

Company number: 7487432
Charity number: 1139869
Charity number Scotland: SCO44260



Sarcoma UK
Annual Report and Accounts
For the Year Ended 31 March 2024

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Chair of Trustees' Statement

As the new chair of Sarcoma UK, I am honoured and excited to present our Annual Report and Accounts for the year ending March 2024. It is with great pride that I have witnessed our charity's continued growth, expanded reach, increased investment, and amplified impact in the fight against sarcoma.

The devastating impact of sarcoma on individuals and families is something I understand all too well. Its impact is compounded as this rare and complex cancer often goes unrecognised and misdiagnosed, leading to late diagnoses, limited treatment options, and poorer outcomes compared to many other cancers.

In the thirteen years since our establishment, Sarcoma UK has made significant strides in addressing these challenges. We are now over halfway through our 5 year "Tackling Sarcoma Together" strategy, making substantial progress towards our ambitious goals to diagnose sarcoma earlier, ensure patients have better experiences and live longer lives with less long-term effects.

Key achievements from the past year include:

- A record-breaking £1.53 million investment in sarcoma research, including leveraged funds from partners
- Enhanced support for emerging sarcoma researchers
- A 30% increase in new users of our Support Line
- Substantial expansion of information resources for patients and healthcare professionals
- Strengthened advocacy efforts on behalf of sarcoma patients and their families

While these accomplishments are noteworthy, we recognise that there is still much work to be done. For example, we currently engage with only a fraction of the families affected by sarcoma who could benefit from our support. To combat this, our GROW project, launched last year, aims to significantly increase awareness of our services among those diagnosed with sarcoma. Although we've made good progress, we remain committed to reaching every individual affected by this disease.

On behalf of Sarcoma UK's Board of Trustees, I am proud to present this Annual Report and Accounts. With an exciting year ahead and a dedicated team, we remain steadfast in our mission to improve the outcomes and experiences of everyone affected by sarcoma.

Together, we can make a difference in the lives of those impacted by this devastating disease.

Anjula Thompson

Chair of Trustees

Reference and Administrative Details

Company number	7487432 (Limited by guarantee in England and Wales)
Charity number	England and Wales (1139869) Scotland (SCO44260)
Registered office	17/18 Angel Gate, City Road, London, EC1V 2PT www.sarcoma.org.uk info@sarcoma.org.uk 0207 856 0445
Trustees	Trustees, who are also directors under company law, who served during the year and up to the date of this report being approved were as follows: Anjula Thompson (Chair from December 2023) Sharon Reid – Chair (term of office ended December 2023) Hristo Anastasov Dr Fiona Cowie Jamie Ford-Cordes Dr Sally Johnson Dr Aisha Miah Michael Parry Isla Robinson Alan Abraham (appointed October 2023) Duncan Buchanan (appointed December 2023) Gary Davison (appointed December 2023) Leyla Hayes (appointed October 2023) Matthew Treagus (appointed October 2023) Sarah Conneally (term of office ended June 2023) Johanne Vass (term of office ended June 2023) Louisa Nicoll (term of office ended December 2023) Rubinder (Ruby) Sangha (resigned July 2024)
Patron	Richard Whitehead MBE
Chief Executive	Richard Davidson
Bankers	CAF Bank Ltd, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JQ Lloyds TSB, National Clubs & Charities, PO Box 1000, BX1 1LY
Solicitors	Brahams Dutt Badrick French LLP, 24 Monument Street, London, EC3R 8AJ
Auditor	Sayer Vincent LLP, 110 Golden Lane, London, EC1Y 0TG

Objectives and Activities

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

Our vision

Where everyone affected by sarcoma cancer has the treatment, care and support they need.

Our mission

To ensure everyone affected by sarcoma receives the best treatment, care, information and support available and to create the treatments of the future.

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

- Drive awareness of sarcoma cancer.
- Find answers through funding sarcoma research.
- Provide information and support to anyone affected by sarcoma cancer.
- Campaign for better treatments and to improve standards of care.

Sarcoma facts and figures

1. Sarcomas are uncommon cancers that can affect any part of the body, on the inside or outside, including the muscle, bone, tendons, blood vessels and fatty tissues.
2. Fifteen people are diagnosed with sarcoma every day in the UK. That's about 5,300 people a year.
3. There are over 100 different sub-types of sarcoma.
4. A key symptom of sarcoma is a lump that gets bigger quickly.
5. Sarcoma diagnoses now make up about 1.4% of all cancer diagnoses in the UK.
6. Sarcomas account for about 11% of childhood cancers and about 14% of cancers in teenagers.
7. The majority of people are diagnosed when their sarcoma is about the size of a large tin of baked beans (10cm).
8. Sarcoma survival rates have been very gradually increasing over the last two decades in the UK. The five-year survival rate for sarcoma is 55%.

Fundraising practices

The last few years have necessitated a shift in our fundraising practices as we have sought to diversify our income channels and supporter engagement. We now have a much more balanced fundraising portfolio and stronger digital as well as longer term income streams.

For a charity of our size, we consider ourselves a leader in good fundraising models and we work hard to follow exemplary supporter-led engagement practices. We subscribe to the Fundraising Regulator's Code of Fundraising Practice and we are a member of a number of professional and sector-wide bodies. Our fundraisers are provided with relevant and appropriate training and support whilst they are employed by the charity.

We take safeguarding very seriously and we are especially careful and sensitive when dealing with vulnerable people, including (but not restricted to) those affected by cancer. We have a robust Adults at Risk policy and a designated Safeguarding Officer.

Supporter feedback is an important source of information about how our work impacts on them (and wider members of the public).

Engaging with our supporters, in person, on the telephone and via email, post and social media are essential ways to involve people in our work and progress. This work is only carried out by paid members of our team. To date, we have not employed any external organisations or professional fundraisers to fundraise on our behalf.

In the time period of this report, we are pleased to report that we received no complaints relating to our fundraising activities.

Achievements and Performance

Information and Support

We will equip and empower people affected by sarcoma

What we said we would do:

1. We will aim to reach everyone who is affected by sarcoma with our support and information, particularly those groups such as those from any ethnic minority community who we have failed to reach previously.
2. We will engage with people closer to the point of diagnosis.
3. We will support patients at every step of their sarcoma journey.

1. Reach everyone who is affected by sarcoma with our support and information

- This year we expanded and enhanced our information and support offering, launching new PIF TICK accredited print and digital resources shaped and driven by the needs of people affected by sarcoma, as well as operating for our first full year with two staff members on each Support Line shift.
- In total we sent out 22,766 information resources, representing a 75% increase on last year. Requests for information resources peaked in June ahead of Sarcoma Awareness Month, linked with the launch of our first Sarcoma Awareness Month pack for supporters and healthcare professionals.

- The Sarcoma UK Support Line saw a 30% increase in new people using the service. In total the team were in contact with 1077 individuals, through 5088 contacts. Double staffing shifts led to a 50% decrease in voicemails left while the line was busy.
- Our flagship information booklet 'Understanding Soft Tissue Sarcoma' was launched at the British Sarcoma Group conference, featuring an updated design, personal stories and more visual information. The resource was developed in collaboration with a team of healthcare professionals and patients.
- To broaden our reach across a wider range of people affected by sarcoma, we developed new webpages on rarer sarcoma subtypes including the four main types of rhabdomyosarcoma, solitary fibrous tumour, desmoplastic small round cell tumour, and endometrial stromal sarcoma. We also launched a new soft tissue sarcoma data hub on our website, which includes incidence, survival statistics, routes to diagnosis and deprivation.
- We improved the visibility of our video content, forming a partnership with YouTube Health, meaning our videos now feature on their new 'health content shelf' and show as being from an authoritative source. We timed this with the launch of a new educational animation video aimed at medical students to teach them about sarcoma.
- We launched an internal task and finish group called GROW (or Growing the Reach of Our Work) which looked at creating a benchmark of our current reach as well as identifying ways that we can grow our reach to healthcare professionals and ultimately patients and families. The group consulted widely and came up with a list of recommended actions which we are now taking forward through our business plan for 2024-25.

2. Engage with people closer to the point of diagnosis

- The Support Line received 118 direct referrals of people newly diagnosed, from a total of 9 sarcoma centers and support groups allowing us to contact people earlier in their sarcoma journey.
- For the second year in a row, pre-diagnosis came in the top three reasons for contact to the Support Line, along with diagnosis and treatments.
- We published a new website hub on genomic testing, which features pages on what genomic testing is, types of genomic tests, how it works, advantages and disadvantages, as well as real-life stories about people who have undergone genomic testing.

3. Support patients at every step of their sarcoma journey

- We continue to work with Sarcoma Support Groups across the UK, attending meetings and hosting a Support Group Leaders Day. This year 3 new Support Groups were established, including a group for parents who have a child that has been diagnosed with sarcoma.
- Sarcoma UK contributed to and supported the recommendations of a Healthcare Service Investigation Branch report into palliative and end of life care across England.
- We published a new palliative care hub on our website, providing practical information and signposting to support for anyone facing problems with advanced, progressive or life-limiting illness.
- We facilitated 48 internal opportunities for involvement with our patient involvement network members, and inducted 25 new members to the patient involvement network over the course of the year.

Research

We will support world-class research

What we said we would do:

1. We will fund and support the next generation of sarcoma researchers and encourage networking and collaboration.
2. We will combine our grant funding streams to increase flexibility and efficiency.
3. We will involve people affected by sarcoma in our research programme so that it is better informed by their experiences and priorities.
4. We will launch targeted calls for funding in priority areas of research.

1. Fund and support the next generation of sarcoma researchers

- We held the second annual in-person meeting of our PhD Student Network, featuring talks from senior sarcoma researchers and people affected by sarcoma, as well as giving the students the opportunity to meet and share progress on their own research projects.
- In 2023/24 we funded three new PhD studentship projects.

PhD Studentships awarded in 2023/24

Unravelling the Role of the Matrisome in the Growth and Spread of Leiomyosarcoma

Dr Darryl Overby, Imperial College London – PhD studentship

£129,979

This project aims to better understand the cancer cell ‘matrix’, a scaffold of cells providing support to the tissue. Although in healthy cells, the matrix provides signals to prevent uncontrolled growth of cells, in cancer, the matrix becomes disorganised, leading to cancer metastasis and drug resistance. By using a special device thinner than a human hair, the team aim to understand how the cancer cell matrix contributes to uncontrolled growth of cells in leiomyosarcoma. In the longer term, this research could allow clinicians to identify tailored treatments for individual patients.

Overcoming osteosarcoma chemoresistance by understanding and targeting cellular quiescence

Dr Lucia Cottone, University College London – PhD studentship

£129,795

Osteosarcoma is a common bone cancer in children and young adults, but sadly, patients often respond poorly to chemotherapy. The reason why osteosarcoma resists chemotherapy remains unclear, hindering the development of better treatments. This project aims to address this challenge by exploring the process of “quiescence,” where some osteosarcoma cells stop dividing and “go to sleep” during chemotherapy, only to “wake up” once the drug levels decrease. A PhD student will investigate these quiescent cells using advanced technologies and test drugs that could make them more sensitive to chemotherapy. Success in this research could lead to better identification of patients less likely to respond to current treatments and pave the way for new therapies, potentially improving outcomes and guiding future clinical trials for those affected by sarcoma.

This project was awarded the Sayako Grace Robinson PhD Studentship, awarded to one PhD research project every year in memory of Sayako Grace Robinson, who died of angiosarcoma in 2014.

Computational analysis of the tumour microenvironment of sarcomas of unmet clinical need for the identification of novel therapeutic strategies

Dr Dean Bryant, University of Southampton – PhD studentship

£114,182

Gastrointestinal stromal tumours (GISTs) are the most common type of sarcoma. GISTs include various cell types, including "normal" cells that communicate with the cancer cells. These interacting cells form the tumour microenvironment, which is important as it helps cancer cells grow and resist treatment. While other cancers have a well-understood microenvironment that informs patient outcomes and treatment strategies, this knowledge is lacking for GISTs. This project aims to fill that gap by using advanced technologies to analyse the GIST tumor microenvironment in detail. Experts in computer science and biology will utilize one of the world's most powerful supercomputers for this complex analysis. Additionally, a PhD student will be trained in this emerging field. The team hope the findings of this research will help other researchers predict which GIST patients will respond well to certain treatments, enabling more personalised and effective treatment options.

We are delighted to be co-funding this project with GIST Cancer UK.

- We brought in more formal processes to govern our Strategic Collaborations Fund, increasing the transparency and structure for researchers applying to us for support for collaborative research.
- Through this fund, we joined forces with the Grace Kelly Childhood Cancer Trust to support a project at the University of Birmingham looking into immunotherapy for childhood sarcomas and contributed to a £1million new collaborative research project using AI to improve sarcoma diagnosis.
- We renewed our collaboration with the Sarah Burkeman Trust for another year, with the Trust contributing £50,000 to one project funded through the Open Grant Round.
- We invited a costed-extension proposal for an existing sarcoma data grant led by Prof Sandra Strauss and funded jointly with the Bone Cancer Research Trust.
- We were delighted to receive £385,671 from the Medical Research Charities Early Career Researcher Support Fund to support sarcoma researchers at early stages of their careers.

Collaborative grants awarded in 2023/24

Deployment of AI for diagnosing and improving prognostication of sarcomas

Prof Adrienne Flanagan, University College London

£ 50,000

Early diagnosis is crucial for effective sarcoma treatment, but the complexity of over 100 subtypes and a shortage of pathologists make accurate diagnosis challenging, leading to delays and increased costs. Building on a grant awarded by Sarcoma UK in 2022, the team will develop a bespoke artificial intelligence (AI)-based network to help diagnose sarcoma, by suggesting relevant tests to confirm diagnoses. The algorithm can currently detect 15 soft tissue sarcomas, but the team aim to increase this to more than 50. They will scan two decades' worth of images, testing the AI tool by running prospective diagnoses through the model. Sarcoma UK's funding will pay technicians to retrieve, scan and analyse slides from the archives. If successful, the AI tool will enable quicker, more accurate diagnoses, reducing the time and resources needed, and allowing patients to access the correct treatment sooner. Additionally, the resulting image library will be a valuable resource for future research and training.

Sarcoma UK's commitment to this project forms part of a larger consortium of funding from others including UKRI, totalling over £600,000.

Investigating the capacity of invariant Natural Killer T cells to reactivate the anti-sarcoma immune response

Dr Carmela de Santo, University of Birmingham

£49,957

Immunotherapy has shown success in treating blood cancers but has been less effective against solid tumours like sarcoma. This is partly due to myeloid-derived suppressor cells (MDSCs), which inhibit the immune response in sarcomas. This project aims to overcome this challenge by activating key immune cells (called iNKT cells). These can in turn stop MDSCs from working, allowing the immune system to target and kill the sarcoma. The team will study the interaction between immune cells and sarcoma cells using real patient samples. The research will determine whether iNKT cells could make immunotherapy more effective in sarcoma patients. Building on promising results in adult trials, this work could lay the groundwork for early-phase clinical trials in children.

We are delighted to be co-funding this project with the Grace Kelly Childhood Cancer Trust. The two charities are making an equal contribution towards the overall project cost of £99,915.

Improving outcomes in sarcoma through analysis and interrogation of national cancer data

Dr Sandra Strauss, University College London

£112,271

This is an uplift to an existing project, analysing patient data to understand and ultimately improve sarcoma care in England. Better knowledge and understanding of how patients with sarcoma are treated within the NHS can help us identify variation in care and the need for improvement, as well as monitor progress. The first stage of the project produced information on incidence and survival for all soft tissue sarcoma subtypes and went on to complete similar analyses for subtypes of bone sarcoma. This new extension focusses on developing methods to classify sarcoma patient pathways and treatments. Starting with Ewing's sarcoma, the team will focus particularly on the order and timing of specialist multi-disciplinary team discussion and treatment modalities, and how this differs between specialist and non-specialist centres. This is an impactful piece of work which will provide a better understanding of how sarcomas are being diagnosed and treated in England, and in the longer term will provide the data to inform management guidelines and service commissioning for these patients.

This is a second uplift to an existing project which is funded in collaboration with the Bone Cancer Research Trust. We are pleased to continue our partnership with BCRT through funding this new costed extension, to which they have contributed £56,135 through a financial payment to Sarcoma UK.

2. Combine our grant funding streams

- We ran our largest Open Grant Round to date, offering over £1 million total funding to projects in any area of sarcoma research. Our Grant Review Panel recommended 15 out of the 25 applications received to the round as being of fundable quality.
- Funding was awarded to 3 PhD studentships (see above), 3 large grants and 4 small grants.

Small and large grants awarded in 2023/24

Deciphering chromosome instability dynamics in single-cell genomic evolution of gastrointestinal sarcoma tumours and its implications on TKI therapies

Dr Sarah McClelland, Bart's Cancer Institute

£50,000

Gastrointestinal stromal tumours (GISTs) account for around 20% of all sarcomas. They show high levels of 'chromosomal instability', a process where cancer cells lose or

rearrange genetic material as they divide and reproduce. The underlying causes of this instability remain unclear. This project aims to identify the 'Achilles heel' associated with chromosomal instability in GIST to develop more effective therapies. The team will use advanced technology to analyse DNA in individual cells, detecting small changes that occur as they grow into a population of cells. By applying this method to GIST for the first time, they hope to uncover why certain cellular processes don't work as they should. Providing key answers as to how and why GISTs change their genomes, the research could lead to more accurate subtype diagnosis, new prognostic markers, and more personalized treatment options for GIST patients, ultimately improving outcomes and guiding further sarcoma research.

We are delighted to be co-funding this project with GIST Cancer UK.

Investigating the Potential of the Heme Oxygenase-1 (HO-1) Inhibitor Tin Mesoporphyrin as an Effective Immunotherapy for Osteosarcoma Pulmonary Metastasis

Dr Agi Grigoriadis, King's College London

£50,000

Osteosarcoma is one of the most common types of bone cancer, often affecting children and young adults. Sadly, outcomes can be poor, especially when it has spread to the lungs. Cancer cells can hijack key immune cells called TAMs, which can make chemotherapy less effective. Previous research has shown that in osteosarcoma, TAMs produce a substance called Heme-Oxygenase 1, which makes the immune system less effective. But a drug called SnMP, usually used for neonatal jaundice, can block HO-1 and potentially reactivate immune cells to work as they should. The team on this project will investigate how SnMP reactivates immune cells, and whether combining SnMP and chemotherapy could be an effective treatment for people whose osteosarcoma has spread to the lungs. If successful, this could advance SnMP to clinical trials as a novel option for patients.

We are delighted to be funding this project through a generous donation from the Sarah Burkeman Trust.

Reassurance or anxiety - how does the intensity of monitoring for recurrent sarcoma impact patients' quality of life and survival?

Dr Laura Magill, Birmingham Centre for Observational and Prospective Studies (BiCOPS).

£49,853

Following surgical treatment for sarcoma, patients undergo follow-up scans to check whether the cancer has grown back or spread to other parts of the body. If the cancer has returned, it is often monitored for a while and further treatment may be offered. It is unclear how frequently scans should be done after surgery to maximise outcome and quality of life, and scans can cause anxiety for patients. In this study, following surgery patients will be allocated or can choose either high or lower intensity follow-up over five years. The team will use questionnaires to monitor wellbeing over time and will then compare quality of life and survival between groups. This will allow a comparison of outcomes when patients have control over their follow-up plans versus when it is determined for them. This project will help optimise sarcoma follow-up to improve patients' quality of life, survival outcomes, quality of care, reduce anxiety and distress and lower costs for patients and the NHS.

This project is the Roger Wilson Award for 2023/24, awarded to one clinical project every year in recognition of Sarcoma UK's founder's commitment to the charity.

Characterisation and modelling of the tumour immune microenvironment in liposarcomas

Dr Zoe Walters, University of Southampton

£149,827

Liposarcoma (LPS) is the most common soft tissue sarcoma, but current treatments like surgery, chemotherapy, and radiotherapy have limited effectiveness. LPS tumour cells can evade detection by inactivating the immune system, and while immunotherapy reactivates the immune response, only a minority of LPS patients benefit from it. This may be in part due to a lack of understanding about how normal cells interact with cancer cells in LPS. Currently, laboratory models only include tumour cells, making it impossible to study the interaction between the two. This project will develop a new model of LPS that includes both cancer and healthy immune cells to study their interactions. The team will profile the immune landscape of LPS tumours from patient samples and create models that mirror these interactions, allowing them to assess responses to immunotherapies. By providing a platform to test patient response to treatment, this research could lead to more personalized treatments and improved clinical trial strategies for LPS patients.

Cell surface proteomic profiling to guide precision immuno-oncology in leiomyosarcoma

Dr Paul Huang, Institute of Cancer Research

£150,000

Leiomyosarcoma is a common subtype of soft tissue sarcoma, but sadly standard treatments often fail to provide long-term benefits. While immunotherapy has shown success in other cancers, it has only helped a small number of leiomyosarcoma patients in clinical trials. This project aims to explore whether immunotherapy can be more effective for leiomyosarcoma by analysing the specific targets on the surface of cancer cells that immunotherapy drugs recognize. The research team will use an 'organ-on-chip' device to mimic how leiomyosarcoma and drugs interact in the body. By testing different combinations and sequences of immunotherapy drugs on both lab-grown cells and real tumour samples, they hope to identify effective treatment strategies. The findings could lead to better understanding of immunotherapy drug targets in leiomyosarcoma, ultimately improving care and outcomes for these patients.

Understanding what helps and hinders survivors of childhood sarcoma to be physically active: qualitative research to inform intervention development

Dr Morven Brown, University of Newcastle

£49,746

Children, teenagers and young adult (CTYA) sarcoma survivors are less physically active than those who have not had cancer, but often also less active than those with different cancer types. There is a lack of support available to these patients. The team on this project will speak to CTYA sarcoma survivors to understand the barriers they face, understand the support they need, and identify techniques to increase their engagement in physical activity. This will inform the development of an intervention which aims to support and improve physical activity levels. An evidence-based physical activity intervention designed for young sarcoma survivors will improve their physical activity levels and therefore improve physical and psychological wellbeing. This will help reduce poor health and protect their heart health for young sarcoma survivors.

Phenotypic characterisation of the immune microenvironment to define mechanisms of responsiveness to immunotherapy in Kaposi Sarcoma

Dr David Pinato, Imperial College London

£149,417

Kaposi sarcoma (KS) is a rare form of skin cancer which can occur in people with HIV. Up to 15% of patients do not respond to HIV treatment alone and require chemotherapy to keep this cancer at bay. But sadly, chemotherapy cannot cure KS and can only manage the cancer for a short while with severe side effects. This project aims to explore immunotherapy, specifically a drug called dostarlimab, as a safer and better alternative for these patients. The team are running a clinical trial where immunotherapy is administered, and tumour samples are collected before and after and tested in the laboratory to investigate if there are certain features which may help us understand which patients may benefit from immunotherapy. The team aim to improve outcomes for patients with KS, and understand who responds best to immunotherapy to personalise treatments to each patient.

3. *Involve people affected by sarcoma in our research programme*

- We continue to involve people affected by sarcoma in all major research initiatives, which have recently included input in both our Research Strategy Committee and Grant Review Panel meetings and inviting patient advocates to present on their experiences at our joint symposium with the Bone Cancer Research Trust.
- We have trained 5 new lay reviewers to join our research funding rounds this year, bringing the total number of active lay review network members to 29. We also welcomed a new lay member, Claire Lupton, to our Grant Review Panel.
- We facilitated new external patient involvement opportunities, including feeding into an application to a major research funder and assisting with setting up a patient involvement panel at the University of Southampton. Network members have also begun working with the surgical team in Birmingham looking at pre-operative psychological support.

4. *Launch targeted calls for funding*

- Our targeted funding call in 2023/24 focused on research projects into ultra-rare sarcoma subtypes. With an available budget of £300,000, three of the five applications brought to the round were deemed fundable by the panel and two were awarded funding.

Ultra-rare sarcoma grants awarded in 2023/24

A comprehensive molecular atlas of epithelioid sarcoma for applications in precision medicine

Dr Paul Huang, Institute of Cancer Research

£149,990

Epithelioid sarcoma is an ultra-rare sarcoma that impacts young adults. Sadly they are very challenging to treat and there are few targeted therapies available, meaning outcomes are often poor. In this project, the team will aim to understand the biology of why epithelioid sarcomas often don't respond to treatment, bringing together leading scientists in the UK, Germany and France. They will conduct analysis on samples to define biomarkers and candidate drug targets, develop more accurate molecular diagnostic tools, and understand the role of the immune system for these cancers and whether immunotherapies have potential. If successful, this project will result in new future treatments for EPS patients, generate a knowledge bank of biological data for the research community, and provide tools for doctors to tailor the most appropriate therapy for individual patients.

Identifying and inhibiting the oncogenic effects of endometrial stromal sarcoma fusion proteins

Prof Richard Jenner, University College London

£149,973

Endometrial stromal sarcoma (ESS) is diagnosed in 30-60 women a year in the UK. Sadly, outcomes can be poor because we do not understand the molecular changes that cause this cancer type. Previous research by the team has found that a fusion protein called JAZF1-SUZ12 causes ESS. In this project, the team will research whether it does this by preventing immune cells from killing endometrial stromal cells. They will also determine whether the fusion proteins found in high-grade ESS have the same effect, or whether they do other things to cells that explain why they cause more severe disease. Finally, they will test whether drugs that inhibit an important enzyme can prevent the damaging effects of fusion proteins. The team hope that this research will lead to new treatments directly targeting the effects of ESS fusion proteins being tested in patients in the future.

5. Work more closely with the sarcoma research community

- Our Research Strategy Committee continued to advise the charity on the direction of our research programme, determining the focus of targeted funding calls, reviewing our collaborations process, and feeding back on our mid-stage research strategy review.
- We worked with colleagues at LifeArc to explore how sarcoma research could be best positioned to capitalise on a new £100m childhood cancer translational challenge which LifeArc will launch in the coming months. We also attended a James Lind Alliance Funders Meeting to stimulate research into agreed JLA priorities for childhood cancers.
- We held scoping calls with members of the sarcoma and diagnostic research communities to define the scope of our collaborative diagnosis funding call with the Bone Cancer Research Trust.
- We welcomed Prof Dan Tennant, Dr Magdalena Meissner, Dr Mahbub Ahmed, and Dr Nischalan Pillay as new scientific members to our Grant Review Panel to replace those who had reached the end of their term.
- We awarded £14,886 to five workshops and meetings via our Research Workshop Scheme. The scheme aims to encourage networking and collaboration within the sarcoma research community, and this year supported workshops across a broad range of research areas including childhood sarcomas, clinical trials, and subtype-specific work.

Dr Zoe Walters, University of Southampton

Advancing novel therapeutic targets for paediatric soft tissue sarcomas (pSTS), £3,000

Dr Aisha Miah, Royal Marsden Hospital

Development of UK Hypo-Fractionated Radiotherapy Trial for extremity and truncal soft tissue sarcomas, £2,886

Prof Tze Min Wah and Prof Dan Stark, University of Leeds

2nd UK Interventional Radiology Workshop for the management of Desmoid Fibromatosis (DF), £3,000

Dr Abigail Evans, EuroEwing Consortium, University College London

EEC Network Meeting: Planning the next ES trials, £3,000

Dr Paul Huang, Institute of Cancer Research

Leiomyosarcoma Research UK Priorities Workshop, £3,000

Policy

We will build strong and productive relations with healthcare professionals

What we said we would do:

1. We will collaborate with healthcare professionals to engage with the National Institute for Health and Care Excellence (around guidelines, appraisal of new drugs and to improve delays to diagnosis).
2. We will facilitate networking and collaboration among healthcare professionals to encourage the sharing of best practice and service improvement ideas.

1. Collaborate with healthcare professionals

- The Tricia Moate award was given this year to Olivia Trott, Sarcoma Clinical Nurse Specialist from the Southwest Peninsula sarcoma team.
- Sarcoma UK sponsored 15 Health care professionals to attend the BSG (British Sarcoma Group) conference in 2024 to promote wider engagement with healthcare and research professionals and to broaden cross-team collaboration.
- Sarcoma UK had a number of poster presentations and oral presentations at the BSG conference, highlighting the work we are doing in research, support, patient information, and policy.

2. Facilitate networking and collaboration among healthcare professionals

- We supported a series of regional sarcoma Clinical Nurse Specialist catchups, with one of the team attending the groups in the North, London and Southwest.
- Members of the team also attended the EMSOS conference in Brussels, the EORTC conference in Cyprus and the SPAGN and New Horizons GIST conferences in Dublin.
- We continued to work closely with the Chair of the Sarcoma Advisory Groups (SAGs) to shape the agenda and support meetings of the SAG Chairs' Group about delivery issues and best practice, and have continued to work with the SAGs to progress our projects on genomic testing and diagnostic mapping.

Public Affairs

We will work together with the sarcoma community to achieve earlier, accurate diagnosis

What we said we would do:

1. We will improve the quantity and quality of education on sarcoma for healthcare professionals.
2. We will work to improve referral pathways and improve quick access to scans.
3. We will influence UK governments, the NHS and other policymakers to improve how sarcoma is diagnosed.
4. We will prioritise research into the earlier diagnosis of sarcoma.

1. Improve the quantity and quality of education on sarcoma

- We published a new animation video aimed at medical students to teach them about sarcoma. The video, which has been watched 797 times, aims to help to reduce the knowledge gap that healthcare professionals can experience due to sarcoma not appearing on the medical school curriculum.
- We worked with University of Nottingham to produce and promote an e-learning module for physiotherapists on their role in spotting the signs and symptoms of some sarcomas, and how they can help move the patient along the diagnostic pathway within primary care. The module has been undertaken by 1,179 individuals based in the UK.

- The Sarcoma UK Induction package has been shared with 68 individuals newly working in the sarcoma field.
- Members of the team presented to GP trainees training at the University of Canterbury, to the Boehringer Ingelheim staff team, and at the Frimley Health 'Cancer Care across boundaries' webinar session.

2. Improve referral pathways and quick access to scans

- We worked with the Sarcoma Advisory Group Chairs to develop UK-wide maps and supporting information on sarcoma specialist centres and satellite centres. We gathered information on treatment centres for surgery, radiotherapy, and chemotherapy as well as captured data on existing diagnostic routes to specialist centres across the four nations, to better inform patients about their care pathways.
- The Early Diagnosis Steering Group established working groups to help specialist centres focus on referred patients that are at a higher risk of having a sarcoma. The groups aim to develop a national standard for radiology referrals to prevent over-referrals to specialist centres of patients that do not have sarcomas, and to standardise the criteria that GPs use to make referrals.

3. Influence UK governments, the NHS and other policy makers

- For Teenage & Young Adult Cancer Awareness Month, we held drop-in events in the UK and Scottish Parliaments that focused on the need to improve outcomes for young people with sarcoma. We were joined by young people personally affected by sarcoma at both events and spoke to 80 MPs and MSPs.
- We worked with the MP Gerald Jones to raise the issue of sarcoma at Prime Minister's Questions in July. The Deputy Prime Minister agreed to his request for a meeting and the Health Minister met with a family affected by sarcoma to discuss issues in sarcoma care and the need for greater investment in research and new treatments.
- Sarcoma UK collaborated as part of the Specialist Cancer Charity Group of eleven charities on a Citizen Juries project to look at specific issues relating to the care of patients, cancer policy and delivery during 2024.
- We undertook a new project to build a picture of access and barriers to access to genomic testing for sarcoma patients across the UK. Gathering evidence from sarcoma patients and family members, Specialist Sarcoma Centres, and government and NHS leaders in the four nations, we identified the actions that are needed to make sure that there is equitable access for patients to gain from this technology.

4. Prioritise research into early diagnosis of sarcoma

- We began working with the Bone Cancer Research Trust to launch a collaborative funding call for research into early diagnosis to run in 2024-25. Discussions were held with members of the research community to finalise the scope of the call, and we held a joint Improving Sarcoma Diagnosis Research symposium with 80 members of the research and clinical community to raise awareness of this call and inform its scope.
- One of our collaborative research grants also focused on improving the diagnosis of sarcoma. Deployment of AI for diagnosing and improving prognostication of sarcomas (Prof Adrienne Flanagan, University College London). The £50,000 contribution from Sarcoma UK helped the project team to leverage wider funding of over £1million.

Public Awareness

Increase public awareness of sarcoma through higher profile and targeted campaigns.

What we said we would do:

1. Deliver an engaging and awareness raising Sarcoma Awareness Month.
2. Carry out a digital audit with Rally, the online advertising and digital marketing agency.
3. Increase presence with media publications.
4. Deliver a Sarcoma UK Awards Ceremony, a celebration of talent, success, and achievement.

Highlights of the year included:

Sarcoma awareness month

In July, we held our third Sarcoma Awareness Month. with the 'Does Size Matter?' campaign. The campaign focused on the fundamental aspects of sarcoma and the individuals it affects, providing a bold and exciting approach to raise public awareness.

Alongside raising awareness, the campaign aimed to provide further education about sarcoma, directing audiences to supportive digital material and the Support Line. Social media posts highlighted key symptoms, while PR activity in print and digital media featured credible voices of authority from the medical profession.

The 'Does Size Matter?' campaign achieved outstanding outcomes across key social media platforms, generating a reach of almost five million, and driving a 46.6% surge in website traffic. Positive feedback was seen across multiple channels, with notable highlights including TommyInnit's announcement on Twitter that he had become a Celebrity Ambassador for Sarcoma UK, reaching over 1.5 million people, and Jake Quickenden's appearance on the Lorraine show on ITV, demonstrating how to check the body for lumps to a potential audience of 500,000.

Rally digital audit

We carried out a digital audit with Rally. The Digital Communications Manager has outlined a two-year plan to enhance existing digital practices, drive growth, increase awareness and reach and design a robust organisational framework for digital. We continue to implement Phase 1 of the Digital Plan based on those recommendations from the Rally digital audit.

Ambassadors

Sarcoma UK welcomed Graeme Park as our newest Sarcoma UK Celebrity Ambassador. Graeme is a British house music DJ and is widely credited as one of the original founders of the UK's rave/club scene, notably as a leading figure of The Hacienda club in Manchester. Graeme's son Oliver died of sarcoma earlier this year, aged just 18, and he is determined to do all he can to raise funds and awareness.

Research Comms

We had some great research comms output, with the PhD students 'Don't rush challenge', announcing breakthroughs in sarcoma data, being part of NHS Digital's data webinar series, announcing our LifeArc collaboration and funding of three new diagnosis research projects, and press releasing our collaboration with RareCan.

Media Coverage

Sarcoma UK has experienced a fantastic period of increased media exposure over the past year, with a significant rise in both national and regional press coverage. Some of the key highlights include:

- Extensive coverage around the London Marathon 2023, with over 200 regional news stories featuring Sarcoma UK ambassador Lloyd Scott's fundraising efforts, as well as national coverage in outlets like The Daily Mail, The Independent, and BBC News.
- Similar national and regional coverage for Sarcoma UK ambassador Jake Quickenden's participation in the London Marathon, reaching over 200 regional news stories and features in publications like OK Magazine and The Sun.
- 50 news articles in regional press following Sarcoma UK's Teenagers and Young Adults focused parliamentary events, spanning from Portsmouth to Glasgow, including a feature in the Scottish national tabloid The Daily Record.
- Coverage for the launch of Sarcoma UK's "measuring and tracking a lump" resource, which was picked up by regional and Scottish national media.
- High-profile media appearances by ambassadors like Jake Quickenden on ITV's Lorraine and London Live, as well as Sarcoma UK supporter stories featured in outlets like the Southern Daily Echo, Asian Voice, and Welsh broadcaster S4C.
- The announcement of a new celebrity ambassador, YouTube star TommyInnit, received over 1.5 million views on Twitter and led to discussions with the BBC Gaming Team.
- From December to early February, 40 media appearances, including coverage of Sarcoma UK's Shining Star awards, a fundraiser named Sam Sheppard, and 11-year-old Mia Shore's impressive £12,000 fundraising challenge.
- Sarcoma UK issued several strategic press releases, including calls for earlier diagnosis and better care for sarcoma patients, as well as statements reacting to relevant news events like King Charles III's cancer diagnosis.

The Shining Star Awards

Sarcoma UK held its inaugural awards ceremony, 'The Shining Stars,' in November 2023 at 10 Downing Street. It was a wonderful opportunity for the sarcoma community to unite and celebrate talent, success, and achievement. Minister for Cancer Services Will Quince MP sponsored the event, and our celebrity ambassadors were present to announce the winners. The awards generated media coverage, and following their success, we plan to hold the ceremony again in 2024/25.

Overall, Sarcoma UK has seen a significant increase in both proactive and reactive media coverage over the past year, raising crucial awareness about sarcoma and the charity's work. The communications team expects this momentum to continue as they collaborate closely with internal teams to identify more news opportunities and promote the charity's campaigns, research, and support services.

Fundraising

Ensure we have the funds to support our priorities.

What we said we would do:

1. Raise at least £3,200,000.
2. Grow our challenge events portfolio.
3. Childhood cancer collaboration with Leukaemia UK and Brain Tumour Research.

Highlights of the year included:

- The London Marathon remains our flagship fundraising event, with a team of 125 runners raising over £500,000 in the April 2023 marathon.
- We introduced three new virtual events, Step into Spring, Walk For, and Turn the Page which successfully generated both funds and new supporters for the charity.
- Our annual summer event, previously known as the Big Picnic, was rebranded as Cuppa & Cake. It proved highly popular among community fundraisers, leading us to make it a year-round event with active promotion during the summer.
- Our Charity of the Year partnership with Santa in the City raised over £11,000, with 60 runners participating across both evenings.
- Our partnership with David Wilson Homes concluded this year, with staff fundraising efforts collectively raising over £50,000.
- We continued our partnership with Franklin Templeton, including a charity golf day.
- From the sale of TommyInnit's book and podcast, we received £184,000. We are thrilled that Tommy has accepted our invitation to become an ambassador.
- Our annual Christmas Carol Concert at St Giles in the Field Church was a great success, attracting a large audience and featuring special guests, including West End stars and notable TV personalities.
- Off The Kerb, alongside our ambassador Angela Barnes, hosted a sellout comedy evening at the Brighton Dome. The event, featuring acts such as Suzi Ruffell, Adam Hills, Jack Dee, and Romesh Ranganathan, raised £19,000.
- In September 2023, 46 supporters participated in the National Three Peaks Challenge in memory of Gaz Emmerson, raising over £67,000.
- Chancellor Jeremy Hunt hosted an event for Sarcoma UK at the Treasury, highlighting the need for an increased focus on ultra rare sarcomas.
- In September, we launched our We3Can collaboration with Brain Tumour Research and Leukaemia UK. As a collective, the three charities represent 78% of all cancer in children and this partnership aims to raise funds for vital research.
- Sarcoma UK participated in the Big Give Christmas Challenge, raising over £40,000.
- We are grateful for the continued support from Gwen Owen Robinson. Her annual contributions have significantly advanced sarcoma research, enabling eight students to undertake PhD projects through the Sayako Grace Robinson PhD Studentship programme.
- We expanded our regional fundraising efforts by hiring a Community Fundraising Officer in the North.
- Group funds continue to be key supporters of Sarcoma UK.
- Community fundraising remained strong, with numerous supporters hosting their own events.
- We renewed our collaboration with the Sarah Burkeman Trust for another year, receiving £50,000 for a project funded through the Sarcoma UK Open Grant Round.
- Sarcoma UK was awarded £385,671 from the Medical Research Council (MRC) under the UK Government Post Covid Recovery Medical Research Charity Support Fund, providing crucial support for early career researchers.

Operations and Resources

What we said we would do:

1. Create a strong, stable organisation with good governance, systems and processes.
2. Ensure that we have a positive, skilled team with appropriate training and development.
3. Focus on equality, making our services accessible to all people with sarcoma, with no one left behind.

1. Create a strong, stable organisation with good governance, systems and processes

- In October and December 2023, we welcomed four new trustees to Sarcoma UK. These new trustees will enhance our governance and contribute to a more diverse and representative leadership team.
- We reviewed and updated our website donation process, incorporating new features and payment methods, including QR codes. This update also improved marketing consent capture and gave the site a more modern look. We introduced an option for donors to cover associated fees, which has been met with very positive feedback.
- We increased our use of email automation for event stewardship, allowing participants to receive personalised and timely messages from the Fundraising team.
- We continued to enhance our data governance for all incoming data streams, leading to more accurate and up-to-date contact information for supporters on our database.
- We implemented real-time management and tracking of marketing consent, resulting in an immediate increase in contactable supporters. This system allows us to track where individuals choose to opt-in or out of Sarcoma UK content.
- A Direct Debit payment system has been implemented, which will be the preferred option for regular gifts going forward.

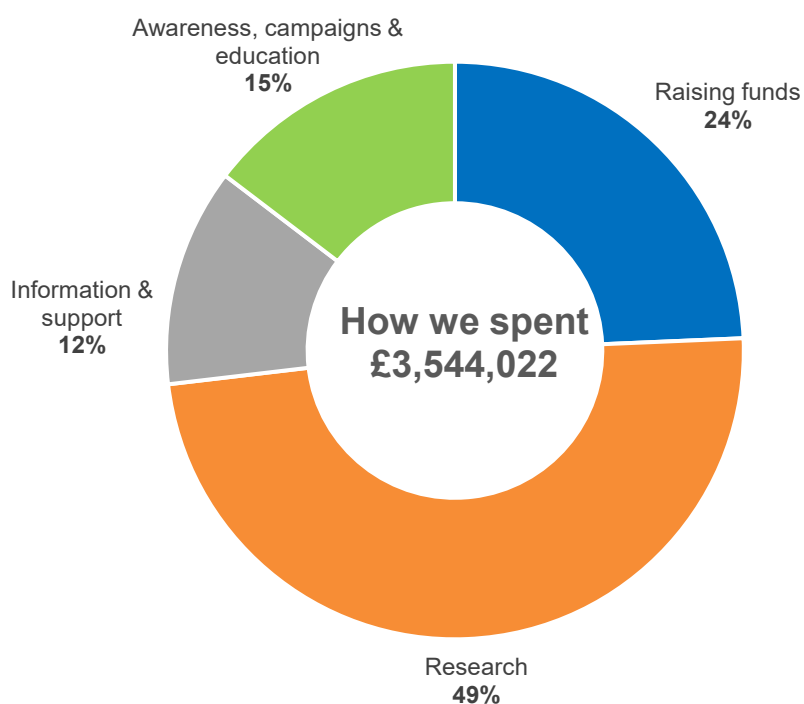
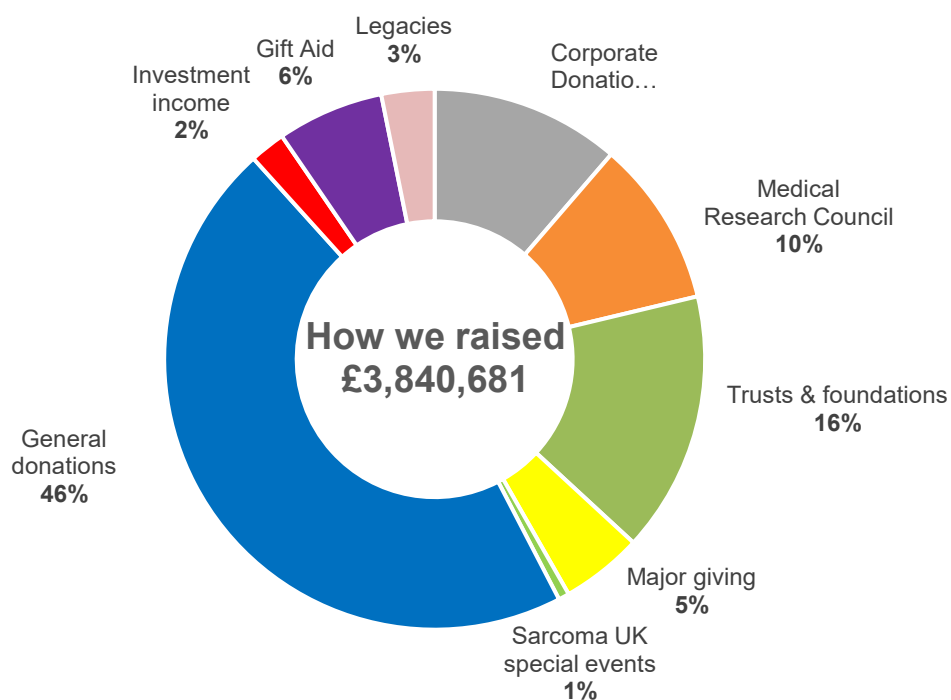
2. A positive, skilled team with appropriate training and development

- The Staff Wellbeing Group continued to enhance staff wellbeing through away days, team-building activities, and wellbeing surveys.
- Many team members participated in project management training. Due to the positive feedback received, we plan to extend this training to all staff in 2024/25 and develop an organisational project management process.
- Our Support Line Manager completed the Whitehall and Industry Group Women's Leadership course.
- We welcomed ten new permanent staff members to our team, enhancing our fundraising, communications, research, and policy and public affairs departments with their skills.

3. Focus on equality, making our services accessible to all people with sarcoma, with no one left behind

- The Equality, Diversity, and Inclusion (EDI) Working Group continued to explore ways for Sarcoma UK to engage with the broader sarcoma community and began implementing initial steps towards this goal. This year's main focus included:
 - Introducing an internal EDI Framework, which is now integrated into the decision-making process during the planning stages of new projects.
 - Welcoming four new members to the group in January 2024.
 - Attending a Cultural Awareness and Race Equality workshop, with insights shared with the EDI Group by the Sarcoma UK Patient Involvement Coordinator and CEO.
 - Initiating a review by the communications team to assess platforms, publications, and processes for compliance with accessibility standards.

How we raise and spend our money



The above activities include 11% support costs and 1% governance costs, which have been re-allocated to each activity (see notes to financial statements)

Future Plans

In the coming year we will continue on our path towards achieving the objectives outlined in our strategy to 2026.

Our long-term vision

All people with sarcoma will be diagnosed earlier, have better experiences and live longer lives with less long-term effects.

What this means for people affected by sarcoma



Patients will be diagnosed earlier
(at stage I or II)



Patients will live longer



Patients will have better experiences
of their sarcoma

To achieve this over the next three to five years we will focus on:

- | | | |
|--|--|--|
| <ul style="list-style-type: none">• Improving education on sarcoma for healthcare professionals.• Increasing awareness of sarcoma.• Improving referral and access to scans.• Prioritising research into the early diagnosis of sarcoma. | <ul style="list-style-type: none">• Ensuring patients have more treatment options.• Ensuring all care is given at specialist centres or involves sarcoma multi-disciplinary teams.• Supporting more targeted treatments.• Improving our understanding of sarcoma and how it develops. | <ul style="list-style-type: none">• Funding research to improve outcomes and quality of life.• Ensuring access to the most appropriate care and support.• Ensuring patients have more access to reliable, transparent information.• Enabling patients to have access to peer support. |
|--|--|--|

We have a detailed plan for 2024/25 including activities and projects aimed at helping us achieve the strategic objectives outlined in our *Tackling Sarcoma Together* organisational strategy. These objectives include:

1. Reach everyone who is affected by sarcoma with our support and information, particularly those groups such as those from any ethnic minority community who we have failed to reach previously.
2. Engage with people closer to the point of diagnosis.
3. Support patients at every step of their sarcoma journey.
4. Fund and support the next generation of sarcoma researchers and encourage networking and collaboration.
5. Combine our grant funding streams to increase flexibility and efficiency.
6. Involve people affected by sarcoma in our research programme so that it is better informed by their experiences and priorities.
7. Launch targeted calls for funding in priority areas of research.
8. Work more closely with the sarcoma research community to shape our research programme and priorities.
9. Collaborate with healthcare professionals to engage with the National Institute for Health and Care Excellence (around guidelines, appraisal of new drugs and to improve delays to diagnosis).
10. Facilitate networking and collaboration among healthcare professionals to encourage the sharing of best practice and service improvement ideas.
11. Improve the quantity and quality of education on sarcoma for healthcare professionals.
12. Improve referral pathways and improve quick access to scans.
13. Influence UK governments, the NHS and other policymakers to improve how sarcoma is diagnosed.
14. Prioritise research into the earlier diagnosis of sarcoma.
15. Create a strong, stable organisation with good governance, systems and processes.
16. Have a positive, skilled team with appropriate training and development.
17. Focus on equality, making our services accessible to all people with sarcoma, with no one left behind.
18. Increase public awareness of sarcoma through higher profile and targeted campaigns.
19. Raise the funds to support the priorities above.

Governance, Structure and Management

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 2023/24

Anjula Thompson (Chair from December 2023)

Anjula qualified as a Solicitor in 1993. She worked in private practice for 10 years and thereafter as a legal officer in the voluntary sector before taking up her current role, in 2005 as a Deputy District Judge, adjudicating in Civil and family cases. Anjula is the wife of Sarcoma UK trustee Dave Thompson who sadly passed away in 2016.

Sharon Reid – Chair (term of office ended December 2023)

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.

Sharon has taken on the role of advisor to the Board of Trustees, offering her expertise when required.

Hristo Anastasov

Hristo has valuable fundraising experience, participating in the Board of Cardiff Round Table charity for two years, where he was responsible for the distribution of funds, as well as supporting the charity in its efforts to raise more. In his work at Amazon, Hristo is in charge of managing the Pet Private Brand Business across Europe, as well as optimising internal ways of working. Hristo is also completing an MBA at one of the world's leading universities and is expanding his network both domestically and internationally. He hopes this will enable him to help Sarcoma UK foster more corporate and NGO partnerships.

Dr Fiona Cowie MBBS FRCR

Fiona Cowie is a Clinical Oncologist at the Beatson West of Scotland Cancer Centre, Glasgow, specialising in the management of adult patients with sarcomas, and children who need radiotherapy. She also undertakes the long term follow up of childhood cancer survivors. Fiona has been actively involved in managing people affected by sarcoma for over 20 years and has been constantly learning about the many different aspects of sarcoma. She has also been involved with paediatric cancer care, Young Adult cancer care and long term follow up after treatment. Fiona also has extensive medical panel and voluntary sector experience, including as a Duke of Edinburgh leader.

Jamie Ford-Cordes FCCA

Jamie has over 30 years experience working in the financial services environment, with the last 10 years as a financial control manager at Santander UK. He is a fully qualified FCCA accountant and has been for over 20 years. Jamie hopes both his work and personal experiences will help provide another perspective and help with the ongoing work being completed at Sarcoma UK.

Dr Sally Johnson

Sally is an experienced NHS GP and medical leader with expertise in clinical governance, quality improvement and the operationalisation of new clinical services. She has 12 years of Board experience as Medical Director and Chief Medical Officer of a number of healthcare organisations that provide NHS primary care, urgent care and private telemedicine. Sally has recent leadership experience in private digital healthcare and the global Covid vaccination programme. Sally has personal experience of sarcoma from when a close friend was diagnosed with sarcoma. After watching her friend's journey, Sally is keen to promote awareness of sarcoma amongst medical professionals to ensure early diagnosis and treatment.

Dr Aisha Miah

Aisha has spent more than a decade as Consultant Clinical Oncologist at the Sarcoma Unit, The Royal Marsden Hospital and is Honorary Faculty of the Division of Radiotherapy and Imaging at The Institute of Cancer Research, delivering on radiotherapy research studies for sarcoma patients. Aisha has also led on the delivery of education and training for Specialist Registrars in London and the South-East as Training Programme Director for Clinical Oncology. From a clinical perspective, she first joined the sarcoma community 10 years ago and quickly learnt the challenges in treating sarcoma and improving knowledge among health care professionals and the public. She represented Sarcoma UK as a member of the Morcellation Task and Finish Group to develop RCOG patient information leaflets and consent advice to raise awareness of uterine sarcomas.

Michael Parry

Michael is a Consultant Orthopaedic Surgeon at the Royal Orthopaedic Hospital specialising in orthopaedic oncology and primary and revision lower limb arthroplasty. His specialist interests are in orthopaedic oncology and lower limb arthroplasty, with a particular interest in the management of infected joint replacements.

Isla Robinson

Isla Robinson is a freelance Marketing Consultant (Director level) with over 15 years' experience of local and global marketing, including as a lead member of the team for Campari UK. Isla brings her professional expertise to the Board alongside first-hand experience of Ewing's sarcoma with which she was diagnosed in 2011. This was when Isla first discovered Sarcoma UK, and she has since found the charity to be a 'key source' of reliable information.

Alan Abraham (appointed October 2023)

Alan is a sarcoma clinical nurse specialist (CNS) based in Glasgow. He registered as a nurse in 2007 and has been working with sarcoma patients for a large part of the time since. He worked as a staff nurse on an orthopaedic ward where he would be involved in the immediate post-operative care of sarcoma patients who'd had tumour resections, then since 2019 as a CNS.

Duncan Buchanan (appointed December 2023)

Duncan has more than 30 years' experience as a solicitor in the City of London advising trustees of large pension schemes. He first became involved with Sarcoma UK during the pandemic when he provided pro bono advice to the charity on a fundraising initiative it was launching (20 for 20). Since then, Duncan has continued to provide pro bono advice to Sarcoma UK on other initiatives.

Gary Davison (appointed December 2023)

Gary is a retired chartered accountant and worked in the financial services sector for more than 30 years, most recently as European Financial Controller for Bernstein Autonomous LLP. For four years he also chaired the finance committee for a 400-pupil prep school. He hopes his financial experience can help with the financial oversight of Sarcoma UK. In 2018, Gary lost his wife to leiomyosarcoma. The family have been supporters of Sarcoma UK for some time.

Leyla Hayes (appointed October 2023)

Leyla has 20 years of experience working as a broadcast journalist and media professional. She started her career in the Latin American section of BBC World Service after studying Spanish and Portuguese. She then moved to the main newsroom and has worked as a television news reporter for the BBC, ITV and Channel 5 News, covering all types of stories including politics, crime, education and health.

Matthew Treagus (appointed October 2023)

Matthew is Chief Information Officer and Chief of Staff at Oxford Biomedica – a cell and gene therapy innovator. Matthew was a co-founder of AKQA, a pioneer of the digital industry. He is a retiring Partner at Baringa Partners LLP and has previously served as Interim CIO at Save the Children UK. Matthew lost his great friend Chris Martin to sarcoma in 2015. He has been supporting our fundraising efforts since then and joined the Board of Trustees in 2023.

Sarah Conneally (term of office ended June 2023)

Sarah is former Head of Events & Visits at 10 Downing Street, having worked for both David Cameron and Theresa May. 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.

Johanne Vass (term of office ended June 2023)

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.

Louisa Nicoll (term of office ended December 2023)

Louisa is a nurse with extensive experience in the delivery of oncological and specialist palliative care services. She is currently Ward Manager at a Sue Ryder hospice in Henley-on-Thames. Louisa's husband was diagnosed with high grade osteosarcoma in March 2016 and sadly died in August 2020.

Ruby Sangha MSc MBA (resigned July 2024)

Ruby has 17 years of experience across the healthcare and life science industry. From working in clinical trials, to helping new and emerging medical devices and digital health technologies access the NHS and meet the needs of patients and doctors. Ruby has also worked in the pharmaceutical industry, leading and establishing partnerships with start-ups. Ruby also works to help government investment programmes determine start-ups that meet the needs of the UK healthcare industry. She has also worked in management consulting in various projects across the pharmaceutical industry, government and NHS.

The Board continue to follow the Charity Governance Code, to manage and take responsibility for Trustee governance. The Board has two committees, the Nominations and Human Resources (NHR) Committee and the Governance, Risk and Finance (GRF) Committee. The Board have produced a detailed Charity Governance Code assessment document, which is reviewed by the GRF Committee and presented to the Board. As a result the following actions will be incorporated in 2023/24.

1. Formalised Vice Chair role and appointment to start in December 2023.
2. Review of the Sub Committee structure and membership.
3. Changes to the format and content of Board meetings including phasing and frequency.

Nominations and Human Resources Committee (NHR)

Responsible for HR and staffing issues, including staff remuneration. Responsibility for the renewal of tenure, recruitment and appointment of trustees is also delegated to the **NHR Committee** who make recommendations to the Board of Trustees.

Members during the year:

- Isla Robinson - Chair
- Louisa Nicoll (until December 2023)
- Ruby Sangha
- Hristo Anastasov
- Aisha Miah

Governance, Risk and Finance Committee (GRF)

Responsible for overseeing governance, organisational risk and working with the Senior Management Team on finance. The **GRF Committee** make recommendations to the Board of Trustees.

Members during the year:

- Jamie Ford-Cordes – Chair
- Anjula Thompson (until December 2023)
- Sally Johnson
- Matthew Treagus

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 Nomination and Human Resources 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 consisted of:

- Chief Executive
- Director of Finance and Resources
- Director of Fundraising and Communications
- Director of Research, Policy and Support

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 NHR 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 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 Grant Review Panel; sarcoma support group leaders; Sarcoma UK's Information Review Panel; Sarcoma UK's Medical Advisory Group, individuals and families who have provided their stories for use as case studies; everyone who has undertaken fundraising and awareness-raising in their communities; everyone who has set up information stands or cheering stations at events; and everyone who has supported Sarcoma UK at events and activities throughout the year. In accordance with accepted practice, no amounts are included in the financial statements to reflect the value of work undertaken by volunteers.

Risk management

To manage risk effectively, Sarcoma UK employs a comprehensive risk assessment model. This model identifies major strategic risks, evaluates their likelihood and impact, and outlines measures to mitigate them. The Senior Management Team and the Trustee Governance Risk and Finance Committee (GRF) regularly review the highest-priority risks and establish appropriate actions to address them.

Our risk assessment model categorises risks into the following areas:

- Financial
- Governance
- People
- Technology
- Charitable Activities
- Environmental and External Factors
- Law and Regulation
- Fundraising

The most significant risks identified during 2023/24 include:

1. High staff turnover and key staff departures.
2. Cyber threats.
3. The potential impact of the cost of living crisis, another pandemic, Brexit effects, and an economic downturn.

To address these risks, the following actions have been incorporated into our risk management strategy:

1. Staff Retention: Regularly review the cost of living crisis and the benefits offered to staff, and conduct periodic salary benchmarking exercises.
2. Cyber security: Achieve Cyber Essentials Plus certification to assess and enhance our cyber security measures, providing reassurance to stakeholders and informing our cyber security framework and disaster recovery plan.
3. Income Diversification: Invest in regional staff to diversify income channels and continue to review cost of living and inflation rates regularly.

The trustees are satisfied that appropriate systems are in place and further steps are planned to manage and mitigate these most significant risks.

Grant Making Policy

Sarcoma UK is a member of the Association of Medical Research Charities (AMRC), an organisation of the leading medical and health research charities in the UK. In accordance with AMRC best practices, Sarcoma UK is committed to ensuring the highest standards of accountability, balance, independence, rotation of expertise and impartiality in our research programme.

We work with our Research Strategy Committee in setting and working to a research strategy. Our funding decisions are made based on recommendations from our Grant Review Panel on the basis of the scientific quality of the studies proposed, and the relevance to people affected by sarcoma, while considering the amount of overall funding available. Assessment criteria is published openly on the charity's website.

We hold annual calls for proposals, which are open competition and publicised on our website and to the sarcoma research community. Applications submitted are subject to a preliminary triage of their eligibility. All applications which fall within scope for the call and for which the due diligence process has not identified any unacceptable issues will be considered. Eligible applications undergo a rigorous external review process by sarcoma research experts and people affected by sarcoma. All panel members and external peer reviewers adhere to our Principles of Peer Review Policy, as well as declaring conflicts of interest in line with our Conflicts of Interest Policy. Applicants are offered the opportunity to respond to comments from peer and lay reviewers before applications are discussed by our Grant Review Panel.

Our Grant Review Panel and Research Strategy Committee are made up of independent scientific experts as well as people with a personal connection to sarcoma. The Grant Review Panel considers all peer and lay reviews and responses and scores each application independently and anonymously. The panel then makes recommendations for funding to Sarcoma UK's Board of Trustees, who approve the final grants to be awarded. In accordance with our Conflict of Interest Policy for Grant Review Panel Members, members must absent themselves from any portion of a meeting where discussions involve a grant proposal to which they are connected. They may not participate in related decisions and, in certain cases, may not receive any associated documents.

All grant-holders submit regular progress reports each year and a final report at the end of the project. We keep in regular contact with our grant-holders to assess progress and impact throughout the lifetime of the project and beyond.

Further information: <https://sarcoma.org.uk/our-research/how-we-fund-research>.

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 2023/24, Sarcoma UK had collaborations with: the Association of Medical Research Charities (AMRC); BMJ Learning; Boom Foundation (Northern Ireland); British Sarcoma Group; The Bone Cancer Research Trust; Cancer 52; Specialist Cancer Charities Group, National Cancer Registry and Analysis Service (NCRAS), Welsh Cancer Intelligence and Surveillance Unit, Information Services Division of the NHS National Services Scotland, N. Ireland Cancer Registry, GIST Cancer UK; National Institute of Health and Care Excellence (NICE); National Sarcoma Forum (of specialist nurses); NHS England; Public Health England, the Sarah Burkeman Trust; Sarcoma Patients GlobalNet; the Scottish Sarcoma Network; the network of sarcoma specialist centres – bone and soft tissue – in England, Wales and Northern Ireland; Sarcoma Advisory Group (SAG) Chairs; the Children and Young People's Cancer Coalition; and our partners in the We3Can initiative.

Financial Review

Income

Sarcoma UK has made excellent progress against its objectives for the year, successfully raising £3,840,681, an increase of 33% from the previous year (2023: £2,889,367). This notable growth is primarily due to enhanced fundraising efforts throughout the year, and a grant from the UK Government Post-Covid Recovery Medical Research Charity Support Fund for the third consecutive year.

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

Expenditure

Total expenditure rose to £3,544,022 (2023: £2,896,051), representing a 22% increase on the previous year. This increase is primarily due to:

- Increasing research grants payable by £460,024.
- An increase in staff costs by £139,684, following new positions in the research team and fundraising, and a percentage increase in salaries to support staff with the cost of living.
- Office costs increased by £23,240 to account for an increase in desk spaces.
- Sarcoma information production, design and print increased by £15,979 following a new updated soft tissue booklet, educational animation video and a higher volume of booklet reprints.
- Sarcoma UK's contribution to the We3Can collaboration.

Sarcoma UK maintains rigorous financial oversight, utilising robust management and budgetary controls. We are committed to directing a significant portion of our resources toward charitable activities, with 76% of our total expenditure allocated to these efforts. We also focus on minimising fundraising costs. This year, for every £1 spent on fundraising, we raised £4.36, an improvement from the previous year, reflecting a substantial increase in income.

A surplus of £296,659 (2023: deficit £6,684) was made this year and increases total charity funds to £1,803,507 (2023: £1,506,848), of which £5,539 are restricted. The reserves policy is discussed below.

Reserves Policy

The Board of Trustees aim to maintain reserves at a level which equates to approximately six months of operational costs including budgeted salary, rent and support costs. This is approximately £802,000 for the forthcoming year.

Due to the generosity of our supporters and the outstanding performance of Sarcoma UK's fundraising team, the total funds of the charity at 31 March 2024 were £1,803,507 of which £5,539 are restricted. This leaves a balance of £1,797,968 as unrestricted funds. £16,684 of these funds are tied up as fixed assets leaving a balance of £1,781,284, which exceeds the level required by the reserves policy £802,000. Remaining funds of £979,284 will be applied to furthering our mission to ensure everyone affected by sarcoma receives the best treatment, care, information and support available and to create the treatments of the future.

The Board of Trustees plan to reduce reserves in line with the reserves policy by making additional investments in our charitable activities over the next few years, with a primary focus on the following strategic initiatives in 2024/25:

- Increasing research funding by over £300,000.
- Enhancing investment into the We3Can childhood cancer collaboration campaign.
- Conducting a comprehensive State of the Nation review.
- Commissioning a National Sarcoma Survey.
- Boosting investment in Sarcoma Awareness Month and digital communications, based on recommendations by the Rally digital audit.
- Providing training for Support Group Leaders.
- Supporting early diagnosis projects
- Expanding office space to support a new hybrid working model.
- Implementing recommendations from the GROW project to raise awareness of Sarcoma UK among those affected by sarcoma.

The Board of Trustees monitor reserves very carefully and regularly evaluate investment opportunities to ensure optimal use of funds. The reserves policy will be reviewed in 2025 to ensure it meets the charities 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 2024 was 18 (2023:13). 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 23 October 2024 and signed on their behalf by

Anjula Tompson – Chair of Trustees

Acknowledgements

Patron	Richard Whitehead MBE
Founder	Roger Wilson CBE
Celebrity Ambassadors	Jake Quickenden, Gavin Ramjaun, Sandra Dickinson, Mark Osmond, Angela Barnes and TommyInnit.
Ambassadors	Lesley Abraham, Shelagh Allison, Sarah Conneally, Zoe Conway, Jan Cornell, Maddie Cowey, Karen Delin, Dr Alison Dunlop, Andy Eckles, Mark Gould, Amelia Granville, Zoe Homer Emmerson, Prof Ian Judson, Gina Long, Steve Mayer, Louisa Nicoll, Leona O'Neill, Ian Randall, Glenys Stittle, Baroness Liz Sugg, Dr Rachel Taylor, Jasmine Thompson, Zoe Thompson, Jo Vass, Wendy Watkins, Sam Whittam, Dr Jeff White, Glyn Wilmshurst, Sheelagh Wilson and John and Sue Young.

Grant Review Panel

Dr Sam Behjati, Group Leader at the Wellcome Sanger Institute. Consultant Paediatric Oncologist, Addenbrooke's Hospital, Cambridge.

Dr Madeleine Adams, Consultant Paediatric Oncologist, Children's Hospital for Wales, Cardiff.

Dr Mahbubl (Mabs) Ahmed, Consultant Clinical Oncologist, UCL.

Prof Matthew Allen, Prof of Small Animal Surgery, University of Cambridge (Ad hoc member).

Professor Andrew Beggs, Professor of Cancer Genetics & Surgery, University of Birmingham.

Professor Susan Burchill, Professor of Adolescent and Paediatric Cancer Research, Leeds Institute of Cancer and Pathology, University of Leeds.

Dr Quentin Campbell-Hewson, Consultant Paediatric Oncologist, Great North Children's Hospital in Newcastle upon Tyne.

Dr Louise Carter, Senior Clinical Lecturer in Experimental Cancer Medicine, University of Manchester.

Julia Casimo, lay panel member.

Dr Will English, Lecturer in Medical Education, Norwich Medical School, University of East Anglia and Honorary Research Fellow in the Department of Oncology and Metabolism, University of Sheffield.

Mr Craig Gerrand, Consultant Orthopaedic Surgeon, Royal National Orthopaedic Hospital.

Professor Rebecca Gladdy, Associate Professor in the Department of Surgery, The University of Toronto and a Principal Investigator at the Lunenfeld-Tanenbaum Research Institute, Canada.

Dr Paul Huang, Team Leader, Division of Molecular Pathology, Institute of Cancer Research.

Becky Hughes, lay panel member.

Claire Lupton, Lay Member.

Dr Magdalena Meissner, Clinical Senior Lecturer, NCRI Sarcoma Group.

Dr Olivier Pardo, Team Leader in Division of Cancer, Imperial College London.

Dr Nischalan Pillay, Group Leader Sarcoma Biology and Genomics, UCL.

Dr Sophie Postel Vinay, Physician Scientist at the Drug Development Department and. U981 INSERM research unit, Gustave Roussy Cancer Centre, France.

Alasdair Punton, lay panel member.

Prof Daniel Tennant, Prof of Biochemistry, University of Birmingham.

Leanne Thorndyke, lay panel member.

Dr Zoë Walters, Associate Professor in TranSupport Lineational Epigenomics, University of Southampton.

The following individuals joined the Grant Review Panel on an ad-hoc basis for Sarcoma UK's Improving Sarcoma Diagnosis Research Round:

Dr Adam Dangoor, Consultant in Medical Oncology, Bristol Cancer Institute.

Dr Rob Turner, Consultant Clinical Oncologist, Leeds Teaching Hospital NHS Trust.

Research Strategy Committee

Professor Bernadette Brennan (chair), Consultant Paediatric Oncologist at the Royal Manchester Children's Hospital.

Dr Cristina Antonescu, Director, Bone and Soft Tissue Pathology, Memorial Support Lineoan Kettering Cancer Centre, New York.

Dr Sam Behjati, Group Leader at the Wellcome Sanger Institute. Consultant Paediatric Oncologist, Addenbrooke's Hospital, Cambridge.

Chris Copland, lay member.

Dr Fiona Cowie, Clinical Oncologist, Beatson West of Scotland Cancer Centre, Glasgow and Sarcoma UK Trustee.

Professor Rick Haas, nominated Professor of Radiotherapy with a focus on bone and soft tissue sarcomas, Leiden University, The Netherlands.

Professor Bernd Kasper, Medical oncologist and leads Mannheim Cancer Center (MCC), Mannheim University Medical Center, Germany.

Professor Heinrich Kovar, Head of the Molecular Biology of Solid Tumours group, St. Anna Children's Cancer Research Institute Austria.

Emma McCloskey, lay member.

Dr Michael Parry, Consultant Orthopaedic Surgeon, Royal Orthopaedic Hospital and Sarcoma UK Trustee.

Professor Fiona Thistlethwaite, Medical oncology consultant within the Experimental Cancer Medicines Team (ECMT) and Medical Director of the Christie Clinical Research Facility, Manchester.

Professor Gareth Veal, Professor of Cancer Pharmacology, University of Newcastle.

Supporters

Sarcoma UK is deeply grateful to all those who have supported us during the year.

Sarcoma UK could not exist without the kindness of our supporters who contribute to our progress in a wide variety of ways. While many people support the charity through financial donations, others contribute through volunteering, giving their time, energy, passion, and skills.

A huge thank you to all our supporters.

Opinion

We have audited the financial statements of Sarcoma UK (the 'charitable company') for the year ended 31 March 2024 which comprise the statement of financial activities, balance sheet, statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 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 2024 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 8 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

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on Sarcoma UK's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

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 contained within the annual report. 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. 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 course of 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 this gives rise to a material misstatement in the financial statements themselves. 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; and
- 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 directors were not entitled to prepare the financial statements in accordance with the small companies regime and 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

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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

Capability of the audit in detecting irregularities

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management, which included obtaining and reviewing supporting documentation, concerning the charity's policies and procedures relating to:
 - Identifying, evaluating, and complying with laws and regulations and whether they were aware of any instances of non-compliance;
 - Detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected, or alleged fraud;
 - The internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We inspected the minutes of meetings of those charged with governance.
- We obtained an understanding of the legal and regulatory framework that the charity operates in, focusing on those laws and regulations that had a material effect on the financial statements or that had a fundamental effect on the operations of the charity from our professional and sector experience.
- We communicated applicable laws and regulations throughout the audit team and remained alert to any indications of non-compliance throughout the audit.
- We reviewed any reports made to regulators.
- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations.
- We performed analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud.
- In addressing the risk of fraud through management override of controls, we tested

the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at: www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

Use of our report

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.

Noelia Serrano (Senior statutory auditor)
15 November 2024

for and on behalf of Sayer Vincent LLP, Statutory Auditor
110 Golden Lane, LONDON, EC1Y 0TG

Sayer Vincent LLP is eligible to act as auditor in terms of section 1212 of the Companies Act 2006.

Sarcoma UK

Statement of financial activities (incorporating an income and expenditure account)

For the year ended 31 March 2024

	Note	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
Income from:							
Donations and legacies	2	2,422,407	1,335,565	3,757,972	2,303,091	568,015	2,871,106
Investments		82,709	-	82,709	18,261	-	18,261
Total income		2,505,116	1,335,565	3,840,681	2,321,352	568,015	2,889,367
Expenditure on:							
Raising funds	3	861,973	-	861,973	772,935	-	772,935
Charitable activities							
Research	3	527,682	1,202,162	1,729,844	714,263	542,340	1,256,603
Information and support	3	304,573	128,701	433,274	358,000	6,373	364,373
Awareness, campaigns and education	3	506,528	12,403	518,931	486,373	15,767	502,140
Total expenditure		2,200,756	1,343,266	3,544,022	2,331,571	564,480	2,896,051
Net income / (expenditure) and net movement in funds for the year	5	304,360	(7,701)	296,659	(10,219)	3,535	(6,684)
Reconciliation of funds:							
Total funds brought forward		1,493,608	13,240	1,506,848	1,503,827	9,705	1,513,532
Total funds carried forward		1,797,968	5,539	1,803,507	1,493,608	13,240	1,506,848

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 15 to the financial statements.

Sarcoma UK

Balance sheet

Company no. 7487432

As at 31 March 2024

	Note	£	2024 £	£	2023 £
Fixed assets:					
Tangible assets	10		16,684		14,020
			16,684		14,020
Current assets:					
Debtors	11	582,104		590,166	
Short term deposits		416,903		110,878	
Cash and cash equivalents		4,807,105		4,331,906	
			5,806,112	5,032,950	
Liabilities:					
Creditors: amounts falling due within one year	12	1,796,134		1,701,685	
Net current assets			4,009,978		3,331,265
Total assets less current liabilities			4,026,662		3,345,285
Creditors: amounts falling due after one year	13		2,223,155		1,838,437
Total net assets	14		1,803,507		1,506,848
The funds of the charity:	15				
Restricted income funds			5,539		13,240
Unrestricted income funds:					
Designated funds		-		200,000	
General funds		1,797,968		1,293,608	
Total unrestricted funds			1,797,968		1,493,608
Total charity funds			1,803,507		1,506,848

Approved by the trustees on 23 October 2024 and signed on their behalf by Anjula Thompson

Anjula Thompson
Chair of Trustees

Sarcoma UK

Statement of cash flows

For the year ended 31 March 2024

	2024 £	£	2023 £	£
Cash flows from operating activities:				
Net income / (expenditure) for the reporting period (as per the statement of financial activities)	296,659		(6,684)	
Depreciation charges	6,671		4,699	
Sale of fixed assets	-		496	
Interest	(82,709)		(18,261)	
(Increase) in debtors	8,062		(63,611)	
Increase in creditors	479,167		686,035	
Net cash provided by operating activities		707,850		602,674
Cash flows from investing activities:				
Transferred to short term deposits	(306,024)		(1,345)	
Interest received	82,709		18,261	
Loss on disposal of fixed assets	377		536	
Purchase of fixed assets	(9,713)		(6,396)	
Net cash (used in) / provided by investing activities		(232,651)		11,056
Change in cash and cash equivalents in the year		475,199		613,730
Cash and cash equivalents at the beginning of the year		4,331,906		3,718,176
Cash and cash equivalents at the end of the year		4,807,105		4,331,906

Analysis of cash and cash equivalents

	At 1 April 2023 £	Cash flows £	As at 31 March 2024 £
Cash at bank and in hand	3,915,511	466,759	4,382,270
Notice deposits (less than three months)	416,395	8,440	424,835
Total cash and cash equivalents	4,331,906	475,199	4,807,105

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) - (Charities SORP FRS 102), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) 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.

Income from revenue grants, is recognised when the charity has entitlement to the funds, any performance conditions attached to the grants have been met, it is probable that the income will be received and the amount can be measured reliably and is not deferred.

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 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.

g) Interest receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank.

Notes to the financial statements

For the year ended 31 March 2024

1 Accounting policies (continued)

h) Fund accounting

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund.

Unrestricted funds are donations and other incoming resources received or generated for the charitable purposes.

Designated funds are unrestricted funds earmarked by the trustees for particular purposes.

i) Expenditure and irrecoverable VAT

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be 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) Grants payable

Grants payable are made to third parties in furtherance of the charity's objects. Single or multi-year grants are accounted for when either the recipient has a reasonable expectation that they will receive a grant and the trustees have agreed to pay the grant without condition, or the recipient has a reasonable expectation that they will receive a grant and that any condition attaching to the grant is outside of the control of the charity.

Provisions for grants are made when the intention to make a grant has been communicated to the recipient but there is uncertainty about either the timing of the grant or the amount of grant payable.

k) 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, database, IT 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:

<input type="checkbox"/> Raising funds	31%
<input type="checkbox"/> Research	13%
<input type="checkbox"/> Information and support	26%
<input type="checkbox"/> Awareness, campaigns and education	30%

l) 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.

Notes to the financial statements

For the year ended 31 March 2024

1 Accounting policies (continued)

m) 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

n) 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.

o) Cash at bank and in hand

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

p) 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.

q) 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 Income from donations and legacies

	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
Donations and gifts	2,299,363	1,335,565	3,634,928	2,271,615	568,015	2,839,631
Legacies	123,044	-	123,044	19,475	-	19,475
Donated goods and services	-	-	-	12,000	-	12,000
	<u>2,422,407</u>	<u>1,335,565</u>	<u>3,757,972</u>	<u>2,303,091</u>	<u>568,015</u>	<u>2,871,106</u>

Sarcoma UK

Notes to the financial statements

For the year ended 31 March 2024

3a Analysis of expenditure (current year)

	Charitable activities						2024 Total £	2023 Total £
	Cost of raising funds £	Research £	Information and support £	Awareness, campaigns and education £	Governance costs £	Support costs £		
Staff costs (Note 6)	330,174	145,591	259,231	219,214	26,357	212,496	1,193,063	1,053,379
Other staff costs	9,215	8,642	18,829	19,968	149	35,144	91,947	68,458
Research grants payable (Note 4)	-	1,496,857	-	-	-	-	1,496,857	1,036,833
Research support (development scheme)	-	16,473	-	-	-	-	16,473	10,853
Travel & subsistence	420	1,351	2,424	1,917	-	3	6,115	4,397
Fundraising fees	53,705	-	-	-	-	-	53,705	59,288
Fundraising materials	26,415	-	-	-	-	-	26,415	34,460
Events, participation & publicity costs	253,553	-	-	-	-	-	253,553	253,086
Fundraising appeals	6,202	-	-	-	-	-	6,202	3,964
Donor relationship management	4,208	-	-	-	-	-	4,208	5,776
Fundraising Collaborations (We3can)	29,000	-	-	-	-	-	29,000	-
PR & marketing	-	-	-	77,982	-	-	77,982	121,928
Support services	-	-	12,450	-	-	-	12,450	13,711
Awareness & campaigning projects	-	-	-	56,840	-	-	56,840	69,135
Information services	-	-	27,273	-	-	-	27,273	11,294
Office costs	-	-	-	-	-	106,553	106,553	83,313
Office communication costs	-	-	-	-	-	21,352	21,352	15,627
Membership subscriptions	14,072	2,895	51	9,222	2,026	-	28,266	25,404
Trustees development, expenses & meeting costs	-	-	-	-	9,814	-	9,814	3,907
Legal & professional	-	-	-	-	10,573	3,846	14,419	12,176
Insurance	-	-	-	-	-	2,845	2,845	2,931
Bank charges	-	-	-	-	-	1,642	1,642	895
Depreciation & Loss on Disposal	-	-	-	-	-	7,048	7,048	5,235
	726,964	1,671,809	320,258	385,143	48,919	390,929	3,544,022	2,896,051
Support costs	119,994	51,581	100,447	118,908	-	(390,929)	-	-
Governance costs	15,015	6,455	12,569	14,880	(48,919)	-	-	-
Total expenditure 2024	861,973	1,729,844	433,274	518,931	-	-	3,544,022	2,896,051

Notes to the financial statements

For the year ended 31 March 2024

3b Analysis of expenditure (previous year)

	Charitable activities				Governance costs	Support costs	2023 Total
	Cost of raising funds	Research	Information and support	Awareness, campaigns and education			
	£	£	£	£	£	£	£
Staff costs (Note 6)	261,788	131,481	221,246	230,935	22,176	185,753	1,053,379
Other staff costs	11,622	10,344	8,375	2,686	308	35,123	68,458
Research grants payable (Note 4)	-	1,036,833	-	-	-	-	1,036,833
Research support (development scheme)	-	10,853	-	-	-	-	10,853
Travel & subsistence	247	1,036	1,917	979	-	218	4,397
Fundraising fees	59,288	-	-	-	-	-	59,288
Fundraising materials	34,460	-	-	-	-	-	34,460
Events, participation & publicity costs	253,086	-	-	-	-	-	253,086
Fundraising appeals	3,964	-	-	-	-	-	3,964
Donor relationship management	5,776	-	-	-	-	-	5,776
PR & marketing	-	-	-	121,928	-	-	121,928
Support services	-	-	13,711	-	-	-	13,711
Awareness & campaigning projects	-	-	10,725	58,410	-	-	69,135
Information services	-	-	11,294	-	-	-	11,294
Office costs	-	-	-	-	-	83,313	83,313
Office communication costs	-	-	-	-	-	15,627	15,627
Membership subscriptions	20,558	2,672	49	49	2,076	-	25,404
Trustees development, expenses & meeting costs	-	-	-	-	3,907	-	3,907
Legal & professional	-	-	-	-	9,883	2,293	12,176
Insurance	-	-	-	-	-	2,931	2,931
Bank charges	-	-	-	-	-	895	895
Depreciation & Loss on Disposal	-	-	-	-	-	5,235	5,235
	650,789	1,193,219	267,317	414,987	38,350	331,388	2,896,051
Support costs	109,476	56,809	86,989	78,113	-	(331,388)	-
Governance costs	12,669	6,574	10,067	9,040	(38,350)	-	-
Total expenditure 2023	772,935	1,256,603	364,373	502,140	-	-	2,896,051

Notes to the financial statements

For the year ended 31 March 2024

4 Grant making

	2024 £	2025 £	2026 £	2027-31 £	2024 £	2023 £
Grants to institutions:						
University Hospital Sussex NHS Trust	-	-	-	-	-	9,591
University of Edinburgh	-	-	-	-	-	149,882
Newcastle upon Tyne University Hospitals NHS	-	-	-	-	-	149,839
Stipend Uplifts	-	-	-	-	-	21,054
Institute of Cancer Research	-	-	140,631	159,359	299,990	373,905
Imperial College London	-	48,308	91,482	139,606	279,396	149,998
University College London	-	124,847	145,524	171,668	442,039	307,131
University of Southampton	-	-	103,951	160,058	264,009	49,993
University of Birmingham	24,058	25,900	-	-	49,957	-
University of Newcastle	-	-	49,746	-	49,746	-
King's College London	-	-	50,000	-	50,000	-
BiCOPS	-	13,624	14,464	21,765	49,853	-
Barts Cancer Institute	-	50,000	-	-	50,000	-
					1,534,990	1,211,393
Sheffield University (Underspend)					-	(6,573)
University College London Hospitals NHS Foundation Trust (Underspend)					-	(8,082)
Royal National Orthopaedic Hospital (Underspend)					-	(9,850)
Institute of Cancer Research (Cancelled)					-	(148,455)
University College London (Underspend)					(1,252)	(1,599)
Institute of Cancer Research (Underspend)					(246)	-
University of Leeds (Underspend)					(516)	-
Imperial College London (Underspend)					(3)	-
University of Oxford (Underspend)					(3,284)	-
University of Birmingham (Underspend)					(3,858)	-
Royal Marsden (Underspend)					(28,974)	-
At the end of the year					1,496,857	1,036,833

Full details of grant making activities are disclosed on page 8-14 of the report of the trustees.

5 Net expenditure for the year

This is stated after charging / (crediting):

	2024 £	2023 £
Depreciation	6,671	4,699
Profit on disposal of fixed assets	377	536
Interest received	(82,709)	(18,261)
Operating lease rentals:		
Property	53,760	40,457
Auditor's remuneration (excluding VAT):		
Audit	10,560	8,225

Notes to the financial statements

For the year ended 31 March 2024

6 Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel

Staff costs were as follows:

	2024	2023
	£	£
Salaries and wages	1,037,133	915,889
Social security costs	109,700	97,014
Employer's contribution to defined contribution pension schemes	43,191	39,927
Accrued holiday pay	3,039	549
	1,193,063	1,053,379

The following number of employees received employee benefits (excluding employer pension costs and national insurance contributions) during the year

	2024	2023
	No.	No.
£100,001 - £110,000	1	1
£70,001 - £80,000	2	-
£60,001 - £70,000	-	2

The total employee benefits including pension contributions and national insurance of the key management personnel were £353,140 (2023: £331,637) incurred by 4 (2023: 4) employees.

Sarcoma UK spent £1,193,063 on staff costs, 66% of these staff costs were on those staff who support and directly drive awareness of sarcoma cancer, find answers through research, provide information and support to anyone affected by sarcoma cancer and campaign for better treatments and to improve standards of care. The remaining 34% was on staff who raise the funds required to carry out the above charitable activities.

The charity trustees were not paid or received any other benefits from employment with the charity in the year (2023: £nil). No charity trustee received payment for professional or other services supplied to the charity (2023: £nil).

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs totalling £4,821 (2023: £1,128) incurred by 9 (2023: 6) members relating to attendance at meetings of the trustees. The costs shown in note 3 for trustees' development, expenses and meeting costs also include costs relating to trustee meeting lunches, which are not direct trustee expenses relating to attendance at meetings of the trustees.

7 Staff numbers

The average monthly headcount of employees, analysed by activities was:

	2024	2023
	No.	No.
Raising funds	8	6
Research	2	2
Information and support	7	5
Awareness, campaigns and education	5	5
Support and governance (re-allocated to the above activities based on staff time)	5	5
	27	23

Total number of staff by headcount at 31 March 2024 was 30 (including 10 part-time).

8 Related party transactions

Sarcoma UK Trustees and close family personally donated and raised £12,966 (2023: £35,714). This includes money raised through challenge events.

9 Taxation

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

Notes to the financial statements

For the year ended 31 March 2024

10 Tangible fixed assets

	Fixtures and fittings £	Computer equipment £	Total £
Cost or valuation			
At the start of the year	29,520	53,802	83,322
Adjustment to previous year disposals	-	(5,343)	(5,343)
Additions in year	-	9,713	9,713
Disposals in year	-	(1,472)	(1,472)
At the end of the year	29,520	56,699	86,220
Depreciation			
At the start of the year	29,520	39,782	69,302
Adjustment to previous year disposals	-	(5,343)	(5,343)
Charge for the year	-	6,671	6,671
Disposals in year	-	(1,095)	(1,095)
At the end of the year	29,520	40,015	69,535
Net book value			
At the end of the year	-	16,684	16,684
At the start of the year	-	14,020	14,020

All of the above assets are used for charitable purposes.

11 Debtors

	2024 £	2023 £
Other debtors	9,450	9,450
Prepayments	373,844	336,597
Accrued income	165,203	244,119
Trade Debtors	33,607	-
	582,104	590,166

12 Creditors: amounts falling due within one year

	2024 £	2023 £
Trade creditors	155,713	156,110
Taxation and social security	27,612	23,855
Other creditors	7,710	6,806
Accruals	205,046	109,130
Deferred income	29,640	-
We3Can Collaboration	13,106	-
Grants payable	1,357,305	1,405,784
	1,796,134	1,701,685

13 Creditors: amounts falling due after one year

	2024 £	2023 £
Grants payable:		
1 - 2 years	1,270,408	1,102,730
2 - 5 years	952,748	735,707
	2,223,155	1,838,437

Notes to the financial statements

For the year ended 31 March 2024

14a Analysis of net assets between funds (current year)

	General unrestricted £	Restricted £	Total Funds £
Tangible fixed assets	16,684	-	16,684
Net current assets	4,004,439	5,539	4,009,978
Long term liabilities	(2,223,155)	-	(2,223,155)
Net assets at 31 March 2024	1,797,968	5,539	1,803,507

14b Analysis of net assets between funds (prior year)

	General unrestricted £	Designated £	Restricted £	Total funds £
Tangible fixed assets	14,020	-	-	14,020
Net current assets	3,118,025	200,000	13,240	3,331,265
Long term liabilities	(1,838,437)	-	-	(1,838,437)
Net assets at 31 March 2023	1,293,608	200,000	13,240	1,506,848

15a Movements in funds (current year)

	At 1 April 2023 £	Income and gains £	Expenditure and losses £	Transfers £	At 31 March 2024 £
Restricted funds:					
Sarcoma Trust	10	-	-	-	10
Research	-	1,205,077	(1,202,162)	-	2,914
Information and support	500	128,613	(128,701)	-	413
Awareness, campaigns and education	12,730	1,875	(12,403)	-	2,202
Total restricted funds	13,240	1,335,565	(1,343,266)	-	5,539
Unrestricted funds:					
<i>Designated funds:</i>					
Research	100,000	-	(100,000)	-	-
Information and support	100,000	-	(100,000)	-	-
Total designated funds	200,000	-	(200,000)	-	-
General funds	1,293,608	2,505,116	(2,000,756)	-	1,797,968
Total unrestricted funds	1,493,608	2,505,116	(2,200,756)	-	1,797,968
Total funds	1,506,848	3,840,681	(3,544,021)	-	1,803,507

15b Movements in funds (prior year)

	At 31 March 2022 £	Income and gains £	Expenditure and losses £	Transfers £	At 1 April 2023 £
Restricted funds:					
Sarcoma Trust	10	-	-	-	10
Research	-	542,340	(542,340)	-	-
Information and support	5,000	1,873	(6,373)	-	500
Awareness, campaigns and education	4,695	23,803	(15,767)	-	12,731
Total restricted funds	9,705	568,015	(564,480)	-	13,240
Unrestricted funds:					
<i>Designated funds:</i>					
Research	100,000	-	(100,000)	100,000	100,000
Information and support	100,000	-	(100,000)	100,000	100,000
Total designated funds	200,000	-	(200,000)	200,000	200,000
General funds	1,303,827	2,321,352	(2,131,571)	(200,000)	1,293,608
Total unrestricted funds	1,503,827	2,321,352	(2,331,571)	-	1,493,608
Total funds	1,513,532	2,889,367	(2,896,051)	-	1,506,848

Purposes of restricted funds:**Sarcoma Trust**

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

Research

These funds are to be used specifically towards research grants, 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.

Awareness, Campaigns and Education

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

16 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:

	Property 2024 £	2023 £	Equipment 2024 £	2023 £
Less than one year	46,680	13,440	168	1,678
	46,680	13,440	168	1,678

17 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.