



ANNUAL REPORT 2017-2018



**OVARIAN
CANCER
RESEARCH
FOUNDATION**

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FOREWORD FROM CHAIR



I am proud to present the Ovarian Cancer Research Foundation (OCRF) 2017-18 Annual Report, outlining the impact of our work over the last year. The focus of our myriad of activities are aligned to achieving our vision – *'Every woman, everywhere – free from the threat of ovarian cancer'*.

It has been an exciting year for the OCRF in many ways. True to our mission of *'funding innovative ovarian cancer research to save women's lives through early detection and personalised treatment'*, we committed research grants of \$2.8 million this year. This process was ably assisted by our newly enhanced Scientific Advisory Committee that includes international experts in the field of ovarian cancer research.

Recognising that collaboration is key, the OCRF has widened its scope of work to seek out diverse views and joint initiatives with other bodies working in the area of cancer research, a move warmly welcomed. In mid-November we will be holding our inaugural Ovarian Cancer Research Symposium, hosted by the Hudson Institute of Medical Research. The focus of the Symposium is ovarian cancer basic science, and it will bring the OCRF research community together to present their research, network and look for opportunities to collaborate.

We have a small, but highly talented OCRF team who together do whatever is necessary to achieve our vision and mission, regardless of role titles or job descriptions. Our CEO, Lucinda Nolan has done a first class job in leading the team, and building on the legacy and dedication of the two co-founders of the OCRF, and I thank her for her tireless efforts.

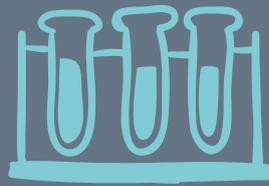
It has been a very busy year for our dedicated Committee of Management (COM) members who bring their individual skills and talents to the table, resulting in a critical diversity of thought at the COM level. Two much valued and long serving members of the COM, Paul Ashworth and Professor Martin Oehler, recently retired from the COM. On behalf of the OCRF I thank them for their passion, dedication and commitment over many years.

Needless to say, none of this is possible without the assistance of many – our generous corporate partners, sponsors and major donors, our community campaigners, our sub committee members, our Ambassadors, our researchers, and the many individuals who have been touched by this insidious disease in some way, and decide to do something about it. I thank each and every one of you.

I look forward to another very successful year in 2019, and hope that it brings us closer to the time when every woman, everywhere, is free from the threat of ovarian cancer.

OUR IMPACT

Approximately **\$2.8 million** in total funding awarded to grants



8 research projects funded and commenced

19 publications from our funded research projects



\$10 million+ in pro bono support

Our campaigns were seen or heard by over **11.1 million people**



New partnerships with other cancer research organisations will potentially grow ovarian cancer research funding by more than **\$500,000**

FOREWORD FROM CEO



The Ovarian Cancer Research Foundation has had another very successful year. Our vision remains a constant in all our activities: *Every woman, everywhere – free from the threat of ovarian cancer.*

As a fundraising charity for ovarian cancer research, our key goals in furthering our vision are to increase our revenue and to reduce costs. This year, we are proud to announce a 39% increase in income from the previous year, and a further 22% reduction in administrative costs.¹

Our financial performance has allowed us to explore and implement additional grant opportunities outside of our normal annual grant processes. This is a very exciting development for us and will hopefully help us to accelerate progress within the research field.

This last financial year, we have focused on *collaboration* as the key pillar to achieve accelerated results.

We have:

- initiated strategic partnerships with other cancer research agencies and funding bodies;
- engaged with Government and associated parliamentary groups;
- listened and acted on the needs of our research community;
- built the expertise and standing of our Scientific Advisory Committee through international and skilled representation;
- developed stronger ties and longer-term planning with our key corporate partners;
- included the voices of our key donors and fundraising supporters;
- and, most importantly, sought input from, and amplified the voice of our ovarian cancer community

Rather than seeking to achieve our vision and mission in a solitary manner, we understand that collaboration makes us stronger, smarter, and more effective. Speed is the essence. To save women's lives now, and in the future, we need the support of so many others to help pave the way.

A sincere thank you to all our partners, supporters and friends – we wouldn't be able to present such great results without the support of so many others. We look forward to another year of hard work, in the hope that over the next twelve months we continue to make huge strides in the ovarian cancer research space – an area that is, and has been, undervalued and underfunded.



Three new partnerships with the ACRF, NBCF and Cancer Council Victoria



Strong income growth: 39% YOY



Added independent, international expertise to advisory committee



Continued reduction of administrative costs: 22% YOY

¹ Administrative costs do not include set costs such as employee salaries and marketing costs

THE STATUS OF OVARIAN CANCER RESEARCH

OVARIAN CANCER OVERVIEW

Ovarian cancer is the most lethal of all gynaecological cancers, taking the lives of 140,000 women each year internationally, and confers a large health burden with more than 600,000 women throughout the world currently living with ovarian cancer.

In Australia alone, there will be an estimated 1,613 new cases of ovarian cancer diagnosed in 2018.² Tragically, this disease accounts for 5.1% of all female cancer deaths and its high mortality rate is attributed to late diagnosis and ineffective therapy. Every day, three women will die from this disease.

Unlike other cancers, there is no early detection test. The only way to definitively diagnose ovarian cancer is by taking a tissue sample during surgery. Every woman in the world is living with this risk, yet the issue remains undervalued and underfunded.

WHY IT IS SO LETHAL?

Ovarian cancer is known as the silent killer or the disease that whispers. The symptoms associated with the disease are vague and easily mistaken for common women's health issues – bloating, changes in appetite, pelvic or abdominal pain or pressure, and frequent urination – so they rarely set off alarm bells. This often results in delayed action addressing the complaints and ultimately in women being diagnosed when they are at the advanced stages of the disease, significantly reducing survival rates.

While other cancers can be diagnosed by effective screening at an early stage (e.g. cervical cancer by PAP smear or breast cancer by mammography), an early detection test for ovarian cancer does not exist.

Statistics indicate that just 45% of women diagnosed with ovarian cancer are likely to survive past five years whereas women with access to early detection of breast cancer have nearly doubled those survival rates. With no substantial improvement in ovarian cancer survival rates over the last two decades, the key to ovarian cancer survival lies in the development of better diagnostic methods. If diagnosed early, over 90% of ovarian cancer patients can be cured.

Raising awareness around ovarian cancer and its symptoms won't save lives. Early detection will. Viable research is the answer and early detection is the key.

OVARIAN CANCER RESEARCH STATUS

Over the past 10 years, the global medical community has begun pushing for a better understanding of ovarian cancer. We now have a greater appreciation of the heterogeneity of the disease and researchers are exploring the potential of multipronged screening strategies – genetics, biomarkers, ultrasound, and even cancer DNA surveillance. Ovarian cancer is now researched as a spectrum of diseases with different molecular and clinical characteristics. Researchers are also investigating how screening, prevention or treatments might be targeted to the specific cancer type.³

Treatment advances over the past two decades have led to significantly better outcomes for patients suffering from many other cancer types. Funding and community attention have been two of the most significant drivers. Unfortunately, ovarian cancer has seen slower progress due to a lack of funding. For example, over the last few years, federal funding for ovarian cancer research has been less than 2% of all government cancer research funding, even though it remains the most lethal of the gynaecological cancers.

² Cancer Australia Ovarian Cancer Statistics, July 2017.

³ Bridget. M. Kuehn, MSJ. The Hunt Continues for Early Ovarian Cancer Clues. *Journal of the American Medical Association*. July 4, 2017. Volume 318, Number 1.



THE NEED TO SHIFT THE STATISTICS - EARLY DETECTION TESTING ⁴

There are several reasons for the lack of an effective means of screening for ovarian cancer. As the scientific community continues to build their collective knowledge in these areas, progress towards early detection testing will become more rapid and the statistics around ovarian cancer patient survival will finally start to shift.

1. UNDERSTANDING THE ORIGINS OF THE DISEASE

Given ovarian cancer is heterogeneous and does not behave in the same way as most other types of cancer with regard to malignancy, research is still being undertaken to further our understanding of the characteristics of the disease. In the 1990s a group of researchers discovered “cancer stem cells” which were able to both self-renew and produce a new lineage of cells within a malignancy. One of the defining traits of these cells is that they do not uniformly produce biomarkers that can be used for broad screening, further limiting ovarian cancer detection methods.

2. ACCURACY OF TRADITIONAL BIOMARKER TESTING

For a cancer to be adequately detected, it must produce a detectable biomarker. The biomarker should be present in higher quantities in afflicted patients and must be detected to a high level of specificity to provide an accurate diagnosis. To date, the only ovarian cancer-associated biomarker is CA-125. However, the levels of CA-125 can be affected by oestrogen and other hormones, leading to many false positives. This prevents CA-125 from being an effective biomarker in women with no previous history of cancer. Other proteins are also elevated in ovarian cancer, but none has proven specific and sensitive enough to lead to an early detection breakthrough.

3. SHORTAGE OF FOLLOW-UP STUDIES

These challenges haven’t deterred scientists and researchers from trying to develop a screening or early detection test despite many setbacks faced along the way. In recent times there has been a renewed push, with groups of researchers coming together to share their collective genomic, epidemiological and clinical data to better understand the various forms of ovarian cancer, who is at risk of each of them, and what to do about it.

Over the last few years a large number of molecules with potential utility in ovarian cancer screening has been identified by international research groups. The actual implementation of such candidates as useful biomarkers for population screening purposes, however, is still pending. Indeed, there is an evident shortage of follow-up studies in which these markers have been validated in a large group of patients. This is probably due to the fact that, as ovarian cancer is usually diagnosed at a late stage, early stage ovarian cancer samples for those types of studies are limited.

⁴ Sumayya Ahmad. *Advances in Ovarian Cancer Screening*. Yale Journal of Biology and Medicine. March 2011 84(1): 47-49



OUR VISION

While there have been many advances in our understanding of the basic biology of ovarian cancers, we have been unable to meaningfully shift survivability rates of ovarian cancer sufferers.

Our vision remains steadfast:

Every woman, everywhere – free from the threat of Ovarian Cancer.

OUR MISSION

Our funding is directed to research studies that are focused on finding an early detection test, as well as research that explores individualised and targeted therapeutics that will extend women's lives.

Our mission is therefore:

Funding innovative ovarian cancer research to save women's lives through early detection and personalised treatment.

OUR OBJECTIVES

THE OCRF HAS THREE MAIN OBJECTIVES:

- 1. Develop and implement an early detection program for ovarian cancer that is non invasive, highly accurate and widely available.**
- 2. Improve the mortality rate, management and long-term survival of women with ovarian cancer.**
- 3. Attract and fund the most innovative and skilled researchers.**

We rely solely on the financial support of corporate Australia and the community. Once the costs for maintaining our small office are absorbed, and appropriate reserve funds are retained, funds are distributed as scientific grants to dedicated ovarian cancer researchers in Australian and New Zealand hospitals, universities and research institutes.

Due to the clarity of our mission and our core proposition – that research is the solution – the OCRF is in a strong, sustainable financial position and is one of the major funding bodies for ovarian cancer research in Australia.

OVARIAN CANCER STATISTICS⁵

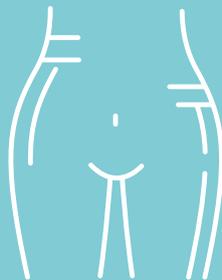
AUSTRALIAN STATISTICS



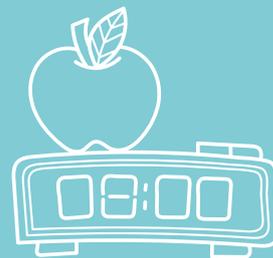
Over 1600 women are diagnosed every year



Ovarian Cancer is the 8th most commonly diagnosed cancer among females



There were an estimated 1,069 deaths from ovarian cancer in 2018



One woman dies every 8 hours from ovarian cancer

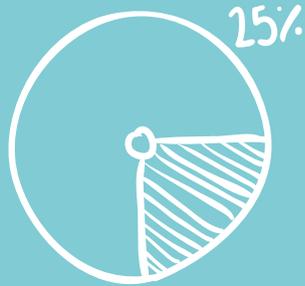


Ovarian Cancer is the 6th most common cause of death from cancer among females

⁵ <https://ovarian-cancer.canceraustralia.gov.au/statistics>

OVARIAN CANCER STATISTICS⁶

SURVIVORSHIP / SURVIVAL RATES

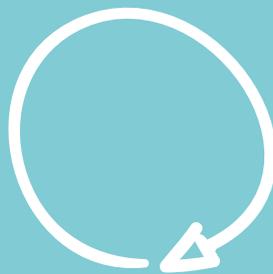


Only 20-25% of women diagnosed in advanced stages of ovarian cancer will survive beyond 5 years



While survival across all cancer has improved by 20% over the past 25 years, the relative survival for ovarian cancer has only improved by 10%

RECURRENCE



Over 70% of patients diagnosed with ovarian cancer will have a recurrence

FUNDING



Less than 2% of government funding for cancer research goes to ovarian cancer research



BRCA

Women who carry a mutation in their BRCA1 or BRCA2 genes have an approximately 20% greater risk of developing ovarian cancer than women with normal BRCA genes. However, less than 20% of all women with ovarian cancer have a genetic link to the disease.

⁶ Cancer Australia Ovarian Cancer Statistics, July 2017.



WHO WE ARE

The Ovarian Cancer Research Foundation is a charity that raises funds for the most promising and innovative ovarian cancer research. The OCRF was established in early 2000 and works tirelessly in its quest to improve the long-term survival rates of ovarian cancer sufferers. The most effective way to save women's lives is by an ovarian cancer cure. However, an early detection test for ovarian cancer would significantly shift the current survivability statistics. We will continue to raise vital research funds to improve the future for all women – and to enable the understanding and treatment of ovarian cancer to keep pace with better funded cancer research.

While the OCRF has significant community reach and remains a major funding body for ovarian cancer research, we are staffed by a very small team of five (FTE 4.4). By having a small and cross-skilled team, we continue to ensure that there is a sustainable and generous funding pool for our researchers and research institutes to access.

For several years, the OCRF has also funded the establishment, maintenance and growth of a tissue banking program providing high-quality ovarian cancer specimens for research. Research into ovarian cancer is hampered worldwide by the lack of samples from patients with early stage disease, as only about 10% of cancers are detected early. Consequently, most research groups are working with samples from patients with advanced disease. The issue with this is that identified tumour markers in the advanced stage samples commonly do not reflect early disease and cannot be validated with a large cohort of early stage cases.

Given each year we always receive more grant applications than we can potentially fund, we provide access to our Tissue Banks to any relevant or complementary research project – at no charge – whether or not they are funded by the OCRF.

OUR PERFORMANCE TO DATE

STRATEGIC PLANNING

This year, the Ovarian Cancer Research Foundation completed business plan activities ahead of schedule, leading to a successful finalisation of our current strategic and business plans. Our focus had been to foster and enhance our reputation as the leading national independent body solely dedicated to funding ovarian cancer research by prioritising leadership; governance; cost management; services; workplace environment; innovation and our citizenship. We are very proud of our achievements to date (which included the development and implementation of 31 discrete projects) but recognise the many challenges that still lay ahead.

We have already developed a new strategic plan – our OCRF Strategy on a Page – and we look forward to reporting our progress and achievements next year as we start to implement our key strategic shifts. Again, we will focus on the importance of collaboration where we will leverage from the strengths and expertise of others – to quicken progress towards our long-term goals – a world free from the threat of ovarian cancer.

WE HAVE HAD A HIGHLY SUCCESSFUL YEAR THAT SAW THE FINALISATION OF OUR OCRF STRATEGIC PLAN AND 2017/18 BUSINESS PLAN. SOME KEY HIGHLIGHTS INCLUDE:



LEADERSHIP

We further refined and diversified our communication style and channels to raise the volume for our ovarian cancer community.

We have developed and successfully implemented a brand campaign – which highlights how women are being left in the dark around the devastating impacts of an ovarian cancer diagnosis (#leftinthedark). With the discovery and development of an early detection test, we can all shine a light on this disease, and give women everywhere the peace of mind they deserve (#shinealight).



GOVERNANCE

We have continued to review the current and future skillset required for our governance and have recruited highly regarded and experienced members for both our Committee of Management and our Scientific Advisory Committee.

We have implemented a Marketing and Fundraising Advisory Committee, staffed with skilled practitioners and strategists, to ensure that we remain profitable and sustainable.

We reviewed and enhanced our governance framework and implemented a comprehensive operating manual and induction package.



COST MANAGEMENT

We implemented our cost savings strategy and achieved a 22% reduction in administrative costs over the 12 months (excluding wages and marketing costs).

We have identified further cost saving areas which have now been scoped and we will reap the returns during the next financial year.



SERVICES

We have increased and diversified our revenue streams by tailored and targeted marketing and fundraising strategies, leading to a 39% increase in income over the last year.

We have extended the time limits of our grant funding to successful applicants to cover up to three years rather than just one year. This will provide our researchers the reassurance of sustainable funding over the life of the project.



WORKPLACE ENVIRONMENT

We have undertaken numerous team-building activities and development opportunities – ensuring that the team is focused on the priorities and behaviours that matter.

We have refined a set of key performance metrics for the organisation and for the team – that enables us to benchmark our performance year on year.



INNOVATION

We have focused on driving a culture of innovation and continuous improvement – and seek to evaluate all key and substantive events and campaigns.

We have trialed new and exciting marketing and PR approaches to drive our return on investment.



CITIZENSHIP

We ensure that our focus and activities continue to provide value to the community.

We have developed some strong joint-funding partnerships with other key cancer research groups – including the Australian Cancer Research Foundation, the National Breast Cancer Foundation and Cancer Council Victoria.

We continue to leverage from other cancer groups in the field, using their skills and expertise to assist our own stakeholders, including the Cancer Council Victoria, their support hotline and their communication training program.

OCRF FUNDED RESEARCH: PROGRESS AND IMPACT



1. DR SHERRY WU, THE UNIVERSITY OF QUEENSLAND, SCHOOL OF BIOMEDICAL SCIENCES

Expected outcome: To develop strategies that will harness the power of the immune system to eliminate tumours and systematically reduce recurrence rates.

Dr Sherry Wu is a young researcher investigating a novel treatment for ovarian cancer. Touched by ovarian cancer patients she worked with at the University of Texas M.D. Anderson Cancer Center, who suffered from the disease's early recurrence, her approach is investigating the ability of the body's own immune system to recognise and attack cancer cells. By comparing ovarian cancer tumours containing high levels of T-cells – the immune system's defence army – with those with low levels, Dr Wu identified it could be non-coding RNAs (molecules that don't code for any proteins) playing a role in regulating T-cell activity. Dr Wu is now investigating whether combining this novel therapy of non-coding RNAs with existing immune therapies boosts the ability of T-cells to infiltrate and attack ovarian tumour cells.

To date: 2 journal articles published



2. DR SIMON CHU, HUDSON INSTITUTE OF MEDICAL RESEARCH

Expected outcome: To provide direct evidence that specific drugs will lead to better targeted co-treatment regimens.

Dr Simon Chu has been associated with the OCRF since the early 2000s and is in the third year of a three-year project. Dr Chu is one of the leading researchers internationally investigating a rare type of ovarian cancer dependent on hormones, called granulosa cell tumours. These tumours produce hormones and often the first indication a woman has this type of cancer is when abnormally high levels of oestrogen are detected. The cancer is often successfully treated, but can recur between five to 20 years later, when it becomes resistant to chemotherapy. Dr Chu is investigating better treatments for these types of ovarian cancers which may also be applicable to some of the more common ovarian cancers. His approach looks at the over-expression of a particular protein in ovarian cancer (XIAP) which appears to protect a tumour cell from dying. He is investigating the use of a combination therapy which inhibits the problematic protein XIAP before sensitising it to a further hit from another drug to cause cancer cell death. Dr Chu has personally been touched by ovarian cancer, which claimed the life of a close family member, and he draws on his expertise in both cancer research and endocrinology to fight this disease.

To date: 7 journal articles published



3. DR ANDREW N STEPHENS, HUDSON INSTITUTE OF MEDICAL RESEARCH

Expected outcome: Clinical trials of the 'Active Ratio Test' on 300 women with a high risk of developing ovarian cancer, leading to the establishment of the first biomarker screening test for early-stage ovarian cancer detection.

Dr Andrew Stephens is developing an early detection test for 'high grade serous' tumours, the most common form of ovarian cancer. Based on the measurement of a protein produced very early during the cancer's progression, the 'Active Ratio Test' (ART) can be performed using a cervical swab, with a blood test version also being developed. This research has now progressed to the clinical trial stage, with recruitment of 300 women starting in July 2018. The ART works by measuring ratio changes between different forms

of proteins, as an early indicator of the presence of ovarian cancer. This new study will demonstrate the clinical application of ART to detect early stage ovarian cancers and will also establish whether ART can detect pre-cancerous changes in women with a known genetic predisposition to developing these cancers.

To date: 5 journal articles published



4. DR KRISTINA WARTON, UNIVERSITY OF NEW SOUTH WALES, SCHOOL OF WOMEN'S AND CHILDREN'S HEALTH

Expected outcome: To develop an ovarian cancer diagnostic test using circulating tumor DNA.

Dr Kristina Warton is investigating a blood test for ovarian cancer based on circulating tumour DNA. Like other cancerous tumours, ovarian cancer tumours shed DNA which spills over into the bloodstream. The DNA is different to healthy DNA because it has mutations, however, it is difficult to detect because it is so fragmented. In addition, every patient has different mutations, making it challenging to identify a common thread behind the disease. However, methylation is a change that happens in cancer that seems to be quite consistent. Dr Warton is now using a cutting-edge scientific technique to amplify this circulating tumour DNA to detect methylation and developing this in a way so it is a sensitive enough test to be detected in blood. Her research will compare blood samples of women with and without ovarian cancer.

To date: 1 journal article published



5. DR CAROLINE FORD, UNIVERSITY OF NEW SOUTH WALES, SCHOOL OF WOMEN'S AND CHILDREN'S HEALTH

Expected outcome: To determine the potential and feasibility of targeting receptor molecules to prevent the spread of ovarian cancer.

This research has identified two genes called ROR1 and ROR2 that are linked to the likelihood of women to survive following their ovarian cancer diagnosis. The research team has shown that these receptors are turned on in ovarian cancer and are linked to the ability of ovarian cancer cells to migrate and invade, two properties cancer cells must acquire in order to spread.

The team has also shown that when they turn these genes off in lab-based models of ovarian cancer, they can stop the cancer in its tracks. This is exciting as these genes are present specifically on the surface of ovarian cancer cells, and therefore can be more easily targeted by new drugs. The research team is now in the process of developing and testing new drugs capable of switching these genes off in ovarian cancer patients.

To date: 2 journal articles published



6. DR CARLOS SALOMON, THE UNIVERSITY OF QUEENSLAND, UQ CENTRE FOR CLINICAL RESEARCH

Expected outcome: To develop a novel biomarker panel for the early detection of epithelial ovarian cancer and to identify new therapeutic targets to inhibit tumour growth.

Dr Carlos Salomon is focused on developing a blood test to detect ovarian cancer early. He is investigating the role of exosomes – tiny vesicles released from cells that are

believed to act as messengers to other cells – as an early indicator of the disease. Dr Salomon said his team has discovered exciting data over the past five years showing the possibility that exosomes are involved in cell-to-cell communication in ovarian cancer, including mediating the transformation and progression of the disease. Dr Salomon's team has identified a set of molecules within exosomes that increase in association with the disease's progression. Based on these molecules, an algorithm has been created to identify women at early stages of ovarian cancer using a simple blood test. This algorithm can correctly classify eight out of 10 women that will develop ovarian cancer. As a result of the OCRF funding, The University of Queensland has pledged to support a PhD student for Dr Salomon's team to further his research.

To date: 1 Book chapter, 1 journal article published



7. PROFESSOR PETER HOFFMANN, UNIVERSITY OF SOUTH AUSTRALIA, FUTURE INDUSTRIES INSTITUTE

Expected outcome: To validate newly identified, highly accurate biomarkers and to combine these into a diagnostic test for early detection and screening of ovarian cancer.

Growing cancer cells can release specific proteins into the blood stream. They can also influence the concentration of physiological proteins. Thus, protein biomarker became the ideal target for early detection of ovarian cancer. The OCRF funded projects have allowed the research team to identify five novel candidate protein biomarkers. These biomarkers are upregulated in the bloodstream of early stage ovarian cancer patients and could potentially be detected. Currently the research team is working on the validation of these biomarkers using a large set of samples collected internationally from patients suffering from different stages of ovarian cancer. These samples will allow the team to assess the specificity of the analysed biomarkers for the detection of early stage ovarian cancer versus other female cancers with high incidence rates, such as breast and lung cancer.



8. PROFESSOR MARTIN K OEHLER, ROYAL ADELAIDE HOSPITAL AND UNIVERSITY OF ADELAIDE

Expected outcome: To assess the utility of autoantibodies biomarkers in combination with CA-125 in early detection of ovarian cancer.

Professor Martin Oehler is Director of Gynaecological Oncology at the Royal Adelaide Hospital and a Clinical Professor of Obstetrics and Gynaecology at the University of Adelaide. His research focuses on the development of an early detection test for ovarian cancer based on patients' immune responses. Professor Oehler has identified several autoantibodies – antibodies produced in response to the body's own cancerous tissue – and developed a blood test to detect these. His research will now look to validate these results in a large group of patients. Professor Oehler is both a clinician and a researcher whose patients include women with ovarian cancer, which motivates him even more to find a way to improve women's likelihood of surviving this terrible disease.



OUR OTHER ACHIEVEMENTS

TISSUE BANKS

For several years, the OCRF has also funded the establishment, maintenance and growth of a tissue bank program providing high-quality ovarian cancer specimens for research. This is a unique resource for ovarian cancer research and underpins ovarian cancer research activities. Again, in the spirit of collaboration, we provide free access to the tissue banks to all relevant ovarian cancer researchers, irrespective of whether they are funded by the OCRF.

The purpose of our tissue banking program is twofold:

- a) to manage ovarian cancer tissue collections in support of our related research activities; and
- b) support the establishment and evaluation of new clinical trials arising from research findings.

Currently, we have two tissue banks in operation - one based at the Hudson Institute of Medical Research and a second at the University of Adelaide.

	Hudson Institute	University of Adelaide
Projects supported by bank (inc OCRF-funded projects)	6	5
Types of Tissue Accessed	Tissue, Serum, Plasma, Cervical swab, Ascites, Urine, PBMCs	Tissue, Plasma, Ascites
Number of Publications	9	4

The OCRF has recently established a Tissue Bank Steering Committee to review the current operation of our two Tissue Banks. We are looking at ways to standardise processes across the two locations and ensure that our operating model is best suited to provide access to high-quality ovarian cancer specimens for research.

STRATEGIC PARTNERSHIPS

The OCRF has been fortunate to form many important partnerships with peers over the last twelve months, which have helped us to grow and where needed, leverage others' strengths. Our collaborations support our aim to be a leading voice in advancing women's health outcomes and acknowledge that we can't do so alone.

This year, we welcomed Emily Legg from Ovarian Cancer Action (UK) who spent time at the OCRF office, sharing advice, expertise and how our "sister" organisation operates in the United Kingdom. Similarly, we had the privilege of participating in the Cancer Council Victoria's (CCV) Listen and Refer communication training program, to ensure that we were confident in our communications with those touched by cancer in some way. We have also been invited to participate in some key forums such as the Federal Parliamentary Friends of Women's Health and the CCV's Low Survival Cancers Alliance.

JOINT GRANT FUNDING ALLIANCES

We have looked at different methods to further support relevant research in the most efficient and effective way. After discussions with some of our cancer research funding peers, we have formulated some key strategic alliances where our dollars will be matched in funding relevant ovarian cancer research.



Australian Cancer Research Foundation (ACRF)

The ACRF is a private charity whose primary mission is to provide competitive grants for major items of infrastructure and equipment to enable high quality research into all forms of cancer in Australia. In 2018, a Memorandum of Understanding was signed between the ACRF and the OCRF, where the OCRF agreed to provide financial support if any ACRF Annual or Major Grant recipient was deemed to be relevant and supportive of the aims of the OCRF. This support would be to fund personnel to operate any equipment purchased by ACRF Grant monies to ensure that the equipment was available and used for maximum impact and efficiency. The OCRF has committed up to \$300,000 per annum for a term of three years commencing during the 2018 ACRF Grants processes.

National Breast Cancer Foundation (NBCF)

The NBCF, in partnership with the Australian community, is leading the pursuit of new knowledge in the prevention and cure of breast cancer. Emerging evidence suggests that there is significant overlap in the mutation profile and endocrine-driven signaling pathways of patients with breast cancer and ovarian cancer. These developments clearly offer exciting new opportunities to support collaborative cancer research projects that benefit many more women compared to tumour-specific approaches.

For the first time, the NBCF and the OCRF have come together to jointly fund high impact translational research that spans both ovarian and breast cancers to improve outcomes for women. The total amount available for this funding opportunity is \$1,000,000 over 3-5 years, evenly split between the two organisations for one or two research projects. The result of this grant scheme will be announced by March 2019.

Cancer Council Victoria (CCV)

CCV funds between \$4 million and \$6 million to external research organisations each year and has developed an international reputation for innovative work in cancer research, prevention and support. As an independent not-for-profit organization, they play a leading role in reducing the impact of all cancers on all people.

CCV has sought ways to increase investment for research into low survival cancers, such as ovarian cancer, and has agreed to co-fund a Grants-in-Aid award with the OCRF. This model aims to access established and rigorous research assessment processes already in place to ensure the best research applications are supported - with the ultimate aim of improving outcomes for people affected by low survival cancers. A Grants-in-Aid award will be funded to a maximum of \$100,000 a year for up to three years, to support a specific ovarian cancer research project.

LONGER TERM FUNDING FOR SUCCESSFUL OCRF GRANTS

We have spent considerable time engaging with our research community in an effort to more clearly understand their needs and requirements so that our service and funding models are fit for purpose. This year, we are pleased to announce that the OCRF has extended successful project funding from one year to up to three years - to best reflect the requirements of our dedicated and talented researchers. We hope that this certainty of funding builds confidence and sustainability in the world of ovarian cancer research and that we continue to attract and retain the most skilled researchers in the cancer field.



ENHANCING OUR SCIENTIFIC ADVISORY COMMITTEE

To ensure that we fund the most innovative and promising ovarian cancer research, we rely heavily on the expertise of our Scientific Advisory Committee (SAC). We are very proud to announce our newest independent members that will enable the OCRF to make the best, most informed, and expert decisions around achieving our vision – *that every woman, everywhere, will be free from the threat of ovarian cancer.*

INTRODUCING OUR INDEPENDENT SAC MEMBERS

PROFESSOR IAIN MCNEISH

DIRECTOR, OVARIAN CANCER ACTION RESEARCH CENTRE, IMPERIAL COLLEGE LONDON

Professor Iain McNeish holds a key role with our sister organisation in the United Kingdom and his ovarian cancer research focus is on developing improved therapies through improved understanding of disease biology. Professor McNeish also co-leads the BriTOC translational research collaborative.

PROFESSOR KENNETH P NEPHEW

PROFESSOR OF CELLULAR AND INTEGRATIVE PHYSIOLOGY PROFESSOR OF OBSTETRICS AND GYNECOLOGY INDIANA UNIVERSITY SCHOOL OF MEDICINE

Professor Nephew is a Professor of Cellular and Integrative Physiology and Obstetrics and Gynecology at Indiana University. He leads the Ovarian Cancer Research Group at the IU Simon Cancer Center (IUSCC), serves as the Assistant Director for Basic Science Research Bloomington, and is a Program Leader of the Walther Cancer Institute, which is affiliated with IU. He is a Full Member of the Tumor Microenvironment and Metastasis Program and the Breast Cancer Program at IUSCC. Professor Nephew is the former Director of Graduate Education for the Medical Sciences at IU and is highly active in training and educating graduate and medical students in ovarian cancer research. Professor Nephew has dedicated his entire professional career to the study of ovarian cancer. He is the Principal Investigator and co-investigator on numerous grants from National Institutes of Health/National Cancer Institute (NIH/NCI), serves on various editorial boards, scientific advisory committees, and review panels for both the NIH, American Cancer Society (ACS), and Department of Defense Ovarian Cancer Research Program.

PROFESSOR SANDRA OSULIC

PROFESSOR, CEDARS-SINAI MEDICAL CENTER, PROFESSOR IN RESIDENCE, UCLA
DIRECTOR, WOMEN'S CANCER BIOLOGY CEDARS-SINAI MEDICAL CENTER

Professor Sandra Orsulic, Ph.D., is Director of Women's Cancer Biology at the Women's Cancer Research Institute at Cedars-Sinai Medical Center. Her primary research interests include mouse models of ovarian carcinoma, the molecular characterization of ovarian cancer, and pathway-targeted therapy. Prior to joining Cedars-Sinai, Professor Orsulic was Principal Investigator of a research laboratory at the Massachusetts General Hospital in Boston, where she also served as Assistant Professor of Pathology at Harvard Medical School. Professor Orsulic is a member of the National Cancer Institute's Mouse Models of Human Cancers Consortium Steering Committee and Chair of the Gynecological Cancers Working Group. She is also a member of The Cancer Genome Atlas Project Ovarian Carcinoma Working Group, which investigates the underlying genetic changes that occur in human ovarian cancer.



Professor Orsulic's research on ovarian cancer has been funded by the National Institutes of Health, Department of Defense, American Cancer Society, Ovarian Cancer Research Fund, and the Susan G. Komen Foundation. Her work has been published in numerous peer-reviewed journals, such as Nature, Cancer Cell, The Journal of Cell Biology, Cancer Research, Development, and Proceedings of the National Academy of Sciences, USA.

PROFESSOR MAGDALENA PLEBANKSI
ECP DIRECTOR, BIOMEDICAL & HEALTH INNOVATION, SCHOOL OF HEALTH AND BIOMEDICAL SCIENCES, RMIT UNIVERSITY

Professor Magdalena Plebanski is an internationally-recognised and award-winning researcher. Her focus is on developing practical and affordable vaccines and treatments for complex diseases like malaria and cancer. She has also pioneered the use of synthetic size-defined non-inflammatory nanoparticles in vaccines. Professor Plebanski has forged a stellar career in medical and health research. She came to Australia from Oxford University in the UK, where she showed new ways in which malaria parasites can trick the human immune system. More recently, her insights have been used to help understand cancer progression across multiple human clinical trials, particularly leukemia and ovarian cancer. Her nanoparticle studies also opened the door to new nanotechnology applications to prevent allergic airways disease. She has more than 50 patents in 10 patent families, which have supported the formation of biotechnology companies.

Professor Plebanski has published more than 150 peer-reviewed full-length papers, including in leading journals such as Lancet, Nature, Science, Immunity, Nature Biotechnology, Nature Medicine and Nature Communications among others, and has secured funding from national and international grant bodies, as well as charitable and commercial funding.

PROFESSOR MATTHIAS ERNST
SCIENTIFIC DIRECTOR, OLIVIA NEWTON-JOHN CANCER RESEARCH INSTITUTE

Professor Ernst's research focus is on molecular mechanisms that underpin the growth of cancer cells and his laboratory team is exploring novel strategies to target cancer-promoting proteins with a focus on developing new therapeutics for gastrointestinal cancers. Professor Ernst is also the Head of the School for Cancer Medicine at La Trobe University and an NHMRC Principal Research Fellow.

SUCCESSFUL 2018 GRANT RECIPIENTS

The 2018 research grants were awarded in July. Again, the OCRF received an unprecedented response to the call for grant applications, topping the previous year's total. The OCRF awarded a total of \$2.8 million in new funding over the next two to three years, which includes seven research grants.

The projects were selected in line with the OCRF's research priorities:

a) Early Detection

- Identifying early events in tumour formation and progression, to help diagnose the presence of ovarian cancer
- Identifying biomarkers that are at a concentration detectable at the early stages of the disease

b) Management & Treatment

- Developing new targets for therapy
- Looking at the best way to beat chemotherapy resistance
- Investigating methods that may block the ability of the cancer to spread

Congratulations to all recipients (shown in the table below).

Recipient	Name of Study	Research Institution	Funded Until
Early Detection			
1. Dr Andrew N Stephens	Measuring the "CXCL10 Active Ratio" as a Novel Diagnostic Approach to Ovarian Cancer Detection	Hudson Institute of Medical Research	June 2021
2. Dr Carlos Salomon	Tumour-derived Exosomes as a Signature of Ovarian Cancer – Liquid Biopsies as Indicators of Tumour Progression	Centre for Clinical Diagnostics, University of Queensland	June 2021
3. Dr Kristina Warton	Methylated Circulating DNA in Blood for the Early Diagnosis of Ovarian Cancer	School of Women's and Children's Health, UNSW	June 2020
4. Professor Martin K Oehler	Autoantibody Biomarkers for Ovarian Cancer Detection	University of Adelaide	April 2020
5. Associate Professor Michelle Hill	Discovery of new blood protein biomarkers to detect ovarian cancer earlier in order to improve prognosis and survival rates	QIMR Berghofer Medical Research Institute	June 2021
Management & Treatment			
6. Dr Sherry Wu	Re-activating Anti-tumour Immunity by Targeting N-MYC-Let7 Axis in Ovarian Cancer	University of Queensland	December 2020
7. Dr Simon Chu	Efficacy of Smac Mimetics to treat Epithelial Ovarian Cancer and Granulosa Cell Tumours The role of the FOXL2 C134W mutation in Granulosa Cell Tumours	Hudson Institute of Medical Research	June 2019



OUR COMMUNITY SUPPORTERS

The Ovarian Cancer Research Foundation relies heavily on the generous commitment of our myriad of supporters – who work tirelessly in donating, raising funds, or providing in-kind or pro-bono support to ensure that we meet our research funding commitments. Due to this generosity, we have diverse and sustainable revenue streams that are derived from campaigns and events, corporate sponsorships, endowments, foundation and grant income, community fundraising and general donations and bequests. Ensuring reliable revenues enables us to commit between one and three million dollars in grant allocations each year to the most innovative and promising research proposals received

ANNUAL FUNDRAISING NUMBERS

NUMBER OF FUNDRAISING EVENTS:

80 TOTAL FUNDRAISING EVENTS

14 REPEAT FUNDRAISING EVENTS

66 NEW FUNDRAISING EVENTS

AMOUNT OF FUNDS RAISED

\$332,067.84 COMMUNITY FUNDRAISING

Does not include 'Multicharity events' or fundraising connected to campaigns



SPOTLIGHT ON AN AMBASSADOR

LEANE FLYNN

Meet Leane Flynn, White Shirt Campaign Ambassador and ovarian cancer patient.

At her usual gynaecological check-up in April 2017, Leane mentioned that she had noticed some bloating and increased need to urinate. Known to be common symptoms of menopause, these weren't initially alarming. A blood test and ultrasound were ordered to confirm the diagnosis.

No one expected the scan to show a large tumour growing on both of Leane's ovaries, and another one beside her liver. And the blood test? The CA125 result was 800+, over 20 times what it should have been. Subsequent surgery confirmed that Leane had advanced ovarian cancer.

"In hindsight, I think about how I could have done something sooner. I think about how I could have known. To be honest, I assumed that ovarian cancer would be detected in my standard check-ups. But that's the worrying part—without an early detection test, we don't have a reliable way of knowing early."



COMMUNITY HEROES

HELEN'S HOPE

Helen's Hope is a charitable organisation dedicated to the beloved Helen Hatzis, an OCRF Ambassador who sadly passed away in December 2016 after an eight-year battle with ovarian cancer. A few of Helen's close friends and family have formed a committee to honour her legacy and raise awareness for charitable and worthwhile causes.

On the 22nd October 2017, Helen's Hope organised a Ladies Afternoon Tea to raise money for the Ovarian Cancer Research Foundation. Over 170 people attended the event, with a raffle, silent auction and sale of Helen's Hope aprons, raising over \$17,100.

SILVER LINING RIDE²⁰¹⁸



ANNUAL SUPPORTER EVENTS

SILVER LINING RIDE

Mandy Herbert and Helen Hatzis met in the worst possible circumstances. They'd been diagnosed with ovarian cancer, an insidious disease that has no early detection test and no cure. As Mandy and Helen embarked on their fight, they became great mates, tackling the disease with vigour... and so often, with humour.

After almost a decade, horribly, Helen lost her battle in December 2016. Just weeks later, again there was bad news. Having lived with and tackled what she described as "the Beastie" for more than 11 years, Mandy also passed away.

Given the plight of Mandy and Helen, the Silver Lining Riders had a strong connection to the Ovarian Cancer Research Foundation. Through the years, "Mands Mob" has raised a touch over \$300,000 through dinners, trivia nights and fun runs.

In 2017 a group of nine riders, led by Mandy's daughter Georgie Herbert, Helen's husband John Hatzis and close friend of both women, Channel 9 personality and OCRF Ambassador Clint Stanaway, pedalled precisely 1067.9km from Adelaide to Melbourne. In doing so, they raised more than \$120,000 for the OCRF.

The "Mands Mob" team are planning another ride again in 2018 from Sydney to Melbourne, 200km further than last year with the hope to raise \$150,000 for the OCRF.



ANNUAL SUPPORTER EVENTS

SILVER STYLE

The annual Silver Style event is an opportunity to celebrate the progress made towards the OCRF's goal of improving the survival rates of women with ovarian cancer. It's also a chance to bring together supporters and friends of the OCRF, including our community ambassadors, major donors and corporate partners in recognition of their contributions throughout the year.

This year's event, held on Thursday 16th November, 2017 at Mural Hall in Melbourne, didn't disappoint. A highlight of the night was the presentation of a cheque from Witchery's White Shirt Campaign for \$1,000,000. These funds represent a significant step forward in OCRF's mission: Funding innovative ovarian cancer research to save women's lives through early detection and personalised treatment.

Dr. Stephens addressed the audience at Silver Style about the progress his research team has achieved over the last few years. His study, again funded by OCRF, will see the commencement of a clinical trial involving a cohort of high-risk women. The excitement in the room at hearing this news was heartening, with families of ovarian cancer patients commenting on the emotional uplift they felt.

Another significant part of the evening was the traditional Silver Style auction. The generous donations of major prizes from Grossi Restaurants, Microflite, Smeg, Alexandra Nea and Witchery introduced some fierce competition into the live and silent auctions, resulting in almost \$15,000 being raised for the OCRF. Thanks to those in the room who generously bid for these items.

Special thanks for the support from our major sponsors Witchery, Georg Jensen, Simson Cards, oOh! Media, and our community supporters Mands' Mob, Cabal Club, Letitia Linke, Helen's Hope and the extended Hatzis family.



IN MEMORIUM

LETITIA LINKE (1980-2018)

The OCRF community mourns the passing of much-loved ambassador Letitia Linke.

Letitia's impact was incredible, as both a significant fundraiser and a passionate advocate of ovarian cancer research.

Letitia connected with many women affected by ovarian cancer, most of whom followed her journey through her social media presence, her blog and her work with the OCRF. All of us who knew her directly or through the generous sharing of her story were touched by her warmth, care, passion and positivity.

Letitia's legacy will live on through the work she has done on behalf of and alongside the OCRF.

She is survived by her husband Paul, her two boys, Ollie and Tommy and her mother Madelyn.

We will miss her greatly.

OUR MAJOR SPONSORS

The OCRF is thankful for the generous and ongoing support of our Corporate Partners and major donors. The support from our Corporate Partners provides not only vital funds, but also contributes substantially to our awareness raising activities.

Thank you to the OCRF's Premier Partner Witchery for their ongoing support via the annual White Shirt Campaign. Witchery's commitment to the OCRF has led to significant growth and enabled funding for over 50 research projects since their involvement with the OCRF commenced in 2001.

WITCHERY

MAJOR CORPORATE PARTNERS

Thank you also to Georg Jensen, Simson Cards, oOh Media, Nova Entertainment (Smooth FM) and Marie Claire for their continued support throughout the 2017-18 financial year.



MAJOR DONORS

Thank you to our major donors, who have provided significant funds to support our research endeavours:

- JB Were Charitable Endowment Fund
- The Wales Family Foundation
- Quinn Femelle Private Ancillary Fund
- Lord Mayor's Charitable Foundation
- Zimmerman Family Foundation
- William Angliss Foundation
- Bourne Foundation
- A.I. Topper & Co

PRO BONO AND IN-KIND SUPPORTERS

The OCRF would also like to thank the following organisations for their support, energy and contribution throughout the past 12 months:

- KPMG
- Allens Linklaters
- Tech Head
- Global Leadership Foundation (Gayle Hardie)
- Review Australia
- Go-To Australia
- Broadsheet
- NAB

OUR MAJOR ACTIVITIES



\$1,000,000 RAISED



9.5M PEOPLE REACHED VIA OOH MEDIA SCREENS



743,000 HEARD ABOUT IT ON NOVA 100 & SMOOTH FM



820,000 REACHED ON SOCIAL MEDIA

WHITE SHIRT CAMPAIGN

Inspired by the *Power of 10*, 2018 marked 10 years of the White Shirt Campaign in partnership with Witchery. The milestone was celebrated by 10 specially designed White Shirts and 10 powerful women.

Through the power of fashion, OCRF and Witchery have raised vital awareness and funds for the disease that whispers. Over \$11 million has been raised in a decade of partnership since 2008 that has enjoyed the support of numerous fashion icons and wonderful media partners. It has also launched wonderful initiatives such as the White Shirt Design Award aiming to nurture creativity among the next generation of design talent.

Witchery's incredible generosity and support of the OCRF through the White Shirt Campaign has demonstrated the amazing value that a corporate partner can bring to raising awareness of a cause and filling the gap in much needed funding for ovarian cancer research. Witchery is one of the only leading Australian fashion brands to dedicate all gross proceeds of a collection to a charitable cause. We feel that this puts them at the forefront of life-saving fashion.

JOINING FASHION FORCES

marie claire joined the fight against ovarian cancer this year in a big way, providing an eight page spread in its May magazine, publishing articles on its social channels and bringing additional ambassadors to support the Campaign.

oOh-MAZING SUPPORT

Media partner oOh Media again played a critical role in spreading the word far and wide with millions of dollars' worth of indoor and outdoor advertising for the Campaign.

COMMUNITY CAMPAIGNERS

Our wonderful supporters upped the ante this year. Not only were they out buying White Shirts, they were also running fundraising events for White Shirt Day – World Ovarian Cancer Day - on May 8. With a new record, our supporters raised an additional \$25,000 towards the Campaign.

With such momentum, the 2018 campaign has been extremely successful, and we are looking forward to revealing the total at the Silver Style event in November.



FROCKTOBER

Frocktober is the OCRF's most significant peer-to-peer fundraising campaign.

Frocktober empowers women of all backgrounds, lifestyles and fabulous fashion sense to support a common cause: ovarian cancer research. It's a chance for participants to connect with like-minded people, share personal stories, flaunt their fashion style and play a pivotal role in the journey towards an early detection test for ovarian cancer.

In 2017, Alexandra Nea was brought on to revise the creative look and feel of Frocktober, resulting in the creation of five frock figures that were used across all platforms and merchandise of the campaign.

The campaign saw an incredible response from the community. For the first time, participants were asked to register and purchase a supporter pack. This led to more than 400 registrations and a record amount raised.

The reach and engagement of the campaign on social media was staggering, exposing the OCRF to a new audience, particularly on Instagram where Frocktober came to life in vivid imagery.

Thank you to the many dedicated participants who made Frocktober such a success.

STATISTICS

- **\$407,000 raised** (30% increase from 2016)
- **> 70,000 website visitors** over Sept / Oct (100% increase from 2016)
- **418 registered, paid participants** (up from 411 registrations in 2016)
- **> 6000 individual donors** (up from 5,252 in 2016)
- **\$64.29 average donation** (up from \$59 in 2016)

VISIBILITY OF THE CAMPAIGN

Media reach

- Seen by more than **1.1 million people** via oOh Media screens
- Heard by more than **800,000 people** on Nova 100 and Smooth FM
- Supporter stories published in The Herald Sun, The Age, The Western Australian and numerous other online and local publications



OUR MAJOR ACTIVITIES



EARLY DETECTION RESEARCH APPEAL

This year, the OCRF put the call out to supporters for donations to help fund the next phase of an exciting research project at the Hudson Institute of Medical Research under Dr Andrew N Stephens. Having received an unprecedented number of high-quality grant applications, we asked supporters and donors to contribute with us to fund the researchers behind the Active Ratio Test project for another year.

The Active Ratio Test project has the potential to revolutionise the future of women's health, by providing a simple, accessible, and reliable screening test that can be included as part of a standard health check-up.

Videos, social media and targeted email communication telling the story of our wonderful ambassador and ovarian cancer patient Leane Flynn and how a test such as this may have changed her future, were run in the lead up to the End of Financial Year calling for tax-deductible donations.

Supporters and donors responded overwhelmingly to the cause, raising over \$57,000 against a target of \$45,000. In the same period, OCRF's income increased by more than \$40,000, a 22% increase from June 2017.



GEORG JENSEN

2017-18 saw Georg Jensen reaffirm support for the OCRF. The Offspring Collection underpinned the brand's promotional and financial commitment to ovarian cancer research.

A proportion of each item sold within the Offspring Collection, a range of jewelry designed to represent hope for women affected by ovarian cancer, was donated to the OCRF. This generous commitment resulted in more than \$60,000 raised during the financial year. The campaign tied in support from Marie Claire and InStyle magazines. A feature piece on high profile women and the hope that their daughters will one day live free from the fear of ovarian cancer, provided valuable story lines that helped promote the campaign.

Thank you to Georg Jensen for the ongoing commitment and drive to build support for ovarian cancer research.



OUR GOVERNANCE

At the OCRF we are striving for strong and transparent governance to maintain stakeholder, partner, donor and community confidence in our performance and help us achieve our vision and mission. The Committee of Management (COM) is responsible for the governance of the organisation and works to ensure we are able to respond strategically into the future and demonstrate our continued benefit to the community.

COMMITTEE OF MANAGEMENT'S ROLE

The COM's primary role is to ensure that OCRF's activities are directed towards achieving our mission of developing an early detection test for ovarian cancer and improving the mortality rate, management and long-term survival of women with ovarian cancer.

Fulfilling this primary role involves certain core elements such as:

- determining, reviewing and maintaining the vision, purpose and values of the organisation;
- approval of short and long-term strategies and policies;
- approval of annual budgets;
- appointment, performance evaluation and (if circumstances necessitate) termination of the employment contract of the CEO;
- risk oversight
- providing a check on the integrity of external financial and non-financial reports; and
- supporting effective engagement with key stakeholders, partners, donors and the community.

These responsibilities are detailed in the COM's Charter, OCRF's Rules and Governance Framework.

COMMITTEE OF MANAGEMENT MEMBERSHIP

The COM comprises the Chairman, Vice-Chairman, Treasurer, Secretary and ordinary members, which are elected at the annual general meeting for a term of three years. In fulfilling its primary role, the COM meets at least six times annually and more frequently as required. Current members include:

MS JULIE TOOP, CHAIRPERSON

Julie has worked for ANZ since 2006 in a variety of legal and business roles. In 2012 she left law and embarked on a new career in banking, facilitated by her selection for the 18 month ANZ Accelerating Banking Experiences for Women Program. On completion of the program Julie was appointed as the Head of Health in Business Banking, and set up a specialist banking team to service the business and personal banking needs of Medical Practitioners. In 2018 Julie moved into the Retail area of ANZ and is currently the lead for Emerging Channels.

MR PAUL ASHWORTH, VICE-CHAIRPERSON

Paul Ashworth is the Managing Partner of Cameron Harrison, a firm providing Specialist Advice and Investment Management solutions for business owners and financially successful families. Paul holds a combined degree in Economics and Law and postgraduate qualification in Finance Law from The University of Melbourne.



MR NATHAN PREYSER, TREASURER

Nathan brings a wealth of knowledge in finance, leadership and stakeholder management to the OCRF. Across a career spanning 30 years, Nathan has held several key senior commercial, financial and operational roles within brands of major Australian ASX retail organisations. For the past 14 years, Nathan has delivered proven results in business within different sectors as CFO, COO, Group Business Manager, Business Management and Project Consultant.

DR GERALDINE GOSS, SECRETARY

Geraldine works as a medical oncologist with a focus on caring for women with breast and gynaecological cancers. After graduating from the University of Melbourne, Geraldine undertook postgraduate training in oncology at the Royal Melbourne and Repatriation Hospitals, followed by laboratory-based research as a Breast Cancer Fellow. She completed her MD thesis before travelling to Boston, USA where she completed fellowships at St Elizabeth's Medical Centre and the Dana Farber Cancer Institute. Here she developed her interest in gynaecological cancers. On her return to Australia in 2000, she completed a Masters degree in Women's Health at the University of Melbourne.

MR TONY PYMAN, ORDINARY MEMBER

Tony Pyman was a partner in the legal firm Allens for more than 33 years and was a part time Corporate Counsel of Peter MacCallum Cancer Institute from September 2011 to April 2014. Over the years, Tony's legal practice encompassed a wide range of areas including general commercial advice, drafting of contracts, corporate finance transactions, company floats, mergers and acquisitions, joint ventures, corporate reconstructions, research and development syndications, research and development collaborations, clinical trials and commercialisation of technology.

MS SHARON MCCROHAN, ORDINARY MEMBER & MFAC CHAIRPERSON

Sharon McCrohan is one of Australia's most experienced media and strategic communications consultants, with a career spanning over 20 years as a journalist and adviser to Federal and State government leaders and cabinets, private sector boards, sporting bodies, statutory authorities, charities, and government agencies. As the mum of two girls, Sharon has a strong personal commitment to the defining mission of the OCRF in line with a clear focus on improving the survivability rates for women with ovarian cancer.

DR L JANE MCNEILAGE, ORDINARY MEMBER & SAC CHAIRPERSON

Dr Jane McNeilage held the position of the very first National Australia Bank Ovarian Cancer Research Foundation Research Fellow in 2001. Today, she works in private practice as a Gynaecological Oncologist and holds the position of Visiting Medical Officer at the Gynaecology Oncology unit, Monash Medical Centre and at the Department of Surgical Oncology, Peter MacCallum Cancer Institute. Jane authored and co-authored over 50 articles in magazines and research journals and has received several awards throughout her career.



SCIENTIFIC ADVISORY COMMITTEE (SAC)

This subcommittee supports the COM in discharging its responsibilities, by providing expert advice, recommendations and assurance in the awarding of research funding according to the OCRF's mission. SAC meets at least twice annually. This year, the OCRF was excited to welcome a number of new members to the SAC.

Membership:

Dr L Jane McNeillage, SAC Chairperson

Dr Geraldine Goss, Committee Member

Mr Nathan Preyser, Committee Member

Professor Matthias Ernst, Olivia Newton John Cancer Research Centre

Professor Magdalena Plebanski, School of Health and Biomedical Sciences, RMIT University

Professor Iain McNeish, Ovarian Cancer Action Research Centre, UK

Professor Kenneth P Nephew, Indiana University School of Medicine, USA

Professor Sandra Orsulic, Cedars-Sinai Medical Centre, USA

MARKETING & FUNDRAISING ADVISORY COMMITTEE (MFAC)

This subcommittee supports the COM in discharging its responsibilities by providing guidance and assurance regarding marketing, fundraising and partnership strategic direction, planning and development. MFAC meets at least four times annually.

Membership:

Ms Sharon McCrohan, MFAC Chairperson

Mr Paul Ashworth, Committee Member

Ms Rosalind Willett, Willett Marketing

Ms Jennifer Petropoulos, Witchery

Ms Helen Moreland, Victorian Civil and Administrative Tribunal

Ms Amy Purdue, Bendigo Bank

OUR EMPLOYEES



LUCINDA NOLAN - CEO

Lucinda Nolan is currently the CEO of the Ovarian Cancer Research Foundation and has a wealth of knowledge and experience across the public sector and as a director for several boards. Lucinda is a director on the Boards of Hawthorn Football Club, BankVic and the Penington Institute.

Like many others, Lucinda has experienced the tragedy of ovarian cancer. Lucinda's sister-in-law, Jane, died of ovarian cancer at the age of 54. Jane's cancer was detected in the advanced stages of the disease and this has reaffirmed to Lucinda that to save women's lives, we need to find and develop a test for early detection. Research is the answer.



LISA PANETTA – OFFICE MANAGER

Lisa is a chartered accountant and has a range of experiences working with not-for-profit organisations, bringing a wealth of knowledge in financial management to OCRF.

Lisa is acutely aware of the insidious nature of this disease having lost a close family member after a 5-year battle with the disease.



ERIN EADES – CORPORATE GOVERNANCE COORDINATOR

Erin has wide-ranging experience and formal qualifications in corporate governance and has held several key governance positions in very different organisational contexts. With a background in the tertiary sector, Erin is well placed to support OCRF in its pursuit to invest in the most innovative research in ovarian cancer.

The unexpected nature of her Aunt's demise to ovarian cancer in 2016 highlighted - in a profoundly personal way - that women deserve to live their lives without fear of ovarian cancer.



ARBEL GIVARGIS – MARKETING DIRECTOR

Arbel is an experienced marketer and relationship manager. He brings a breadth of experience, having worked in both the corporate and not-for-profit sectors. Arbel is passionate about developing deep and ongoing relationships with the OCRF's key stakeholders, to encourage even more supporters to engage with the cause. He believes strongly in the power of connecting people and empowering the community to drive change.

Arbel became acutely aware of ovarian cancer with the premature passing of a close friend's mother from the disease in 2016. Arbel's wife also lost her grandmother to ovarian cancer and an aunt is currently fighting the disease, making the cause even more personal.



ERIN RITCHIE – MARKETING & FUNDRAISING COORDINATOR

Erin is currently studying a Bachelor of Law / Bachelor of Arts (Media Studies / International Relations) at Deakin University.

Originally a Frockster at heart, Erin joined the team in 2017 to support our community fundraisers. In the three years prior to joining the team, Erin participated in Frocktober, wearing a different frock each day in October – amounting to over 100 frocks! The ability to combine her obsession with sewing and her passion for finding an early detection test for such an insidious disease has made her a wonderful advocate for the cause.

FINANCIAL STATEMENTS

STATEMENT OF COMPREHENSIVE INCOME

For the year ended 30 June 2018

INCOME	2017-18	Restated 2016-17	2015-16
Corporate Sponsorship	1,710,312	1,084,852	2,072,632
Individual & Community Donations	1,078,043	919,409	1,052,333
Philanthropic Giving	408,006	242,800	134,436
Other Income	119,927	130,969	123,189
Total Income for the year*	3,316,288	2,378,030	3,382,590
EXPENDITURE			
Administration	233,180	299,315	271,628
Employee Expenses	662,748	490,368	489,077
Awareness & Fundraising Campaigns	604,545	405,386	398,369
Total Expenditure*	1,500,473	1,195,069	1,159,074
Surplus before grant payments	1,815,816	1,182,961	2,223,516
GRANT PAYMENTS			
Grants paid during the year	1,404,170	1,557,747	1,431,178
Total Grants Payments	1,404,170	1,557,747	1,431,178
Total Comprehensive Income (Loss)	411,646	(374,786)	792,338

PRO-BONO SUPPORT			
Pro-bono products & services (received at zero cost)	10,073,666	-	-

STATEMENT OF FINANCIAL POSITION

For the year ended 30 June 2018

ASSETS	2017-18	Restated 2016-17	2015-16
Current Assets	6,426,661	6,026,404	4,953,372
Non-Current Assets	19,930	23,536	24,689
Total Assets	6,446,591	6,049,940	4,978,061
LIABILITIES			
Current Liabilities	95,320	110,815	297,222
Non-Current Liabilities	732	231	1,729
Total Liabilities	96,052	111,046	298,951
Net Assets	6,350,539	5,938,894	4,679,110

FINANCIAL STATEMENTS

STATEMENT OF CASH FLOWS

For the year ended 30 June 2018

CASH FLOW FROM OPERATING ACTIVITIES	2017-18	Restated 2016-17	2015-16
Receipts from Corporate Sponsorship	1,705,201	1,775,520	2,001,303
Receipts from Donations & Fundraising Activities	1,485,645	1,158,879	1,262,229
Interest Received	119,927	130,748	118,879
Payments to Suppliers & Employees	(2,153,705)	(1,367,397)	(1,285,232)
Payments of Research Grants	(1,404,170)	(1,557,747)	(1,431,178)
Total Cash (used in)/provided by Operating Activities	(247,102)	140,003	666,001
CASH FLOW FROM INVESTING ACTIVITIES			
Transfer of cash to term deposit	(315,127)	(297,299)	(687,068)
Payments for plant and equipment	(2,777)	(5,165)	(698)
Proceeds from sale of plant and equipment	-	350	5,661
Total Cash (used in) Investing Activities	(317,904)	(302,114)	(682,105)
Net (Decrease) in Cash	(565,006)	(162,111)	(16,104)
Cash Balance at the Beginning of the Year	729,203	891,314	907,418
Cash Balance at the End of the Year	164,197	729,203	891,314

HOW TO SUPPORT US

CONTACT US

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