Sarcoma UK
Annual Report & Accounts
for the year ended 31 March 2017
Chair of Trustees’ Statement

In my final year as Chair of Trustees, I am delighted to report on another year of significant development for Sarcoma UK. 2016/17 has been a pivotal year for us. As the charity partner of 10 Downing Street, we had a unique opportunity to increase awareness and build our profile for the future. A highlight of this year was our reception at 10 Downing Street, hosted by the Prime Minister Theresa May.

I am very pleased to report that the charity’s income continues to grow steadily, despite a very challenging fundraising environment. Our income increased by 14% to £1,369,014, and exceeded our forecast budget. I am hugely grateful to all our supporters who, through their amazing efforts, have put Sarcoma UK into the JustGiving Top 100 charities. We raise more money per JustGiving page than most other charities and this is down to the commitment and enthusiasm of our dedicated supporters. Thank you to everyone who has raised funds for Sarcoma UK this year.

Our strategy is to achieve sustainable income growth that is matched by an increased investment into our charitable objectives. I am delighted to report that we invested our largest single amount into sarcoma research this year – £491,582 – a significant increase from 2015/16 (£335,493).

It has been a privilege to have served the sarcoma community for the past nine years as a member of the Board of Trustees and to have overseen the growth of Sarcoma UK from a small volunteer-run charity to a national voice for everyone affected by sarcoma – patients, family members, friends, health professionals, and researchers. During this time, I have seen a real change and increase in awareness and understanding of sarcoma. Support and information for people diagnosed with sarcoma and their families is now in place through Sarcoma UK’s team of sarcoma specialist nurses, our Support Line services and the charity’s high quality information which is available in multiple formats. I have no doubt that the continued investment that Sarcoma UK is making into ground breaking medical research will pay dividends in the coming years.

However, there is still much to do. 3,800 people are diagnosed with sarcoma each year, yet many are still unaware of the personal and expert support available to them from Sarcoma UK. I would like to know that every person diagnosed with sarcoma is seen by a sarcoma specialist team and made aware of the services Sarcoma UK can provide. When I heard my sarcoma diagnosis for the first time eleven years ago, I will always remember the fear of not being able to find safe, reliable and supportive information on the internet. I am so proud of the work Sarcoma UK has accomplished in bringing this much needed support and information to people affected by sarcoma.

As my term of office ends, I look back and see the incredible developments brought to life through the hard work and keen focus of both fellow trustees and staff. I look forward to seeing what Sarcoma UK does next, with great confidence that the charity will continue to maximise its impact and truly change the landscape for sarcoma.

Karen Delin
Chair of Trustees
1. Sarcoma is cancer. It can develop anywhere in the body. 10 people are diagnosed with sarcoma every day in the UK.

2. Sarcoma is cancer of the bone or soft tissue.

3. A key symptom of sarcoma is a lump that is increasing in size, often quickly.

4. Sarcoma is one of the hardest cancers to diagnose. People visit their GP more times than those with any other form of cancer before being diagnosed with sarcoma.

5. Sarcoma is usually the size of a baked bean tin when diagnosed. If sarcoma is diagnosed when it is smaller than a golf ball, it would increase the chance of survival by at least 20%.

6. People with sarcoma tend to be younger than most people with cancer. 16% of sarcomas are diagnosed in people under 30, compared to only 2% of all other cancers.

The sarcoma landscape

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Objective and Activities

Sarcoma UK is the only cancer charity in the UK focusing on all types of sarcoma.

Our Mission
Our mission is to amplify sarcoma awareness, inspire involvement, and fund ground-breaking research to transform the lives of everyone affected by sarcoma.

Our Goals
1. More people will survive sarcoma
2. More will be known about the causes of sarcoma
3. Everyone affected by sarcoma will have access to the best treatment and care

What we do
- Sarcoma UK works with patients, carers, supporters, health professionals and researchers to drive awareness of sarcoma, promote early diagnosis and improve patient experience.
- Sarcoma UK has pledged to invest over £3 million into sarcoma research by 2020 with the aim of finding effective treatment for the disease within the next 10 years.
- Sarcoma UK is the only UK charity providing personal support and expert information on sarcoma.
- Sarcoma UK aims to increase survival rates by at least 10% by 2020. Early diagnosis saves lives.
- Sarcoma UK provides education and training for GPs to help them recognise the symptoms of sarcoma.

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Achievements and Performance – Priority 1:
Initiate change to raise awareness and improve standards of treatment and care

What we said we would do:
1. Increase public awareness of sarcoma so that more people know that sarcoma is cancer, through our partnership with 10 Downing Street, Sarcoma Awareness Week, and targeted engagement with the media.
2. Draw on data from the National Sarcoma Survey to work with sarcoma specialist centres, multi-disciplinary teams, and clinical nurse specialists to improve the sarcoma patient experience.

1. Increase awareness - what we did:

The staff at the Prime Minister’s Office, 10 Downing Street, chose Sarcoma UK as their Charity of the Year 2016, in memory of Chris Martin, Principal Private Secretary to the Prime Minister who passed away of sarcoma in November 2015.

During the partnership, Team 10:
- Held a Great British Bake-Off with guests Paul Hollywood and Nadia Hussain, attended by the Prime Minister David Cameron and Chancellor George Osborne.
- Completed a 12-mile assault course, Tough Mudder London West.
- Held a staff summer party in aid of Sarcoma UK.
- Provided volunteers from the Cabinet Office to facilitate a session at our Sarcoma Research Symposium.
- Invited Sarcoma UK’s Chief Executive to present to 10 Downing Street staff.
- Ran 10km dressed as Santa Claus.
- Upskilled Sarcoma UK staff.
- Raised £25,000 for Sarcoma UK.

In November, Prime Minister Theresa May hosted a special reception Transforming the Landscape for Sarcoma at 10 Downing Street.
- 137 people attended, including patients and their families, health professionals, researchers, current and potential supporters, politicians and people of influence in the health sector including the Secretary of State for Health, Jeremy Hunt MP, and the National Cancer Director, Cally Palmer.
- The Prime Minister met privately with Sarcoma UK representatives, our Patron Richard Whitehead, supporters Pippa Hatch and Andrea Siodmok, and members of Chris Martin’s family.

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“Can I just thank you from the heart for the stories and photos this week, they are truly inspirational. I was diagnosed with a sarcoma in my abdominal wall last October and had a large piece of wall removed and part of my left hip. I’ve had breast cancer before but sarcoma has been the bad boy. So thank you once again because of these stories I can do up my truss and hold my head up high.” H

Sarcoma Awareness Week 2016
- Our new infographic film about sarcoma signs and symptoms was launched for Sarcoma Awareness Week and was viewed over 10,000 times (July 16 – March 17) on YouTube.
- Sarcoma and You was a unique online photographic exhibition that captured the effects of sarcoma on body image. Photographer and sarcoma patient Alison Romanzcuk shot 12 inspiring and striking portraits of people who had a personal story of sarcoma to tell.

The infographic and Sarcoma and You exhibition attracted media coverage in the Daily Mirror, Yours, Mail Online, Huffington Post, London Live, and Good Morning Britain.
The National Sarcoma Survey (2015) data and findings were widely used in 2016/17. This unique and extensive dataset of the experiences of 650 sarcoma patients in England and Wales has been a key tool in helping clinicians and policy makers to understand the needs and experiences of sarcoma patients to drive improvements in care.

The complete dataset was made available free of charge to seven national clinical and research groups under a Data Transfer Agreement.

Findings from the Survey were presented verbally to the Scottish Sarcoma Network; Cancer 52; and National Cancer Research Institute sarcoma clinical studies group (bone sarcoma sub-group). Academic posters were displayed at the European Society of Medical Oncology (ESMO) annual conference; the Connective Tissue Oncology Society (CTOS) annual conference; and the British Sarcoma Group annual conference.

The National Sarcoma Forum (of sarcoma specialist nurses and allied health professionals) East region analysed the data on rehabilitation and designed a questionnaire to be used by clinical nurse specialists in sarcoma clinics. The data will inform improvements in access to, and timing of, rehabilitation for sarcoma patients.

The findings of the Survey were presented in a written briefing to the National Cancer Director, Cally Palmer, and John Baron MP, Chair of the All Party Parliamentary Group on Cancer.

2. Improve sarcoma patient experience - what we did:

- The National Sarcoma Survey (2015) data and findings were widely used in 2016/17. This unique and extensive dataset of the experiences of 650 sarcoma patients in England and Wales has been a key tool in helping clinicians and policy makers to understand the needs and experiences of sarcoma patients to drive improvements in care.
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- The findings of the Survey were presented in a written briefing to the National Cancer Director, Cally Palmer, and John Baron MP, Chair of the All Party Parliamentary Group on Cancer.

3. Other – what we did:

- We supported 11 National Sarcoma Forum regional meetings.
- We worked with the Royal Marsden Hospital to deliver training about sarcoma to 100 GPs.
- We significantly increased the numbers of health professionals who successfully completed the Sarcoma UK-sponsored BMJ online module, ‘Lumps, Bumps and Sarcomas’ from 3,300 to 9,582 in 12 months. The module is the fourth most completed one during this period, with a 90% completion rate.
In 2016/17, Sarcoma UK invested £491,582 into high quality scientific research into sarcoma, a significant increase from 2015/16 (£335,493). This investment funded 10 research grants.

We received £1.5 million worth of high quality fundable applications for our allocated investment of £500,000.

We diversified our research grants calls in 2016/17 into Clinical Research and Basic Science.

We launched our flagship PhD studentship programme - the Sayako Grace Robinson Studentship - a ten year research investment. The scheme is run as part of the Basic Science research grant call.

Our annual Roger Wilson Research Award invited applications for research into Quality of Life.

Roger Wilson Research Award

Can a holistic model of rehabilitation improve quality of life after treatment for lower extremity sarcoma? A pilot and feasibility study.
Mr Craig Gerrand, Newcastle Upon Tyne Hospital NHS Foundation Trust £33,080

This pilot project will test if a more holistic approach to rehabilitation works for patients who need rehabilitation either immediately after treatment or more than six months later. This project will potentially improve rehabilitation for all sarcoma patients who have limb surgery.

Development of a sarcoma-specific patient-reported outcome measure.
Dr Rachel Taylor, University College London Hospitals £119,464

The aim of this project is to develop a sarcoma-specific Patient Reported Outcome Measure (S-PROM) using patient input and feedback. It also includes a strategy to incorporate this into clinical practice.

Clinical Research Awards

Magnetic Resonance guided Focused Ultrasound (MRgFUS) for the treatment of recurrent sarcomas
Professor Lee Jeys, Royal Orthopaedic Hospital, Birmingham £24,800

This research will test the feasibility of using Magnetic Resonance Imaging (MRI) scans to treat locally recurring sarcomas. The technique directs high intensity ultrasound waves at tumours to cause thermal ablation. This non-invasive, day-case procedure may offer an alternative therapy for recurrent sarcomas.

Does PET-MRI of myxofibrosarcoma improve the local staging of disease compared to standard MRI? A pilot and feasibility study.
Dr George Petridis, Newcastle upon Tyne Hospital NHS Foundation Trust £19,212

Myxofibrosarcomas can infiltrate adjacent tissues, which can make the extent of the cancer difficult to assess for the surgeon planning removal. This research project plans to test whether using Magnetic Resonance Imaging (MRI) and Positron Emission Tomography (PET) will give an improved assessment of myxofibrosarcomas, and has potential to improve surgical outcomes for this group of patients.

GeDDiS TransBio: Translational study to investigate prognostic and predictive immune biomarkers in soft tissue sarcoma (STS).
Dr Sandra Strauss, University College London Hospitals £75,161

This project uses samples collected during the GeDDiS clinical trial to see if there are any markers which might respond to current and new immune therapies that are entering clinical studies.
Achievements and Performance – Priority 2
Seek answers through research

Grants awarded in 2016/2017:

Sayako Grace Robinson PhD Studentship

*Defining the mechanisms of pazopanib and regorafenib resistance in soft tissue sarcoma.*
Dr Paul Huang, The Institute of Cancer Research, London
£119,960

This project aims to discover how the body develops resistance to two chemotherapy drugs (pazopanib and regorafenib) used in the treatment of soft tissue sarcoma. Using tumour samples collected from patients treated with these drugs, a lab-based model will be made of the cells. This model will be used to investigate the biological processes of how resistance occurs. This research could help doctors test patients before chemotherapy to check they will respond to the treatment. It will also increase knowledge of how to overcome drug resistance in sarcoma.

Grants awarded in 2016/2017:

**Basic Science Awards**

*Unravelling the epigenetic regulation of brachyury to identify new targets for the treatment of Chordoma.*
Professor Adrienne Flanagan, Royal National Orthopaedic Hospital, London
£25,000

The protein brachyury has a known role in Chordoma. Lab experiments have shown that if this protein is not there, the Chordoma cell dies. This project will look at how using drugs to switch off the gene that makes brachyury affects Chordoma cells growth. This research could lead to a clinical trial for new treatment for Chordoma.

*Combination immunotherapy with immune checkpoint inhibition and oncolytic vaccinia virus delivered by isolated limb perfusion (ILP) to target metastases in extremity soft-tissue sarcoma.*
Mr Andrew Hayes, The Institute of Cancer Research, London
£24,005

Isolated limb perfusion (ILP) is a surgical technique used to administer chemotherapy. The limb is isolated from the rest of the body and chemotherapy given directly to it. It is used in cases where the tumour is large or the limb has had previous surgery. This project will investigate how adding a cancer killing virus to the ILP treatment affects the immune system and how combining this with other treatments may affect the growth and spread of sarcoma.

*Sarcomas fuelled by the squeeze – Does the Hippo release the pressure?*
Dr Carsten Hansen, University of Edinburgh
£25,000

This project looks at the difference in the pressure of cells inside an osteosarcoma tumour compared to cells outside. Sarcomas with a high internal pressure are more able to spread. The research will look at the causes of the pressure difference and how this affects the growth and spread of osteosarcoma.

*Development of a gene signature as a biomarker of tumour hypoxia in soft tissue sarcoma.*
Professor Catharine West, University of Manchester
£25,000

Cancer cells have lower oxygen levels, known as hypoxia. This project looks at using genetic markers to identify when sarcoma cells are hypoxic. This knowledge will then be used to test drugs that may kill hypoxic sarcoma cells. This research has the potential to test which patients may benefit from treatment which targets hypoxia, and may give a better outcome for patients with soft tissue sarcoma.

We continued to fund previous research commitments – see www.sarcoma.org.uk for details.
Achievements and Performance – Priority 2
Seek answers through research

2. Map researchers - what we did:
   • We identified all UK researchers who had published in the field of sarcoma.

3. Sarcoma Research Symposium - what we did:
   • Our first Sarcoma Research Symposium focused on basic science and was attended by over 70 delegates including scientists, researchers and clinicians, and featured high profile speakers (Acknowledgements page 20).
   • Held a poster display and competition featuring 16 research projects from junior researchers, providing an opportunity to showcase their research.
   • Identified Research Priorities (Basic Science):

4. What we did – other:
   • The International Sarcoma Kindred Study (UK arm funded by Sarcoma UK) was the focus of a paper published in Lancet Oncology by Professor Ian Judson, and was highlighted by the BBC high profile speakers (Acknowledgements page 20).
   • Identified Research Priorities (Basic Science):

Achievements and Performance – Priority 3
Support the sarcoma community and provide information

What we said we would do:
1. Expand our national Support Line and support services.
2. Expand the range and distribution of our patient information.

1. Expand our support services - what we did:
   • The Support Line was open for 20 hours a week, responding to questions from patients, family members, friends, and health professionals by phone and email.
   • From 1 April 2016 to 31 March 2017, the Support Line had 1044 contacts, from 411 individuals. The average call length is 28 minutes.
   • The capacity of the Support Line was expanded in July 2016 with the recruitment of a second sarcoma nurse specialist as Support Line lead.
   • An internal evaluation of the service was carried out in 2017 to assess impact and develop the service.
   • We continue to support and financially assist 14 regional sarcoma support groups throughout the UK, including a new support group for desmoid-type fibromatosis.
   • We provided face-to-face support to 238 patients at eight patient support events and two wellness days.

2. Expand the range and distribution of our information - what we did:
   • Distributed 5,133 patient information booklets and factsheets to 47 specialist centres, 52 treatment centres and 85 information centres, including new outlets identified via a mapping exercise.
   • Made our booklets and factsheets available digitally, resulting in 5,980 downloads of booklets and factsheets.
   • Produced six new information products including Understanding desmoid-type fibromatosis; Giant cell tumour of the bone; and Lymphoedema & sarcoma.
   • Worked in partnership with The Christie Hospital, Manchester to produce a factsheet on Proton Beam Therapy, which will be distributed by The Christie team in the PBT Unit from 2018.
Achievements and Performance – Priority 4
Build a strong charity

In a challenging fundraising environment, we place more emphasis than ever on Sarcoma UK’s ethos of personalised support for fundraisers, attentive stewardship of donors, and positive messages in our appeals. This approach, and our strategy to diversify income streams, seems to be paying dividends: our income increased by 14% this year.

- Sarcoma UK’s community of runners, bakers, cyclists, skydivers, gig organisers, knitters and Tough Mudders had another magnificent year. Thanks to their efforts, JustGiving named us as one of their top 100 charities and we learned that the average value of a page for Sarcoma UK is approximately three times that of pages across the platform. To everyone who took up a challenge or fundraised in their community, we offer our heartfelt thanks; we simply couldn’t do what we do without your energy and enthusiasm.

- The implementation of our strategy to diversify income streams continued in 2016/17 with the appointment at the start of the year of a Fundraising Officer with responsibility for Trusts and Foundations. This stream has already begun to expand, and represents 12% of our total income compared to 3% last year. Legacy income – always challenging to predict – fell from last year, but following the launch of a new web page we received notification from more supporters that they have included a donation to Sarcoma UK in their will.

- Our fledgling Major Gifts programme developed thanks to the reception at 10 Downing Street in November, which enabled us to strengthen relationships with several key individuals. This year, we also received the first instalment of a transformational philanthropic gift to fund a series of PhD studentships in sarcoma basic science, named in memory of Sayako Grace Robinson. Significant contributions to our income also came from corporate supporters, including 10 Downing Street and David Wilson Homes.

Fundraising case studies

Gina Long first contacted Sarcoma UK after her family was touched by sarcoma. A passionate charity supporter, she was awarded an MBE in 2016 in recognition of 35 years of fundraising for good causes. She told us she wanted to use her vast experience of gala events and online auctions to raise money to fight sarcoma, and we were delighted that she chose us as a beneficiary of her Secret Garden Ball and Ultimate Charity Auction, which included ‘money can’t buy’ lots such as a training session with Paralympic gold medallist and Sarcoma UK patron Richard Whitehead, a VIP Manchester United experience and a luxury catamaran trip around the British Virgin Islands. At Christmas, Gina and her husband Andrew visited our office to hear how Sarcoma UK supports people affected by sarcoma, and to present a cheque for over £57,000.

Every year, we are inundated with applications to run the London Marathon, and deciding how to allocate our places becomes more and more difficult. But when James Read proposed running in a giant golf ball costume, we knew we couldn’t refuse! James’s wife Sarah had recently undergone major surgery, having been diagnosed with sarcoma at the age of 28, only a few months after their honeymoon. James said: “After learning that only 53% of the public have heard of sarcoma and only 26% know that sarcoma is a cancer, I knew I had to take action. Dressing up as a giant golf ball would have helped raise sarcoma awareness along the route and prompted the public to go to their GP if they have a lump the size of a golf ball.” Over the last few years, James has raised a total of £16,250 and continues to take on sporting challenges for Sarcoma UK.
Future Plans

**Strategic Priorities**

1. Initiate change to raise awareness of sarcoma and improve standards of treatment and care.
2. Seek answers through research.
3. Support the sarcoma community and provide information.
4. Build a strong charity.

**2017/18**

**We will:**

- Run two research grant calls - basic science and clinical research, and continue our level of investment into high quality sarcoma research.
- Launch a mass participation event for the sarcoma community during Sarcoma Awareness Week.
- Provide sarcoma patients and their families with new ways to access our support and information services.
- Ensure full compliance with new charity fundraising regulations and data protection legislation in a changing external environment.

The above activities include 16% support costs and 2% governance costs, which have been re-allocated to each activity (see notes to financial statements).
Acknowledgements

Patron  Richard Whitehead MBE
Founder  Roger Wilson CBE

Research Advisory Committee
Professor Penella Woll (Chair)
BMedSci, MBBS, PhD, FRCP
Professor of Medical Oncology, University of Sheffield

Dr Sara Booth
MD FRCP FRCP
Honorary Consultant, Associate Lecturer, University of Cambridge
Honorary Senior Lecturer at the Department of Palliative Care and Policy, King's College London

Dr Bernadette Brennan
BSc, MBChB, MRCP (UK), FRCPath, MD
Consultant Paediatric Oncologist, Royal Manchester Children's Hospital

Mr Paul Cool
MD MMedSc (Res) FRCS (Ed) FRCS (Orth)
Consultant Orthopaedic & Oncological Surgeon, The Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry

Mr Anant Desai
BA MA MBBS MD FRCS
Consultant General Surgeon, Queen Elizabeth Hospital, Birmingham

Dr Sinclair Dundas
PhD, MBChB, FRCPath
Consultant Pathologist, Aberdeen Royal Infirmary

Professor Adrienne Flanagan
MB, BCh, BAO, PhD, LRCP, LRCS, FRCPath, FMedSci
Professor of Musculoskeletal Pathology, University College London
Consultant Pathologist/Clinical Lead, Royal National Orthopaedic Hospital

Professor Ted Hupp
PhD
Principal Investigator and Professor of Cancer Research, University of Edinburgh

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FRCS (Tr & Orth), FRCSEd, MB ChB
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Chair of Psychosocial and Medical Oncology, University of Leeds

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Dr Jayne Wood
MBBS FRCP BSc PgDip
Consultant in Palliative Medicine and Clinical Lead, Royal Marsden and Royal Brompton Hospitals London

Research Symposium

Programme Committee
Prof Adrienne Flanagan
Professor of Musculoskeletal Pathology, University College London

Professor Janet Shipley
Head of the Division of Molecular Pathology, The Institute of Cancer Research

Professor Ted Hupp
Principal Investigator and Professor of Cancer Research, University of Edinburgh

Dr Hugh Robinson
Senior Lecturer, University of Cambridge

Speakers
Prof Adrienne Flanagan (Chair)
Professor of Musculoskeletal Pathology, University College London

Professor Gerard Evan
Sir William Dunn Professor of Biochemistry, University of Cambridge

Professor David Thomas
NHMRC Senior Research Fellow, Director of the Kinghorn Cancer Centre; Head of the Cancer Division at the Garvan Institute of Medical Research, Sydney

Dr Sam Behjati
Wellcome Trust Sanger Institute Intermediate Clinical Fellow

Professor Tony Carr
Director, Genome Damage and Stability Centre, University of Sussex

Dr Paul Huang
Team Leader, The Institute of Cancer Research, London

Professor Janet Shipley
Head of the Division of Molecular Pathology, The Institute of Cancer Research, London

Dr Andrea Siadmok
Head of the Policy Lab, Cabinet Office

Professor Peter Rigby
Former Chief Executive Officer, The Institute of Cancer Research, London
A huge thank-you to all our major donors

- 10 Downing Street
- The Analyst
- The Boom Foundation
- David Wilson Homes South West
- The Edith Lilian Harrison 2000 Foundation
- The GeeWizz Charitable Trust
- Jessica's Sarcoma Awareness
- The Kilpatrick Fraser Charitable Trust
- The Robert McAlpine Foundation
- Gwen Owen Robinson
- The Roy Thompson Charitable Trust
- The Thompson Family Charitable Trust
- O2 Academy Glasgow
- Omidyar Network UK Ltd
- Penningtons Manches
- The Richard Sumner Fund
- The Sandie’s Stars Fund
- The Stephanie Darling Fund
- The Terry Allison Tribute Fund
- The Tom Eckles Fund
- The Tom McMahon Fund
- The UlLegend Fund

Corporate donors

- Barclays Bank plc
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- Lease2Buy Cars
- MBNA Ltd
- CAF Bank Ltd, 25 Kings Hill, Avenue Kings Hill, West Mailing, Kent ME19 4JQ
- Lloyds TSB, National Clubs & Charities, PO Box 1000 BX1 1LY

Gifts in kind

- Touchline – design of a Sarcoma UK report and hosting a supporter reception
- The Adam Jones Fund
- The Amy Westlake Fund
- The Chris Martin Fund
- The Dave Thompson Fund
- The Derek Watkins Fund 007
- Hope’s Fund
- The James Hessey Fund
- The Leigh Gaskin Fund
- The Richard Sumner Fund
- The Sandie’s Stars Fund
- The Stephanie Darling Fund
- The Terry Allison Tribute Fund
- The Tom Eckles Fund
- The Tom McMahon Fund
- The UlLegend Fund

Legacies

We recognise the deeply personal decisions involved when making a will, and express our unending gratitude to the following supporters from whose wills we received a gift in 2016/17.

- Bernadette Waters
- Elizabeth Gale
- Virginia Crellin
- Louise Garbett
- Rachel Billsberry-Grass (Consultant, CauseWorks)
- Mark Gould (Director, The Systems Management Company)
- Katie Heyward (Head of Trust Fundraising, Action Medical Research)

Individuals who have provided professional support

The following people have provided valuable professional support and advice to Sarcoma UK on a pro-bono basis.

- Bernadette Waters
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- Virginia Crellin
- Louise Garbett
- Rachel Billsberry-Grass (Consultant, CauseWorks)
- Mark Gould (Director, The Systems Management Company)
- Katie Heyward (Head of Trust Fundraising, Action Medical Research)

Other

- Dr Andrea Siodmok (Head of the Policy Lab, Cabinet Office) and the staff at The Cabinet Office Policy Lab.
- The staff of 10 Downing Street for support throughout our Charity of the Year partnership.
- Paul White [Peak Venues]; Magda Archer [artist]; and Richard Whitehead MBE [Paralympian and Sarcoma UK Patron] who donated auction lots for the Ultimate Charity Auction.
Legal Entity
Sarcoma UK is a charity registered in England and Wales with the Charity Commission on 17 January 2011, and registered as a charity in Scotland on 12 September 2013. Its governing documents are its memorandum and articles of association. Sarcoma UK is also a company limited by guarantee incorporated with Companies House on 10 January 2011. Sarcoma UK is sole corporate Trustee of former charity The Sarcoma Trust.

Charitable Objectives
The objectives of the charity are to promote and protect the physical and mental health of patients with bone and soft tissue sarcomas in the United Kingdom through the provision of information, support, education and practical advice to them, their families and their carers, the relief of sickness and the preservation of health in particular by promoting and supporting research with the publication of the useful results thereof and the development of more effective treatment and care for patients with bone and soft tissue sarcomas, to advance the education of the general public in all areas relating to sarcoma.

Board of Trustees 2016/17
Karen Delin – Chair
Karen has over 20 years’ experience in palliative care nursing. Diagnosed with a gynaecological sarcoma in 2006, Karen established and continues to organise the London Sarcoma Support Group as well as being a founder trustee of Sarcoma UK.

Sarah Bartholomew
Sarah is former Head of Events & Visits at 10 Downing Street, having worked for both the current and previous Prime Minister. Sarah was a colleague of Chris Martin at 10 Downing Street and she led their working group during our Charity of the Year partnership in 2016. Sarah is now a Director at the newly formed Commonwealth Summit Unit, part of the Cabinet Office.

Andy Eckles – Trustee with special interest in finance
Andy has 30 years’ experience in finance, as both an auditor and currently as Group Financial Controller at Huntswood, a company that provides specialist resourcing and consultancy services. Andy’s son, Tom, passed away from Ewing’s sarcoma in September 2015.

Professor Rob Grimer
Rob is a (retired) Professor of Orthopaedic Oncology at the Royal Orthopaedic Hospital, Birmingham. During his long career in sarcoma, he helped pioneer the use of extendable prostheses and new surgical techniques such as irradiation and re-implantation of bone to treat sarcoma. He is a founding member of the British Sarcoma Group.

Leigh Hibberdine
Leigh works in events management and became involved with Sarcoma UK when her daughter was diagnosed in 2009 with paediatric wild-type GIST (gastro-intestinal stromal tumour).

Ian Hughes
Ian is the owner of SILO Consulting Ltd, based in York. Ian was diagnosed with leiomyosarcoma in 2010.

Professor Ian Judson
Ian has been treating patients with sarcoma for 25 years as Head of the Sarcoma Unit at the Royal Marsden until his retirement in 2016. He has conducted many clinical trials in this area, and was a founder member of the British Sarcoma Group, and President until 2015.

Sharon Reid
Sharon is a former Executive Director and Chief Operating Officer at Edelman, the world’s largest PR agency, and has worked in communications for the last 18 years.

Johanna Vass
Jo is a Sarcoma Advanced Nurse Practitioner, the lead for sarcoma nursing services and a key member of the South Wales Sarcoma Multi-Disciplinary Team. She was the first sarcoma specialist nurse to be appointed in South Wales in 2012.

Dr Jeff White
Jeff is a consultant medical oncologist working in sarcoma at the Beatson West of Scotland Cancer Centre, and former National Lead Clinician for the Scottish Sarcoma Network.

Sam Whittam
Sam is a barrister working principally in the area of child protection and was called to the bar in 1995. In 2009, Sam lost her friend to sarcoma.

Glyn Wilmshurst
Glyn co-founded the communications agency Touchline, which produces the publications, websites and branding of several governments as well as various international arts, trade, travel and sports organisations. Glyn was diagnosed with a myxoid liposarcoma in December 2010.

Sub-Committees
Responsibility for HR and staffing issues is delegated to the HR Sub-Committee who make recommendations to the Board of Trustees, including staff remuneration.

Members 2016/17:
- Leigh Hibberdine
- Sam Whittam
- Glyn Wilmshurst

Responsibility for the renewal of tenure, recruitment and appointment of trustees is delegated to the Nominations Sub-Committee who make recommendations to the Board of Trustees.

Members 2016/17:
- Karen Delin
- Ian Hughes
- Dr Jeff White
Trustee Appointment and Induction

Sarcoma UK places a high value on having an informed and skilled Board of Trustees which guides the charity to achieve its ambitious goals.

Trustees serve a three-year term, after which they are eligible for re-election for a further three years.

New trustees are recruited in various ways, according to the skills sought by the Board. Vacancies are advertised in national charity media; through professional networks; and via the charity’s website and networks. Potential trustees are invited to submit a formal application and attend an interview with the Nominations Sub-Committee.

All trustees receive the Trustee Handbook, setting out the role and responsibilities of Sarcoma UK trustees, including the charity’s policies and procedures relating to governance. A Register of Trustees’ Interests is in place and updated annually.

All new trustees receive the governing document, strategy and business plan, published accounts and minutes of previous Board of Trustee meetings, Trustee Handbook, as well as Charity Commission guidance on effective governance. A formal induction programme is in place, where trustees spend time with the Chief Executive and the Senior Management Team. Trustees are subscribed to Governance publication and are encouraged to attend training and other events for charity trustees.

Organisational Structure

The Board of Trustees sets the strategic direction of Sarcoma UK and approves the main policies of the charity. It appoints and directs the Chief Executive, monitors performance and identifies and manages the major risks facing the charity. The Board meets four times a year.

The Board delegates responsibility for the running of the charity to the Chief Executive with clearly communicated and recorded executive limits. The Chief Executive is responsible and accountable for achieving Sarcoma UK’s strategic objectives and delivering the annual business plan. A Senior Management Team is in place to support the Chief Executive, providing leadership across key areas of the charity’s work, and ensuring delivery of the charity’s day-to-day work.

Sarcoma UK’s Senior Management Team in 2016/17 consisted of:

- Chief Executive
- Communications Director
- Director of Finance & Resources
- Director of Fundraising
- Director of Research, Support & Information

Sarcoma UK has a policy for reviewing staff salaries, set out in the Staff Handbook. Staff salaries are reviewed annually by the Board of Trustees HR Sub-Committee, on behalf of the Board of Trustees, and benchmarked against voluntary sector pay surveys and inflation. The remuneration of senior management is covered under this policy.

The total number of staff employed at 31 March 2017 was 13 (including three part-time). The trustees are grateful to the staff team for the outstanding work they do on behalf of people affected by sarcoma.

Volunteers

The trustees recognise the valuable contribution made by volunteers to Sarcoma UK and wish to record their gratitude for this commitment. These include members of Sarcoma UK’s Research Advisory Committee; sarcoma support group leaders; Sarcoma UK’s Information Review Panel; individuals and families who have provided their stories for use as case studies; everyone who has undertaken fundraising and awareness-raising in their communities; and everyone who has set up information stands and cheering stations at events and challenges. In accordance with accepted practice, no amounts are included in the financial statements to reflect the value of work undertaken by volunteers.

Risk Assessment

Sarcoma UK has a risk assessment model in place, which is reviewed regularly by the Senior Management Team and trustees. This model sets out the processes for identifying major strategic risks, assessing their likely impact and, where appropriate, the measures that need to be implemented to mitigate the risks.

In our risk assessment model, risks are categorised under the following headings: Governance, Financial, Operational, Environmental and External Factors, Compliance Risk, and Charitable Objectives.

The most significant current risk to the charity has been identified as the impact of the external environment on fundraising, in particular:

1. New fundraising regulations
2. New data protection regulations
3. Public confidence in charities
4. Uncertainty around Britain’s withdrawal from the EU and the possible economic impact

To manage this risk, the following actions will be incorporated into the risk model:

1. Investment into new fundraising streams to spread the risk and establish greater diversity in fundraising sources.
2. Training and knowledge-building opportunities for trustees and staff to ensure full understanding of the new regulations.
3. An objective in the 2017/18 business plan to achieve full compliance with new fundraising and data protection regulations.
4. Robust monitoring of monthly management accounts to identify changes in income patterns as early as possible.

The risk model has been reviewed by the trustees and they are satisfied that appropriate systems are in place to mitigate major risks.
Grant Making Policy

Our research grants programme for sarcoma involves annual calls for proposals which are publicised to the UK sarcoma research community, in particular sarcoma active researchers and UK Higher Education Institutes.

Applications submitted undergo a rigorous peer review process to identify the best quality sarcoma research projects in centres of excellence across the UK. Our Research Advisory Committee considers all peer reviews and makes recommendations for funding to the Board of Trustees, who approve the final grants.

Sarcoma UK is a member of the Association of Medical Research Charities (AMRC) and is fully compliant with their practices. Our Principles of Peer Review Policy is published and all applicants are made aware of it. We also publish our Conflicts of Interest policy, whereby all members of the Research Advisory Committee are required to provide an annual declaration of potential conflicts of interest. The policy also sets out the conditions for automatic exclusion from participation in funding decisions for members who have conflicts of interest, and this policy is implemented rigorously at meetings.

Our research strategy states that no area of research is given greater priority over any other within a cell. We always award on the basis of the scientific quality of the proposed studies. Clinical research projects must be patient focused. We will support both people and projects, and will provide funding for pump-priming research to support the development of ideas. We wish to increase the sum total of sarcoma research in the UK and remain flexible in our approach towards funding and research partnerships.

Public Benefit

The trustees have referred to the guidance contained in the Charity Commission’s general guidance on public benefit when reviewing the charity’s aims and objectives and in planning its future activities. In particular, the trustees consider how planned activities will contribute to the aims and objectives that have been set.

Working with Others

Sarcoma UK recognises that progress towards our goals is maximised when working collaboratively with others who share an interest in improving the lives of people affected by sarcoma. As the only UK charity focusing on all types of sarcoma, we aim to work collaboratively with the whole sarcoma community to achieve our vision for the future. In March 2017, the trustees approved guiding principles for Sarcoma UK’s collaboration with other organisations to ensure maximum impact for our supporters. In 2016/17, Sarcoma UK had collaborations with the Association of Medical Research Charities (AMRC); BMJ Learning; The Boom Foundation (Northern Ireland); British Sarcoma Group; Cancer S2; The Christie Hospital; The Good Grief Trust; GIST Support UK; Maggie’s Centres; National Cancer Research Institute (NCRI) sarcoma clinical studies group; NCRI James Lind Alliance Priority Setting Partnership – Living With and Beyond Cancer steering group; National Institute of Health and Care Excellence (NICE); National Sarcoma Forum (of specialist nurses); NHS England; Sarcoma Patients EuroNet; The Royal Marsden Hospital; Shine Cancer Support; the Scottish Sarcoma Network; and the network of sarcoma specialist centres – bone and soft tissue – in England, Wales and Northern Ireland.

Income

Sarcoma UK has made excellent progress against its objectives for the year, successfully raising £1,369,014, an increase of 14% from the previous year (2016: £1,202,498), which exceeded our income forecast for the year. This is the direct result of the investment made into our fundraising team during the year and shows early evidence of the future potential in our new fundraising programmes, in particular Trusts and Foundations, Legacies, and Major Gifts.

Expenditure

Total expenditure increased by 28% to £1,396,746 (2016: £1,094,574). Expenditure on charitable activities increased by 29% to £1,118,488 (2016: £867,426). This reflects the significant increase in investment into research this year, as well as the ongoing level of commitment to our charitable objectives of Information and Support, and Awareness and Education.

We strive to keep the costs of raising money to a minimum. There has been an increase of 23% in the cost of raising funds, which has directly resulted in an increase in our level of income and is building a secure funding base for the future. This year for every £1 spent on fundraising £4.90 was raised (2016: £5.26).

There was a planned deficit of £27,732 (2016: surplus £107,924). This represents expenditure of restricted funds carried forward from the previous year and decreases total charity funds to £952,661 (2016: £980,393), of which £7,546 are restricted. The reserves policy is discussed below.

The trustees wish to thank all donors for their invaluable support during the year, which is helping Sarcoma UK transform the lives of everyone affected by sarcoma.

Reserves Policy

The Board of Trustees reviewed and changed the reserves policy in December 2016 with the aim of maintaining reserves at a level which equates to approximately six months of overhead costs.

The total funds of the charity at 31 March 2017 were £952,661 of which £7,546 are restricted. This leaves a balance of £945,115 as unrestricted funds. The trustees have agreed to designate £500,000 of these unrestricted funds to research grants in 2017/18, leaving a balance of £445,115. The level of reserves is equivalent to over six months of overhead costs. This is approximately £380,000 for the forthcoming year, which will ensure uninterrupted services and delivery of our charitable activities. The reserves policy will be reviewed in 2017/18, to ensure it is adequate for the charity’s future operational needs.
Statement of Responsibilities of the Trustees

The trustees (who are also directors of Sarcoma UK for the purposes of company law) are responsible for preparing the trustees’ annual report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure of the charitable company for that period. In preparing these financial statements, the trustees are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charities SORP
- Make judgements and estimates that are reasonable and prudent
- State whether applicable UK Accounting Standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation

The trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware:

- There is no relevant audit information of which the charitable company’s auditor is unaware
- The trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company’s website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Members of the charity guarantee to contribute an amount not exceeding £1 to the assets of the charity in the event of winding up. The total number of such guarantees at 31 March 2017 was 12 (2016:10). The trustees are members of the charity but this entitles them only to voting rights. The trustees have no beneficial interest in the charity.

Auditor

Sayer Vincent LLP was re-appointed as the charitable company’s auditor during the year and has expressed its willingness to continue in that capacity.

The trustees’ annual report has been approved by the trustees on 3 October 2017 and signed on their behalf by

Karen Delin
Chair of Trustees

Independent Auditor’s Report to the Members of Sarcoma UK

Opinion

We have audited the financial statements of Sarcoma UK (the ‘charitable company’) for the year ended 31 March 2017 which comprise the statement of financial activities, balance sheet, statement of cash flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 ‘The Financial Reporting Standard applicable in the UK and Republic of Ireland’ (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- Give a true and fair view of the state of the charitable company’s affairs as at 31 March 2017 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice
- Have been prepared in accordance with the requirements of the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005 and regulation B of the Charities Accounts (Scotland) Regulations 2006 (as amended)

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor’s responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC’s Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- The trustees’ use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- The trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the charitable company’s ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The other information comprises the information included in the trustees’ annual report, other than the financial statements and our auditor’s report thereon. The trustees are responsible for the other information. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon. In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material...
misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

**Opinions on other matters prescribed by the Companies Act 2006**

In our opinion, based on the work undertaken in the course of the audit:

- The information given in the trustees’ annual report, for the financial year for which the financial statements are prepared is consistent with the financial statements
- The trustees’ annual report, has been prepared in accordance with applicable legal requirements

**Matters on which we are required to report by exception**

In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the trustees’ annual report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charities Accounts (Scotland) Regulations 2006 (as amended) require us to report to you if, in our opinion:

- Adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- The financial statements are not in agreement with the accounting records and returns; or
- Certain disclosures of trustees’ remuneration specified by law are not made; or
- We have not received all the information and explanations we require for our audit; or
- The trustees were not entitled to take advantage of the small companies’ exemptions in preparing the trustees’ annual report and from the requirement to prepare a strategic report.

**Responsibilities of trustees**

As explained more fully in the statement of trustees’ responsibilities set out in the trustees’ annual report, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company’s ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

**Auditor’s responsibilities for the audit of the financial statements**

This report is made solely to the charitable company’s members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005. Our audit work has been undertaken so that we might state to the charitable company’s members those matters we are required to state to them in an auditor’s report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company’s members as a body, for our audit work, for this report, or for the opinions we have formed.

We have been appointed as auditor under section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and under the Companies Act 2006 and report in accordance with regulations made under those Acts.

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council’s website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor’s report.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Noelia Serrano (Senior statutory auditor)
5th October 2017
for and on behalf of Sayer Vincent LLP, Statutory Auditor
Invicta House, 108-114 Golden Lane, LONDON, EC1Y 0TL
Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006.
### Statement of Financial Activities

(Incorporating an income and expenditure account)

For the year ended 31 March 2017

<table>
<thead>
<tr>
<th>Note</th>
<th>Unrestricted</th>
<th>Restricted</th>
<th>2017 Total</th>
<th>2016 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income from:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and legacies</td>
<td>3</td>
<td>1,111,707</td>
<td>251,129</td>
<td><strong>1,362,836</strong></td>
</tr>
<tr>
<td>Other trading activities</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td><strong>3,000</strong></td>
</tr>
<tr>
<td>Investments</td>
<td>6,178</td>
<td>-</td>
<td><strong>6,178</strong></td>
<td><strong>6,597</strong></td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td><strong>1,117,885</strong></td>
<td><strong>251,129</strong></td>
<td><strong>1,369,014</strong></td>
<td><strong>1,202,498</strong></td>
</tr>
<tr>
<td>Expenditure on:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raising funds</td>
<td>4</td>
<td>276,821</td>
<td>1,437</td>
<td><strong>278,258</strong></td>
</tr>
<tr>
<td>Charitable activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research</td>
<td>4</td>
<td>356,110</td>
<td>277,585</td>
<td><strong>633,695</strong></td>
</tr>
<tr>
<td>Information and support</td>
<td>4</td>
<td>172,253</td>
<td>2,281</td>
<td><strong>174,534</strong></td>
</tr>
<tr>
<td>Awareness and education</td>
<td>4</td>
<td>308,924</td>
<td>1,335</td>
<td><strong>310,259</strong></td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td><strong>1,114,108</strong></td>
<td><strong>282,638</strong></td>
<td><strong>1,396,746</strong></td>
<td><strong>1,094,574</strong></td>
</tr>
<tr>
<td>Net income / (expenditure) and net movement in funds for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>3,777</td>
<td>(31,509)</td>
<td><strong>(27,732)</strong></td>
</tr>
<tr>
<td>Reconciliation of funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total funds brought forward</td>
<td>941,338</td>
<td>39,055</td>
<td><strong>980,393</strong></td>
<td><strong>872,469</strong></td>
</tr>
<tr>
<td>Total funds carried forward</td>
<td>945,115</td>
<td>7,546</td>
<td><strong>952,661</strong></td>
<td><strong>980,393</strong></td>
</tr>
</tbody>
</table>

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 16 to the financial statements.

### Balance Sheet

As at 31 March 2017

<table>
<thead>
<tr>
<th>Note</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed assets:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>11</td>
<td>10,228</td>
</tr>
<tr>
<td>Current assets:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>12</td>
<td>198,282</td>
</tr>
<tr>
<td>Short term deposits</td>
<td></td>
<td>207,916</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td></td>
<td>1,418,375</td>
</tr>
<tr>
<td>Liabilities:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Creditors: amounts falling due within one year</td>
<td>13</td>
<td>552,597</td>
</tr>
<tr>
<td>Net current assets</td>
<td></td>
<td>1,271,976</td>
</tr>
<tr>
<td>Total assets less current liabilities</td>
<td></td>
<td>1,282,204</td>
</tr>
<tr>
<td>Creditors: amounts falling due after one year</td>
<td>14</td>
<td>329,543</td>
</tr>
<tr>
<td>Net current assets</td>
<td></td>
<td>952,661</td>
</tr>
<tr>
<td>Total net assets</td>
<td></td>
<td>952,661</td>
</tr>
<tr>
<td>The funds of the charity:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted income funds</td>
<td>16</td>
<td>7,546</td>
</tr>
<tr>
<td>Unrestricted income funds:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designated funds</td>
<td></td>
<td>500,000</td>
</tr>
<tr>
<td>General funds</td>
<td></td>
<td>445,115</td>
</tr>
<tr>
<td>Total unrestricted funds</td>
<td></td>
<td>945,115</td>
</tr>
<tr>
<td>Total charity funds</td>
<td></td>
<td>952,661</td>
</tr>
</tbody>
</table>

Approved by the trustees on 3 October 2017 and signed on their behalf by

Karen Delin
Chair of Trustees
(Company no: 7487432)
Notes to the Financial Statements
For the year ended 31 March 2017

1. Accounting policies
a) Statutory information
Sarcoma UK is a charitable company limited by guarantee and is incorporated in the United Kingdom. The registered office address (and principal place of business, if different from the registered office) is 49-51 East Road, London, N1 6AH.

b) Basis of preparation
The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (September 2015) and the Companies Act 2006.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy or note.

c) Public benefit entity
The charitable company meets the definition of a public benefit entity under FRS 102.

d) Going concern
The trustees consider that there are no material uncertainties about the charitable company’s ability to continue as a going concern. The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

e) Income
Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor’s intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

f) Donations of gifts, services and facilities
Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised so refer to the trustees’ annual report for more information about their contribution.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market, a corresponding amount is then recognised in expenditure in the period of receipt.

Donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market, a corresponding amount is then recognised in expenditure in the period of receipt. On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market, a corresponding amount is then recognised in expenditure in the period of receipt.

The trustees consider that there are no material uncertainties about the charitable company’s ability to continue as a going concern.

The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor’s intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised so refer to the trustees’ annual report for more information about their contribution.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market, a corresponding amount is then recognised in expenditure in the period of receipt.

The trustees consider that there are no material uncertainties about the charitable company’s ability to continue as a going concern.

The trustees do not consider that there are any sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income have been met, it is probable that the income will be received and that the amount can be measured reliably.

For legacies, entitlement is taken as the earlier of the date on which either: the charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the charity that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the charity has been notified of the executor’s intention to make a distribution. Where legacies have been notified to the charity, or the charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is a treated as a contingent asset and disclosed if material.

Income received in advance of the provision of a specified service is deferred until the criteria for income recognition are met.

Donated professional services and donated facilities are recognised as income when the charity has control over the item or received the service, any conditions associated with the donation have been met, the receipt of economic benefit from the use by the charity of the item is probable and that economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), volunteer time is not recognised so refer to the trustees’ annual report for more information about their contribution.

On receipt, donated gifts, professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market, a corresponding amount is then recognised in expenditure in the period of receipt.
required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds relate to the costs incurred by the charitable company in inducing third parties to make voluntary contributions to it, as well as the cost of any activities with a fundraising purpose.
- Expenditure on charitable activities includes the costs of raising sarcoma awareness, funding research and providing information and support, all undertaken to further the purposes of the charity and their associated support costs.
- Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

**j) Allocation of support costs**

Resources expended are allocated to the particular activity where the cost relates directly to that activity.

Support costs are those costs which do not in themselves constitute a charitable or fundraising activity, but are the central office functions necessary to support these activities. They include administration, finance, HR and office overhead costs.

Governance costs are the costs associated with the governance arrangements of the charity. These costs are associated with constitutional and statutory requirements and include any costs associated with the strategic management of the charity’s activities.

Support and governance costs are re-allocated to each of the activities on the following basis which is an estimate, based on staff time, of the amount attributable to each activity:

- Raising funds: 27%
- Research: 19%
- Information and support: 29%
- Awareness and education: 25%

**k) Operating leases**

Rentals payable under operating leases, where substantially all the risks and rewards of ownership remain with the lessor, are charged to the statement of financial activities on a straight line basis over the minimum lease term.

**l) Tangible fixed assets**

Items of equipment are capitalised where the purchase price exceeds £250. Depreciation costs are allocated to activities on the basis of the use of the related assets in those activities. Assets are reviewed for impairment if circumstances indicate their carrying value may exceed their net realisable value and value in use.

Depreciation is provided at rates calculated to write down the cost of each asset to its estimated residual value over its expected useful life. The depreciation rates in use are as follows:

- Fixtures and fittings: 5 years
- Computer equipment: 5 years

**m) Debtors**

Trade and other debtors are recognised at the settlement amount due after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

**n) Cash at bank and in hand**

Cash at bank and in hand includes cash and short term highly liquid investments with a short maturity of four months or less from the date of acquisition or opening of the deposit or similar account.

**o) Creditors and provisions**

Creditors and provisions are recognised where the charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any trade discounts due.

**p) Pensions**

The charitable company operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charitable company in an independently administered fund. The pension cost charge represents contributions payable under the scheme by the charitable company to the fund. The charitable company has no liability under the scheme other than for the payment of those contributions.

**2. Detailed comparatives for the statement of financial activities**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Unrestricted (£)</th>
<th>Restricted (£)</th>
<th>Total (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income from:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and legacies</td>
<td>1,086,920</td>
<td>105,981</td>
<td>1,192,901</td>
</tr>
<tr>
<td>Other trading activities</td>
<td>3,000</td>
<td>-</td>
<td>3,000</td>
</tr>
<tr>
<td>Investments</td>
<td>6,597</td>
<td>-</td>
<td>6,597</td>
</tr>
<tr>
<td><strong>Total income</strong></td>
<td>1,096,517</td>
<td>105,981</td>
<td>1,202,498</td>
</tr>
<tr>
<td><strong>Expenditure on:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raising funds</td>
<td>220,511</td>
<td>6,637</td>
<td>227,148</td>
</tr>
<tr>
<td>Charitable activities</td>
<td>738,028</td>
<td>129,400</td>
<td>867,428</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td>958,537</td>
<td>136,037</td>
<td>1,094,574</td>
</tr>
<tr>
<td><strong>Net income / (expenditure) and net movement in funds for the year</strong></td>
<td>137,980</td>
<td>(30,056)</td>
<td>107,924</td>
</tr>
<tr>
<td>Reconciliation of funds</td>
<td>803,358</td>
<td>69,111</td>
<td>872,469</td>
</tr>
<tr>
<td><strong>Total funds brought forward</strong></td>
<td>941,338</td>
<td>39,056</td>
<td>980,393</td>
</tr>
</tbody>
</table>

**3. Income from donations and legacies**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Unrestricted (£)</th>
<th>Restricted (£)</th>
<th>Total (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations and gifts</td>
<td>1,101,363</td>
<td>251,129</td>
<td>1,352,492</td>
</tr>
<tr>
<td>Legacies</td>
<td>8,314</td>
<td>-</td>
<td>8,314</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1,111,707</td>
<td>251,129</td>
<td>1,362,836</td>
</tr>
</tbody>
</table>

Donated services include work by Touchline on the production of a Sarcoma UK report and hosting a supporter reception. Glyn Wilmshurst, CEO at Touchline, is a member of Sarcoma UK Board of Trustees.
### 4. Analysis of expenditure

<table>
<thead>
<tr>
<th>Category</th>
<th>2017</th>
<th>Total 2017</th>
<th>2016</th>
<th>Total 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>106,242</td>
<td>381,204</td>
<td>117,110</td>
<td>330,438</td>
</tr>
<tr>
<td>Support</td>
<td>106,242</td>
<td>381,204</td>
<td>117,110</td>
<td>330,438</td>
</tr>
<tr>
<td>Governance</td>
<td>106,242</td>
<td>381,204</td>
<td>117,110</td>
<td>330,438</td>
</tr>
<tr>
<td><strong>Research, Support, Governance</strong></td>
<td>310,686</td>
<td>1,053,628</td>
<td>345,630</td>
<td>1,092,746</td>
</tr>
</tbody>
</table>

Staff costs were as follows:

- **Research grants payable (note 5)**: £490,789
- **Unrestricted income** (2016: £381,204) and **restricted income** (2016: £381,204)
- **Depreciation** (2016: £381,204)
- **Interest payable** (2016: £381,204)
- **Operating lease rentals** (2016: £381,204)
- **Audit** (2016: £381,204)

5. **Grant making**

<table>
<thead>
<tr>
<th>Institutions</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Edinburgh</td>
<td>25,000</td>
<td>7,365</td>
</tr>
<tr>
<td>University of Aberdeen</td>
<td>-</td>
<td>118,872</td>
</tr>
<tr>
<td>University of Sheffield</td>
<td>-</td>
<td>36,319</td>
</tr>
<tr>
<td>Aston University</td>
<td>-</td>
<td>28,690</td>
</tr>
<tr>
<td>University of Oxford (returned balance)</td>
<td>(15,055)</td>
<td>-</td>
</tr>
<tr>
<td>Newcastle University</td>
<td>52,292</td>
<td>22,317</td>
</tr>
<tr>
<td>University College London</td>
<td>194,625</td>
<td>120,000</td>
</tr>
<tr>
<td>Institute of Cancer Research</td>
<td>144,865</td>
<td>-</td>
</tr>
<tr>
<td>University of Manchester</td>
<td>25,000</td>
<td>-</td>
</tr>
<tr>
<td>Royal Orthopaedic Hospital</td>
<td>24,800</td>
<td>-</td>
</tr>
<tr>
<td>Royal National Orthopaedic Hospital</td>
<td>25,000</td>
<td>-</td>
</tr>
<tr>
<td>Newcastle University (underspend)</td>
<td>(301)</td>
<td>-</td>
</tr>
<tr>
<td>Aston University (underspend)</td>
<td>(492)</td>
<td>-</td>
</tr>
</tbody>
</table>

At the end of the year: £490,789

Full details of grant making activities are disclosed on pages 11-13 of the report of the trustees.

6. **Net expenditure for the year**

This is stated after charging / (crediting):

<table>
<thead>
<tr>
<th>Item</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depreciation</td>
<td>6,725</td>
<td>6,572</td>
</tr>
<tr>
<td>Interest payable</td>
<td>6,178</td>
<td>6,572</td>
</tr>
<tr>
<td>Operating lease rentals</td>
<td>66,690</td>
<td>45,093</td>
</tr>
<tr>
<td>Auditors’ remuneration (excluding VAT):</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Audit</td>
<td>6,100</td>
<td>5,900</td>
</tr>
</tbody>
</table>

7. **Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel**

Staff costs were as follows:

<table>
<thead>
<tr>
<th>Item</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and wages</td>
<td>425,524</td>
<td>331,907</td>
</tr>
<tr>
<td>Social security costs</td>
<td>42,458</td>
<td>33,355</td>
</tr>
<tr>
<td>Employer’s contribution to defined contribution pension schemes</td>
<td>6,308</td>
<td>6,726</td>
</tr>
<tr>
<td>Accrued holiday pay</td>
<td>(2,121)</td>
<td>9,216</td>
</tr>
</tbody>
</table>

Of the total expenditure £1,114,108 was unrestricted (2016: £958,537) and £282,638 was restricted (2016: £136,037).
The following number of employees received employee benefits (excluding employer pension costs and national insurance contributions) during the year between:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>£60,000 - £69,999</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

The total employee benefits including pension contributions and national insurance of the key management personnel were £264,457 (2016: £222,742) incurred by 5 (2016: 5) employees.

The charity trustees were not paid or received any other benefits from employment with the charity in the year (2016: £nil). No charity trustee received payment for professional or other services supplied to the charity (2016: £nil).

Trustees’ expenses represent the payment or reimbursement of travel and subsistence costs £nil (2016: £nil).

Trustees’ expenses includes costs relating to attendance at meetings of the trustees. The costs shown in note 4 for trustees’ development, expenses & meeting costs also include costs relating to trustee meeting lunches, which are not direct trustee expenses relating to attendance at meetings of the trustees.

8. Staff numbers
The average number of employees (head count based on number of staff employed) during the year was as follows:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raising funds</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Research</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Information and support</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Awareness and education</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Support</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Governance</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12</strong></td>
<td><strong>9</strong></td>
</tr>
</tbody>
</table>

9. Related party transactions
There are no donations from related parties which are outside the normal course of business and no restricted donations from related parties.

Donated services include work by Touchline on the production of a Sarcoma UK report and hosting a supporter reception. Glyn Wilmshurst at Touchline, is a member of Sarcoma UK Board of Trustees.

10. Taxation
The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes.

11. Tangible fixed assets

<table>
<thead>
<tr>
<th></th>
<th>Fixtures and fittings £</th>
<th>Computer equipment £</th>
<th>Total £</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of valuation</td>
<td>13,947</td>
<td>19,992</td>
<td>33,939</td>
</tr>
<tr>
<td>Additions in the year</td>
<td>-</td>
<td>1,307</td>
<td>1,307</td>
</tr>
<tr>
<td>At the end of the year</td>
<td>13,947</td>
<td>21,299</td>
<td>35,246</td>
</tr>
</tbody>
</table>

Depreciation

<table>
<thead>
<tr>
<th></th>
<th>At the start of the year</th>
<th>Charge for the year</th>
<th>At the end of the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost of valuation</td>
<td>5,999</td>
<td>12,294</td>
<td>18,293</td>
</tr>
<tr>
<td>Charge for the year</td>
<td>2,859</td>
<td>3,866</td>
<td>6,725</td>
</tr>
<tr>
<td>At the end of the year</td>
<td>8,858</td>
<td>16,160</td>
<td>25,018</td>
</tr>
</tbody>
</table>

Net book value at the end of the year 5,089 5,139 10,228

At the start of the year 7,948 7,698 15,646

All of the above assets are used for charitable purposes.

12. Debtors

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other debtors</td>
<td>18,294</td>
<td>16,498</td>
</tr>
<tr>
<td>Prepayments</td>
<td>102,149</td>
<td>80,250</td>
</tr>
<tr>
<td>Accrued income</td>
<td>77,839</td>
<td>154,166</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>198,282</strong></td>
<td><strong>250,923</strong></td>
</tr>
</tbody>
</table>

13. Creditors: amounts falling due within one year

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors</td>
<td>27,811</td>
<td>27,688</td>
</tr>
<tr>
<td>Taxation and social security</td>
<td>12,636</td>
<td>11,947</td>
</tr>
<tr>
<td>Other creditors</td>
<td>380</td>
<td>300</td>
</tr>
<tr>
<td>Accruals</td>
<td>18,653</td>
<td>93,812</td>
</tr>
<tr>
<td>Grants payable</td>
<td>493,197</td>
<td>286,183</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>552,597</strong></td>
<td><strong>419,930</strong></td>
</tr>
</tbody>
</table>
14. Creditors: amounts falling due after one year

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants payable</td>
<td>329,543</td>
<td>163,859</td>
</tr>
<tr>
<td></td>
<td>329,543</td>
<td>163,859</td>
</tr>
</tbody>
</table>

15a. Analysis of net assets between funds (current year)

<table>
<thead>
<tr>
<th>General</th>
<th>Designated</th>
<th>Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Tangible fixed assets</td>
<td>2,692</td>
<td>-</td>
<td>7,536</td>
</tr>
<tr>
<td>Net current assets</td>
<td>442,423</td>
<td>829,543</td>
<td>10</td>
</tr>
<tr>
<td>Long term liabilities</td>
<td>-</td>
<td>(329,543)</td>
<td>-</td>
</tr>
<tr>
<td>Net assets at 31 March 2017</td>
<td>445,115</td>
<td>500,000</td>
<td>7,546</td>
</tr>
</tbody>
</table>

15b. Analysis of net assets between funds (prior year)

<table>
<thead>
<tr>
<th>General</th>
<th>Designated</th>
<th>Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Tangible fixed assets</td>
<td>2,802</td>
<td>-</td>
<td>12,844</td>
</tr>
<tr>
<td>Net current assets</td>
<td>538,536</td>
<td>563,859</td>
<td>26,211</td>
</tr>
<tr>
<td>Long term liabilities</td>
<td>-</td>
<td>(163,859)</td>
<td>-</td>
</tr>
<tr>
<td>Net assets at 31 March 2016</td>
<td>541,338</td>
<td>400,000</td>
<td>39,055</td>
</tr>
</tbody>
</table>

16a. Movements in funds (current year)

<table>
<thead>
<tr>
<th>At 1 April 2016</th>
<th>Incoming resources &amp; gains</th>
<th>Outgoing resources &amp; losses</th>
<th>Transfers</th>
<th>At 31 March 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Restricted funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sarcoma Trust</td>
<td>10</td>
<td>-</td>
<td>-</td>
<td>10</td>
</tr>
<tr>
<td>Infrastructure development</td>
<td>12,843</td>
<td>(5,307)</td>
<td>-</td>
<td>7,536</td>
</tr>
<tr>
<td>Research</td>
<td>26,202</td>
<td>250,379</td>
<td>(276,581)</td>
<td>-</td>
</tr>
<tr>
<td>Information and support</td>
<td>-</td>
<td>750</td>
<td>(750)</td>
<td>-</td>
</tr>
<tr>
<td>Total restricted funds</td>
<td>39,055</td>
<td>251,129</td>
<td>(282,638)</td>
<td>7,546</td>
</tr>
<tr>
<td>Unrestricted funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research designated funds</td>
<td>400,000</td>
<td>(214,208)</td>
<td>314,208</td>
<td>500,000</td>
</tr>
<tr>
<td>General funds</td>
<td>541,338</td>
<td>1,117,885</td>
<td>(699,900)</td>
<td>445,115</td>
</tr>
<tr>
<td>Total unrestricted funds</td>
<td>941,338</td>
<td>1,117,885</td>
<td>(1,114,108)</td>
<td>-</td>
</tr>
<tr>
<td>Total funds</td>
<td>980,393</td>
<td>1,369,014</td>
<td>(1,396,746)</td>
<td>952,661</td>
</tr>
</tbody>
</table>

16b. Movements in funds (prior year)

<table>
<thead>
<tr>
<th>At 1 April 2015</th>
<th>Incoming resources &amp; gains</th>
<th>Outgoing resources &amp; losses</th>
<th>Transfers</th>
<th>At 31 March 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Restricted funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sarcoma Trust</td>
<td>10</td>
<td>-</td>
<td>-</td>
<td>10</td>
</tr>
<tr>
<td>Infrastructure development</td>
<td>69,101</td>
<td>(56,258)</td>
<td>12,843</td>
<td>-</td>
</tr>
<tr>
<td>Research</td>
<td>-</td>
<td>79,481</td>
<td>(53,279)</td>
<td>26,202</td>
</tr>
<tr>
<td>Awareness and education</td>
<td>-</td>
<td>10,000</td>
<td>(10,000)</td>
<td>-</td>
</tr>
<tr>
<td>Information and support</td>
<td>-</td>
<td>16,500</td>
<td>(16,500)</td>
<td>-</td>
</tr>
<tr>
<td>Total restricted funds</td>
<td>69,111</td>
<td>105,981</td>
<td>(136,037)</td>
<td>39,055</td>
</tr>
<tr>
<td>Unrestricted funds:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research designated funds</td>
<td>335,493</td>
<td>(267,159)</td>
<td>331,666</td>
<td>400,000</td>
</tr>
<tr>
<td>General funds</td>
<td>467,865</td>
<td>1,096,517</td>
<td>(691,378)</td>
<td>541,338</td>
</tr>
<tr>
<td>Total unrestricted funds</td>
<td>803,358</td>
<td>1,096,517</td>
<td>(958,537)</td>
<td>-</td>
</tr>
<tr>
<td>Total funds</td>
<td>872,469</td>
<td>1,202,498</td>
<td>(1,094,574)</td>
<td>980,393</td>
</tr>
</tbody>
</table>
Purposes of restricted funds:

**Sarcoma Trust**
These funds represent the amounts retained within the Sarcoma Trust after becoming a linked charity with Sarcoma UK.

**Infrastructure Development**
Expenditure against the fund relates to depreciation charges for the year, on assets purchased to develop the infrastructure of Sarcoma UK.

**Research**
These funds are to be used specifically towards research grants, as requested by the donor.

**Awareness and Education**
These funds are to be used specifically towards raising awareness and improving standards of treatment and care, as requested by the donor.

**Information and Support**
These funds are to be used specifically towards the provision of support and information for the sarcoma community, as requested by the donor.

Purposes of designated funds:

**Research**
These funds represent those designated by the trustees, towards research grants in 2017/18.

18. **Analysis of cash and cash equivalents**

<table>
<thead>
<tr>
<th>At 1 April 2016</th>
<th>Cash flows at 31 March 2017</th>
<th>Other changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td><strong>Cash at bank and in hand</strong></td>
<td>991,949</td>
<td>324,572</td>
</tr>
<tr>
<td><strong>Notice deposits (less than three months)</strong></td>
<td>100,862</td>
<td>992</td>
</tr>
<tr>
<td><strong>Net assets at the end of the year</strong></td>
<td>1,092,811</td>
<td>325,564</td>
</tr>
</tbody>
</table>

19. **Operating lease commitments**
The charity’s total future minimum lease payments under non-cancellable operating leases is as follows for each of the following periods:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Less than one year</td>
<td>16,985</td>
<td>16,049</td>
<td>473</td>
</tr>
<tr>
<td>16,985</td>
<td>16,049</td>
<td>473</td>
<td>411</td>
</tr>
</tbody>
</table>

20. **Legal status of the charity**
The charity is a company limited by guarantee and has no share capital. The liability of each member in the event of winding up is limited to £1.