does not require additional treatments (the drug is released locally while the child goes through normal daily activities; after several weeks the biocompatible material is completely degraded) and does not come with severe side effects.

The work in this project is the result of a unique collaboration between material scientists and cancer immunologists/oncologists. Our aim is to have a prototype ready within 1-2 years that is optimized in mouse models and that we can take forward into clinical trials in canine sarcoma. Because we will then have evidence of safety and efficacy in two independent animal models (an FDA requirement), we hope we will be able to take the final leap into clinical trials in patients with sarcoma within several years' time. The results as obtained in sarcoma may be translated to other cancers that often relapse after surgery, such as paediatric brain cancer and other solid tumours.

In the past year, we obtained proof of principle; we were able to reduce sarcoma relapse after surgery in mice carrying soft tissue sarcomas from 100% to close to 0%, by local injections of the drug at low

concentrations (2% of the normal systemic dose). This means that the drug is indeed doing what we hoped it would do. We optimized the dose and are close to having optimized the treatment duration.

We also tested the gel (without the drug) in mice to test whether it was tolerable and not interfering with wound healing, the results of which were positive. We also made a version of the drug and the gel labelled with a fluorescent label. This means that we can test in living mice how fast the gel releases the drug and for how long. This is crucial information, as we need the gel to release the drug for about 1-2 weeks. However, the wound healing environment contains enzymes that break down the gel, the concentrations of which change over time during the wound healing response and the same is true for pH. That means that the only way we can optimize our gel and see whether it is in fact releasing the drug with the desired speed and duration is in living animals, in the context of surgery.

In the year going forward, we will now put the drug in the gel and test it for its anti-tumour effect after surgery in mice, we will optimize the gel/drug in terms of release kinetics, and we aim to start a clinical trial in dogs with soft tissue sarcoma (in collaboration with veterinary oncologist Dr Ken Wyatt from Perth Veterinary Oncology).

In addition to current PhD student Francois Rwandamuriye and junior post-doc Rachael Zemek, the Sarcoma Group at TKI will be further expanded with PhD student Breana Weston next year (who did her Honours project with us this year).

Additional Funding Leveraged

- Sock it to Sarcoma! Research Grant $50,000
- Australia New Zealand Sarcoma Association Johanna Sewell Research Grant $50,000
- Perpetual Philanthropy Research Grant, $50,000
- An NHMRC Ideas Grant application is currently under review

Relevant Publications

- Rwandamuriye FX, Weston BJ, Lesterhuis WJ*, Zemek RM*. A Mouse Model of Incompletely Resected Soft Tissue Sarcoma for Testing Perioperative Treatments to Prevent Local Recurrence. Journal of Visual Experiments, Under review (invited protocol paper, *corresponding authors)
- Zemek RM*, Fear F, Forbes C, De Jong E, Boon L, Casey T, Lassman T, Bosco A, Millward MJ, Nowak AK, Lake R, Lesterhuis WJ*. Bilateral tumour models for analysis of the cellular and molecular events associated with immune checkpoint blockade. Nature Protocols (*Corresponding authors) under review.
- Zemek RM, De Jong E, Chin W, Fear F, Forbes C, Casey T, Hope D, Boon L, Forrest AR, O Muiri D, Millward MJ, Nowak AK, Lassman T, Bosco A, Lake R, Lesterhuis WJ. Sensitization to immune checkpoint blockade through activation of a STAT1/NK axis in the tumor microenvironment. Science Translational Medicine 11 (501), eaav7816, 2019
- Chin WL, Zemek RM, Lesterhuis WJ, Lassmann T. Functional genomics in cancer immunotherapy: computational approaches for biomarker and drug discovery. Molecular Systems Design & Engineering, 2019

Funding: **CLCRF Research Fellowship (2017 – 2019)**
Researcher: **Dr Mark Cruickshank**
Title: **Molecular and immuno-therapy targets for high-risk leukaemia**

While the survival rate for patients with childhood leukaemia has improved dramatically, approaching 5-year survival of 95% for some patient groups, several sub-types of leukaemia are refractory to current treatments.

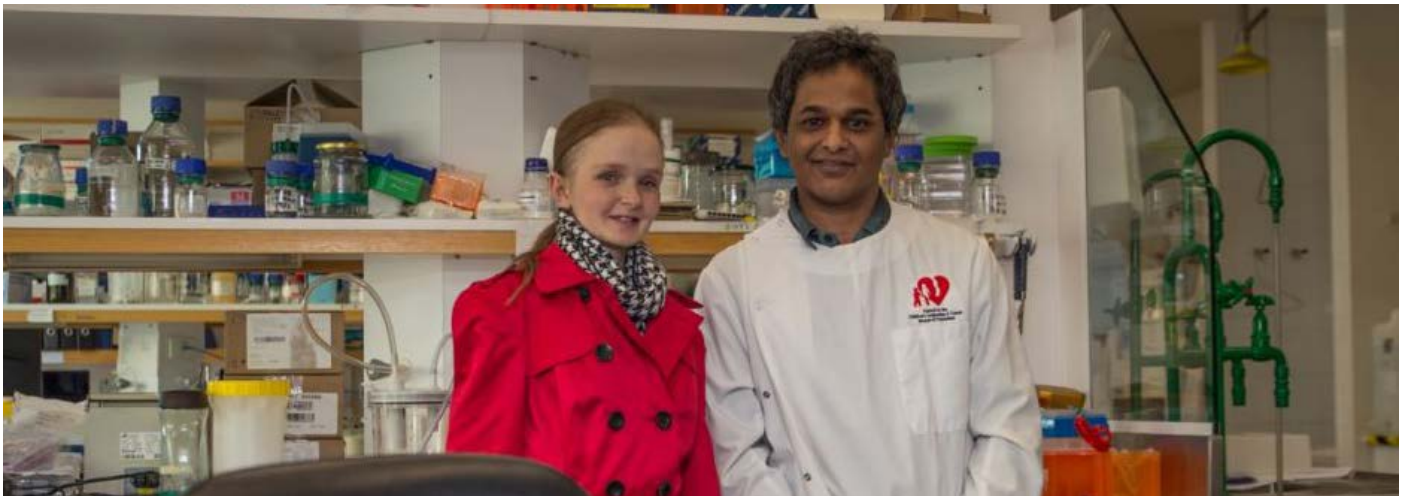
Furthermore, in cases where treatment is successful, the toxicity of the drugs results in severe acute side effects and long-term morbidity. Strikingly, in patients less than 18 months at the time of diagnosis, the survival rate is only 30%. In many studies more intensive therapy was administered to infants to improve survival. Unfortunately, this led to a large number of toxic deaths, and did not improve overall survival. We urgently need to find novel therapy for these patients. Since treatments using highly toxic chemotherapies are not successful, understanding the biology of this disease holds the key.

Dr Cruickshank was awarded the CLCRF Woolworths Fellowship from 2017 – 2019 and has been centrally involved in building the infant leukaemia research program. In these studies, the CLCRF-research team have been investigating the novel genetic and molecular features of infant leukaemia and performing extensive pre-clinical drug development using patient derived cell lines. In recognition of the important role the immune system plays in controlling and preventing cancer and leukaemia, Dr Cruickshank has been collaborating with A/Prof Jason Waithman, head of the Cancer Immunology Unit at Telethon Kids Institute on new ways to harness the immune system for cancer therapy.

Together Dr Cruickshank and A/Prof Waithman's teams have investigated how immune cells work to fight cancer. The collaboration has also investigated how immune-targeting therapies (i.e. immunotherapy) can effectively be combined with epigenetic therapies. This work has resulted in the publication of three joint manuscripts:

- Wylie B, Chee J, Forbes CA, Booth M, Stone SR, Buzzai AC, Cruickshank MN*, Waithman J*. Acquired resistance during adoptive cell therapy by transcriptional silencing of immunogenic antigens. OncoImmunology. 2019;8:e1609874-2. (*Joint senior/corresponding author)
- 2. Wylie B, Read J, Buzzai AC, Wagner T, Troy N, Syn G, Cruickshank MN*, Waithman J*. CD8(+)XCR1(neg) Dendritic Cells Express High Levels of Toll-Like Receptor 5 and a Unique Complement of Endocytic Receptors. Front Immunol. 2019;9:2990. (*Joint senior/corresponding author)
- 3. Jonathan C, Wilson C, Buzzai A, Wylie B, Forbes CA, Booth M, Principe N, Foley B, Cruickshank MN*, Waithman J*. (2019) Impaired T cell proliferation by ex vivo BET-inhibition impedes adoptive immunotherapy in a murine melanoma model. Epigenetics. 2019 Aug 26:1-11. doi: 10.1080/15592294.2019. (*Joint senior/corresponding author)

Funding: **Molecular targets for high-risk leukaemia**
Researcher: **Dr Mark Cruickshank**
Title: **Are there germ-line molecular targets in high-risk leukaemia?**



In this study, we have assembled the largest collection of infant leukaemia samples (n=42) with next-generation sequencing data, many of which have been sequenced by both genome/exome and transcriptome sequencing. The patient sequencing data was compared to a large collection of normal controls that have had their exomes sequenced (n=64,752).

The sequencing data was analysed to detect genes with potentially pathogenic DNA variants that are present in the patients normal cells as well as cancer cells. The infant patients were found to express DNA sequence variants in many genes, including a known leukemia-predisposition, KRAS. In addition, we found that infant patients were enriched for pathogenic variants in a gene known as KEAP1. Rare variants in both of these genes have been observed as somatic mutations in adult solid tumours. For example, in adult lung cancer patients, KRAS or KEAP1 mutations can drive cellular changes promoting cancer progression but also can be targeted by specific drugs.

We have investigated if the same genetic changes could either drive leukaemia in a model system or alter drug efficacy. Our studies demonstrate that the novel patient-specific KRAS germ-line allele appears to promote leukaemia cell survival, which can be effectively treated using a drug known as trametinib similarly to solid cancers.

On the other hand, variations in KEAP1 appear to have different effects to those reported in solid cancers. Using CRISPR/Cas9-genome engineering, we show that several clinically relevant drugs appear to be more effective in cells that have an inactivated copy of the KEAP1 gene. Furthermore, by treating leukaemia cells with chemicals that block KEAP1 gene function, the activity of these clinically relevant drugs could be enhanced across a wide spectrum of high-risk childhood leukaemia cell lines.

Together these results suggest that germ-line DNA sequence variations in infant leukaemia patients could alter disease progression and therapy response. Moreover, we identify the KEAP1-pathway as a novel therapeutic target for high-risk childhood leukaemia.

Findings from research conducted during Dr Cruickshank's Fellowship have been presented in the following scientific forums and community groups:

- February 2019: "The genetic background of infant leukaemia reveals novel therapeutic targets". Lorne Cancer.
- March 2018: "Expression of rare alleles at cancer associated loci in KMT2A/MLL-rearranged infant acute lymphoblastic leukaemia suggests a role for RAS-pathway and KEAP1". Keystone Precision Medicine in Cancer Conference.
- October 2017: "Infant leukaemia: are we targeting a one-hit wonder". Invited presentation for Murdoch Childrens Research Institute; Functional Genomics Seminar Series.
- August 2017: "Infant leukaemia: are we targeting a one-hit wonder". Invited presentation for University of Western Australia; Molecular Sciences Seminar Series.

Together these studies have generated a number of important research publications and have allowed us to leverage additional funding to support the work.

Financial Members

as at 30 June 2019

Financial Members as at 30 June 2019

A
A'Court Susan
Agostino Melina
Alexander Andrea & Gordon
Anderson Kimon & Sondra
Anzellino Dom & Rosa
Anzellio Vincent
Archibald Lesley
Astone Joe & Ivy
Atkinson Michael
Aubin Paula

B
Bailey Philip
Barnett John
Ballantyne Patricia
Bartoli Giorgio & Gloria
Beer Campbell
Bentley Jan
Bombardieri Patricia
Boogaard Annette & Austin Ken
Boulton Brian
Bowater Valma
Boyd James
Bradshaw John & Elizabeth
Brassington John
Bridson Suad
Brockway Frank
Brodie-Hall R & C
Brown Gerry & Thea
Bruce Kristy
Bruce Justin
Bruce Philip Life Member
Bruce Christine
Bunn Tania & Loren
Burgess Donald
Burns Faith
Butler Robyn
Buttfield Jan
Byers Dorothy

C
Calleja John
Cattach Brent
Cattach David & Jenny
Cattach AM Geoff Life Member
Cattach Stewart
Cattach Family
Causier David & Susan
Chapman George & Lucy
Clark Sue
Clifford Alistair
Cocking Barbara
Cotter Gary & Carolyn
Couzens Kathleen
Covich John
Cox Norma
Criddle Jack

D
Dalton Kylie
Daniels Jan
Davies Lesley
De Chiera PS & DM
De Nooyer Lein
Delroy Neil
Detiuk Michael & Georgina
Di Candilo G
Di Masi L & E
Dickson Stuart & Jennifer
Dobrowolski Maria
Dodd EF
Draper Stephen & Karen
Duane Rebecca
Ducey Gerry & Beryl
Dunning Vaughan
Duxbury Helen

E
Elks Revele
Elliott Mary
Ellis Barry & Sue
Escott Brenda

F
Fahrner Helke Dr
Falconer David & Leanne
Falconer Peter Life Member
Fardon Andrew & Jackie
Fawcett Bob & Jan
Fels Brian
Fiorenza Antonio (Tony)
Flavel Don
Flint Monica
Ford Peter & Jette
Francis Rosslyn
Frawley M & S
Frost Petra

G
Galati Cono & Trudy
Galati Sophie
Garas Mounir
Garner Family
Geddes David & Charlotte
Genovese/Fox Family
Germain Terrence
Germs Leanne
Giglia Maria
Ginbey Maria
Glass Thelma
Gobby Geoffrey
Godfrey Allan
Goetz Marilyn
Graham Rory & Christine
Graham Valerie
Gray Jill
Grosser Kerry

H
Haederle Mike & Judi
Hall Michelle
Hambley Rita
Han Edward & Francis
Hanley Garry
Hargrave Steve
Harris Eileen
Harris Murray, Helen & Justin
Hart Roy & Linda
Heal Valda
Heal Eric & Judy
Heil Adrian
Hesketh John & Barbara
Hicks David & Pam
Hill Anne
Hill Christopher
Hill Charles & Joan
Hill Stan & Beryl
Howarth Family

I
Ieraci Stefan
Ieraci Tony & Loran
Italiano Robert & Minnie
Ivory Valma

J
James Errol

Jarvis Stephen Dr
Jennings Brian
Jennings Ian & Val
Jupp Allan & Cheryl

K

Keane Brian
Kearns Gary & Wendy
Kees Ursula Prof Life Member
Kelly Linda
Kelly J
Kelly-Cook Danielle
Kenda Renato & Annette
Kirkwood Kerrin
Kitchen Mary

L

Lamb Phil
Langer Family
Larke Graham & Althea
Lazzarich Family
Leeflang Carine
Love Murray
Lush Katelyn
Lychlander Sheila
Lydon Larry & Isabell

M

Maddock Eric & Annette
Mancuso Maruzza
Marchant Family
Matthews Daniel
Matthews Neville
McCallum Family
McClymont Frank
McCorkill Ron Dr & Michelle
McCormick Dorothy
McCormick Steve & June
McCusker Malcolm, AC, CVO, QC
McDonald Ian
McKain Phoebe
McLaurin David & Diane
Miller Rusty & Barbara
Mills Nancy
Milner Warren
Milton John & Nui Drs
Mincherton Glyn
Mischin Michael MLC
Morrissy Jenny
Muir Darryl
Murray Wendy
Myers John

N

Newton Tony
Norton Daniel
Nottle Pat

O

Oldham Neil & Shirley
Oldham Tracey
Oliveri Antonio & Santina

P

Parker Michael & Catherine
Parkin Peggy
Paulin Antony
Pintabona Charles & Sharon
Powell Sandra
Preece Christine

Q

Quinn Judy
Quinones Susanne

R

Ratcliffe Alan & Sue
Reynolds Dwayne
Riley Geoff & Mary
Rodoreda Greg & Michelle
Rotary Club of Harvey

S

Salamone Rebecca
Savage Dean & Paulette
Schulze Dean
Sealy Harold & Jeanette
Segal Leah
Seidelin Erik & Helen
Senior Sue
Sequeira Andre & Neicha
Seymour Michele
Seymour Patricia
Silbert Lindsay & Suzanne
Silsbury Robin
Sim Paula
Simons Eileen
Sims Wendy
Sinclair Family
Skinner James & Patricia
Slatter Brian
Smith Jim
Stanley Fiona Prof, AC
Stokman Gerda
Stuchbury Mark & Laura
Swinbourn Matthew, MLC
Szo Stefan

T

Tate Noelene
Tate Franklin
Taylor JR Dr & MM
Terms Alexandra
Thomas Family
Turner Jim
Turner Glen
Turner Dr Keven & Fay

U

Udinga Alex & Jan

V

Van Burge Gerrit (Gary) OAM, JP
Villa Gillian
Vogel Reto

W

Walker Richard
Wallace M-J
Wannberg Family
Warn Rosalie
Warwicker Shirley
Webb Brian & Maxena
White Ron & Cheryl
Wilborn Bernie
Williams David & Kirsten
Williamson Kim Life Member
Williamson Jenny
Wilson Lorna
Wood Brendan & Margaret

ABN: 42 030 465 053

Financial Statements

Year Ended 30 June 2019

CHILDREN'S
Leukaemia & Cancer Research
Foundation (Inc.)

Suite 3/100 Hay Street
Subiaco WA 6008

PO Box 1118
West Perth WA 6872

PATRON - Justin Langer AM
ABN: 42 030 465 053

STATEMENT BY THE COMMITTEE OF MANAGEMENT

The Committee Members have determined that the Foundation is not a reporting entity, and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial report.

In the opinion of the Committee of Management, the accompanying financial reports:

1. (a) The financial statements and notes are in accordance with Part 5 of the Associations Incorporation Act 2015; and

   (b) The accompanying Operating Statement gives a true and fair view of the operating excess of the Foundation for the financial year; and

   (c) The accompanying Balance Sheet gives a true and fair view of the state of affairs of the Foundation as at the end of the financial year.

2. At the date of the statement there are reasonable grounds to believe that the Foundation will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee of Management and is signed by and on behalf of the Committee of Management by:

.....
Chief Executive Officer – Andrea Alexander

.....
Treasurer – Kim Williamson

Date: 13/11/2019

The accompanying notes form part of the financial statements.

INDEPENDENT AUDIT REPORT

TO THE MEMBERS OF THE CHILDREN'S LEUKAEMIA & CANCER RESEARCH FOUNDATION (INC)

NICK DEL POPOLO
CHARTERED ACCOUNTANT
9 CARRINGTON STREET
NORTH PERTH, WA, 6006
Ph: 0419 922 776

13 November 2019

TO THE MEMBERS
THE CHILDREN'S LEUKAEMIA & CANCER RESEARCH FOUNDATION (INC)

We have audited the financial statements of Children's Leukaemia & Cancer Research Foundation (INC)(The Foundation) for the year ended 30 June 2019.

The Foundation's Management Committee are responsible for the preparation of the financial statements. We have conducted an independent audit of these financial statements in order to express an opinion on them to the members of the Foundation. The Management Committee's responsibility also includes such internal control as the Management Committee's determine necessary to enable the preparation of a financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial statements are free of material misstatement. Our procedures included examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial statements, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether in all materials respects the financial statements are presented fairly in accordance with Australian Accounting Standards so as to present a view of the Foundation which is consistent with our understanding of its financial position and the results of its operations.

The financial statements include fundraising receipts. It has not been practicable to determine whether pledged monies from external fundraising activities have been received and banked through the Foundation's accounts.

The Audit opinion expressed in this report has been formed on the above basis.

INDEPENDENCE

In conducting our audit, we have complied with the independence requirements of the Australian professional ethical pronouncements.

AUDIT OPINION

In our opinion, the financial statements present fairly the financial position of Children's Leukaemia & Cancer Research Foundation (INC) as at 30 June 2019 and the results of its operations for the year ended 30 June 2019 in accordance with applicable Accounting Standards to the extent described in Note 1.
In addition;
a.The financial statements satisfy the requirements of Part 5 of the Associations Incorporation Act 2015;
b. We have been given all information, explanations and assistance necessary for the conduct of the Audit;
c. The Foundation has kept financial records sufficient to enable financial statements to be prepared and audited;
d. The Foundation has kept other records as required by Part 5 of the Associations Incorporation Act 2015

EMPHASIS OF MATTER- BASIS OF ACCOUNTING

We draw attention to Note 1 to the financial report, which describes the basis of accounting. As a result, the financial report may not be suitable for another purpose. Out audit opinion is not modified in respect of this matter.

N Del Popolo 13.11.2019

Nick Del Popolo
Chartered Accountant
Registered Company Auditor

AUDITORS INDEPENDENCE DELCLARATION

TO THE COMMITTEE OF MANAGEMENT OF THE CHILDREN'S LEUKAEMIA & CANCER RESEARCH FOUNDATION (INC)

I declare that, to be best of my knowledge and belief, during the year ended 30 June 2019 there have been no contraventions of:

i.Any applicable code of professional conduct in relation to the audit

Name of firm:	N DEL POPOLO
Name of partner:	N DEL POPOLO
Date:	1st July 2019
Address:	9 CARRINGTON STREET NORTH PERTH WA 6006

Nick Del Popolo
Chartered Accountant
Registered Company Auditor

Operating Statement 01/07/2018 - 30/06/2019

Revenue	2018/2019	2017/2018
Subscriptions	1,750	2,361
Donations & Promotions	204,868	197,829
Community Activities	131,053	207,908
Raffles & Direct Mail Campaigns	452,574	301,547
Schools & Associations	23,563	12,930
Commercial Support:		
Triple Vend/Austway	1,850	1,350
United Fundraisers	1,061	1,108
VLT	1,048	2,744
Grants & Gifts in Wills:		
Gifts in Wills	1,666,351	556,101
3BL (Brain Tumour Research Project)	2,080	250
Interest Received	113,627	148,335
TOTAL	**$2,599,825**	**$1,432,463**

Expenditure	2018/2019	2017/2018
Admin/Salaries & Other Costs	440,927	383,782
Depreciation	34,805	34,354
Raffles & Direct Mail Campaigns	198,887	150,178
Promotions & Events	112,876	162,602
Property Outgoings/Refurbishment	37,455	43,805
SUB-TOTAL	**$824,951**	**$774,721**

Appropriations	2018/2019	2017/2018
Research Funding/Grants July to June expenditure:		
PRO10111/20728 Block Grant	443,741	523,319
PRO12681 $1Mio Grant of Excellence	8,111	62,888
PRO14610 Novel Therapies NUT Midline - Dr A Stirnweiss	-	2,471
PRO20221 Therapeutic Targets for High-Risk Leukaemia - Dr M Cruickshank	54,785	140,139
PRO20219 Molecular & Immuno-Therapy Targets for High-Risk Leukaemia - Dr M Cruickshank	98,355	134,641
PRO20328 Assoc Prof A Beesley - manuscript costs	1,700	7,588
Dr S Malinge - UR Kees Fellowship	327,624	123,553
Unexpended (July 2018 - June 2019)	65,684	2,184
SUB-TOTAL - Appropriations	$1,000,000	$996,784
EXCESS/(DEFICIT) TRANSFER TO ACCUMULATED FUNDS	**$774,874**	**$ (339,041)**

The accompanying notes form part of the financial statements.

Balance Sheet - 30/06/2019

ACCUMULATED FUNDS	Notes	2018/2019	2017/2018
Balance as at 01/07/2018		$6,472,174	$6,811,217
Excess/(Deficit) from Operating Statement		$774,874	$(339,042)
TOTAL ACCUMULATED FUNDS		**$7,247,048**	**$6,472,174**

These Funds are represented by:

CURRENT ASSETS	2018/2019	2017/2018
Cash On Hand	$100	$100
Cash At Bank	$409,983	$330,448
Gaming Commission	$31,145	$30,567
Term Deposits	$4,538,343	$3,832,708
Total Cash Available	**$4,979,571**	**$4,193,823**
Pre-payment	$500,000	$500,000
Trade Debtors	$2,155	$5,642
Shares at Cost	$17,166	$17,166
Share Options - At Cost	$1	$1
Provision for Diminution in Value	$(12,526)	$(13,006)
Total Current Assets	**$5,486,367**	**$4,703,625**

NON-CURRENT ASSETS		2018/2019	2017/2018
Property - Land & Buildings			
Property 100 Hay Street Subiaco	2	$886,630	$886,630
Capital Improvements		$121,626	$121,626
Provision for Diminution in Value		$(198,256)	$(198,256)
Provision for Depreciation		$(64,684)	$(42,518)
Computer Equipment at Cost		$13,370	$10,153
Less: Accum Deprecation		$(20,675)	$(8,036)
Collectables		$2,199	$2,199
Property - Vacant Land			
Property 26 Parnell Pde Bassendean	2	$572,928	$572,928
Property 28 Parnell Pde Bassendean	2	$553,588	$553,588
Total Non-Current Assets		**$1,866,727**	**$1,898,315**
TOTAL ASSETS		**$7,353,094**	**$6,601,940**

CURRENT LIABILITIES	2018/2019	2017/2018
Trade Creditors	$(10,985)	$(39,057)
Accrued/Sundry Creditors	-	-
Leave Liabilities	$(91,824)	$(84,044)
Provision for AL/LSL on-costs	$(10,500)	$(10,500)
Total Years Tax Liabilities	$7,263	$3,835
Total Liabilities	**$(106,046)**	**$(129,767)**
NET ASSETS	**$7,247,048**	**$6,472,174**

The accompanying notes form part of the financial statements.

Statement of Cash Flows - as at 30/06/2019

CASH FLOWS FROM OPERATING ACTIVITIES	Notes	2018/2019	2017/2018
Receipts from:			
Subscriptions		$1,750	$2,361
Donations and Promotions		$204,868	$197,829
Community Activities		$131,053	$207,908
Raffles and Direct Mail Campaigns		$456,061	$301,547
School and Associations		$23,563	$12,930
Commercial support		$3,959	$5,202
Grants and Gifts in Wills		$1,668,431	$556,351
Interest		$112,369	$148,335
Payments to clients, suppliers, employees and for research grants		$(1,813,867)	$(2,175,556)
Net cash provided by operating activities	3	**$788,187**	**$(743,093)**

CASH FLOWS FROM INVESTING ACTIVITIES	2018/2019	2017/2018
Investment in Term Deposits	$(1,515,435)	$(1,905,173)
Payments for Property, Plant & Equipment	$(3,217)	-
Withdrawal of Term Deposits	$810,000	$2,821,000
Acquisition of PPE	-	$(5,168)
Net cash used in investing activities	**$708,652**	**$910,659**

Net change in cash and cash equivalents	**$79,535**	**$167,566**
Cash and cash equivalents, beginning of year	$330,548	$162,982
Cash and cash equivalents, end of year	**$410,083**	**$330,548**

The accompanying notes form part of the financial statements.

NOTE 1 - Statement of Significant Accounting Policies

The significant accounting policies which have been adopted in the preparation of this financial report are:

Basis of Preparation

The Financial Report is a special purpose financial report, which has been prepared to meet the requirements of the Management Committee to provide information to the Children's Leukaemia & Cancer Research Foundation (Inc). The Foundation is not a reporting entity and is not obliged to adhere to the mandatory reporting requirements of the Australian Accounting Standards. Notwithstanding the special reporting status of the foundation, the Management Committee have, unless otherwise stated followed generally accepted accounting principles in accordance with Australian Accounting Standards. The accounts have been prepared on the basis of historical costs and do not take into account the changing value or fair value of non-current assets. The Accounting policies are consistent with those prepared in 2018.

Taxation and GST

Children's Leukaemia & Cancer Research Foundation (Inc) is an income tax exempt body.

The Net amount of Goods and Services Tax and GST recoverable from or payable to the Australian Taxation Office is included as a current asset or liability in the Balance Sheet.

Revenue, Expenses and Assets are recognised net of GST.

Employee Entitlements

The amounts expected to be paid to employees for their pro-rata entitlement to long service leave and annual leave are accrued annually at current pay rates.

NOTE 2 - Valuation of Non-Current Assets - Property

Hay Street, Subiaco was purchased on 02/09/2010 and is valued at market valuation. The Market Valuation is at 19/06/15 and is prepared by an independent licensed property valuer. 26 and 28 Parnell Parade, Bassendean, were transferred to the Foundation on 17/09/2013 by a deceased estate.

They are valued at Committee of Management valuation based upon a real estate agents Appraisal and Report dated 18/09/2012 and a second real estate agents drive-by valuation dated 08/11/2013.

NOTE 3 - Operating Cash Flow

Reconciliation of cash flows from operating activities with current year operating excess.

CASH FLOWS FROM OPERATING ACTIVITIES	2018/2019	2017/2018
Net profit after tax	$774,874	$(339,041)
Non-cash flows in operating excess		
Depreciation	$34,805	$34,354
Dimuinition in share investments	$(480)	$3,840
Net changes in working capital:		
Operating Profit Before Working Capital Changes	$774,874	
Change in trade and other receivables	$2,709	$(487,931)
Change in trade and other payables	$(42,001)	$41,815
Change in provisions	$18,280	$3,870
Net cash from operating activities	**$788,187**	**$(743,093)**

CHILDREN'S
Leukaemia & Cancer Research
Foundation (Inc.)

Children's Leukaemia & Cancer Research Foundation (Inc)

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instagram.com/clcrf