



ANNUAL REPORT & ACCOUNTS

2022

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OUR VISION

A WORLD WHERE PRIMARY BONE CANCER IS CURED

OUR MISSION

TO SAVE LIVES AND IMPROVE OUTCOMES FOR PEOPLE AFFECTED BY PRIMARY BONE CANCER

OUR VALUES

- **PIONEERING** WE LEAD THE WAY, WE LEAVE NO STONE UNTURNED, WE ARE PREPARED TO TAKE RISKS.
- **DYNAMIC** WE DON'T STAND STILL, WE INNOVATE, WE CELEBRATE EVERY SUCCESS.
- **SUPPORTIVE** WE LISTEN, WE UNDERSTAND, WE CARE.
- **KNOWLEDGEABLE** WE KNOW OUR STUFF, WE ARE EAGER TO KNOW MORE.
- **TRUSTWORTHY** WE DO WHAT WE SAY.

CHAIR OF TRUSTEES INTRODUCTION

Welcome to our 2022 Annual Report & Accounts. Against the challenging backdrop of continued uncertainty both at home and abroad, I'm extremely proud to share how the amazing Bone Cancer Research Trust team and the primary bone cancer community have risen to the challenge and continued to support us to grow from strength to strength.

Despite the growing impact of the cost-of-living crisis, the remarkable generosity of our supporters was once again in evidence as, with their support, we raised over £3.8 million in 2022. This has enabled us to commit over £2.3 million of research funding, breaking last year's record by almost £1 million. I'm particularly pleased to report that 2022 saw us award our biggest ever grant to continue and expand ICONIC, our flagship osteosarcoma project.

Following the success of the two meetings held virtually during the pandemic, we were delighted to hold our first in-person Advances in Ewing Sarcoma symposium, organised in collaboration with Children with Cancer UK. The event was a huge success and saw presentations from several world-renowned Ewing sarcoma researchers, as well as providing the formal launch of a joint £1 million funding call. Partnerships and collaboration will continue to be a key theme that drives us forward and enables the Bone Cancer Research Trust to deliver our strategic objectives.

For many of the individuals affected by primary bone cancer, our Support and Information Service provides a much-needed opportunity to meet and share experiences with others who understand what they are going through. That's why we were pleased to be able to welcome everyone back to our in-person Bone Cancer Conference. Recognising the importance and need for the conference we were, for the first time ever, able to hold two events in the north and south of the country to full capacity at each event.

The reach of our awareness work continued to grow, and once again, We saw a record number of people engage with our digital campaigning activities. In total our messaging was seen over 69 million times across the globe.

2022 sees the culmination of, what was then, our most ambitious strategic plan to date and 'The Biggest Ever Commitment to Primary Bone Cancer'. With the unwavering support of our amazing community and the tireless hard work of #TeamBones we significantly grew our income allowing us to achieve all the objectives we set out in our 2017-2022 strategy. But we can't and won't stop there as much more still needs to be done.

That's why our even bigger and bolder 10 year strategy looks to the future with a focus on both kinder and more effective treatments for primary bone cancer patients. To find out how this will be achieved, please scan the QR code on the back page to see our new strategy 'More Patients Surviving. More Patients Thriving.'

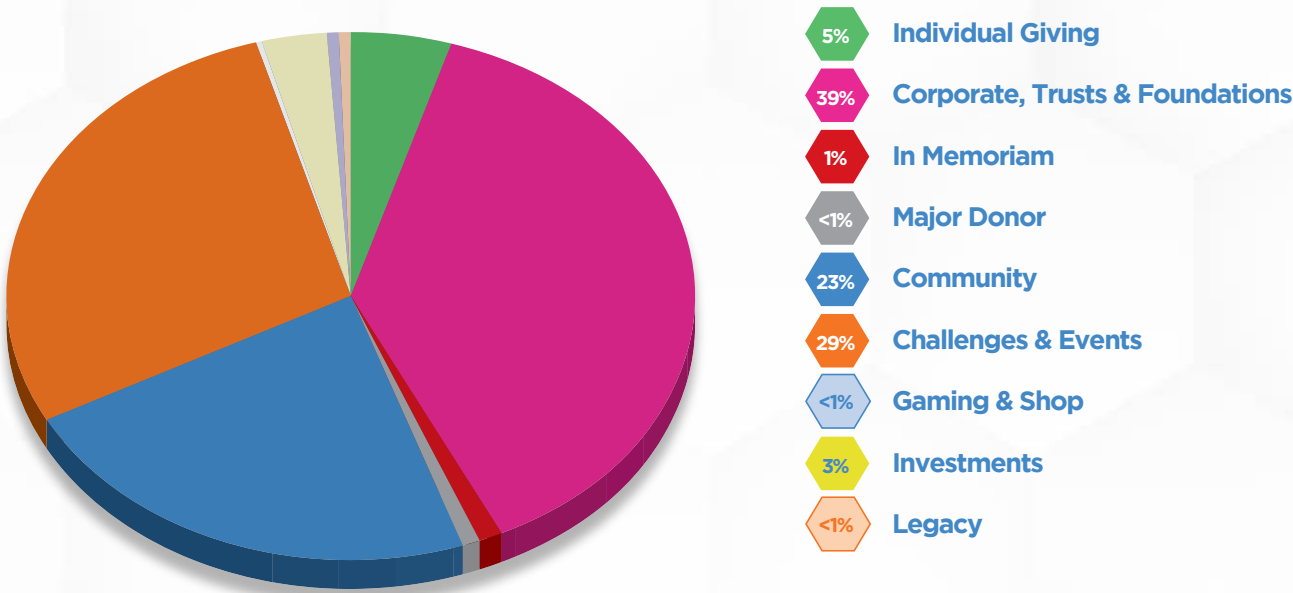
Finally, 2022 was my inaugural year as Chair of the Board of Trustees and I wanted to take this opportunity to give credit to my predecessor Andy Lewis, under whose stewardship the charity was transformed. I extend my thanks to Andy on behalf of the Board of Trustees, the staff team and the primary bone cancer community.

Professor Alison Gartland
Chair of Trustees

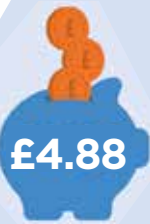
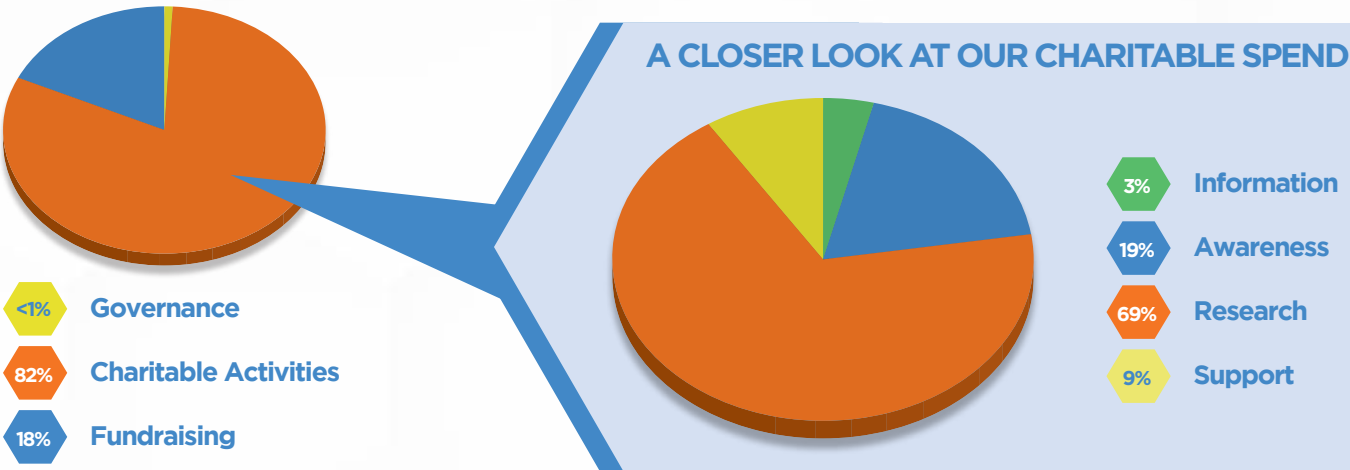


INCOME & SPEND

Our income totalled £3,866,576. This came from:



Our total expenditure was: £4,481,656



FOR EVERY £1
WE SPENT ON FUNDRAISING
£4.88 WAS RAISED
FOR OUR LIFE-SAVING WORK

During 2022 a further £272,860 (not included in the charts above) was committed to planned research and awareness campaigns due to take place from 2023 onwards.

THIS TAKES THE AMOUNT THAT WE HAVE COMMITTED TO CHARITABLE ACTIVITIES IN 2022 TO £3,935,695.

2022 IN NUMBERS

- 400,000,000

Our new media and PR activities reached a potential 400 million internationally
- 69,723,364

Our digital awareness campaign activities were seen over 69 million times
- 54,894,00

2,447 individuals completed 54,894,00 burpees as part of their fundraising
- 4,200,000

Bone Cancer Awareness Week reached over 4.2 million individuals
- 4,131,923

555,939 Individuals accessed 4,131,923 pages on our website
- 3,866,576

We raised an amazing £3,866,576 for our vital work
- 2,522,010

We spent £2,522,010 on research – more than ever before!
- 1,000,000

We received a £1 million grant from Children with Cancer UK for research into Ewing sarcoma
- 603,289

Miles were cycled, ran, or walked in support of our work
- 268,549

Our patient stories were accessed 268,549 times as a source of information and support
- 234,135

Times our dedicated information pages were accessed
- 210,543

Our social media followers grew to around the world
- 80,953

Donations were received from 28,681 amazing supporters
- 72,063

Times our symptoms information page was accessed
- 20,340

We awarded £20,340 in financial support grants to primary bone cancer patients
- 12,438

Patient samples collected, that the Infrastructure Grants have facilitated
- 5,000

Over 5,000 individuals took on fundraising challenges to support our life-saving work
- 2,025

Contacts made by our Support & Information Service
- 1,500

Individuals who have joined our 9 digital support groups
- 128

We have awarded 128 research grants since 2006
- 103

International scientific publications acknowledged funding by us since 2006
- 85

Up to 85% of primary bone cancer patients approached, agreed to donate tissue samples
- 72

In-person and virtual support events
- 38

Charitable Trusts and Foundations made grants to 19 different projects
- 35

Our Patient & Public Involvement Panel comprised 35 members of our community
- 17

Our PPIP members supported the development and review of 17 project applications.
- 13

Our new funding scheme allow researchers to attend important meetings to learn new skills.
- 10

Companies sponsored our special events, freeing up funds that paid for 833 hours of research
- 8

Because of the support of our community, we awarded 8 extra research projects
- 2

We held 2 Bone Cancer Conferences
- 1

1 incredible community made all of this possible – our supporters

STRATEGIC OBJECTIVES & ACHIEVEMENTS

RESEARCH



In line with our strategy, The Biggest ever Commitment To Primary Bone Cancer, in July 2017 we launched our new 2017 – 2022 Grant Programme. The below table demonstrates the progress of this programme to date:

2017-2022 Grant Programme						
GRANT TYPE/YEAR	2017	2018	2019	2020	2021	2022
CLINICAL / TRANSLATIONAL		✓			✓	
EARLY CAREER FELLOWSHIP						✓
PHD STUDENTSHIP		✓✓		✓	✓	
INFRASTRUCTURE GRANTS	✓	✓	✓	✓	✓	✓
EXPLORER	✓✓	✓	✓✓	✓	✓✓✓	✓
IDEAS	✓✓	✓	✓✓	✓✓✓	✓✓✓✓✓	✓✓✓✓
LARGE RESEARCH PROJECT					✓✓	✓✓✓
CLINICAL TRIAL SUPPORT						✓
PROGRAMME						✓
SKILLS DEVELOPMENT GRANTS						✓✓✓✓✓ ✓✓✓✓✓ ✓✓✓✓✓ ✓✓✓✓✓ ✓
OTHER RESEARCH INVESTMENT	✓	✓	✓	✓	✓	✓

✓ AWARDED AS PLANNED ✓ ADDITIONAL UNPLANNED AWARD ✓ CALL CANCELLED DUE TO ADDITIONAL PHD STUDENTSHIP ✓ GRANT TYPE REPLACED WITH LARGE RESEARCH PROJECT

STRATEGIC OBJECTIVES & ACHIEVEMENTS

RESEARCH

New Grants awarded in 2022

LEAD RESEARCHER	PROJECT TITLE	GRANT TYPE	AWARD VALUE
Professor Sandra Strauss	Ad-ICONIC	Programme	£997,834
Dr Lucia Cottone	Cellular Dynamics Of Chemotherapy Resistance In Osteosarcoma	Early Career Fellowship	£500,000
Professor Alison Gartland	Preclinical validation of novel compounds to treat osteosarcoma	Large Project	£249,820
Professor Robert Falconer	Lead optimisation of a tumour-targeted methotrexate prodrug with enhanced therapeutic index for osteosarcoma	Large Project	£249,760
Dr Martin McCabe	Biological studies in rEECur, an international randomised controlled trial of chemotherapy for the treatment of recurrent and primary refractory Ewing sarcoma	Clinical Trial Support	£187,805
Mr Gareth Stevens	Sample Collection Support Grant - Birmingham (Y5)	Infrastructure	£53,931
Mr Kenneth Rankin	Sample Collection Support Grant - Newcastle (Y5)	Infrastructure	£15,500
Dr Hadley Sheppard	Evaluating the therapeutic potential of senolytic agents in chordoma	Idea	£25,000
Professor Richard Martin	Developing novel biomaterials for osteosarcoma and chordoma treatment	Idea	£24,986
Dr Helen Knowles	ANGPTL4 is a potential therapeutic target in osteosarcoma	Idea	£10,233
Mr Corey Chan	Lab stay at Harvard Medical School	Skills Development Grant	£3000
Miss Laura Regadera-Munoz	Lab stay at University of East Anglia	Skills Development Grant	£1000
Mr Fermin Pradies-Pinchete,	Lab stay at University of East Anglia	Skills Development Grant	£1000
Dr Stefan Zollner	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£723
Dr Maria Christina Manara	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£500
Dr Sara Sanchez Molina	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£500
Dr Joanna Kitlinska	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£500
Mr Maximilian Kerkoff	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£392

LEAD RESEARCHER	PROJECT TITLE	GRANT TYPE	AWARD VALUE
Mrs Sarah Vaughan	Travel grant for BSG attendance	Skills Development Grant	£390
Dr Antonio Romo Morales	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£235
Mr Tilman Hoelting	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£219
Ms Silvia Luchetta	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£200
Ms Sophie Richardson	Travel grant for Advances in Ewing Sarcoma meeting	Skills Development Grant	£57

Projects committed to in 2022

LEAD RESEARCHER	PROJECT TITLE	GRANT TYPE	AWARD VALUE
Dr Paul Huang	A deep dive into the proteomic landscape of chondrosarcoma: improving patient stratification and outcomes	Large Project	£250,000
Dr Katherine Trevers	A proof of concept study: can cell-free RNA (cfRNA) be used to measure disease burden in chordoma?	Ideas	£22,860

Projects receiving additional funding to continue progress

LEAD RESEARCHER	PROJECT TITLE	GRANT TYPE	AWARD VALUE
Dr Martin Pule	Towards Engineered T Cells for Osteosarcoma	PhD Studentship	£2,079
Dr Kogularamanan Suntharalingam	Bone-seeking Metal-based Drugs to overcome Chemotherapy Resistant Osteosarcoma Sub-populations	Idea	£10,000
Dr Darrell Green	TP53 Restoration using mRNA Vaccine Technology	Idea	£2,193

STRATEGIC OBJECTIVES & ACHIEVEMENTS

RESEARCH



Following on from momentum gained in previous years, thanks to the generosity of our community, 2022 was a record-breaking year for our investment in research. We committed £2,387,637 of research funding to support 28 projects and delivered a comprehensive research programme, available to researchers in the UK and worldwide, supporting career development, research infrastructure and clinical and laboratory based pioneering research.

In March, we provided funding to ensure the continuation of the Euro Ewing Consortium, a European initiative to support trials and translational research in Ewing sarcoma, which has to date developed and delivered a number of international trials.

In October, we held our first in-person Advances in Ewing Sarcoma symposium in Leeds after holding the previous 2 meetings virtually due to COVID-19. The meeting was organised in collaboration with Children with Cancer UK and was a huge success. It brought together over 80 international Ewing sarcoma researchers, from the UK, Europe and America. We were delighted to have keynote

presentations from Professor Richard Gorlick, Professor Claudia Rössig and Dr Brian Crompton, with a further 10 short presentations and 16 poster presentations. The day concluded with the launch of a £1 million Programme Funding call, in collaboration with Children with Cancer UK and restricted to Ewing sarcoma.

A highlight of the year was the continuation and expansion of ICONIC, our flagship osteosarcoma project. Thanks to an incredibly kind donation, in December we were able to provide £1 million in funding to extend the recruitment to this project and to explore immune markers and targets for new osteosarcoma treatments.

We will award our first programme grant, supporting collaborative research in osteosarcoma to improve patient outcomes.

In December, we awarded The Hamilton Family Programme of Osteosarcoma Research, our first research programme grant worth £1million. This exceptional amount of funding was made possible thanks to an extremely generous donation and will allow the continuation and expansion of ICONIC, an osteosarcoma clinical trial running throughout the UK for patients of all ages. This exciting new stage will ensure more patients can participate and will facilitate large-scale research into immunotherapy-based treatments.

We will promote Skills Development Grants to improve knowledge and skill gaps in the primary bone cancer research community and to promote our research being shared at national and international conferences.

Since their launch, we have received exceptional interest in our Skills Development Grants, awarding 13 throughout the year. As intended, these grants have allowed researchers, clinicians, and allied healthcare professionals to travel nationally and internationally to learn new skills and share their findings. One award has resulted in a new imaging technique being introduced in the UK from the US and contributed to the securing of £1.5million for a new sarcoma surgical clinical trial. Feedback from grant awardees has been unanimously positive and we are continuing to see a growing interest in this funding stream. Based on need, we have also expanded the remit of the grants to enable individuals to complete training courses that are specific to primary bone cancer and sarcoma patients.

We will continue to explore collaborations that will bring greater benefit to our patients.

During the year we were delighted to continue our partnership work with Children with Cancer UK. Together, we held a symposium focused on Ewing sarcoma research. As a direct result of our shared values and determination to change outcomes for patients, we launched a £1million grant call for projects aiming to bring new treatments closer to clinical trial. This funding will be awarded in 2023. Our collaboration with the Ewing's Sarcoma Research Trust has now surpassed 10 years and continues to accelerate biological studies in Ewing sarcoma. In October we were pleased to start a new funding partnership with Sarcoma UK, University College London, and NHS Digital which will provide accurate and detailed data on diagnosis, incidence, survival, and treatment up to present date. This data will provide the evidence base to support our new organisational strategy in the coming years. It will also, provide a long-term measure for the impact of our work.

We will hold face to face symposia focused on multiple primary bone cancers.

In May we held our first chondrosarcoma symposium, which brought together experts from the surgical, pathology, oncology, and research fields. Chondrosarcoma is the most common form of primary bone cancer; however it has seen significantly less investment compared to osteosarcoma and Ewing sarcoma. The day consisted of presentations to give an overview of ongoing work, which was followed by an interactive workshop session aimed at identifying opportunities to improve outcomes for chondrosarcoma patients. The day concluded with the launch of a dedicated funding call to support the identified research priorities, which will be awarded in 2024.

October saw us build on our previous virtual Advances in Ewing Sarcoma Research meetings with our first in-person symposium, which took place in Leeds, UK. This meeting brought together over 80 delegates from around the world to share progress and identify priorities in Ewing sarcoma research. We were joined by Professor Claudia Rössig, Professor Richard Gorlick and Dr Brian Crompton, all leaders in their professional fields, who gave keynote speeches. The day concluded with the launch of a £1M funding call, in collaboration with Children with Cancer UK and, several collaborations across Europe have been established.

RESEARCH. WHAT WE SAID WE'D DO & WHAT WE DID...

We will launch a new and ambitious Research Strategy.

Following consultation with over 1,000 members of the primary bone cancer community, we developed and launched an ambition 10-year organisational strategy in October 2022. As part of this, we have identified 7 strategic priorities for research which will see us commit over £10million to new research and accelerate the development of new and kinder treatments for patients. Our organisational strategy will underpin a more detailed and specific Research Strategy which will be launched in 2023.

We will proactively support researchers through the expansion of our Patient & Public Involvement Panel, encouraging researchers to use this invaluable resource whenever possible.

Our Patient & Public Involvement Panel entered its second year in 2022. Since being established it has become an invaluable resource for the research community – providing new levels of insight and experience to shape the development of research projects. By the end of the year, we had 33 voluntary members of the panel. Of the members, 21 took part in 9 consultations to shape research projects and provided 26 lay reviews of project proposals. Because of the panel, 5 projects were re-worked to greater serve the needs of patients – demonstrating the importance of patient and public involvement in the development of research.

HOW HAVE WE PERFORMED AGAINST OUR 2017-2022 AIMS & OBJECTIVES?

We will commit over £2.8 million to pioneering research through an innovative new grant programme.

- Because of the continued support of our community, we were able to surpass our aims and invest over £5.7million across 73 outstanding research projects, all aiming to improve outcomes for patients.
- Our Grant Programme provided an adaptive framework to react and support emerging research needs, ensuring greater support was available at a time where investment by other organisations was decreasing.

We will support research at all levels, from initial idea through to clinical trial.

- Throughout the period we supported 15 Idea Grants, 14 Project Grants, one Programme Grant and supported two clinical trials.
- Of our funded grants, 7 supported the continuation of projects bringing them closer to patient benefit – ensuring funding isn't a limiting factor in primary bone cancer research.

We will deliver the next generation of world class, primary bone cancer researchers.

- Over the last five years we have supported 4 PhD Studentships focusing on primary bone cancer. We are delighted to report that the two PhD students who have completed their projects in the period have stayed within the field.

In a competitive market, funding for Early Career Fellows is extremely limited, particularly when focusing on a rare cancer. This is why we were determined to ensure this funding was available to primary bone cancer researchers and during the year we funded our first-ever Early Career Fellow, Dr Lucia Cottone. We will continue to support UK surgical centres to enable all primary bone cancer patients to contribute tissue samples for use in research.

- Throughout the period, we awarded 19 Infrastructure Grants to the 5 bone cancer centre in England, providing them with the necessary resources to approach all patients regarding sample donation and involvement in research.
- Thanks to our Infrastructure Grants, 4,805 patient samples have been collected which have directly enabled and supported 21 research projects, plus a further 5,697 samples have been collected and stored to support and facilitate future research.
- Our innovative and pioneering approach to this work, and its direct benefit to patients, led to the Bone Cancer Research Trust being awarded National Healthcare & Medical Research Charity of the Year 2019 at the National Charity Awards.

INFORMATION & SUPPORT



HOW HAVE WE PERFORMED AGAINST OUR 2017-2022 AIMS & OBJECTIVES?

In 2022, we were delighted to see our Support & Information Service returning to face-to-face activities. Our flagship support event, the Bone Cancer Conference returned with 2 events, and we launched smaller, touring 'Get Togethers' taking our Support Team to our patients and supporters in the community. Although we returned to face-to-face events, we continued to hold our weekly and monthly virtual support groups. These virtual support groups were launched in response to lockdown, however, they have made it significantly easier for patients and families to access support without travelling. Throughout the year, we welcomed 822 attendees to our in-person and virtual events.

Throughout 2022, the use of our Support & Information Service grew considerably, and we received a total of 2,025 Support & Information Service contacts, a 27% increase on 2021. We are not only seeing an increase in the number of total contacts, but the number of individuals contacting the Service, and in 2022 almost 500 individuals contacted the Service, with 309 of these making their first contact with us.

As we move from the impact of COVID-19 to the cost-of-living crisis, the financial burden on families or individuals due to a primary bone cancer diagnosis is increasing. Our financial grants have continued to provide important support to patients, covering the cost of food, car parking and travel. In 2022, we awarded over £20,000 in financial support grants, with demand growing.

INFORMATION. WHAT WE SAID WE'D DO & WHAT WE DID...

We will optimise our online information pages to improve accessibility and will begin work developing a new website.

In October 2022 we began working with 2 Health Information experts to review all our patient information in both digital and print format to ensure this is accessible and understandable. This review is also informing the design needs of a new website.

We will update and re-launch our Ewing sarcoma and osteosarcoma information booklets.

We commenced work on our Ewing sarcoma information materials in October as a priority due to the change in standard first line chemotherapy. The review was concluded at the end of 2022 and the resource will be re-designed and printed in early 2023. The osteosarcoma booklet and accompanying materials will also be finalised in 2023.

In October, we were delighted to begin working with two Health Information professionals to review our current information resources and the readability and accessibility of these resources.

After the winding down of the Information Standard, the kitemark for Health Information, the Patient Information Forum was established, which developed the PIF tick as the new accreditation kitemark for all patient information. Between October and December, we developed new procedures to ensure our information production and review processes were robust, and in line with the guidance developed by PIF. In December 2022, we submitted our application for PIF accreditation, with an interview scheduled for January 2023.

We will add to our online information pages to include greater detail on statistics and incidence.

A comprehensive review of available statistics on incidence, survival, time and route to diagnosis and prevalence was undertaken, allowing us to ensure that the statistics used on our website are up to date and are clear.

We will apply for Patient Information Forum (PIF) accreditation, ensuring we meet best practice in patient information production.

Throughout 2022 we developed robust processes and procedures, in line with PIF guidance and submitted our application for PIF accreditation in December 2022, with an interview scheduled in January 2023.

We will re-introduce Information Days at bone cancer surgical centres.

Our Support and Information team held information days at the Robert Jones and Angus Hunt Orthopaedic Hospital, Oswestry and the Royal Orthopaedic Hospital, Birmingham, where they had the chance to meet patients and clinical teams and share our Support and Information resources. The team also visited the proton beam centre at University College London Hospital.

We will develop a Patient / Parent Pack to offer comprehensive information to all patients on their specific primary bone cancer or tumour type.

- In 2017 we co-developed a Step-By-Step Guide for Patients with patients and healthcare professionals as a go-to resource to guide both patients and families or carers through an overwhelming and anxious time.
- Over the 5 years, we have distributed over 1500 printed copies and there have been over 10,000 downloads of this resource.

We will expand our existing portfolio of information for patients of all ages.

- In 2017 we launched Harry has an operation, a dedicated children's resource describing the surgical journey a primary bone cancer patient is likely to experience. This resource was co-developed with patients and a children's psychologist to ensure that this very difficult subject was described clearly for children to understand.
- In 2018, our second children's resource, Abbie Has Osteosarcoma was developed and launched. This interactive resource describes an osteosarcoma patient journey and allows children to record who their doctor and nurse is and to document their feelings throughout their treatment.

We will develop information for carers and families of patients with primary bone cancer.

- All of our information has been designed to be applicable to patients and carers/family members.

Throughout the 5 years, we provided direct support to families and carers through our Support & Information Service.

We will expand our basic information to ensure patients in other countries have access to relevant information.

- Our information was shared with healthcare professionals and patients at international conferences, ensuring that these are available across Europe.
- Our symptoms information was translated to several different languages, including Spanish, French and Italian.
- Our social media campaigns continued to promote our information throughout the UK and overseas. Our Information pages on our website were accessed by people across the globe. Top countries included the United States, Germany, Russia, Canada and India.

We will ensure that information is available for the clinical and medical community.

- We developed a dedicated Healthcare Professional Hub on our website, adding relevant information to this page as an educational resource.
- This hub contains links to management guidelines, downloadable information resources and webinar content.

We will accurately signpost relevant information that falls outside our remit.

- We recognise that there are areas of support and information that we cannot provide, therefore we developed a comprehensive signposting hub on our website.
- This hub provides information on organisations covering topics such as mental health, amputation, counselling and bereavement and special days. content.
- We held 7 webinars with other organisations, showcasing their important work and resources.

SUPPORT. WHAT WE SAID WE'D DO & WHAT WE DID...

We will hold two Bone Cancer Conferences at venues across the UK.

Our flagship support event returned in 2022, after a 2 year pause due to COVID-19. We held two conferences, a SOUTH conference in Watford on the 21st May and a NORTH conference in Leeds on the 15th October. These events were both fully subscribed, showing the importance of these to our community. They brought together over 350 patients, family & friends, healthcare professionals and researchers to share patient experiences, research updates and opportunities to gain invaluable peer support.

We will commence face-to-face support meetings across the UK, enabling patients to gain peer-to-peer support.

We were delighted to launch our Bone Cancer Research Trust 'Get Togethers', which took place in Swansea, Oxford and Leeds. These events have been very popular with patients and allow them to access support, both from our charity and other patients, close to their homes.

We will expand our Support & Information Service to include WhatsApp messaging, increasing our accessibility for patients.

Our Support and Information Service is always striving to ensure it is accessible to all and one way in which we wanted to improve our accessibility was to offer the option of WhatsApp messaging. In 2022, we received over 330 contacts via this channel and it has increased the ease in which patients and loved ones can access support.

We will expand our collaboration with Henry Dancer Days to offer personalised 1-to-1 storytelling sessions for children affected by primary bone cancer.

We were delighted to offer one-to-one Virtual Storytime sessions to 3 children affected by primary bone cancer. As part of these, the children were invited to 6 virtual sessions with a storyteller, where they read 3 books of their choice together. The children received a copy of each book.

Along with the one-to-one sessions, we also held 3 group Virtual Storytime sessions, to which 12 children attended.

We will develop specific support for bereaved parents and families and for siblings of patients.

Two of our key areas of focus in our 2022 conferences were in the area of sibling support and support for bereaved parents. We invited speakers to share their experiences of bereavement and how it feels to be a sibling of a patient with a primary bone cancer and offered a safe space for discussion amongst those with shared experiences. We have heard many times from our supporters that there is a gap in support for siblings, who are often neglected. We also held focus groups to help us shape dedicated support in these areas, ensuring that we deliver something that is beneficial to those who need it.

HOW HAVE WE PERFORMED AGAINST OUR 2017-2022 AIMS & OBJECTIVES?

We will provide a listening ear service that allows current patients or family members to talk with someone that has been through a similar experience.

- After feedback from our community, we moved away from a listening ear service and launched a formal Support & Information Service in 2019 to meet the specialist needs that other support services were not offering our patients.
- Over the 5 years, the Support & Information Service use has grown significantly, with 5720 contacts made throughout this 5 year period.

We will actively promote the sharing of patient stories and experiences.

- Patient stories have proved to be an important means of raising awareness of primary bone cancer and also an important peer support resource. It is important for those facing a primary bone cancer journey to be able to read the experiences of others who have already faced this.
- Throughout this strategic period, we have shared over 100 new patient stories, and held a series of patient experience focused webinars.

THE INCREASE BETWEEN 2017 AND 2022 FOR TOTAL CONTACTS IS...

1278%



We will develop digital 'community' support groups.

- Over the 5 years, we have launched 9 Digital Support Groups to provide a safe space for patients and their loved ones to gain peer-to-peer support.
- In response to the COVID-19 pandemic, when access to face-to-face support with BCRT or other organisations was not possible, we launched virtual support groups, held over Zoom, which break geographical barriers. These have reduced the feelings of isolation for those that attend them.

We will deliver an annual conference aimed at uniting and supporting our community.

- Despite the COVID-19 pandemic resulting in us cancelling the patient conferences planned in 2020 and holding a virtual event in 2021, we held 5 Bone Cancer Conferences attracting 950 attendees.
- The attendances at these events have grown year on year with feedback clearly demonstrating that these events reduce the feelings of isolation and anxiety significantly.

We will ensure robust signposting to other support groups and charities where we cannot provide assistance.

- We have a signposting hub on our website, linking our patients to other organisations..
- Our Support & Information Team now actively signpost to 94 organisations across the UK offering help and support beyond our remit, such as counselling, legal advice, and practical assistance with matters such as travel insurance.



AWARENESS



2022 was a record year for our public awareness campaigns at the Bone Cancer Research Trust. Our digital activities were seen over 69 million times across the UK and internationally. Additionally, we invested in new media and PR activities which resulted in an incredible potential reach of 400 million around the world.

In addition to educating the public, we continued our efforts to educate healthcare professionals and over 4,300 free training resources for medical professionals were downloaded from our website.

In March, we attended the British Sarcoma Group meeting in Liverpool where we gave an overview presentation of our Awareness Initiative and the resources developed as part of this. This gave us a chance to network with key healthcare professionals and invite these to join our awareness advisory panel. During the conference, 6 of the National Sarcoma Fellowship award winners presented their experience at a sarcoma centre.

During Sarcoma Awareness Month in July, our focus was to encourage the public to be aware of the signs and symptoms of primary bone cancer. Our campaign was seen by over 2.3 million people. Our campaign also included working collaboratively on the development of a new video which included Dr Zoe Davison, Head of Research, Information and Support at the Bone Cancer Research Trust and Helen Stradling, Sarcoma Specialist Nurse

and Support Line Manager at Sarcoma UK. The video provided information from both charities about treatment and support available to patients as well as their loved ones and the video was viewed over 14,000 times.

Working with Sarcoma UK and the Royal Orthopaedic Hospital, we supported BriteStar, a registrar led audit to assess compliance with British Sarcoma Group, NICE & Scottish referral guidelines for suspected cancer in the UK for pelvic & appendicular sarcomas. This audit was conducted in the second half of 2022, collecting data from the 5 surgical centres to give a snap-shot of data, such as route and time to diagnosis and stage and grade at diagnosis. This crucial audit will inform our future early diagnosis work.

In December 2022 we launched our first Giant Cell Tumour of the Bone awareness campaign in response to patient feedback that this tumour type is underrepresented. Our campaign lead was a former Giant Cell Tumour of the Bone patient, who kindly shared their personal experience. The campaign was information led focussing on the latest statistics, symptoms, treatment, diagnosis, malignancy, potential causes, and long-term effects.

WHAT WE SAID WE'D DO & WHAT WE DID...

We will work collaboratively to fund a data analyst to capture key primary bone cancer statistics, including incidence, survival, and routes & time to diagnosis. This will inform our work on early diagnosis.

We worked with Sarcoma UK to fund a project with UCL and NHS England. This project has allowed the recruitment of a dedicated sarcoma data analyst. The analyst has interrogated national cancer data and presented the incidence of bone sarcomas broken down by age, type, and sex. This work is being developed for publication in a scientific paper. Once this has been published, more detailed stats will be added to our website and a review of our planned early diagnosis work will be done.

We will support training fellowships for medical students and junior doctors to work in a sarcoma specialist centre to gain valuable and career lasting knowledge in sarcoma.

In 2022, in collaboration with Mr Coonoor R Chandrasekar and Sarcoma UK, we supported the National Sarcoma Fellowship. This enabled medical students and postgraduate doctors to undertake a voluntary e-module to assist their learning in the field of sarcoma. The top 8 students completed a 1-week fellowship at a sarcoma centre. This fellowship gave the winners hands on experience in a sarcoma service and allowed the winners to meet and care for sarcoma patients.

We will present at the British Sarcoma Group meeting; highlighting the issues that our patients face with delayed diagnosis.

We were given the opportunity to present at the British Sarcoma Group meeting in March 2022, which took place in Liverpool. Our presentation focused on our patients' experiences of delayed diagnosis and what BCRT aim to do to improve this. We shared the resources distributed as part of our Awareness Initiative campaign.

We will formalise and expand our Healthcare Expert Panel and develop a strategic plan to improve the awareness of primary bone cancer amongst the public and healthcare professionals.

During the British Sarcoma Group meeting, we identified key healthcare professionals willing to join our Healthcare Expert Panel to advise us on our awareness activities. Terms of Reference for the panel has been drawn up and the panel will officially launch in 2023.

We will launch a new 10-year strategy as part of Bone Cancer Awareness Week.

As part of our Bone Cancer Awareness Week campaign, we launched our 10-year strategy 'More Patients Surviving. More Patients Thriving.' During the week we reached 4.2 million people and since its launch, our 10-year strategy has been viewed 266 times.

HOW HAVE WE PERFORMED AGAINST OUR 2017-2022 AIMS & OBJECTIVES?



We will ensure all GPs in the UK have access to the training and tools they need to identify and diagnose primary bone cancer.

- In 2020 we launched the most comprehensive patient survey on symptoms and routes and time to diagnosis that has been conducted for primary bone cancer patients.
- We used the results of this to inform our Awareness Initiative, in collaboration with Children with Cancer UK.
- We sent resources out to all GPs in England, equipping them with the tools needed to recognise the signs and symptoms of primary bone cancer.
- We also held a live webinar with our GP ambassador to educate fellow GPs on the key signs and symptoms and where to refer.

We will develop tools to allow radiographers, physiotherapists, and other medical professionals to identify the symptoms of primary bone cancer.

- As part of our Awareness Initiative, we developed resources for physiotherapists, radiologists, medical students and pharmacists.
- We held dedicated educational webinars focused on these groups
- We recruited a healthcare professional from each of these disciplines to sit on our Healthcare Expert Panel.

We will increase national and, where possible, international public awareness of primary bone cancer and the Bone Cancer Research Trust.

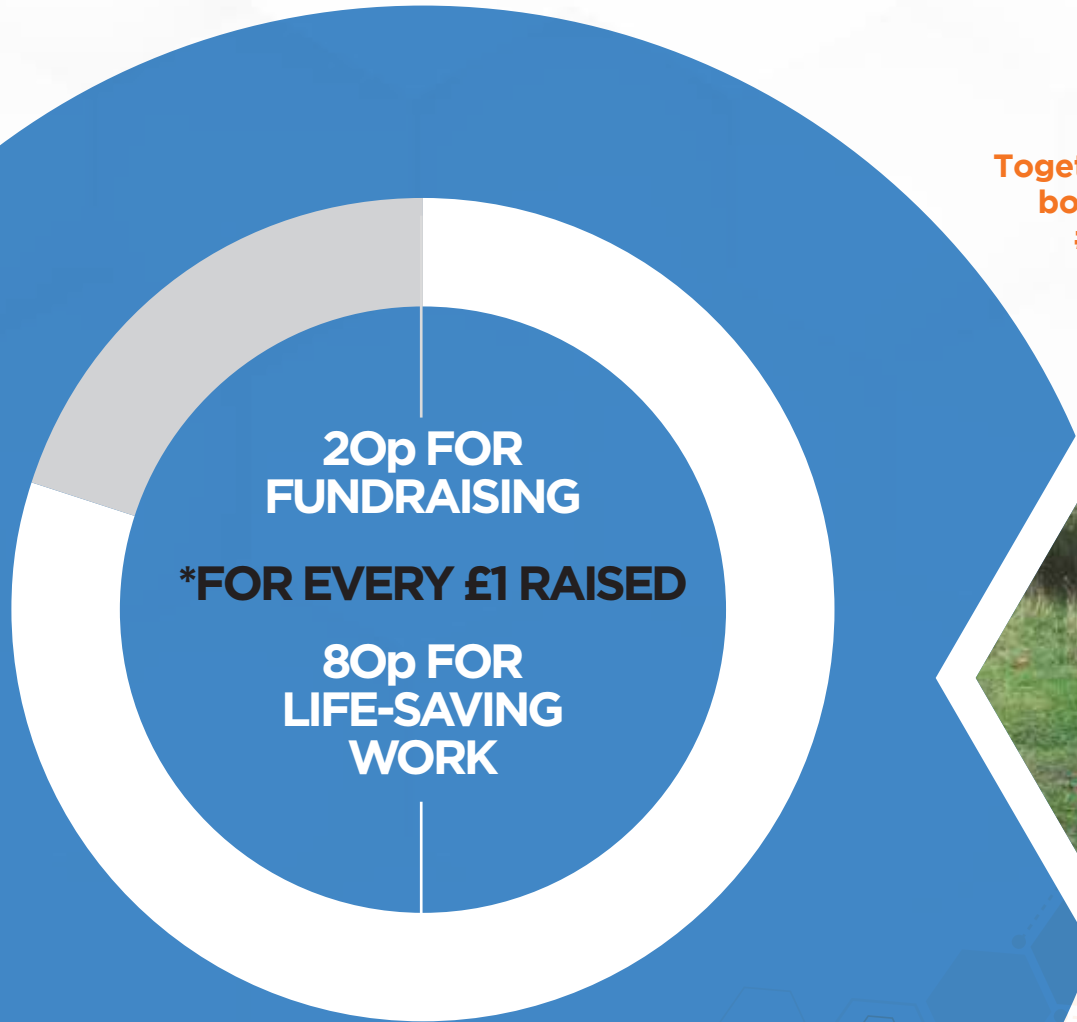
- We ran awareness raising campaigns focused around: World Cancer Day, Rare Diseases Day, World Oral Health Day, Sarcoma Awareness Month, Childhood Cancer Awareness Month and our own events, Bone Cancer Awareness Week and Giant Cell Tumour of the Bone Awareness Week. Our campaigns have reached millions of people around the world all increasing awareness of primary bone cancer and tumours and the Bone Cancer Research Trust.
- With thanks to the bone cancer community, both in the UK and internationally, we have shared over 100 patient stories which have raised awareness of primary bone cancer and tumours and offered support to patients.
- Our online following has grown by over 200% since 2018 as a direct result of our increased activities to over 210,000 social media followers across the globe.
- In 2022, we invested in new media and PR campaigns which resulted in an incredible potential reach of 400 million increasing international awareness.

OUR FUNDRAISING APPROACH

2022 saw continued investment in the fundraising team and the launch of our five-year fundraising strategy, which underpins our ten-year organisational strategy. The post pandemic world compounded by the cost-of-living crisis meant that we needed to stay abreast of industry trends and what fundraising activities our supporters wanted to engage with. At the heart of the five-year strategy is you, our supporters, as we continue to build long-term meaningful relationships with our wonderful community.

In 2022, 80,953 donations were made to support our life saving work by 28,681 supporters. We would like to take this opportunity to thank every single individual who helped us to raise a truly transformational £3,757,229.

Thanks to the generosity and kindness of all who have supported us throughout 2022, we are incredibly proud to announce that we had another fantastic year, more than doubling pre-pandemic levels of fundraising.



*For every £1 we raise, 80p goes towards delivering our life-saving work.

HOW WE FUNDRAISE

Throughout the year, we ensured that there were a diverse number of ways for people to get involved and we continued to offer both virtual and in-person fundraising opportunities. 2022 saw our full event's calendar reinstated and our wonderful fundraisers showed up in great numbers to support us.

- Collaboration is key to our organisational strategy, and we were thrilled when our friends at Children with Cancer donated a fantastic grant of £1 million, which will allow us to collaboratively accelerate research into Ewing sarcoma through a new grant programme which will be awarded in 2023.
- Our flag ship fundraiser was our ball which was attended by 700 people. Our amazing audience had a fantastic night and raised just under £140,000. Our best year yet!
- 2022 was a record year for our Special Funds, where we welcomed 12 new funds into our dedicated community. Our Relationship Managers continue to provide personal and ongoing support, guidance, and materials to facilitate their tireless efforts.
- Our Trusts and Foundation's Team had a record year, with 38 charitable trusts and foundations supporting 19 different projects.
- Over 46,000 people took part in our virtual fundraising challenges which continued to be a successful source of significant income and also helped us raise vital awareness of primary bone cancer and the charity itself across digital channels.
- Corporate sponsorship continued to develop at pace, with 10 brilliant organisations supporting our patient conferences and special events, thereby reducing the cost of our events and freeing up enough funds to pay for 833 hours of research.

Together we will beat
bone cancer forever.
#UntilTheresACure



WHAT WE DO

We aim to inspire our supporters to donate by sharing our patient stories, so they know and understand the impact our organisation can make in people's lives. In all our activities we aim to ensure that our supporters and the wider public are treated fairly and with respect. We inform people how to opt out of our communications, should they wish to do so.

We continually monitor and review our practices to ensure we are adhering to the latest in fundraising regulations and practices. The Bone Cancer Research Trust also voluntarily subscribes to the Fundraising Regulator and its Code of Fundraising Practice.

All staff are aware of and adhere to Charity Commission guidelines and The Code of Fundraising Practice which sets out statutory obligations and best practice standards.

WHAT WE WON'T DO

We do not employ third party fundraising organisations to work on our behalf or use methods of fundraising that can be seen as intrusive or persistent.

We are also very conscientious about self-regulation of our fundraising activities and protecting vulnerable people. We are especially careful and sensitive when engaging with those affected by cancer.

We don't sell or lend our database of supporters to other charities or organisations.

The Bone Cancer Research Trust continues to be a member of the Fundraising Regulator. During 2022 we received no complaints from the regulator relating to any of our fundraising activities.



OUR FUNDRAISING PROMISE

Supporters enable everything we do at the Bone Cancer Research Trust and fundraising for us should be a great experience. We promise:

- 01 We will commit to high standards
- 02 We will be clear, honest and open
- 03 We will be respectful
- 04 We will be fair and reasonable
- 05 We will be accountable and responsible



THANK YOU

The Bone Cancer Research Trust relies on public support to continue our life-saving work — whether this be through financial donations, fundraising, leaving a gift in your Will, donating time, or donating skills and services. We would like to thank every single person who has supported us in 2022 – without you, we could not do what we do for primary bone cancer patients!

Special Funds

We would like to thank all our Special Funds and their supporters for their unwavering support and dedication...

Abigail's Ambition, Adam Dealey, Adam Hassall Tribute Fund, Adam Panther Tribute Fund, Alexander Albiston Tribute Fund, Al Dawson Tribute Fund, Alex Lewis Memorial Fund, Anthony Pilcher Bone Cancer Trust, Ashton's Fund, Be More Isobel, Campaigns for Caroline, Chloë's Fight, Chris Fairley Fund, Christopher Spratt Tribute Fund, Daniel Bridle Memorial Fund, Daniel Humphreys Tribute Fund, The Darren Wilkinson Amelo Warrior Fund, Dila's Fund, Ellison's Fund, Emily Barker Tribute Fund, Fitzzy's Fund, Flora's Fund, For the Love of Stephen, Frank's Fund, Freddie's Future, Gemma Pickering Tribute Fund, Guy Francis Tribute Fund, Hughie's Fund, The Jack Sparrow Fund, James Anderson Tribute Fund, James Stewart Tribute Fund, Jennifer Carvell Tribute Fund, Jessica Gower My Blue Heart Fund, Jordon Wilson Tribute Fund, Josh's Journey, Josh Williamson Tribute Fund, Jude's Fund, Kenny McCabe Tribute Fund, Ken Davies Tribute Fund, Kieran's Legacy, Krystle Smith Tribute Fund, Laura Connolly Tribute Fund, Liberty's Legacy, Liz Clarke-Saul Fund, Lol's Legacy, Mary Collard Tribute Fund, Matthew22 Fund, Matt's Beacon Fund, Menafest, Nick Pollard Tribute Fund, Pushing for a Cure, Rhodri Jones Memorial Appeal, Ruth Grace's Battle, Sam's Fund, The Scott Abbruzzese Memorial Fund, Team Miles Forever Fund, Tom Stead Tribute Fund, Zack Foley Fund.

Our Active Ambassadors

Laurence Whiteley, Peter Lloyd, Dr Phillip Green, Charlene Young.

Support Service Advisors

Dr Sandra Strauss, Professor Robin Jones, Dr Alex Lee, Mr Jonathan Stevenson, Mrs Cathy Cook, Mrs Jane Forsyth.

ISAP

Professor Pamela Kearns, Professor Robert Brown, Mr Piers Gaunt, Dr Paulo Ribeiro, Professor Thomas G P Grünwald, Dr Nathalie Gaspar, Professor Didier Surdez, Dr Phillip Green, Dr Olivia Rossanese, Dr Apostolos Tsiachristas, Dr Filipa Vance.

Corporates, Trusts and Foundations

Albert Gubay Foundation, Balcombe Charitable Trust, Barbour Foundation, Children with Cancer UK, Clive Richards Foundation, Edward Cadbury Charitable Trust, Ewing Sarcoma Research Trust, Giddo's Gift, Inman Charity, Janet Bogen Charitable Trust, Liz and Terry Bramall Foundation, Miss M B Reekie Charitable Trust, National Lottery Awards for All England, PF Charitable Trust, Robert Luff Foundation, Sir William Coxen Trust Fund, Takeda UK, Tesco Community Grants, UK Government COVID Medical Research Charity Support Fund, Cantello Tayler Recruitment Ltd, Evoke Classics, JMW Solicitors LLP, Jungle IT Ltd, LPW Group Ltd, RBC Brewin Dolphin, RNB (Group) Ltd, Stockley and Turner Ltd, Stonebridge Homes Ltd, Worldwide Scaffold and Access Ltd, Friday's Child Direct Response Television, Irwin Mitchell Solicitors.

Volunteers

Ben Lang, Brenda Peel, Felicity Smith, Sarah Dawson, Ben Skinner, Terri Bush, Ian Radbourne, Maria Radbourne, Ben Shaw, Michael Knight, Rachel Westwood, Josh Charles, Josh Lawrence, Sam Thompson, Sophie Lewis, Ben Lewis, Imogen Westwood, Jonny Quinn, Rose Walker, Sahara Williams, Jonathan Todd, Jane Frost, Katrina & Hayley from F4D Events.

...as well as the many other individuals who have supported us in so many different ways.

Information Review Panel

Dr Darrell Green, Dr Elizabeth Roundhill, Professor Bernadette Brennan, Professor Paul Cool.

PPIP Members

Abby Brook-Carter, Alexandra Bushby, Alice Asprou, Andy Harding, Anita Grant, Anja Hollingworth, Ann Maxwell, Anne-Marie Creamer, Charlene Young, Chris Hassall, Claire Beetlestone, Darren Wilkinson, Devynne Cull, Filipa Vance, Imogen Westwood, Jacky Harding, Jenny Wick, Karen Schurer, Kerry Smith, Kirsty Hopgood, Laura Ricaud, Lesley Saul, Lisa Reimer, Lynsey Linnell, Margaret Moore, Mark Newton, Naomi Creutzfeldt, Nick Kalita, Nicole Croft, Pete Lloyd, Rachel Hayton, Rebecca, Knightly Brown, Riana Poppat, Ruth Yard, Sally Saunders, Shirley Wishart, Sonal Anand, Sophie Hartley, Sylvie Leslie, Tim Pingree, Vanessa Sousa, Vathsan Ravindran, Victoria James.

REFERENCE AND ADMINISTRATIVE DETAILS FOR YEAR ENDED 31ST DECEMBER 2022

Trustees:

Andrew Lewis (Chair until 30/4/2022)
Alison Gartland (Chair from 30/4/2022)
Roger Paul
Gillian Elizabeth Johnston
Sarah Bernadette Dawson (resigned 19/1/22)
Damien Harper
James Maffin (until 29/9/2022)
Bernadette Brennan
Arlene Eves
Dr Darrell Green
Jonathan Stevenson
Elizabeth Eatock

Clerk to the Trustees:

Elizabeth Eatock (until end March 2022)
Jenny Connolly (from April 2022)

Independent Scientific Advisory Panel:

Chair: Professor Pam Kearns

Professor Pam Kearns, MBChB, BSC (Hons), PhD, FRCPCH, Professor of Clinical Paediatric Oncology and Honorary Consultant in Paediatric Oncology, University of Birmingham

Deputy Chair: Professor Robert Brown

Professor Robert Brown, Chair in Translational Oncology, Imperial College London and The Institute of Cancer Research

Lay Member: Mr Simon Allocca

Lay member of Independent Scientific Advisory Panel

Member: Dr Richard Grose

BSc, PhD, Barts Cancer Institute

Member: Andy Hall

MBBS, FRCP, PhD, FRCPATH Newcastle University

Member: Piers Gaunt

BSc MSc, Senior Biostatistician, University of Birmingham

Member: Dr Paulo Ribeiro

BSc MSc PhD, Senior Lecturer and Group Leader, Bart's Cancer Institute

Member: Professor Thomas Grunewald

MD, Division Head, Translational Paediatric Sarcoma Research, German Cancer Research Center, Heidelberg, Germany

Member: Dr Nathalie Gaspar

Paediatric Oncologist, Department of Oncology for Child and Adolescent, Gustave Roussy Cancer Campus, France

Member: Dr Didier Surdez

Senior Researcher in the lab of Olivier Delattre, Institut Curie, Paris

Principal Address

Unit 10, Feast Field
Horsforth, Leeds, LS18 4TJ

Registered Charity Number

1159590

Senior Management Team

Mr Mat Cottle Shaw – CEO
Dr Zoe Davison – Head of research and information
Mrs Christine Taylor – Head of finance
Mrs Laura Riach – Head of fundraising and communications (appointed 22/3/22)

Independent Auditors

Thomas Coombs Limited
Statutory Auditor, Chartered Accountants
3365 The Pentagon, Century Way
Thorpe Park, Leeds
West Yorkshire, LS15 8ZB

Bankers

CAF Bank Ltd
25 Kings Hill Avenue, Kings Hill
West Malling, ME19 4JQ

Lloyds Bank
65-68 Briggate, Leeds
West Yorkshire, LS1 6LH

Solicitors

Shakespeare Martineau
No 1 Colmore Square,
Birmingham,
B4 6AA

HR Consultants

The HR Dept Ltd
First Floor
3 Brook Office Park
Emersons Green
Bristol
BS16 7FL

Investment Managers

Brewin Dolphin
10 Wellington Place
Leeds, LS1 4LX

REPORT OF THE TRUSTEES FOR YEAR ENDED 31ST DECEMBER 2022

The trustees present their report with the financial statements of the charity for the year ended 31st December 2022. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

Objectives And Activities

Objectives and Aims

BCRT is an unincorporated body, a trust that is governed by a Trust Deed, and managed by a Board of Trustees. The Trust Deed states that the Trustees must apply the income in furthering BCRT objects, as follows:

- i) Promoting research into the causes and treatment of primary bone cancer in young people and in particular of osteosarcoma and Ewing sarcoma, and publishing the useful results thereof;
- ii) Provide support and information services for persons suffering from Primary Bone Cancer, and their families.

The Trustees have complied with the duty set out in Section 4 of the Charities Act 2011, and have paid due regard to public benefit guidance published by the Charity Commission.

Board Of Trustees

Alison Gartland - Chair (from 30/04/22)

Alison is a Professor of Bone and Cancer Biology at The University of Sheffield and has a background of over 20 years of research into bone biology including primary bone cancer. Alison currently heads up a team of researchers looking at mechanisms of primary and metastatic bone diseases and is regularly involved in education of Medical Students at The University of Sheffield. As such Alison has knowledge of the current research landscape and also the medicine curriculum and teaching priorities for the doctors of the future. Alison is passionate about raising awareness about primary bone cancer.

Andy Lewis - Chair (until 30/04/22)

Andy has 40 years' experience in technology, project management and consultancy. He has worked as a Founding Board Member (BBC Technology), a Company Director and a Programme Director (NCR, BBC, Siemens, ITV, Coopers and Lybrand, Sainsburys, RBS). Andy's son, Alex, passed away from Osteosarcoma in February 2011.

Roger Paul - Deputy Chair (until 30/4/22)

Roger's business life was in telecommunications, working in an executive position with AT&T. His daughter, Claudia, died at the age of 17, following a three-year battle with Ewing sarcoma. Her final wish was for Roger to help children in her position in the future, and consequently, he has been a trustee for 10 years.

Elizabeth Eatock - Deputy Chair (from 30/04/22)

Liz is a chartered accountant with experience of working in the public and charity sectors. Having previously worked at BCRT as Head of Finance, Liz has continued to use her finance and governance knowledge to support the charity as a trustee.

Bernadette Brennan

Bernadette is a Professor in Paediatric Oncology and Consultant Paediatric Oncologist at Royal Manchester Children's Hospital and The Christie NHS Foundation Trust. She is a NCRI Sarcoma Chair and member of the YOSS, Bone and STS subgroup, she chairs the CCLG (Childhood Cancer and Leukaemia Group) Rare Tumour Group and is a member of EXPeRT European Rare Tumour Group. She has given a number of invited lectures for learned societies and research groups both in the UK and overseas.

Sarah Dawson (until 19/1/22)

Sarah is a Coach and HR Training Consultant who became a trustee after her son Al died in 2007. Sarah lectures on related topics and spreads awareness of primary bone cancer to a wide range of audiences.

Arlene Eves

Arlene is a pensions lawyer experienced in advising trustees of occupational pension schemes. She joined BCRT as a trustee in 2018.

Gillian Johnston

Gill has 40 plus years' experience in bookkeeping, payroll and general administration. Her son, Anthony, passed away following a battle with Osteosarcoma in October 2002, and she was a founding trustee of BCRT.

James Maffin (until 29/9/22)

James is a finance professional and an associate member of the Chartered Institute of Management Accountants.

Jonathan Stevenson

Jonathan is a Consultant in Orthopaedic Oncology at the Royal Orthopaedic Hospital, Birmingham, managing adult and paediatric bone and soft tissue tumours of the limbs and pelvis. He became involved with BCRT in 2019 to help promote research and awareness.

Dr Darrell Green

Darrell's best friend passed away from Ewing sarcoma when they were teenagers. Darrell is now a Lecturer and Researcher at Norwich Medical School, University of East Anglia. Darrell trained in molecular genetics at Addenbrooke's Hospital in Cambridge before obtaining his PhD in Medicine at UEA. His research combines genetics, cell and molecular biology with bioinformatics to study gene silencing in primary bone cancer. Darrell sits on the editorial board of scientific journals and on grant review panels for other cancer charities. He has appeared several times on TV and Radio and has presented his research across the UK, Europe and in the USA. He is a member of the Euro Ewing Consortium (EEC) and the European FOSTER Consortium. In 2019, he was listed as a Universities UK Top 100 People "The Nation's Lifesavers". In 2020, Darrell joined the Board of Trustees for Bone Cancer Research Trust.

Damian Harper

Damian was diagnosed with Osteosarcoma in 1986 at just 17 years old. He has had a successful career, initially as a biomedical scientist, working in a pathology laboratory, then moving into project and programme management.

Sub-Committees

Following a governance review undertaken during the year, work commenced to establish sub-committees of the Trustee Board. The purpose of the sub-committees is to assist the full board in fulfilling its oversight responsibilities and achieving its charitable objectives in accordance with the organisational strategy. Good progress was made in formulating the objectives and structure of the new sub-committees, with a view to them becoming operational in the early part of 2023.

Recruitment and Appointment of New Trustees:

The CIO constitution requires the Board of Trustees to have at least 8 members. BCRT reviews the skills mix of the existing Board when recruiting new trustees, to ensure that their skills, personal and professional experiences are complementary to the existing board. On their appointment, new trustees are provided with, or have online access to the following documents:

- Latest audited Annual Report and Statutory Accounts
- Management accounts for the current year
- Minutes of trustee meetings for the current year
- BCRT's conflict of interest policy
- BCRT's financial procedures
- "Charity Governance Code for Larger Charities" published by the Good Governance Steering Group
- "The Essential Trustee", published by the Charity Commission.

Following their appointment, new trustees have a planned induction process during which they meet the staff team, spend time with other trustees, and get to know more about BCRT's activities. Trustees serve a 3-year term, after which they are eligible for re-election.

Organisational Structure

The Board of Trustees meets at least 4 times a year to set the strategic direction of the charity, review ongoing operational and financial performance, approve the awarding of new research grants, and review the risks faced by the charity. The Trustees give their time freely and no trustee remuneration was paid during the year. Details of trustee expenses and related party transactions are disclosed in notes 10 and 24 of the accounts.

Responsibility for the day-to-day running of the charity is delegated to the Chief Executive Officer, who is supported by a Senior Leadership Team, which comprises:

- Head of Fundraising and Communications
- Head of Research, Information and Support
- Head of Finance

The pay of the Chief Executive Officer and Senior Leadership Team is benchmarked against appropriate roles in similar charities. The charity is committed to achieving a balance between paying market rates to attract the most competent staff, and careful management of funds. A policy for staff remuneration is in place and applies to all staff employed by the charity.

The total number of staff employed at 31 December 2022 was 30 (including 10 who work part time).

The charity has a Conflict-of-Interest Policy for Trustees and Staff, and a register of interests is maintained for Trustees, the Chief Executive Officer and the Senior Leadership Team. Trustees are required to disclose all relevant interests to the Clerk to the Trustees and are required to withdraw from any decisions where an actual or potential conflict of interest may arise. Any individual with an interest in a matter being discussed at a meeting must immediately declare the interest to the meeting. The Chair of the meeting will then decide whether that individual will be entitled to vote on the matter.

Grant Making

We recognise that our ability to fund research is limited by our physical and financial resources. We aim to maximise the impact of our grants by encouraging research which is likely to win support from larger funding bodies in due course.

We believe that there is great value in collaborative research. Finding a cure depends on the cooperation of many experts, some of whom may not have worked in primary bone cancer research to date. Therefore we place special emphasis on the importance of:

- Creating the opportunity for researchers to work within primary bone cancer research
- Nurturing the careers of early-stage researchers with an interest in primary bone cancer
- Working with research teams to develop their research ideas through an innovative pilot grant scheme
- Supporting proposals which are likely to win support from larger funding bodies
- Encouraging collaboration between research groups
- Encouraging interdisciplinary team work and partnerships
- Facilitating access to primary tissue and clinical data
- Working with other charities to fund research costs

BCRT has established its grant making policy, which adheres to the recommendations set out by the Association of Medical Research Charities (AMRC) and National Institute for Health Research (NIHR) for peer review, to achieve its objects for the public benefit, and this policy is reviewed periodically. Applications are invited through calls for proposals, which then undergo a thorough review process including both review by our Independent Scientific Advisory Panel (ISAP) and external expert reviewers where necessary. The ISAP make recommendations to the trustees on the award of research grants, and the Board of Trustees approve the grants to be awarded. The ISAP consists of research professionals who are from respected centres of research throughout the UK and Europe. We also have one lay member of ISAP. BCRT is an active member of the AMRC.

The role of ISAP is to:

- Assess the validity of all research applications, taking into account the results of the external peer review process
- Interview candidates for studentships and fellowships
- Make recommendations in respect of funding projects to the Board of Trustees.

BCRT works with the primary bone cancer community and ISAP to develop our strategy to respond to areas of unmet or urgent need. BCRT works collaboratively with researchers and places emphasis on the ongoing monitoring of the impact of the research that we fund.

Risk Management

The trustees have a duty to identify and review the risks to which the charity is exposed, and to ensure that appropriate controls are in place to provide reasonable assurance against fraud and error. BCRT has a risk management policy, which reflects the commitment of the trustees to maintaining a strong risk management framework.

The trustees have examined the major strategic, business and operational risks which are faced by the charity, and confirm that there are suitable systems and procedures in place to enable those risks to be appropriately mitigated, managed and monitored. The CEO and Senior Leadership Team has a day to day responsibility to highlight any major risks that they may become aware of during the course of their duties.

The majority of BCRT's income is from voluntary donations and income from investments derived from voluntary contributions, and so there is a significant risk in being unable to maintain and grow income, in a cost-effective manner, in order to fund our charitable objectives and our 5-year strategy. To manage this risk, the charity continues to invest into the diversification of income streams and to reduce reliance on a small number of core sources of income.

Volunteers

The trustees are very appreciative of the work carried out by numerous volunteers throughout the UK and overseas and thank them for their tireless work in organising fundraising activities. There are also many volunteers that have played a role in other BCRT activities such as office administration, supporting challenges and events, conferences and Bone Cancer Awareness Week. In accordance with accepted practice, no value has been included in the financial statements to reflect the work undertaken by volunteers.

Financial Review

Income and Expenditure

BCRT celebrated its 16th anniversary in 2022 by achieving income of over £3,867K. While lower than the previous year's record-breaking £4,673K, this was a very strong result against a backdrop of the impact of the global pandemic and challenging economic environment. In fact, 2022 saw the charity more than double its pre-Covid income.

We again continued to capitalise on virtual fundraising opportunities and engage with more new supporters, raising awareness of the signs and symptoms of primary bone cancer as well as raising funds. We received grants and donations from a number of Trusts and Charitable Foundations and were grateful to receive a £1M contribution towards our Ewing sarcoma research programme from Children with Cancer UK. We gratefully thank every single fundraiser who contributed in 2022, no matter how large or small – every donation makes such a difference in enabling BCRT to fulfil its charitable objectives.

During the year we spent £3,689K on charitable activities, including awarding grants totalling £2,328K. Charitable spend increased by £1,430K on 2021's total as research programmes and other planned activities resumed after the disruption of the global pandemic. Fundraising costs were £792K, 20% of total income. A deficit of £1,146K was generated in the year.

Investment Policy

BCRT's investment policy requires that there must be no direct investment into tobacco or vaping companies. The charity's investments are held in a combination of fixed interest securities, UK and overseas equities and alternative investments. The funds are held in two portfolios and managed by Brewin Dolphin. The Portfolio number 1, which comprised 58% of the total fund at 31 December 2022, has an investment mandate of 'income and capital growth with moderate investment risk', whilst the mandate for Portfolio number 2, 42% of total value at year end, is 'income and capital growth with low investment risk'.

During 2022 Portfolio No.1 made a total return of -12.37%. This compared to a total return in the MSCI Balanced Index of -8.10%. The market value of the investment portfolio as at 31 December 2022 was £1,947,289. During 2022 the Portfolio No.2 made a total return of -10.75%. This compared to a total return in the MSCI Conservative Index of -11.60%. The market value of the investment portfolio as at 31 December 2021 was £1,431,040.

Reserves Policy

BCRT has a policy of maintaining sufficient reserves to enable the charity to meet, as a minimum, its operational costs for six months, estimated to be £1,410,000.

At the end of 2021 there was a designated reserve of £1,545,000 towards the costs associated with multi-year grants, including early years fellowships, consortia grants, translational grants, and other charitable support and information costs.

During the year the trustees approved the designation of £790,000 from three reserves towards future translational grants, consortia costs and projects in Adamantinoma and Chondrosarcoma.

Restricted reserves at 31 December 2022 were £2,032,035 whilst free reserves were £851,218. The trustees regularly monitor and review the reserves held within the context of the funds required to fulfil the objectives of the charity.

Going Concern

The trustees believe that the charity is a "going concern" based on the current financial status, the ongoing funding streams, the planned expenditure and research strategy.

Trustees Responsibility Statement

The trustees are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

The law applicable to charities in England and Wales, the Charities Act 2011, Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed 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 charity and of the incoming resources and application of resources, including the income and expenditure, of the charity for that period. In preparing those financial statements, the trustees are required to

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charity SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable accounting standards 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 business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charity and to enable them to ensure that the financial statements comply with the Charities Act 2011, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Disclosure of information to auditor

Each of the trustees confirms that so far as they are aware, there is no relevant audit information of which the charity's auditor is unaware. They have taken all the steps that they ought to have taken in order to make themselves aware of any relevant audit information and to establish that the charity's auditor are aware of that information.

Approved by order of the Board of Trustees on 25 October 2023 and signed on its behalf by
Alison Gartland - chair



Report of the Independent Auditors to the Trustees of Bone Cancer Research Trust Opinion

We have audited the financial statements of Bone Cancer Research Trust (the 'charity') for the year ended 31st December 2022 which comprise the Statement of Financial Activities, the Statement of Financial Position, the Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31st December 2022 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

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 Auditors' responsibilities for the audit of the financial statements section of our report. We are independent of the charity 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 the charity'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 trustees are responsible for the other information. The other information comprises the information included in the Annual Report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether 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.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Charities (Accounts and Reports) Regulations 2008 requires us to report to you if, in our opinion:

- the information given in the Report of the Trustees is inconsistent in any material respect with the financial statements; or
- sufficient accounting records have not been kept; or
- the financial statements are not in agreement with the

- accounting records and returns; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the Trustees' Responsibilities Statement, the trustees are responsible for the preparation of the financial statements which 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 charity'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 charity or to cease operations, or have no realistic alternative but to do so.

Our responsibilities for the audit of the financial statements

We have been appointed as auditors under Section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

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 a Report of the Independent Auditors 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 is detailed below:

Our approach to identifying and assessing the risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, was as follows:

- The engagement partner ensured that the engagement team collectively had the appropriate competence, capabilities and skills to identify or recognise non-compliance with applicable laws and regulations.
- We identified the laws and regulations applicable to the charity through discussions with management, and from our commercial knowledge and experience of the sector.
- We focused on specific laws and regulations which we considered may have a direct material effect on the accounts of the operations of the Charity, including the Charities Act 2011.
- We assessed the extent of compliance with laws and regulations identified above through making enquiries of management and inspecting legal correspondence.

- Identified laws and regulations were communicated within the audit team regularly and the team remained alert to instances of non-compliance throughout the audit.

We assessed the susceptibility of the charity's financial statements to material misstatement, including obtaining an understanding of how fraud might occur, by:

- Making enquiries of management as to where they considered there was susceptibility to fraud, their knowledge of actual, suspected and alleged fraud.
- Considering the internal controls in place to mitigate risks of fraud and non-compliance with laws and regulations.

To address the risk of fraud through management bias and override of controls, we:

- Performed analytical procedures to identify any unusual or unexpected relationships.
- Identified and tested journal entries and identified any significant transactions that were unusual or outside the normal course of business.
- Investigated the rationale behind significant or unusual transactions.
- Challenged assumptions and judgements made by management in determining significant accounting estimates.

In response to the risk of irregularities and non-compliance with laws and regulations, we designed audit procedures which included, but were not limited to:

- Agreeing financial statements disclosures to underlying supporting documentation.
- Discussions with management of known or suspected instances of non-compliance with laws and regulations.
- Reading the minutes of meetings of those charged with governance.
- Reviewing correspondence with HMRC, relevant regulators including the Charities Commission and the charity's legal advisors.

At the completion stage of the audit, the engagement partner's review included ensuring that the team had approached their work with appropriate professional scepticism and thus the capacity to identify non-compliance with laws and regulations and fraud.

There are inherent limitations in the audit procedures described above and the further removed non-compliance of laws and regulations is from the events and transactions reflected in the financial statements, the less likely we would become aware of it. Also, the risk of not detecting a material misstatement relating to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our Report of the Independent Auditors.

Use of our report

This report is made solely to the charity's trustees, as a body, in accordance with Part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditors' 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 charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Christopher Darwin FCA (Senior Statutory Auditor)
For and on behalf of Thomas Coombs Limited
Statutory Auditor
Chartered Accountants
3365 The Pentagon
Century Way
Thorpe Park
Leeds
West Yorkshire
LS15 8ZB

Date: 25 October 2023

STATEMENT OF FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31ST DECEMBER 2022

		UNRESTRICTED FUNDS	RESTRICTED FUNDS	TOTAL FUNDS 2022	TOTAL FUNDS 2021
	NOTES	£	£	£	£
INCOME AND ENDOWMENTS FROM					
Donations and legacies	2	1,699,846	2,057,383	3,757,229	4,608,750
Other trading activities	3	6,300	-	6,300	13,757
Investment income	4	103,047	-	103,047	50,516
Total		1,809,193	2,057,383	3,866,576	4,673,023
EXPENDITURE ON					
Income generation	5	792,251	-	792,251	569,275
Charitable activities	6				
Research		878,292	1,643,718	2,522,010	1,490,936
Awareness		690,092	731	690,823	534,302
Information		119,802	-	119,802	98,497
Support		296,787	33,413	330,200	122,103
Admin		26,570	-	26,570	13,752
Total		2,803,794	1,677,862	4,481,656	2,828,865
NET INCOME/(EXPENDITURE) BEFORE INVESTMENT GAINS/(LOSSES)					
		(994,601)	379,521	(615,080)	1,844,158
Net gains/(losses) on investments		(530,539)	-	(530,539)	203,075
NET INCOME/(EXPENDITURE)		(1,525,140)	379,521	(1,145,619)	2,047,233
RECONCILIATION OF FUNDS					
Total funds brought forward		3,207,244	1,652,514	4,859,758	2,812,525
TOTAL FUNDS CARRIED FORWARD		1,682,104	2,032,035	3,714,139	4,859,758

STATEMENT OF FINANCIAL POSITION 31ST DECEMBER 2022

		UNRESTRICTED FUNDS	RESTRICTED FUNDS	TOTAL FUNDS 2022	TOTAL FUNDS 2021
	NOTES	£	£	£	£
FIXED ASSETS					
Intangible assets	13	10,038	-	10,038	6,463
Tangible assets	14	31,279	-	31,279	20,645
Investments	15	3,369,263	-	3,369,263	3,847,964
		3,410,580	-	3,410,580	3,875,072
CURRENT ASSETS					
Stocks	16	245,337	-	245,337	176,920
Debtors	17	241,568	-	241,568	437,491
Investments	18	173,310	2,032,035	2,205,345	783,900
Cash at bank		1,328,803	-	1,328,803	1,402,683
		1,989,018	2,032,035	4,021,053	2,800,994
CREDITORS					
Amounts falling due within one year	19	(2,065,235)	-	(2,065,235)	(1,286,617)
NET CURRENT ASSETS		(76,217)	2,032,035	1,955,818	1,514,377
TOTAL ASSETS LESS CURRENT LIABILITIES		3,334,363	2,032,035	5,366,398	5,389,449
CREDITORS					
Amounts falling due after more than one year	20	(1,652,259)	-	(1,652,259)	(529,691)
NET ASSETS		1,682,104	2,032,035	3,714,139	4,859,758
FUNDS					
Unrestricted funds	22				
- Free reserves				851,218	1,635,136
- Fixed asset reserve				41,317	27,108
- Designated reserve	24			789,569	1,545,000
Restricted funds	22			2,032,035	1,652,514
TOTAL FUNDS				3,714,139	4,859,758

The financial statements were approved by the Board of Trustees and authorised for issue on 25 October 2023 and were signed on its behalf by:



Alison Gartland - chair

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31ST DECEMBER 2022

		2022	2021
	NOTES	£	£
Cash flows from operating activities:			
Cash generated from operations	1	1,324,532	2,665,267
Net cash provided by operating activities		1,324,532	2,665,267
Cash flows from investing activities			
Purchase of intangible fixed assets		(6,600)	(6,600)
Purchase of tangible fixed assets		(21,576)	(17,233)
Purchase of fixed asset investments		(476,118)	(1,708,108)
Sale of fixed asset investments		424,280	153,899
Medium and long term cash deposits		(1,421,445)	(783,900)
Investment income		103,047	50,516
Net cash used in investing activities		(1,398,412)	(2,311,426)
Change in cash and cash equivalents in the reporting period		(73,880)	353,841
Cash and cash equivalents at the beginning of the reporting period		1,402,683	1,048,842
Cash and cash equivalents at the end of the reporting period		1,328,803	1,402,683

NOTES TO THE STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 31ST DECEMBER 2022

1. RECONCILIATION OF NET INCOME/(EXPENDITURE) TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2022	2021
	£	£
Net income for the reporting period (as per the Statement of Financial Activities)	(1,145,619)	2,047,233
Adjustments for:		
Depreciation charges	10,942	4,897
Gain on investments	(46,385)	(3,527)
Amortisation charges	3,025	137
Unrealised loss/(gain) on investments	576,924	(199,548)
Investment income	(103,047)	(50,516)
Increase in stocks	(68,417)	(48,178)
Decrease/(increase) in debtors	195,923	(213,317)
Increase in creditors	1,901,186	1,128,086
Net cash provided by operations	1,324,532	2,665,267

2. ANALYSIS OF CHANGES IN NET FUNDS

	AT 1/1/22	CASH FLOW	AT 31/12/22
	£	£	£
Net cash			
Cash at bank and in hand	1,402,683	(73,880)	1,328,803
	1,402,683	(73,880)	1,328,803
TOTAL	1,402,683	(73,880)	1,328,803

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31ST DECEMBER 2022

1. ACCOUNTING POLICIES

Basis of preparing the financial statements

The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) ‘Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)’, Financial Reporting Standard 102 ‘The Financial Reporting Standard applicable in the UK and Republic of Ireland’ and the Charities Act 2011. The financial statements have been prepared under the historical cost convention, with the exception of investments which are included at market value, as modified by the revaluation of certain assets.

The trustees consider that there are no material uncertainties about the Charity’s ability to continue for a period of not less than 12 months from the date of the approval of the financial statements. Accordingly the financial statements have been prepared on the going concern basis

Income

Donations and sponsored events are included in the Statement of Financial Activities when:

- the Charity is told it is to receive the gift or donation
- the trustees are reasonably certain of the amount to be received
- the trustees are reasonably certain they will receive the money and
- any conditions for receipt are met

Income from challenge events is recognised when the event takes place. Any income received in relation to events taking place in future years is held as deferred income until the event takes place.

Legacies are recognised when it is probable that they will be received. Receipt is normally probable when:

- there has been grant of a probate;
- the executors have established that there are sufficient assets in the estate after settling any liabilities to pay the legacy; and
- any conditions attached to the legacy are either within the control of the Charity or have been met.

Government grants are recognised at the fair value of the asset received or receivable when there is reasonable assurance that the company will comply with conditions attaching to them and the grants will be received using the accruals model.

No amounts are included in the financial statements for services donated by volunteers.

Interest is accounted for on an accruals basis.

For those income streams which fall under the scope of VAT, income is recognised net of VAT.

Expenditure

Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that a transfer of economic benefits will be required in settlement and the amount of the obligation can be measured reliably. Expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings, they have been allocated to activities on a basis consistent with the use of resources.

Irrecoverable VAT is charged against the category of resources expended for which it was incurred.

The costs of generating income consist of investment management fees and those costs incurred attracting voluntary income and activities for generating funds, such as events.

Costs of charitable activities include grants made and an apportionment of overheads and administration costs.

Grants payable are payments made to third parties in the furtherance of the charitable objectives of the Charity. Single or multi-year grants are accounted for where 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 any condition attaching to the grant is outside of the control of the Charity.

Governance costs comprise all costs involving the public accountability of the charity and its compliance with regulation and good practice. These costs include costs related to external inspection and legal fees together with an apportionment of overhead and administration costs.

Critical accounting estimates and judgements

In the application of the charities accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

Critical estimates and judgements

Allocation of administration costs

Administration costs are allocated between the various activities of the group based on the weighting each activity has within total expenditure. The allocation of these costs is considered to be critical to the accounts because they have the ability to materially alter the allocation of costs between expenditure on raising funds and expenditure on charitable activities.

The activities of the charity are categorised as follows:

Income generation	- expenditure incurred in order to raise funds for charitable purposes.
Research	- grant funding research into finding a cure for primary bone cancer.
Awareness	- increasing survival rates through raising awareness of primary bone cancer.
Information	- providing accurate and reliable information across all forms of primary bone cancer.
Support	- improving the access to primary bone cancer support for all patients, family members, carers and friends.

The breakdown of administration costs and how these were allocated between governance and other administration costs is based on the following rates:

Income generation	36.5% (2021: 37.5%)	Information	5.7% (2021: 6.7%)
Research	9.2% (2021: 10.6%)	Support	15.7% (2021: 8.9%)
Awareness	32.9% (2021: 36.3%)		

The trustees consider it to be appropriate to exclude grants awarded from the calculation to avoid significant year on year variances in the breakdown of administration costs.

Intangible fixed assets

Amortisation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Website	- 25% on cost
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Tangible fixed assets

Tangible fixed assets are stated at cost (or deemed cost) or valuation less accumulated depreciation and accumulated impairment losses. Costs includes costs directly attributable to making the asset capable of operating as intended.

Depreciation is provided to write off the cost less the estimated residual of tangible fixed assets by equal instalments over their estimated useful economic lives as follows:

Fixtures and fittings	- 25% on cost	Computer equipment	- 33% on cost and 25% on cost
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Stocks

Stocks are valued at weighted average cost, after making due allowance for obsolete and slow moving items.

Taxation

The charity is exempt from tax on its charitable activities.

Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Investments

Fixed asset investments held by the charity are shares which are publicly traded. Such investments are recognised initially at fair value which is normally the transaction price including transaction costs. Subsequently, they are measured at fair value with changes recognised in 'net gains / (losses) on investments' in the SoFA.

Current asset investments held by the charity are medium and long term cash deposits made with banks and funds. These deposits have a maturity in excess of three months from the date of acquisition.

Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits with banks and funds that are readily convertible into cash at, or close to, their carrying values, but not held for investment purposes.

Financial instruments other than investments

The charity has financial assets and financial liabilities of a kind that qualify as basic and complex financial instruments. Basic financial instruments are measured at their settlement value in the case of current assets and liabilities and at discounted settlement value in the case of creditors falling due after more than one year.

Status

The Bone Cancer Research Trust is a Charitable Incorporated Organisation (CIO), the liability is therefore restricted. If the CIO is wound up, the members of the CIO have no liability to contribute to its assets and no personal responsibility for settling its debts and liabilities.

Volunteers

The value of services provided by volunteers is not incorporated into these financial statements. Further details of the contribution made by volunteers can be found in the Trustees' annual report.

Where services are provided to the Charity as a donation that would normally be purchased from a supplier, this contribution is included in the financial statements at an estimate based on the value of the contribution to the Charity.

Pension costs

The Charity contributes to defined contribution schemes on behalf of some of its employees. These contributions are charged to the SoFA when accrued.

2. DONATIONS AND LEGACIES

	2022	2021
	£	£
Event income	1,917,525	2,790,846
Donations	1,629,065	1,816,789
Grants	210,639	1,115
Total	3,757,229	4,608,750

Grants received, included in the above, are as follows:

	2022	2021
	£	£
BEIS grant	210,639	-
Furlough grant	-	1,115

3. OTHER TRADING ACTIVITIES

	2022	2021
	£	£
Other trading income	6,300	13,757

4. INVESTMENT INCOME

	2022	2021
	£	£
Investment income	103,047	50,516

5. INCOME GENERATION

Raising donations and legacies

	2022	2021
	£	£
Staff costs	306,607	234,934
Event costs	211,968	121,909
Other trading costs	2,148	6,561
Other fundraising costs	79,041	75,010
Administration costs	192,487	130,861
Total	792,251	569,275

6. CHARITABLE ACTIVITIES COSTS

	DIRECT COSTS	GRANT FUNDING OF ACTIVITIES (SEE NOTE 7)	ADMINISTRATION COSTS (SEE NOTE 8)	TOTALS
	£	£	£	£
Research	151,954	2,327,673	42,383	2,522,010
Awareness	540,163	-	150,660	690,823
Information	93,675	-	26,127	119,802
Support	258,186	-	72,014	330,200
Admin	-	-	26,570	26,570
Total	1,043,978	2,327,673	317,754	3,689,405
Total 2020	730,417	1,327,298	201,875	2,259,590

7. GRANTS PAYABLE

	2022	2021
	£	£

Research	2,327,673	1,327,298
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	2022 Unrestricted	2022 Restricted	2022 Total	2021
Dr Lucia Cottone Early Career Fellowship	500,000	-	500,000	-
Dr Sandra Strauss - Advancing ICONIC (AD-ICONIC)	145,311	852,524	997,835	-
Prof Alison Gartland - Preclinical validation of novel compounds to treat osteosarcoma	-	249,820	249,820	-
Prof Robert Falconer - Lead optimisation of a tumour-targeted methotrexate prodrug with enhanced therapeutic index for osteosarcoma	-	249,760	249,760	-
Dr M McCabe - Biological studies in rEECur, an international randomised controlled trial of chemotherapy for the treatment of recurrent and primary refractory Ewing sarcoma	-	187,805	187,805	-
Dr Hadley Sheppard - Evaluating the therapeutic potential of senolytic agents in chordoma	25,000	-	25,000	-
Professor Richard Martin - Developing novel biomaterials for osteosarcoma and chordoma treatment	-	24,986	24,986	-
Dr Helen Knowles - ANGPTL4 as a potential therapeutic target in osteosarcoma	-	10,233	10,233	-
Prof Sibylle Mitnacht, UCL Cancer Institute, Developing Genome-informed treatment to improve outcome in Osteosarcoma	-	-	-	249,204
Professor Alison Gartland, The Mellanby Centre for Bone Research, Department of Oncology and Metabolism, Sheffield University, The Role of Oestrogen in Chondrosarcoma Using Patient-Derived Xenograft Mouse models: A Pilot Study	-	-	-	16,667
Prof Aykut Uren, Georgetown University, Lombardi Comprehensive Cancer Centre, Second Generation Clofarabine Derivatives as CD99 Inhibitors	-	-	-	70,000
Mrs Carolyn Langford, The Royal National Orthopaedic Hospital NHS Foundation Trust, Birmingham, sample collection support	40,431	13,500	53,931	29,897
Prof A Flanagan, Royal National Orthopaedics Hospital Brockley Hill, Stanmore, sample collection support	-	-	-	28,396
Dr Robert Falconer, Institute of Cancer Therapeutics, University of Bradford, Development of a targeted methotrexate prodrug with enhanced therapeutic index for osteosarcoma	-	-	-	16,626

Continued...

	2022	2021
	£	£

	2022 Unrestricted	2022 Restricted	2022 Total	2021
Dr Darrell Green, Biomedical Research Centre, Norwich Medical School, TP53 Restoration using mRNA Vaccine Technology	-	2,193	2,193	20,000
Dr Karen Shah, The Mellanby Centre for Bone research, Department of Oncology and Metabolism, Sheffield University, Delineating the role of hypoxic extracellular vesicles in pulmonary metabolism	-	-	-	19,867
Dr Kogularamanan Suntharalingam, School for Chemistry, University of Leicester, one-seeking Metal-based Drugs to overcome Chemotherapy Resistant Osteosarcoma Sub-populations	-	10,000	10,000	20,000
Professor Gareth Veal, Optimising the Treatment of Teenagers and Young Adults with Ewing Sarcoma through an Increased Understanding of Clinical Pharmacology and Toxicity Biomarker	-	-	-	145,530
Dr Sandra Strauss, UCL Cancer Institute, ICONIC - Improving Outcome through Collaboration in Osteosarcoma	-	-	-	175,000
Dr Olivier Pardo, Imperial College, Division of Cancer, Modulation of Interferon Gamma-mediated Signalling and immune Response by Fibroblast Growth Factor 2 in Osteosarcoma	-	-	-	249,781
Dr Martin Pule, UCL Cancer Institute, Towards Engineered T Cells for Osteosarcoma	2,079	-	2,079	34,614
Dr Sandra Strauss, UCL Cancer Institute, Improving outcome in Sarcoma through Analysis and interrogation of National Cancer Data	-	-	-	43,082
Dr Sandra Strauss, UCL Cancer Institute, Euro Ewing Consortium	-	-	-	36,091
Early Diagnosis Patient Grant	-	-	-	6,000
Mr Kenneth Rankin, Northern Institute for Cancer Research, Newcastle University, sample collection support	8,701	6,800	15,501	16,000
Prof Susan Burchill, Leeds Institute of Medical Research, International Collaboration to Optimise	-	-	-	149,622
Patient Travel Support Grant	-	-	-	2,520
Skills development grants	8,367	-	8,367	-
Newcastle Infra, surplus balance outstanding	(7,164)	-	(7,164)	-
Iben Lyskjaer UCL, surplus balance outstanding	(2,673)	-	(2,673)	-
Jessica Bates, University of Sheffield, Ewing sarcoma project	-	-	-	1,599

Continued...

	2022		2021
	£		£
	2022 Unrestricted	2022 Restricted	2021 Total
Restricted funding allocated to payments of existing grants meeting the specific restrictions	(32,000)	32,000	-
	688,052	1,639,621	2,327,673
			1,327,298

8. ADMINISTRATION COSTS

	MANAGEMENT	INVESTMENT MANAGEMENT COSTS	GOVERNANCE COSTS	TOTALS
	£	£	£	£
Research	42,383	-	-	42,383
Awareness	150,660	-	-	150,660
Information	26,127	-	-	26,127
Support	72,014	-	-	72,014
Income generation	167,286	25,201	-	192,487
Governance	-	-	26,570	26,570
Total	458,470	25,201	26,570	510,241

Administration costs, included in the above, are as follows:

	RESEARCH	AWARENESS	INFORMATION	SUPPORT
	£	£	£	£
Wages	7,700	27,370	4,746	13,082
Social security	686	2,436	422	1,164
Pensions	246	874	152	418
Rent, rates and water	2,342	8,321	1,443	3,977
Telephone	1,130	4,018	697	1,920
Postage and stationery	993	3,530	612	1,687
Irrecoverable VAT	6,933	24,646	4,274	11,781
Sundries	1,093	3,883	673	1,856
Travel and subsistence	574	2,045	355	978
Software licences	4,183	14,871	2,579	7,108
Recruitment and human resources costs	401	1,427	248	683
Stock management	12,216	43,422	7,530	20,755
Bank charges	107	381	66	182
Legal fees	2,488	8,847	1,534	4,229
Amortisation of intangible fixed assets	280	994	172	475
Depreciation of tangible fixed assets	1,011	3,595	624	1,719
Portfolio management	-	-	-	-
Trustees' expenses and meeting costs	-	-	-	-
Auditors' remuneration	-	-	-	-
Accountancy and legal fees	-	-	-	-
	42,383	150,660	26,127	72,014
Total 2021	32,015	109,280	20,130	26,698

Continued...

	INCOME GENERATION	GOVERNANCE	2022 TOTAL ACTIVITIES	2021 TOTAL ACTIVITIES
	£	£	£	£
Wages	30,390	-	83,288	67,219
Social security	2,704	-	7,412	5,485
Pensions	971	-	2,661	1,629
Rent, rates and water	9,239	-	25,322	23,864
Telephone	4,461	-	12,226	9,574
Postage and stationery	3,920	-	10,742	17,025
Irrecoverable VAT	27,365	-	74,999	-
Sundries	4,311	-	11,816	15,713
Travel and subsistence	2,271	-	6,223	2,756
Software licences	16,512	-	45,253	26,893
Recruitment and human resources costs	1,586	-	4,345	14,826
Stock management	48,213	-	132,136	106,236
Bank charges	423	-	1,159	838
Legal fees	9,823	-	26,921	3,658
Amortisation of intangible fixed assets	1,104	-	3,025	137
Depreciation of tangible fixed assets	3,993	-	10,942	4,897
Portfolio management	25,201	-	25,201	18,234
Trustees' expenses and meeting costs	-	800	800	260
Auditors' remuneration	-	8,300	8,300	9,100
Accountancy and legal fees	-	17,470	17,470	4,392
Total	192,487	26,570	510,241	332,736
Total 2021	130,861	13,752	332,736	

9. AUDITORS' REMUNERATION

	2022	2021
	£	£
Fees payable to the charity's auditors for the audit of the charity's financial statements	8,300	9,100

10. TRUSTEES' REMUNERATION AND BENEFITS

The average number of trustees in the year were 11 (2021: 11).

There were no trustee's remuneration or other benefits for the year ended 31st December 2022 nor for the year ended 31st December 2021.

All trustees give their time freely and no Trustee remuneration was paid in the year. During the year monetary donations made by Trustees to the Charity totalled £130 (2021: £668). A number of trustees have connections to organisations which donate funds to the Trust. Further details are provided in note 25.

Trustees' expenses

Reimbursed expenses, which are all subject to the charity's processes of internal controls, do not form part of the remuneration and are not included above. During the period, trustee expenses of £800 (2021: £260) were reimbursed to four trustees (2021: two trustees).

11. STAFF COSTS

	2022	2021
	£	£
Wages and salaries	770,649	592,469
Social security costs	74,117	52,529
Other pension costs	20,113	15,382
Total	864,879	660,380

The average monthly number of employees during the year was as follows:

	2022	2021
Permanent staff	26	20

The average full time equivalent of employees during the year was 22.9 (2021: 18.3).
The breakdown of employees per pillar was as follows:

Income generation	9.1	7.1
Research	2.5	2.2
Awareness	4.5	3.0
Information	2.2	2.1
Support	2.4	2.0
Admin	2.2	1.9
Total	22.9	18.3

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2022	2021
In the band £60,001 - £70,000	1	-

Pension costs of £1,761 (2021: £1,655) were paid by the Charity for the above employee.

The Trust considers its key management personnel comprise the trustees and its Senior Leadership Team. The total employment costs to the charity of the key management personnel were £228,682 (2021: £156,923). The Senior Leadership Team was comprised of 4 members of staff in 2022 (2021: 3).

12. COMPARATIVES FOR THE STATEMENT OF FINANCIAL ACTIVITIES

	UNRESTRICTED FUNDS	RESTRICTED FUNDS	TOTAL FUNDS
	£	£	£
INCOME AND ENDOWMENTS FROM			
Donations and legacies	2,655,762	1,952,988	4,608,750
Other trading activities	13,757	-	13,757
Investment income	50,516	-	50,516
Total	2,720,035	1,952,988	4,673,023
EXPENDITURE ON			
Income generation	569,275	-	569,275
Charitable activities			
Research	584,901	906,035	1,490,936
Awareness	534,302	-	534,302

Information	98,497	-	98,497
Support	87,575	34,528	122,103
Admin	13,752	-	13,752
Total	1,888,302	940,563	2,828,865
Net gains on investments	203,075	-	203,075
NET INCOME	1,034,808	1,012,425	2,047,233
RECONCILIATION OF FUNDS			
Total funds brought forward	2,172,436	640,089	2,812,525
TOTAL FUNDS CARRIED FORWARD	3,207,244	1,652,514	4,859,758

13. INTANGIBLE FIXED ASSETS

	WEBSITE COSTS
	£
COST	
At 1st January 2022	44,787
Additions	6,600
At 31st December 2022	51,387
AMORTISATION	
At 1st January 2022	38,324
Charge for year	3,025
At 31st December 2022	41,349
NET BOOK VALUE	
At 31st December 2022	10,038
At 31st December 2021	6,463

14. TANGIBLE FIXED ASSETS

	FIXTURES AND FITTINGS	COMPUTER EQUIPMENT	TOTALS
	£	£	£
COST			
At 1st January 2022	11,872	36,924	48,796
Additions	1,094	20,482	21,576
At 31st December 2022	12,966	57,406	70,372
DEPRECIATION			
At 1st January 2022	6,994	21,157	28,151
Charge for year	2,758	8,184	10,942
At 31st December 2022	9,752	29,341	39,093
NET BOOK VALUE			
At 31st December 2022	3,214	28,065	31,279
At 31st December 2021	4,878	15,767	20,645

15. FIXED ASSET INVESTMENTS

	LISTED INVESTMENTS	CASH AND SETTLEMENTS PENDING	TOTALS
	£	£	£
MARKET VALUE			
At 1st January 2022	3,802,417	45,547	3,847,964
Additions	444,686	31,432	476,118
Disposals	(377,895)	-	(377,895)
Revaluations	(576,924)	-	(576,924)
At 31st December 2022	3,292,284	76,979	3,369,263
NET BOOK VALUE			
At 31st December 2022	3,292,284	76,979	3,369,263
At 31st December 2021	3,802,417	45,547	3,847,963

There were no investment assets outside the UK.

At 31st December 2022 no individual investment represented more than 5% of the total investment portfolio valuation.

The historical cost at 31st December 2022 is £3,453,600 (2021: £3,392,375).

The funds are held in two portfolios and managed by Brewin Dolphin. The Portfolio number 1, which comprised 58% of the total fund at 31st December 2022, has an investment mandate of 'income and capital growth with moderate investment risk', whilst the mandate for Portfolio number 2, 42% of total value at year end, is 'income and capital growth with low investment risk'.

All investments are carried at their fair value. Investment in equities and fixed interest securities are all traded in quoted public markets, primarily the London Stock Exchange. Asset sales and purchases are recognised at the date of trade at cost (that is their transaction value).

The significance of financial instruments to the ongoing financial sustainability of the Trust is considered in the financial review and investment policy and performance sections of the Trustees' Annual Report.

The main risk to the Charity from financial instruments arises from uncertain investment markets resulting in variable income and capital returns from the portfolio of assets.

Currency translation risks remain for those companies and bonds that are exposed to overseas earnings and assets.

Liquidity risk is anticipated to be low as all assets are traded on recognised exchanges with good liquidity and high trading volumes. The Charity's portfolio has no material investment holdings in markets subject to exchange controls or trading restrictions.

The Charity manages investment risk by appointing professional investment managers and operating an investment policy that provides for a high degree of diversification of holdings within investment asset classes that are quoted on recognised stock exchanges.

The Charity does not make use of derivatives and similar complex financial instruments as it takes the view that investments are held for their longer term total return.

16. STOCKS

	2022	2021
	£	£
Stocks of fund raising items	245,337	176,920

17. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022	2021
	£	£
Other debtors	30,970	25,710
Accrued income, including gift aid receivable	42,251	138,968
Prepaid event costs	168,347	272,813
Total	241,568	437,491

18. CURRENT ASSET INVESTMENTS

	2022	2021
	£	£
Medium and long term cash deposits	2,205,345	783,900
Total	2,205,345	783,900

Included in current asset investments are cash deposits of £763,389 (2021: £271,350) which have a maturity date of greater than one year from the balance sheet date.

19. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2022	2021
	£	£
Operational creditors	93,254	49,266
Taxation and social security	122,578	19,012
Grants payable	1,789,016	1,134,977
Deferred event income	40,416	23,293
Other creditors	19,971	60,069
Total	2,065,235	1,286,617

20. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2022	2021
	£	£
Grants payable	1,652,259	529,691
Reconciliation of Grants Awarded	2022	2021
Opening liability obligation	1,664,668	636,534
Research grants awarded in the year	2,337,510	1,327,298
Research grants refunded in the year	-	-
Provisions no longer required	(9,837)	(1,599)
Paid during the year	(551,066)	(299,164)
Closing liability obligation	3,441,275	1,664,668
Split as:		
Due within one year	1,789,016	1,134,977
Due after more than one year	1,652,259	529,691

21. LEASING AGREEMENTS

The following operating lease payments are committed to be paid:

	LAND AND BUILDINGS			OTHER
	2022	2021	2022	2021
	£	£	£	£
Expiring:				
Within one year	16,797	16,797	461	818
Between one and five years	-	18,324	115	576
Total	16,797	35,121	576	1,394

22. MOVEMENT IN FUNDS

	AT 1/1/22	NET MOVEMENT IN FUNDS	31/12/22
	£	£	£
Unrestricted funds			
General fund	3,207,244	(1,525,140)	1,682,104
Restricted funds			
Ewing Sarcoma			
Liberty's Legacy	188,927	44,684	233,611
Frank's Fund	109,038	(13,358)	95,680
Freddie's Future	51,470	28,246	79,716
Fitzy's Fund	100,037	54,812	154,849
Ewing's sarcoma Research Trust	2,198	25,000	27,198
Children with Cancer	-	1,017,606	1,017,606
Other funds restricted to research into Ewing Sarcoma	42,462	148,304	190,766
Osteosarcoma			
Hamilton Family Research Fund	1,079,500	(1,075,000)	4,500
In support of Mary Collard	321	(321)	-
Tom Stead	4,899	(4,899)	-
Anthony Pilcher Bone Cancer Trust	118	4,272	4,390
Jess Gower	58	(58)	-
Tom Hunt	13,374	(9,000)	4,374
Rhodri Jones	112	(112)	-
Clive Richards Foundation	-	4,861	4,861
Other funds restricted to research into osteosarcoma	492	95,469	95,961
Other Research			
The Liz Clarke-Saul Fund	23,572	10,353	33,925
Other funds restricted to research	(7,224)	44,514	37,290
Infrastructure Grant			
PF Charitable Trust	11,000	-	11,000
Doris Field Charitable Trust	5,000	-	5,000
GJW Turner Charitable Trust	2,500	(2,500)	-
Sir William Coxen Trust	-	20,000	20,000
Other funds restricted to infrastructure Grants	8,242	2,000	10,242
Support, Information and Awareness			
Takeda	8,375	(8,375)	-
James Tudor Foundation	5,642	(5,642)	-
David Brooke Foundation	2,403	-	2,403
Other funds restricted to support, information and awareness	(2)	(1,335)	(1,337)
	1,652,514	379,521	2,032,035
TOTAL FUNDS	4,859,758	(1,145,619)	3,714,139

22. MOVEMENT IN FUNDS - CONTINUED

Net movement in funds, included in the above are as follows:

	INCOMING RESOURCES	RESOURCES EXPENDED	GAINS AND LOSSES	MOVEMENT IN FUNDS
	£	£	£	£
Unrestricted funds				
General fund	1,809,193	(2,803,794)	(530,539)	(1,525,140)
Restricted funds				
Ewing Sarcoma				
Liberty's Legacy	97,489	(52,805)	-	44,684
Frank's Fund	36,642	(50,000)	-	(13,358)
Freddie's Future	53,246	(25,000)	-	28,246
Fitzy's Fund	104,812	(50,000)	-	54,812
Ewing's sarcoma Research Trust	25,000	-	-	25,000
Children with Cancer UK	1,021,700	(4,094)	-	1,017,606
Other funds restricted to research into Ewing sarcoma	58,729	89,575	-	148,304
Osteosarcoma				
Hamilton Family Research Fund		(1,075,000)	-	(1,075,000)
In support of Mary Collard	67,244	(67,565)	-	(321)
Tom Stead	21,630	(26,529)	-	(4,899)
Anthony Pilcher Bone Cancer Trust	4,272	-	-	4,272
Jess Gower	5,769	(5,827)	-	(58)
Tom Hunt	-	(9,000)	-	(9,000)
Rhodri Jones	17,754	(17,866)	-	(112)
Clive Richards Foundation	42,000	(37,139)	-	4,861
SMUR	47,933	(47,933)	-	-
Albert Gubay Charitable Trust	29,193	(29,193)	-	-
Other funds restricted to research into osteosarcoma	93,782	1,687	-	95,469
Other Research				
The Liz Clarke-Saul Fund	10,353	-	-	10,353
BEIS COVID Support Grant	210,639	(210,639)	-	-
Other funds restricted to research	15,602	28,912	-	44,514
Infrastructure Grant				
Barbour Foundation	5,000	(5,000)	-	-
Edward Cadbury Trust	5,000	(5,000)	-	-
GJW Turner Charitable Trust	-	(2,500)	-	(2,500)
Margaret Butters Reekie	10,000	(10,000)	-	-
Sir William Coxen Trust	20,000	-	-	20,000
Other funds restricted to infrastructure Grants	9,800	(7,800)	-	2,000
Methotraxate Prodrug				
Balcombe Trust	25,000	(25,000)	-	-
Support, Information and Awareness				
Takeda	10,000	(18,375)	-	(8,375)
James Tudor Foundation	-	(5,642)	-	(5,642)
St James' Place	2,500	(2,500)	-	-
Other funds restricted to support, information and awareness	6,294	(7,629)	-	(1,335)
	2,057,383	(1,677,862)	-	379,521
TOTAL FUNDS	3,866,576	(4,481,656)	(530,539)	(1,145,619)

22 MOVEMENT IN FUNDS - CONTINUED

	AT 1/1/21	NET MOVEMENT IN FUNDS	31/12/21
	£	£	£
Unrestricted funds			
General fund	2,172,436	1,034,808	3,207,244
Restricted funds			
Ewing sarcoma			
Liberty's Legacy	188,055	872	188,927
Frank's Fund	144,136	(35,098)	109,038
Freddie's Future	36,045	15,425	51,470
Fitzy's Fund	41,979	58,058	100,037
Ewing's Sarcoma Research Trust	22,198	(20,000)	2,198
Other funds restricted to research into Ewing Sarcoma	39,047	3,415	42,462
Osteosarcoma			
Hamilton Family Research Fund	-	1,079,500	1,079,500
In support of Mary Collard	27,748	(27,427)	321
Tom Stead	7,687	(2,788)	4,899
Anthony Pilcher Bone Cancer Trust	5,973	(5,855)	118
Jess Gower	3,241	(3,183)	58
Tom Hunt	2,711	10,663	13,374
Rhodri Jones	6,125	(6,013)	112
Other funds restricted to research into Osteosarcoma	10,911	(10,419)	492
Other Research			
The Liz Clarke-Saul Fund	10,473	13,099	23,572
Other funds restricted to research	435	(7,659)	(7,224)
Infrastructure Grant			
QBE Foundation	737	(737)	-
PF Charitable Trust	11,000	-	11,000
Doris Field Charitable Trust	7,500	(2,500)	5,000
Edward Cadbury Trust	5,000	(5,000)	-
GJW Turner Charitable Trust	-	2,500	2,500
Margaret Butters Reekie	10,000	(10,000)	-
Other funds restricted to infrastructure grants	1,242	7,000	8,242
Methotrexate Prodrug			
Balcombe Trust	10,000	(10,000)	-
The Charity of Stella Symons	10,000	(10,000)	-

Support, Information and Awareness

Takeda	20,727	(12,352)	8,375
My Blue Heart	4,309	(4,309)	-
James Tudor Foundation	7,100	(1,458)	5,642
St James' Place	2,500	(2,500)	-
David Brooke Foundation	-	2,403	2,403
Other funds restricted to support, information and awareness	3,210	(3,212)	(2)
	640,089	1,012,425	1,652,514

TOTAL FUNDS	2,812,525	2,047,233	4,859,758
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22. MOVEMENT IN FUNDS - CONTINUED

Net movement in funds, included in the above are as follows:

	INCOMING RESOURCES	RESOURCES EXPENDED	GAINS AND LOSSES	MOVEMENT IN FUNDS
	£	£	£	£
Unrestricted funds				
General fund	2,720,035	(1,888,302)	203,075	1,034,808
Restricted funds				
Ewing sarcoma				
Liberty's Legacy	135,872	(135,000)	-	872
Frank's Fund	95,993	(131,091)	-	(35,098)
Freddie's Future	65,425	(50,000)	-	15,425
Fitzy's Fund	113,588	(55,530)	-	58,058
Ewing Sarcoma Research Trust	14,963	(34,963)	-	(20,000)
Other funds restricted to research into Ewing Sarcoma	33,036	(29,621)	-	3,415
Osteosarcoma				
Hamilton Family Research Fund	1,250,000	(170,500)	-	1,079,500
In support of Mary Collard	58,087	(85,514)	-	(27,427)
Tom Stead	16,096	(18,884)	-	(2,788)
Anthony Pilcher Bone Cancer Trust	9,545	(15,400)	-	(5,855)
Jess Gower	8,045	(11,228)	-	(3,183)
Tom Hunt	-	10,663	-	10,663
Rhodri Jones	8,587	(14,600)	-	(6,013)
Other funds restricted to research into Osteosarcoma	39,810	(50,229)	-	(10,419)
Other Research				
The Liz Clarke-Saul Fund	13,099	-	-	13,099
Michael Davie Research Foundation	10,000	(10,000)	-	-
Robert Luff Foundation	10,000	(10,000)	-	-
Other funds restricted to research	16,742	(24,401)	-	(7,659)
Infrastructure Grant				
QBE Foundation	-	(737)	-	(737)
PF Charitable Trust	10,000	(10,000)	-	-
Doris Field Charitable Trust	2,000	(4,500)	-	(2,500)
Barbour Foundation	5,000	(5,000)	-	-
Edward Cadbury Trust	-	(5,000)	-	(5,000)
GJW Turner Charitable Trust	5,000	(2,500)	-	2,500
Margaret Butters Reekie	-	(10,000)	-	(10,000)
Other funds restricted to infrastructure grants	9,000	(2,000)	-	7,000
Methotrexate Prodrug				
Balcombe Trust	10,000	(20,000)	-	(10,000)
The Charity of Stella Symons	-	(10,000)	-	(10,000)

Support, Information and Awareness

Takeda	-	(12,352)	-	(12,352)
My Blue Heart	-	(4,309)	-	(4,309)
James Tudor Foundation	-	(1,458)	-	(1,458)
February Foundation	5,000	(5,000)	-	-
St James' Place	2,500	(5,000)	-	(2,500)
David Brooke Foundation	2,600	(197)	-	2,403
Other funds restricted to support, information and awareness	3,000	(6,212)	-	(3,212)
	1,952,988	(940,563)	-	1,012,425
TOTAL FUNDS	4,673,023	(2,828,865)	203,075	2,047,233

23. RESTRICTED FUNDS

Ewing sarcoma

The Liberty's Legacy Restricted Fund represents monies restricted for research into Ewing Sarcoma.

Franks fund represent monies restricted for research into Ewing Sarcoma.

Freddie's Future Restricted Fund represents monies restricted for research into Ewing Sarcoma.

Fitzy's Fund represents monies restricted for research into Ewing Sarcoma.

The Ewing's Sarcoma Research Trust Restricted Fund represents monies restricted for research into Genotype and Phenotype Self-renewing cancer-initiating Ewing Sarcoma, the National Ewing Sarcoma Multi-Disciplinary Team Meeting and oncolytic virus therapy for Ewing sarcoma.

Children with Cancer UK represents funds restricted for research into Ewing sarcoma.

Other funds represent monies restricted for research into Ewing Sarcoma.

Osteosarcoma

The Hamilton Family Research Fund represents funds restricted for research into Osteosarcoma.

The Mary Collard Restricted Fund represents funds restricted for research into Osteosarcoma.

The Tom Stead Restricted Fund represents monies restricted for research into Osteosarcoma.

The Anthony Pilcher Restricted Fund represents monies restricted for research into Osteosarcoma.

The Jess Gower Restricted Fund represents monies restricted for research into Osteosarcoma.

The Tom Hunt Restricted Fund represents monies restricted for research into Osteosarcoma.

The Rhodri Jones Restricted Fund represents monies restricted for research into Osteosarcoma.

Clive Richards Foundation – Represents funds restricted for research into Osteosarcoma and Chordoma.

For the Love of Stephen Fund (SMUR) – Represents funds restricted for research into Osteosarcoma.

Albert Gubay Foundation – Represents funds restricted for research into Osteosarcoma.

Other funds represent monies restricted for research into Osteosarcoma.

Infrastructure Grant

The QBE Foundation Restricted Fund represents monies restricted to the 2018 Birmingham Infrastructure Grant.

The PF Charitable Trust Fund represents monies restricted to the Oxford Infrastructure Grant.

The Doris Field Charitable Trust represents monies restricted to the Oxford Infrastructure Grant.

The Edwards Cadbury Trust represents monies restricted to the Birmingham Infrastructure Grant.

The GJW Turner Charitable Trust represents monies restricted to the Birmingham Infrastructure Grant.

The Miss Margaret Butters Reekie Charitable Trust represents monies restricted to the ICONIC research programme.

Sir William Coxen Trust – Represents funds restricted to supporting tissue sample collection at the Royal National Orthopaedic Hospital, Stanmore.

Other funds represent monies restricted to Infrastructure grants.

Methotrexate prodrug

The Balcombe Trust Fund represents monies restricted to the PhD awarded by BCRT in 2018 seeking to develop a targeted methotrexate prodrug.

The Charity of Stella Symons represents monies restricted to the PhD awarded by BCRT in 2018 seeking to develop a targeted methotrexate prodrug.

Other research

The Liz Clarke-Saul Fund represents monies restricted for research into adamantinoma.

UK Government Covid Medical Research Charity Support Fund (BEIS)– Represents funds restricted for research into Ewing sarcoma, Osteosarcoma, Chondrosarcoma, and Adamantinoma.

Other funds represent monies restricted to research.

Non research

The Takeda Restricted Fund represents monies restricted to the BCRT annual patient conference

The My Blue Heart fund represents monies restricted to support.

The James Tudor Foundation fund represents monies restricted to a patient amputation resource

Other funds represent monies restricted to non-research charitable activities.

24. DESIGNATED FUNDS

	AT 1/1/22	PAID	DESIGNATED	AT 31/12/22
	£	£	£	£
Infrastructure grants	160,000	(90,431)	-	69,569
Information and awareness charitable activities	70,000	(70,000)	-	-
Early careers fellowship	500,000	(500,000)	-	-
Clinical Trial Support grants	150,000	(150,000)	-	-
Consortia and Research Meeting grants	240,000	-	-	240,000
Hamilton Programme of Osteosarcoma Research	125,000	(125,000)	-	-
Translational grants	300,000	-	-	300,000
Adamantinoma grants	-	-	50,000	50,000
Chondrosarcoma grants	-	-	130,000	130,000
TOTAL FUNDS	1,545,000	(935,431)	180,000	789,569

Infrastructure grants support tissue collection at treatment centres across the UK.

Information and awareness charitable activities support planned patient advocacy and the creation and distribution of targeted information resources.

Early career fellowship grants will ensure that future leaders in the field are able to create their own programme of research.

Our Clinical Trial Support Grants will provide additional support to ongoing clinical trials, ensuring no stone is left unturned and every opportunity is explored for maximum patient benefit.

In recognition of the need to bring the primary bone cancer research and clinical communities together, our new Consortia and Research Meeting Grants will bring about new levels of international collaboration and stimulate partnership working, accelerating progress.

Hamilton Programme of Osteosarcoma Research is aimed at supporting a programme of research, which will come together to make progress and improve outcomes for patients.

Translational grants will provide funding towards research, enabling laboratory projects to progress towards clinic.

Adamantinoma grants will ensure research in the area of Adamantinoma.

Chondrosarcoma grants will ensure research in the area of Chondrosarcoma.

25. RELATED PARTY DISCLOSURES

Trustees are required to disclose all relevant interests and register them with the Clerk to the Trustees and in accordance with the Charity’s policy to withdraw from decisions where a conflict of interest arises.

Any individual with an interest in a matter being discussed at a meeting must declare the interest to the meeting. The chair of the meeting will then decide whether that individual should withdraw during the discussion and, if not, whether the individual should be entitled to vote on the matter under discussion.

26. COMMITMENTS

As at 31 December 2022 the charity has committed to funding further research grants of £272,860. These commitments are subject to conditions and review within the control of the charity and accordingly not recognised as grant liabilities within notes 19 and 20.



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