# Annual Report 2023-2024

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Funding research into childhood cancers for over forty years

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# A message from The Foundation

The Foundation has gone through a significant period of change during the 2023/2024 year. With the Back on Track Education Program growing so rapidly, with many families signing up for assistance and five Foundation personnel moving on.

We continue to be grateful for the steadfast support from our incredible community of donors, local groups, Federal Government and businesses. This trustworthy commitment has driven our ability to support our mission, to fund research and to support children diagnosed with cancer and their education needs and sincerely thank you.

The Foundation raised/received revenue totalling \$1,905,451 during the year under review. The main sources of these funds were:

- Back on Track WA program \$847,148 (grants received + donations)
- Raffles & DMC campaigns \$449,082
- Community Activities \$226,067

Despite the many financial challenges faced by our supporters during the year, these people and organisations still donated which allowed us to allocate funds to vital areas.

Expenditure for the year totalled \$1,530,605. Main areas of expenditure being:

- Administration running costs \$525,665
- Back on Track WA Program \$473,240
- Raffles & DMC campaigns \$270,087

This resulted in a profit of \$374,846 before research expenditure.

Research commitments of \$1,253,607 were met in full, leaving a deficit of \$878,761, which was funded through accumulated reserves, ensuring our life-saving work continues.

In celebrating our partnerships, we must extend wholehearted gratitude to the Telethon Kids Institute and extend our appreciation to Professor Jonathan Carapetis AM, the Institute's Director, and Ms Julie Bishop, the Institute's Chairperson. Their collaboration has been invaluable to our mission. We also acknowledge the dedication of the researchers and their teams, particularly Assoc Professor Joost Lesterhuis, Head of the Cancer Centre. Their tireless efforts in advancing childhood cancer research are truly commendable.

We are proud to report on the growth and impact of the Back on Track Education Program, which, in just two short years, has become a vital support system for families navigating the educational challenges that follow a child's cancer treatment. Unique in its approach, Back on Track provides tailored support not only for children recovering from cancer but also for their siblings, recognising the broader impact on the entire family. The program addresses each child's educational, social, and emotional well-being, helping them reintegrate into school, catch up on missed learning, and build a pathway forward that supports their whole development.

A key component of Back on Track is the advocacy that is offered to parents as they navigate the complexities of the education system, a service that has become highly valued by the families we support. By easing the pressure on parents and helping them secure the right educational adjustments, we enable children to achieve great results and foster a sense of normalcy and progress. The positive feedback from parents, teachers, and the children themselves underscores the meaningful difference this program is making, reinforcing CCRF's commitment to holistic, impactful support for young people and their families affected by cancer. The Back on Track Education Program is supported by some of the best tutors in education. Without their support the regional growth of Back on Track would suffer. We thank them deeply for joining our mission

Looking ahead, we are excited about rebuilding the Foundation's capacity to raise funds for research and awareness. With the continued support of our Foundation family and new supporters, we are determined to ensure that childhood cancer research in WA continues to be world-class, ensuring our children receive the best care and treatments available, as well as assisting those families in need of the Back on Track Education program.

On behalf of the Foundation, we express sincere thanks for standing by us on this journey. Together, we are making a difference – one donation at a time.

With heartfelt gratitude.



Geoffrey Cattach, AM



Andrea Alexander CHIEF EXECUTIVE OFFICER & BOARD SECRETARY

# Committee of Management AS AT 30/06/2024

Geoffrey Cattach, AM



Professor Ursula Kees

Founder Mr Peter Harper



Philip Bruce vice chairman (until January 2024)



Allan Godfrey



Justin Bruce



Keir Williams



Andrea Alexander

Life Members Mr Philip Bruce | Mr Geoffrey Cattach, AM | Mr Peter Falconer, OAM Mr Peter Harper | Professor Ursula Kees | Mr Kim Williamson

#### Foundation Staff



Andrea Alexander CHIEF EXECUTIVE OFFICER



Tony Le DIGITAL PROJECT LEAD (until December 2023)

#### **Back on Track Program**



Louise Shedden
PROGRAM MANAGER



Kylie Dalton CHIEF OPERATING OFFICER



Scott Ballem CORPRATE PARTNERSHIP MANAGER (until December 2023)



Caroline Crofton SENIOR EDUCATION ADVOCATE



Mara Alexander RECEPTIONIST / ADMIN) (until April 2024)



Tegan Connolly MARKETING & EVENTS COORDINATOR (until October 2023)

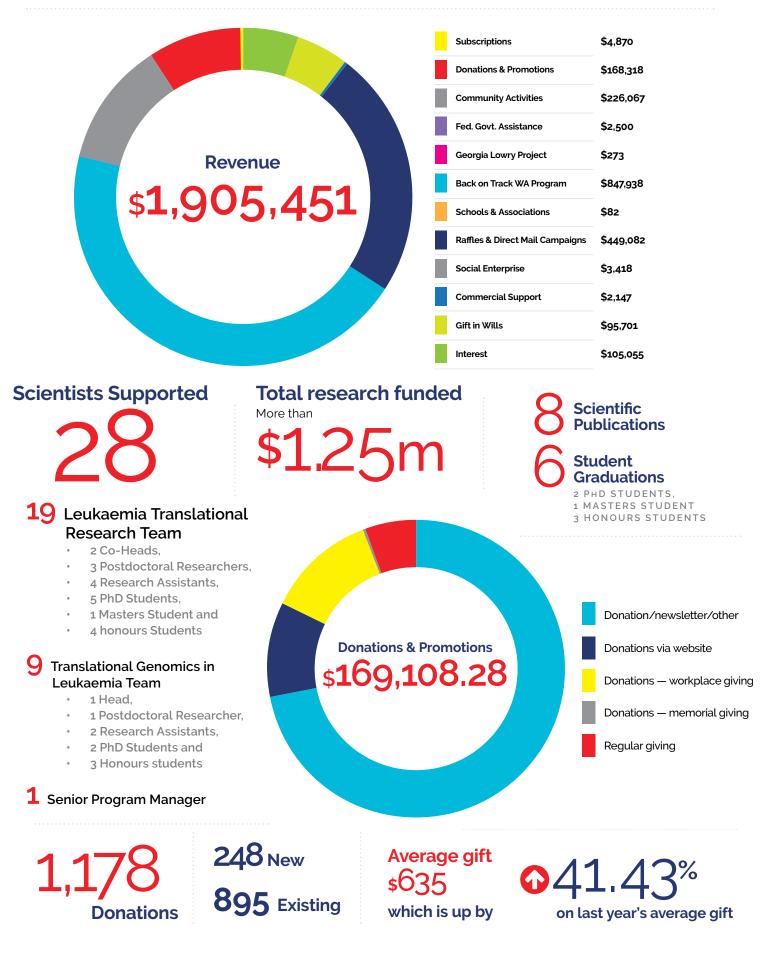


Janelle Eddy EDUCATION ADVOCATE



Sophie Galati COMMUNICATIONS TEAM LEADER (until December 2023)

# **Stats & Achievements**



#### CLCRF Ursula Kees Fellow (2022-2024)

Leukaemia Translational Research

Researcher: Dr Sébastien Malinge Title: Towards Improving Prevention, Treatments and Outcomes in Childhood Leukaemia.

### Senior Program Manager - Telethon Kids Cancer Centre Total Expenditure: \$101,587

Recipient: Ms Emma Stone

Ms Stone works closely with the Head of the Telethon Kids Cancer Centre (TKCC). The position manages and supports the TKCC's large, multidisciplinary research team working on a diverse portfolio of paediatric cancer research. Funding from the Foundation concluded in April 2024..

### Total Research Funded: \$1,253,607

# **Funding of Grants**

### Triennial Block Grant (2022-2024)

Researchers: Associate Professor Rishi S Kotecha and Associate Professor Laurence C Cheung

Title: Module 1 - Novel Therapeutic Agents for Infant Acute Lymphoblastic Leukaemia. Title: Module 2 - Elucidating and Targeting the Crosstalk Between Fat and Leukaemia Cells as a Novel Therapeutic Strategy for Children with High Risk Leukaemia



**Total research funded** More than \$1.25m

**Scientists Supported** 



Student Graduations 2 PHD STUDENTS, 1 MASTERS STUDENT **3 HONOURS STUDENTS** 



Total Expenditure: \$259,098



# **Community Activities & Events**

The WA community and businesses continued to be generous during the year, despite financial challenges for everyone and over \$226,067 was raised from activities.

In 2023/2024, the incredible generosity of the Western Australian community and local businesses shone brightly, despite the financial challenges faced by many. Together, over \$226,067 was raised through a variety of community-driven activities. We are truly humbled and grateful for this outpouring of support, which plays a vital role in our mission to fund life-changing cancer research.

Key highlights of this collective effort included the 2023 Quiz Night which raised a massive \$42,381, the dazzling Consulate Court Christmas Lights which raised \$24773.25, Entertainment Book sales, the 2023 NIBA (WA) Gala Lunch, and Containers for Change contributions. Events like the Festival of Community Soccer, along with support from the Leisure Inn Rockingham, Mandurah Over 55's Kayak Club, Mandurah Murray Mayday Club, the Rockingham Patchwork Group, and the generosity of Rotary, Lions, and other service clubs further fuelled our success. Additionally, donations via PayPal Australia were instrumental in helping us achieve these incredible results.

One standout event was the rebranded bike trek, Cycle for a Cure, held in October. Based at the picturesque Fairbridge Village, riders took on a variety of routes over four days, returning each evening for meals and accommodation. This event was made possible thanks to the invaluable support of the Lions Club of Falcon, Lions Club of Waroona, IGA Community Chest, Rotary Club of Pinjarra, the Shire of Waroona, the Shire of Murray, and the wonderful individuals who sponsored the riders. Together, this inspiring effort raised an impressive \$24,800. We extend our heartfelt thanks to everyone who made Cycle for a Cure a resounding success.

Our heartfelt gratitude also goes out to those who contributed through regular, workplace, and memorial giving, which collectively raised over \$29,819 in 2023/2024. Additionally, our three raffles during the year delivered a net profit of \$103,085 an outstanding achievement made possible by the incredible support of our community.

The Foundation's 2023 tax and Christmas appeals brought in \$74,295, demonstrating once again the unwavering generosity of our supporters. Although no tax appeal was held in 2024, the commitment and kindness of our donors remained steadfast, ensuring our ability to continue funding essential cancer research.

We are endlessly grateful to every individual, organisation, and group that contributed to these efforts. Your generosity and commitment make a tangible difference in the lives of those impacted by childhood cancer, and we are inspired by your support to keep striving for a brighter future.









# **Community Activities & Events**

























# **Our Patron & Ambassador**



We are thrilled to announce that Justin Langer, our inaugural Patron, has graciously agreed to continue his role as Patron of the Foundation through 2025. Justin's unwavering commitment and passion for our mission inspire us every day. His ongoing support strengthens our efforts and amplifies our voice, helping us to achieve remarkable outcomes for children and families impacted by childhood cancer.



# The Foundation Team

As we reflect on 2023 and 2024, it was a period of significant change for the Foundation. The departures of several team members, including Tegan Connolly, Scott Ballem, Sophie Galati, Tony Lee, and Mara Alexander, presented challenges that greatly hindered our capacity to raise funds and awareness in 2024. These transitions emphasised the importance of having a dedicated, experienced, and cohesive team to fulfil our mission effectively.

Despite these obstacles, we were

fortunate to welcome Janelle Eddy to the Back on Track WA program in March 2024. As a teacher, Janelle has already brought a renewed sense of energy and purpose to our work. Her expertise and commitment to supporting children and families are invaluable to the program.

While the past year has not been without its difficulties, the resilience and dedication of our remaining team and supporters have been unwavering. Together, we are determined to rebuild and strengthen the Foundation, ensuring we continue to make a meaningful impact in the fight against childhood cancer.



Janelle Eddy



# The Devastation of Childhood Cancer

Cancer is the leading cause of death by disease for Australian children. Worldwide -400,000 children & adolescents (aged 0–19) develop cancer

every year.

### In children and adolescents (0-19 years):

32% of cancers are leukaemia and other blood cancers.
23.5% are brain and other central nervous system tumours.
6% are sarcomas.

Childhood cancer is not a single disease — there are more than 12 Major types of paediatric cancers and over 100 subtypes.

# Did you know?

### Current treatments cause severe and often lifelong side effects, including problems with:

- \* Emotions, reproduction, growth, development, hormones, learning, memory, heart, lung, dental, digestive system, hearing, vision, sexual development, and sexual function.
- + Most strikingly, they can cause secondary cancers.
- Childhood cancer survivors report higher rates of pain, fatigue, and sleep difficulties compared with siblings and peers, all of which are associated with poorer quality of life.
- Symptoms of post-traumatic stress disorder are welldocumented for parents whose children have completed cancer treatment.

**1,240** Australian children and teens will be diagnosed with cancer in 2024.



children & adolescents (aged 0–19) will die from cancer in Australia.

In 70 years, the FDA has only approved 50 drugs for paediatric cancers. Whereas for adults, 60 cancer drugs are approved every year.

Most current standard treatments of paediatric cancer were approved over **30 YEARS AGO,** many before the mid-1980's, and were invariably discovered and developed for adult cancers.

### Childhood cancers

are very different to adult cancers and cannot generally be prevented.

# Gifts in Wills/Endowment Fund

The Foundation was deeply honoured to receive \$95,701 during the year from Gifts in Wills and an Endowment Fund.

These generous contributions are a testament to the lasting impact that individuals can make in supporting vital childhood cancer research. With the exception of the endowment fund donation, these gifts came as unexpected blessings, as the Foundation was unaware of the benefactors' intentions until their passing.

We extend our heartfelt gratitude to the following individuals and their families for their extraordinary generosity:

- + Albert Cahill
- + Terry Hogben
- + Margaret Marsden
- + Barry Milne
- + Margaret Stevenson Endowment Fund
- + Claudette Taylor
- + Dieter Theil

Total gifts More than \$95k

Your legacy ensures that we can continue our vital work, offering hope and progress for future generations. We are humbled by your trust and commitment to our mission.

# **Benefactors**

The Foundation is incredibly grateful for the generosity of our benefactors, who contributed an extraordinary \$1,061,364 during the year.

These remarkable gifts have been instrumental in enabling us to continue to fund research and provide vital support to those impacted by childhood cancer.

We extend our sincere thanks to the following benefactors for their big-hearted support:



Contributions More than \$1.06m

- + Boarswamp NYE Campdraft
- + Equity Trustees Charitable Foundation
   Pawlowski Family Gift
- + L2 Foundation
- + Murray Hull
- + John & Janet Hughan
- + Margaret Miller Foundation
- + Rotary Club of Katanning

#### **Back on Track WA Program Grants & Donations:**

- + Channel 7 Telethon Trust
- + The Stan Perron Charitable Foundation Ltd

These two grants helped to provide educational support to children with cancer and their families.

Our continued thanks to these very generous supporters for their ongoing support of the Foundation over many years.

## Corporate Benefactors

We are immensely grateful for the continued support of our corporate benefactors, whose contributions play a pivotal role in sustaining the Foundation's work. During the year, the following organisations generously supported us:

- + Beyond Bank
- + Think Pink Realty
- + National Credit Insurance (Brokers)
- + Lotterywest
- + Woolworths Group Ltd

Their commitment and generosity strengthen our ability to fund critical research and provide essential support to children and families impacted by childhood cancer. We thank these outstanding organisations for standing by our side and sharing our mission.

# Membership

Membership remains a cornerstone of the Foundation's success, and the past year has highlighted the importance of growing and engaging our membership base. While we experienced a reduction in active members, we recognise this as an opportunity to refine our approach and strengthen our community of supporters.

Members are critical to our ongoing efforts, and we are committed to developing new and compelling reasons for individuals to become financial members of our cause. By enhancing the value of membership, we aim to inspire more people to join us in our mission.

Additionally, we are excited to have introduced different levels of corporate membership. This initiative allows businesses to partner with us in meaningful ways, and we are optimistic that it will attract more organisations to support our work.

Together, we can achieve even greater impact and continue making a difference in the lives of children and families affected by childhood cancer.



# Conclusion

#### According to the ACNC Australian Charities Report 10th Edition:

According to the ACNC Australian Charities Report 10th Edition, as of 1 February 2024, there are 60,572 registered charities in Australia, equating to one charity for every 439 Australians. In Western Australia alone, there are 4,454 charities, representing an increase of 207 since the previous year.

The report highlights that charities remain a significant part of the Australian workforce, accounting for 10.5% of all employment. Despite this, the sector continues to rely heavily on volunteers, with more than half of all charities operating without paid staff.

While these figures illustrate the broader charitable landscape, they also reinforce the vital role of organisations like ours in the community. Over the past year, our Foundation has been a testament to the strength and resilience of collective effort. From the generosity of individual donors to the support of corporate benefactors and the dedication of volunteers, every contribution has played a part in advancing our mission.

During the 2023/2024 period, the Foundation received 1,178 donations from new and established donors, with an average gift amount of \$635. These acts of kindness are more than numbers; they represent the unwavering commitment of our community to making a tangible difference in the lives of children and families impacted by childhood cancer.

1,178 Donations

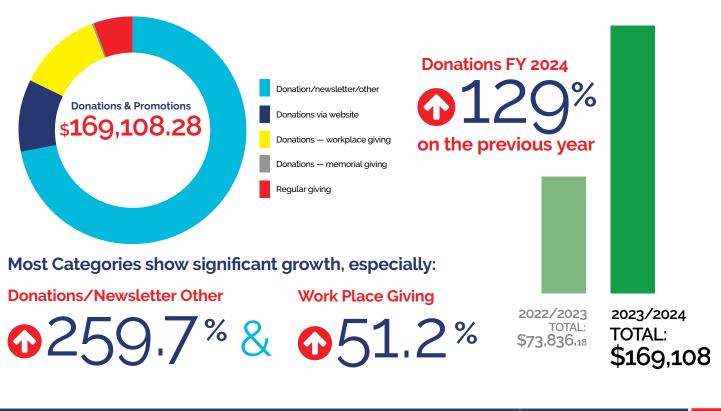
248 New 895 Existing

Average gift \$635 which is up by

**0**41.43<sup>%</sup>

on last year's average gift

As we reflect on the challenges and achievements of the past year, we are filled with gratitude for the people who stand with us. Their support not only sustains our work but inspires us to continue striving for brighter futures. Together, we are stronger, and together, we will continue to bring hope where it is needed most.



# Child Cancer Research 2023/2024



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ANNUAL REPORT 2023/2024 CHILD CANCER RESEARCH FOUNDATION

# WA Kids Cancer Centre

### STRATEGIC PROGRESS AND A FUTURE VISION 2023/2024



Building on these insights, we continued to strategically reframe our approach to childhood cancer research. We developed a focussed strategy to help drive the best possible therapies for kids with cancer now, and to undertake transformative discovery research that improves the lives of tomorrow's kids through more effective and less toxic treatments.

A significant part of our strategic reframing has also involved ongoing community engagement and collaboration.

The past year has been a pivotal period for the Telethon Kids Cancer Centre, which has recently rebranded as the WA Kids Cancer Centre of The Kids Research Institute Australia.

As we continue to be global leaders in childhood cancer research, our mission remains the same: to ensure that every child diagnosed with cancer has the chance for a bright, healthy future. With childhood cancer remaining the leading cause of disease-related death in children, our focus has been on re-evaluating how we can best achieve our mission.

A key piece of work was a comprehensive external review in June 2023 by Professor Doug Hilton, a world leading cancer researcher, former Director of the Walter and Elizabeth Hall Institute in Melbourne, and current CEO of the CSIRO.

The review was an important step in assessing our strengths, identifying areas for development, and ensuring that our efforts are as impactful as possible. It reaffirmed our strengths in, and commitment to, innovative laboratory and clinical research. It also highlighted the importance of even greater integration between our research in the labs and the clinical programs at the Department of Oncology and Haematology at Perth Children's Hospital. We are working to ensure that our research agenda continues to be informed by the experiences of patients and their families, and that our findings are translated into tangible improvements in outcomes. By fostering a culture of collaboration, our next steps will be to continue to bridge the gap between research and clinical practice, ultimately improve outcomes for all children with cancer.

None of this progress would be possible without the unwavering support of the community and our partners. We are deeply grateful to the Child Cancer Research Foundation and your generous supporters for the continued commitment to our mission. Your generosity has been instrumental in enabling our team of brilliant researchers to continue doing what they are most passionate about - creating a future where all kids with cancer survive and thrive

Associate Professor Joost Lesterhuis head, wa kids cancer centre the kids research institute australia

#### Leukaemia Translational Research Funding: Triennial Block Grant (2022–2024) Researchers: Associate Professor Rishi S Kotecha and Associate Professor Laurence C Cheung

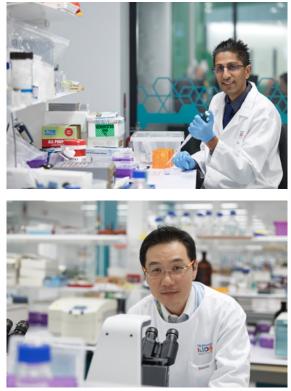


Leukaemia is the most frequently occurring type of childhood cancer. International research over the past 70 years has led to massively improved cure rates. However, despite these advances, leukaemia continues to be one of the leading causes of disease-related death in Australian children.

The main goal of our Leukaemia Translational Research laboratory is to identify new therapeutic approaches so that we can continue to improve the outcomes of children suffering from leukaemia worldwide.

The Leukaemia Translational Research team is co-led by Associate Professor Rishi Kotecha and Associate Professor Laurence Cheung. In 2024, Dr Vincent Kuek, Dr Linda Wijaya and Dr Sung-Kai Chiu further established themselves as post-doctoral officers within the team, with Joyce Oommen, Sajla Singh, Emanuela Ferrari and Grace-Alyssa Chua maintaining their key roles as research assistants. Supervision and mentoring of the next generation of researchers continues through the groups' students.

In 2024 our PhD candidates were Taylor Ferguson, Stephen Dymock, Maren Jinks and Chinnu Jerard. Abigail Lim, Georgia Shaw and Febriana Ajelie joined us as our Honours students. We are also delighted to announce that Rhiannon Panting successfully completed her Master of Research degree. The key achievements of the Leukaemia Translational Research team over the year are highlighted in the following pages.





Newborns and babies who are diagnosed with B-cell acute lymphoblastic leukaemia (B-ALL) at less than 12 months of age face a dismal outlook. Translocations of the KMT2A (MLL) gene are present in up to 80% of ALL cells from infants, with 5-year event-free survival of less than 40%. In an attempt to find better treatments 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. Novel strategies are urgently required to improve outcomes.

The most exciting news over the past 12 months has been a study in which we assessed the burden of long-term complications in survivors of infant ALL. This topic has not previously received significant attention with regards to research efforts, given that infants are known to have poor survival outcomes. We conducted a pivotal study of all infants diagnosed with B-ALL in Australia and New Zealand over a 20-year timeframe. We identified that the survival outcomes of infants diagnosed with **B-ALL in Australia and New Zealand** were comparable to the rest of the Western world and that the intensive treatment offered to infants with B-ALL leads to a high burden of longterm complications in survivors. These findings were published in the highly impactful Blood Cancer Journal and has provided the imperative to reduce the burden of long-term toxicity in future clinical trials.

Another important area of translational research was the conduct of pharmacokinetic studies for pegasparaginsase, an essential drug used for the treatment of ALL. From this study we identified that there was no need to give high doses of pegasparaginase to infants with ALL, with doses of 1500 IU/m2 deemed sufficient to achieve therapeutic efficacy. These findings were published in the key pharmaceutical journal Pharmaceutical Research.

Coupled with the key achievement from last years report (identifying the improved survival outcome for infants with B-ALL following the addition of a novel immunotherapy, blinatumomab, to treatment) these findings have provided the platform to replace highly toxic chemotherapy with immunotherapy. As such, we have developed Interfant-21 as a new global clinical trial for infants with B-ALL. In this study all patients will (i) receive at least once cycle of blinatumomab, (ii) one of the toxic chemotherapy cycles will be replaced by a second cycle of blinatumomab for certain patients, and (iii) we will avoid the administration of excessive chemotherapy by capping the dose of pegasparaginase for all infants at 1500 IU/m2. This trial is now open and available for infants diagnosed with ALL in Australia and New Zealand.

The achievements within this research module have been accomplished due to the longstanding support of the CCRF. This has generated a number of research publications and allowed us to leverage additional funding to support the work, the details of which are provided on the next page.

### Additional Funding Leveraged

 National Health and Medical Research Council Investigator Grant (2025-2029): Emerging Leadership 2 (Kotecha RS, \$1,483,020)

#### **Relevant Publications**

- Brigitha LJ, Mondelaers V, Liu Y, Albertsen BK, Zalewska-Szewczyk B, Rizzari C, Kotecha RS, Pieters R, Huitema ADR, van der Sluis IM. Pharmacokinetics of PEGasparaginase in infants with acute lymphoblastic leukemia. Pharmaceutical Research 2024;41(4):711-720.
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- Isobe T, Takagi M, Sato-Otsubo A, ...Kotecha RS, Cruickshank MN, ...Aburatani H, Ogawa S, Takita J. Multi-omics analysis defines highly refractory RAS burdened immature subgroup of infant acute lymphoblastic leukemia. Nature Communications 2022;13(1):4501.
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- Karsa M, Ronca E, Bongers A, Mariana A, Moles E, Failes TW, Arndt GM, Cheung LC, Kotecha RS, Kavallaris M, Haber M, Norris MD, Henderson MJ, Xiao L, Somers K. Systematic in vitro evaluation of a library of approved and pharmacologically active compounds for the identification of novel candidate drugs for KMT2A-rearranged leukemia. Frontiers in Oncology 2022;11:779859.
- Breese EH, Kotecha RS, Guest EM. Acute lymphoblastic leukemia in infants: A distinctive, high-risk subtype of childhood acute lymphoblastic leukemia. In Litzow MR, Raetz EA, eds. Clinical Management of Acute Lymphoblastic Leukemia: From Bench to Bedside. Springer 2022;135-148.
- Stutterheim J, de Lorenzo P, van der Sluis IM, ...Kotecha RS, ...Schrappe M, Valsecchi MG, Pieters R. Minimal residual disease and outcome characteristics in infant KMT2A-germline acute lymphoblastic leukaemia treated on the Interfant-06 protocol. European Journal of Cancer 2022;160:72-79.
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- Wander P, Cheung LC, Pinhancos SS, Jones L, Kerstjens M, Arentsen-Peters STCJM, Singh S, Chua GA, Castro PG, Schneider P, Dolman MEM, Koopmans B, Molenaar JJ, Pieters R, Zwaan CM, Kotecha RS,\* Stam RW.\* Preclinical efficacy of gemcitabine in MLL-rearranged infant acute lymphoblastic leukemia. Leukemia 2020;34(11):2898-2902.
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#### Module 2:

Elucidating and targeting the crosstalk between fat and leukaemia cells as a novel therapeutic strategy for children with high-risk leukaemia



Recognising that the tumour microenvironment (cells that neighbour cancer cells) contributes to treatment failure or success has led to a recent paradigm shift in cancer therapy. The tumour microenvironment is well documented to be a key factor in multiple stages of cancer progression. Over the past 20 years, clinical studies in children diagnosed with ALL have clearly demonstrated defects in the bone marrow microenvironment, e.g., loss of fat cells and bone cells. However, little is known with regards to how these bone marrow cells contribute to leukaemia development and disease progression.

Over the past 12 months, we have continued our investigation into the role of the different types of bone marrow cells during development of B-ALL. The cell types that we have focused on are bone forming cells (osteoblasts), bone eating cells (osteoclasts), fat cells (adipocytes), blood vessel cells (endothelial cells) and cells that produce fat cells and bone forming cells (mesenchymal stem cells). In the past year, we have achieved the following milestones:

**1.** We discovered the importance of the bone forming cells during development of B-ALL. We established a collaboration with Regeneron Pharmaceutics with the aim to therapeutically target these cells.

Our results showed that leukaemia reduces the number of bone forming cells in the bone marrow. By restoring the number of bone forming cells, we observed a survival advantage in our experimental model. Our findings support a new therapeutic strategy of targeting the bone forming cells for children with high-risk leukaemia.

We are currently conducting more experimental work to further consolidate these findings. 2. Fat cells account for approximately 70% of the bone marrow volume. Whilst loss of bone marrow fat cells in children with leukaemia has been observed, the role of bone marrow fat cells in B-ALL development has not been clearly defined. We have successfully developed three preclinical models that faithfully replicate the clinical features of low bone marrow fat cell number in children with highrisk leukaemia at diagnosis. These models will serve as valuable tools for us to further understand the role of bone marrow fat cells during leukaemia development.

In the past 12 months, we examined whether changing the fat cell content in the bone marrow has an impact on leukaemia progression. This research will provide novel insight into how fat cells could serve as an innovative target, providing an exciting opportunity for developing a new strategy to treat children with high-risk leukaemia. **3.** To broaden the scope of our work and mentor the next generation of researchers, we recruited 5 additional students from Curtin University in 2024. For the PhD projects, Maren aims to identify the role of endothelial cells during B-ALL development and Chinnu will focus on the effect leukaemia has on stem cells and immune cells. For the Honours projects, Abigail studied the effect of an immunomodulator on leukaemia progression, Febriana investigated the effect of a novel agent on leukaemia cells and Georgia was able to assess the importance of bone marrow fat cells in the development of B-ALL. The achievements within this research module have been accomplished due to the longstanding support of the CCRF. This has generated a number of research publications and allowed us to leverage additional funding to support the work, the details of which are provided below.

### Additional Funding Leveraged

• Future Health Research and Innovation Fund WA Near-Miss Award - Ideas Grants (2024): Deciphering the role of bone marrow fat cells in children with high-risk leukaemia (Cheung LC, \$100,000)

#### **Relevant Publications**

- Hughes AM, Kuek V, Oommen J, Kotecha RS, Cheung LC. Murine bone-derived mesenchymal stem cells undergo molecular changes after a single passage in culture. Scientific Reports 2024;14(1):12396.
- Panting RG, Kotecha RS, Cheung LC. The critical role of the bone marrow stromal microenvironment for the development of drug screening platforms in leukemia. Experimental Hematology 2024;133:104212.
- Hughes AM, Kuek V, Oommen J, Chua GA, Van Loenhout M, Malinge S, Kotecha RS, Cheung LC. Characterization of mesenchymal stem cells in pre-B acute lymphoblastic leukemia. Frontiers in Cell and Developmental Biology 2023;11:1005494.
- Hughes AM, Kuek V, Kotecha RS, Cheung LC. The bone marrow microenvironment in B-cell development and malignancy. Cancers (Basel) 2022;14(9):2089.
- Kuek V, Hughes AM, Kotecha RS, Cheung LC. Therapeutic targeting of the leukaemia microenvironment. International Journal of Molecular Sciences 2021;22(13):6888.
- Anderson D, Skut P, Hughes AM, Ferrari E, Tickner J, Xu J, Mullin BH, Tang D, Malinge S, Kees UR, Kotecha RS,\* Lassmann T,\* Cheung LC.\* The bone marrow microenvironment of pre-B acute lymphoblastic leukemia at single-cell resolution. Scientific Reports 2020;10(1):19173.
- 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.\* New therapeutic opportunities from dissecting the pre-B leukemia bone marrow microenvironment. 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. 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: Researcher: Title:

Dr Sébastien Malinge Towards improving prevention, treatments and outcomes in childhood leukaemia



CLCRF - Ursula Kees Fellow (2022-2024)

Blood cancer accounts for about 40% of all paediatric cancers worldwide with Acute Lymphoblastic Leukaemia (ALL) being the most common subtype.

Each year, more than 270 Australian children aged 0-19 years are diagnosed with leukaemia; a number that is expected to double by 2035.

Despite significant improvement in treatment protocols, leukaemia still remains the second cause of death by cancer for children representing 23% of cancer related death, mostly due to ineffective treatment and relapse.

In addition, many survivors suffer from life-threatening conditions resulting from treatment related toxicity, which 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.

These poor clinical features are exemplified in children with Down syndrome (DS). Indeed, up to 30% of children with DS will develop a pre-leukaemia at birth which will lead to fully developed leukaemia in 2-3% of cases (compared to 0.06% for children without DS).

Our lab investigates DS-leukaemia to unveil novel features of leukaemia predisposition, development and response to standard of care treatments. This allows us to uncover novel mechanisms and clinically relevant vulnerabilities.

Our overarching goal is to develop novel personalised chemotherapy and immunotherapies with increased efficacy and less toxicity, to better prevent, treat, and cure leukaemia in all children, DS or not.

Over this year, we have achieved several key milestones, listed on the next page.



#### 1. An extended repository of preclinical models to assess new therapies

In 2024, we extended our `repository` by generating six new animal models of childhood leukaemia. Notably, we have also developed `age-appropriate` models of childhood leukaemia by using paediatric mice to facilitate the testing of novel therapies in a clinically relevant setting of a growing body.

We have also characterised worldfirst cellular models of DS-ALL used to investigate the molecular make-up of childhood leukaemia and identify new weaknesses that can be targeted therapeutically. Altogether, these tools offer us a platform to test novel chemotherapy and immunotherapy approaches, with the view of selecting the most prominent drug to be pushed towards clinical trials. We believe our results will more rapidly translate into the clinic and be beneficial for Western Australian children who develop leukaemia.

#### 2. Identified leukaemia cells that resist standard of care treatments

Relapse is a main reason for treatment failure. Children with relapsed leukemia suffer from treatment toxicity due to treatment intensification, and only 30-50% of them will survive. In most cases, relapse originates from cancer cells that resist standard of care therapy. These resistant cells are very rare and well hidden within the bone marrow. To characterise these cells and capture their weaknesses, we applied state of the art single cell approaches to our unique preclinical models. This enabled us to identify key features of every individual leukemic cell that is resistant to treatment and uncover novel actionable targets. We are now developing immunotherapies to specifically target these resistant cells, which could be added to current standard of care, and thus prevent the appearance of relapse in childhood leukaemia.

#### 3. Discover new efficient therapies in childhood leukaemia: targeting DYRK1A and beyond

Several years ago, we discovered that the chromosome 21 DYRK1A is a key player in childhood leukaemia, myeloid and lymphoid, associated with Down syndrome or not. We demonstrated that targeting this protein is a promising therapeutic approach. In a recent collaborative effort with local, national and international investigators, we tested the efficacy of several new families of DYRK1A inhibitors using our unique cellular models of DS-ALL. To date, we identified one drug that induces death of all leukaemia cells tested and prolongs survival in animals. Notably, a phase I clinical trial using this DYRK1A inhibitor opened in January 2024. We are currently extending our approach beyond DYRK1A by screening nearly ten thousand drugs in our DS-ALL cells. To date, we have identified new weaknesses that are under investigation in test tube and animal models of childhood leukaemia.

### Additional Funding Leveraged

- Australian Lions Childhood Cancer Research Foundation (2023-2025): Paediatric Cancer Immunotherapy for Australia (co-CI, \$200,000)
- Jerome Lejeune Foundation (2023-2025): Towards developing novel targeted therapies for Down syndrome leukemia (\$77,409)
- Westmead Hospital/Telethon Kids Cancer Centre collaborative grant (2022-2024): Identifying underlying germline alterations contributing to leukaemia onset in children (co-CI, \$35,000)
- WA Child Research Fund (2022-2024): Kids are not small adults: identifying age-dependent drug targets in paediatric oncology (co-CI, \$599,746)

### **Relevant Publications**

- Carey-Smith SK\*, Simad MH\*, Panchal K, Aya-Bonilla C, Smolders H, Lin S, Armitage JD, Nguyen VT, Bentley KT, Ford J, Singh S, Oommen J, Laurent AP, Mercher T, Crispino JD, Montgomery AP, Kassiou M, Besson T, Deau E, Meijer E, Cheung LCC, Kotecha RS and Malinge S. Efficacy of DYRK1A inhibitors in novel models of Down syndrome acute lymphoblastic leukemia. Haematologica. 2024 Jul 1;109(7):2309-2315.
- Carey-Smith SK, Cheung LCC, Kotecha RS and Malinge S. Insights into the Clinical, Biological and Therapeutic Impact of Copy Number Alteration in Cancer. Int J Mol Sc. 2024 Jun 21;25(13):6815.
- Marques Da Costa ME, Zaidi S, Scoazec JY, Droit R, Lim WC, Marchais A, Salmon J, Cherkaoui S, Morscher RJ, Laurent A, Malinge S, Mercher T, Tabone-Eglinger S, Goddard I, Pflumio F, Calvo J, Redini F, Entz-Werlé N, Soriano A, Villanueva A, Cairo S, Chastagner P, Moro M, Owens C, Casanova M, Hladun-Alvaro R, Berlanga P, Daudigeos-Dubus E, Dessen P, Zitvogel L, Lacroix L, Pierron G, Delattre O, Schleiermacher G, Surdez D, Geoerger B. A biobank of pediatric patient-derived-xenograft models in cancer precision medicine trial MAPPYACTS for relapsed and refractory tumors. Commun Biol. 2023 Sep 18;6(1):949.
- Baruchel A, Bourquin JP, Crispino J, Cuartero S\*, Hasle H, Hitzler J, Klusmann JH, Izraeli S, Lane AA, Malinge S\*, Rabin K, Roberts I, Ryeom S\*, Tasian SK, Wagenblast E. Down syndrome and leukemia: from basic mechanisms to clinical advances. Haematologica. 2023, July 13.
   \*co corresponding.
- Cheung LC, Aya-Bonilla C, Cruickshank MN, Chiu SK, Kuek V, Anderson D, Chua GA, Singh S, Oommen J, Ferrari E, Hughes AM, Ford J, Kunold E, Hesselman MC, Post F, Faulk KE, Breese EH, Guest EM, Brown PA, Loh ML, Lock RB, Kees UR, Jafari R, Malinge S, Kotecha RS. Preclinical efficacy of azacitidine and venetoclax for infant KMT2A-rearranged acute lymphoblastic leukemia reveals a new therapeutic strategy. Leukemia. 2023 Jan;37(1):61-71.
- Malinge S. It is more `unbalanced` than you think. Blood. 2023 Mar 9;141(10):1095-1096.
- Arkoun B, Robert E, Boudia F, Mazzi S, Dufour V, Siret A, Mammasse Y, Aid Z, Vieira M, Aygun I, Aglave M, Cambot M, Petermann R, Souquere S, Rameau P, Catelain C, Diot R, Tachdjian G, Hermine O, Droin N, Debili N, Plo I, Malinge S, Soler E, Raslova H, Mercher T, Vainchenker W. Stepwise GATA1 and SMC3 mutations alter megakaryocyte differentiation in a Down syndrome leukemia model. J Clin Invest. 2022 Jul 15;132(14):e156290.
- Bhansali RS, Rammohan M, Lee P, Laurent AP, Wen Q, Suraneni P, Tsai YC, Jenni S, Bornhauser B, Siret A, Fruit C, Pacheco-Benichou A, Harris E, Besson T, Thompson BJ, Goo YA, Hijiya N, Vilenchik M, Izraeli S, Bourquin JP, Malinge S, and Crispino JD. DYRK1A regulates B-ALL through phosphorylation of FOXO1 and STAT3. J Clin Invest. 2021 Jan 4;131(1):e135937.
- Laurent AP, Kotecha R and Malinge S. Gains of chromosome 21 in hematological malignancies: lessons from studying leukemia in children with down syndrome. Leukemia. 2020 May 20.
- Laurent AP, Siret A, Ignacimouttou C, Diop MB, Jenni S, Tsai YC, Ross-Weil D, Aid Z, Prade N, Plassard D, Pierron G, Daudigeos-Dubus E, Lecluse Y, Droin N, Bornhauser B, Cheung L, Crispino JD, Gaudry M, Bernard OA, Macintyre E, Barin Bonnigal C, Kotecha R, Goeorger B, Ballerini P, Bourquin JP, Delabesse E, Mercher T and Malinge S. Constitutive activation of RAS/MAPK pathway cooperates with trisomy 21 and is therapeutically exploitable in Down syndrome B-cell Leukemia. Clinical Cancer Research. 2020 Jul 1;26(13):3307-3318.

Funding: Manager: Title: Senior Program Manager Ms Emma Stone Senior Program Manager, WA Kids Cancer Centre The Kids Research Institute Australia



It has been a remarkable year for the WA Kids Cancer Centre of The Kids Research Institute Australia. I am deeply grateful to the Child Cancer Research Foundation for your support of my role as Senior Program Manager. This support has been crucial in enabling us to make significant strides across all facets of the Centre. This has ranged from ensuring that we run efficiently and effectively - allowing our researchers more time to undertake their groundbreaking research - through to enabling the refinement of our overarching strategy.

Over the past year, the continued concentration on our overarching Centre strategy has allowed us to focus our research capabilities, better align our financial planning, and ensure that we are well-prepared to tackle the challenges of childhood cancer research in the coming years. These efforts have resulted in tangible outcomes that will drive future breakthroughs. The enhanced integration of research insights, robust financial and personnel management, and considered planning has optimised our resources and maximised the impact of our initiatives.

With CCRF's backing of the Cancer Centre's support team, our day-to-day operations, from financial management to project coordination, administration, recruitment and retention of team members, and stakeholder engagement have been strengthened, allowing the team to focus on what truly matters - improving outcomes for children facing cancer.

I would like to extend my heartfelt thank you to the CCRF team and your supporters. Your three decades of generous support has been vital to our cause. The progress we have made over the years would not have been possible without you.

**Emma Stone** Senior Program Manager, WA Kids Cancer Centre The Kids Research Institute Australia

# Financial Statements

## Year ended 30 June 2024

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:

- Suite 3/100 Hay Street Subiaco WA 6008
- PO Box 1118 West Perth WA 6872

PATRON - Justin Langer AM ABN: 42 030 465 053

- 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 deficit 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.
- 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:

allocan

Chief Executive Officer - Andrea Alexander

Treasurer – Justin Bruce

Date: 07/11/2024

+ 61 8 9363 7400

STATES CANADA

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#### 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

7 November 2024

#### 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 2024.

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 2024 and the results of its operations for the year ended 30 June 2024 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. Our audit opinion is not modified in respect of this matter.

Nick Del Popolo Chartered Accountant Registered Company Auditor

Liability limited by a scheme approved under professional standards legislation

#### 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 2024 there have been no contraventions of: i.Any applicable code of professional conduct in relation to the audit

Name of firm: Name of partner: Date: Address: N DEL POPOLO N DEL POPOLO 1<sup>st</sup> July 2024 9 CARRINGTON STREET NORTH PERTH WA 6006

Nick Del Popolo Chartered Accountant Registered Company Auditor

Liability limited by a scheme approved under professional standards legislation

### Operating Statement 01/07/2023 - 30/06/2024

Revenue	2023/2024	2022/2023
Subscriptions	\$4,870	\$3,386
Donations & Promotions	\$168,318	\$75,836
Community Activities	\$226,067	\$351,282
Fed & WA Govt Assistance	\$2,500	\$12,853
Georgia Lowry Project	\$273	\$2,550
Back on Track Program	\$847,938	\$451,448
Raffles & Direct Mail Campaigns	\$449,082	\$702,010
Schools & Associations	\$82	\$11,875
Social Enterprise	\$3,418	\$81,033
Commercial Support		
Toolmart Australia	-	\$5,804
VLT	\$130	\$868
Woolworths Australia	\$2,017	\$2,258
Grants & Gift in Wills		
Gift in Wills	\$95.701	\$225,457
3BL (Brain Tumour Research Project)	-	\$510
Grants	-	\$20,000
Interest Received	\$105,055	\$29,672
TOTAL REVENUE	\$1,905,451	\$1,976,843
Expenditure	2023/2024	2022/2023
Admin, Staff & Other Costs	\$525,665	\$1,024,128
Back on Track Program	\$473,240	\$128,902
Depreciation	\$71,990	\$35,191
Georgia Lowry Project	-	\$717
Market Value M/Mment (unrealised)	\$(13,517)	\$1,901
Raffles & Direct Mail Campaigns	\$270,087	\$627,584
Promotions & Events	\$108,260	\$131,009
		\$50,533
Property Outgoings/Refurbishment	\$89,940	400,000
Property Outgoings/Refurbishment Social Enterprise	\$89,940 \$4,942	\$75,782
Social Enterprise	\$4,942	\$75,782
Social Enterprise	\$4,942	\$75,782
Social Enterprise SUB-TOTAL	\$4,942 \$1,530,605	\$75,782 \$2,075,747
Social Enterprise SUB-TOTAL Appropriations Research Funding/Grants July to June expenditure:	\$4,942 \$1,530,605	\$75,782 \$2,075,747
Social Enterprise SUB-TOTAL Appropriations Research Funding/Grants July to June expenditure: PRO10111/20728 Block Grant - July 2023 to June 2024	\$4,942 \$1,530,605 2023/2024	\$75,782 \$2,075,747 2022/2023
Social Enterprise SUB-TOTAL Appropriations	\$4,942 \$1,530,605 2023/2024 \$892,922	\$75,782 \$2,075,747 2022/2023 \$735,076
Social Enterprise SUB-TOTAL Appropriations Research Funding/Grants July to June expenditure: PRO10111/20728 Block Grant - July 2023 to June 2024 PRO20514 Dr S Malinge - UR Kees Fellowship - July 2022 to June 2024	\$4,942 \$1,530,605 2023/2024 \$892,922	\$75,782 \$2,075,747 2022/2023 \$735,076 \$346,831
Social Enterprise SUB-TOTAL Appropriations Research Funding/Grants July to June expenditure: PRO10111/20728 Block Grant - July 2023 to June 2024 PRO20514 Dr S Malinge - UR Kees Fellowship - July 2022 to June 2024 PRO30190 Dr L Lesterhuis - Sarcoma Research	\$4,942 \$1,530,605 2023/2024 \$892,922 \$259,098 -	\$75,782 \$2,075,747 2022/2023 \$735,076 \$346,831 \$88,431

The accompanying notes form part of the financial statements.

### Balance Sheet 30/06/2024

Accumulated Funds	Notes	2023/2024	2022/2023
Balance as at 01/07/2022		\$3,353,562	\$4,747,044
Excess/(Deficit) from Operating Statement		\$(878,761)	\$(1,393,482)
	TOTAL ACCUMULATED FUNDS	\$2,474,801	\$3,353,562
These Funds are represented by			-
Current Assets	Notes	2023/2024	2022/2023
Cash on hand		\$150	\$150
Cash at bank		\$1,416,136	\$94,994
Gaming Commission		-	\$31,693
Term Deposits		-	\$3,007,555
TOTAL CASH AVAILABLE		\$1,416,136	\$3,314,392
Trade Debtors		-	\$7,500
Other Debtors		-	\$39,117
Shares at Cost		\$22,189	\$22,189
Change in Market Value		\$3,155	\$(10,362)
TOTAL CURRENT ASSETS		\$1,441,630	\$3,192,836
Non-Current Assets		2023/2024	2022/2023
Property - Land & Buildings			
Property Unit 3 / 100 Hay Street Subiaco	2	\$886,630	\$886,630
Property Units 11 & 12 / 100 Hay Street Subiaco		\$752,082	\$68,182
Provision for Depreciation (Units 11 & 12)		\$(18,802)	-
Capital Improvements		\$121,626	\$121,626
Less: Accum Deprecation		\$(54,732)	\$(45,610)
Provision for Diminution in Value		\$(290,586)	\$(290,586)
Provision for Depreciation (Unit 3)		\$(175,514)	\$(153,348)
Computer Equipment at Cost		\$37,902	\$37,902
Less: Accum Deprecation		\$(32,653)	\$(20,370)
Wages Overpayment		\$3,510	-
Collectables		\$2,199	\$2,199
TOTAL NON-CURRENT ASSETS		\$1,231,661	\$606,625
TOTAL ASSETS		\$2,673,291	\$3,799,461
Current Liabilities		2023/2024	2022/2023
Trade Creditors		\$(159,286)	\$(375,705)
Leave Liabilities		\$(65,152)	\$(77,017)
Provision for AL/LSL on-costs		\$(13,000)	\$(9,307)
Total Years Tax Liabilities		\$38,948	\$16,129
TOTAL LIABILITIES		\$(198,490)	\$(445,900)
NET ASSETS		\$2,474,801	\$3,353,562

The accompanying notes form part of the financial statements.

### Statement of Cash Flows as at 30 June 2024

<b>Cash Flows From Operating Activities</b>	Notes	2023/2024	2022/2023
Receipts from:			
Subscriptions		\$4,870	\$3,386
Donations and Promotions		\$171,398	\$232,603
Community Activities		\$1,074,135	\$649,342
Raffles and Direct Mail Campaigns		\$527,392	\$702,010
School and Associations		\$3,500	\$17,680
Commercial support		-	\$37,224
Grants and Gifts in Wills		\$98,201	\$138,310
Interest		\$104,265	\$29,672
Payments to clients, suppliers, employees and for research grants		\$(2,986,277)	\$(3,213,658)
NET CASH USED IN OPERATING ACTIVITIES	3	\$(1,002,515)	\$(1,403,432)
Cash Flows From Investing Activities		2023/2024	2022/2023
Investment in Term Deposits		-	\$(487,311)
Payments for Property, Plant & Equipment		\$(683,900)	\$(88,616)
Withdrawal of Term Deposits		\$3,007,555	\$1,020,000
NET CASH USED IN INVESTING ACTIVITIES	la de la della	\$2,323,655	\$444,073
Net change in cash and cash equivalents		\$1,321,140	\$(959,358)
Cash and cash equivalents, beginning of year		\$95,144	\$1,054,352

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 of money. The Accounting policies are consistent with those prepared in 2023.

#### **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.are accrued annually at current pay rates.

#### NOTE 2 - Valuation of Non-Current Assets - Property

3/100 Hay Street, Subiaco was purchased on 02/09/2010 and is valued at market valuation. The Market Valuation is at 27/07/2022 and is prepared by an independent licensed property valuer.

### NOTE 3 - Operating Cash Flow

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

	2023/2024	2022/2023
Net (deficit) / surplus for the year	\$(878,761)	\$(1,393,482)
Non-cash flows in operating deficit		
Deprecation	\$71,990	\$35,191
Diminution in share investments	\$(13,517)	\$1,901
Net (deficit)/surplus before working capital changes	\$(820,288)	\$(1,356,391)
Net changes in working capital:		
Change in trade and other receivables	\$(78,310)	\$(46,617)
Change in trade and other payables	\$(229,547)	\$(31,801)
Change in provisions	\$(30,990)	\$31,377
Net Cash From Operating activities	\$(1,002,515)	\$(1,403,432)

Make a difference to the 1000 children and adolescents (0-19) diagnosed with childhood cancer every year in Australia.

## Please, donate today





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