CT scans and MRI can show in detail the progression of prostate cancer, and have contributed greatly to advances in prostate cancer research.
## EXECUTIVE SUMMARY

| Our Vision, Mission & Values | 4 |
| Accountability              | 4 |
| Highlights                  | 5 |
| Chairman’s Report           | 6 |
| CEO’s Report                | 8 |

## PROGRAMS

| Research                     | 14 |
| Awareness                    | 24 |
| Support                      | 33 |

## COMMUNITY PARTNERSHIPS

| Big Aussie Barbie            | 40 |
| The Male Bag Ride            | 42 |
| The Long Ride                | 43 |
| The Murray Meander           | 44 |
| Biggest Ever Blokes Lunch    | 45 |
| Community Fundraising Highlights | 46 |

## OUR PEOPLE

| Boards & Committees         | 56 |
| Staff                       | 58 |

## GOVERNANCE & FINANCE

| Financial Highlights        | 62 |
| Financial Statements        | 64 |

## THANK YOU

| Rotary                      | 98 |
| Corporate                   | 98 |
| Trusts                      | 99 |
| Clubs                       | 99 |
| Estates                     | 99 |
| In Memoriam                 | 99 |
| Individuals                 | 100 |
| Community Fundraisers       | 101 |
| Pro Bono Support            | 101 |
| Honorary Life Members       | 101 |
| PCFA Award Recipients       | 101 |
| Members                     | 101 |
| Research Partners           | 102 |
EXECUTIVE SUMMARY
Prostate Cancer Foundation of Australia (PCFA) is a broad-based community organisation and the peak national body for prostate cancer in Australia. We are dedicated to reducing the impact of prostate cancer on Australian men, their partners, families and the wider community.

We do this by:

- **Promoting and funding world leading, innovative research into prostate cancer**

- **Implementing awareness campaigns and education programs for the Australian Community, health professionals and Government**

- **Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses**

PCFA receives Government funding for specific projects and relies on the generosity of individuals, the community and partnerships, such as those with the Movember Foundation and Commonwealth Bank, to carry out our essential work.

PCFA’s five values are:

- **Integrity**
- **Optimism**
- **Compassion**
- **Respect**
- **Commitment**

**Accountability**

PCFA operates under the charitable fundraising legislation, as prescribed by each individual State in Australia and associated regulations, including Corporations Law. PCFA has been granted endorsement as a tax-deductible gift recipient under Subdivision 30-BA of the *Income Tax Act 1997* by the Australian Commissioner of taxation.
HIGHLIGHTS

$7M FUNDING FROM FEDERAL GOVERNMENT

SUPPORTING 13 ADDITIONAL PROSTATE CANCER SPECIALIST NURSES, INCLUDING NURSES IN COMMUNITY SETTINGS

GROWTH IN THE SUPPORT GROUP NETWORK

150 SUPPORT GROUPS LOCATED IN EVERY STATE AND TERRITORY

ESTABLISHMENT OF TWO MOVEMBER REVOLUTIONARY TEAM AWARDS

THROUGH GENEROUS FUNDING FROM THE MOVEMBER FOUNDATION

OVER 200 DELEGATES ATTENDED THE FIRST NATIONAL SUPPORT GROUP LEADER TRAINING CONFERENCE

ABIRATERONE (ZYTIGA) LISTED ON PHARMACEUTICAL BENEFITS SCHEME FROM 1 AUGUST

5 YEARS OF THE PCFA RESEARCH PROGRAM – OVER $35M AND 136 RESEARCH PROJECTS IN PROSTATE CANCER FUNDED

AMBASSADOR PROGRAM RELAUNCHED

$4.2 MILLION ALLOCATED TO 20 NEW RESEARCH PROJECTS

LAUNCH OF PCFA’S NEW 5 YEAR RESEARCH STRATEGY

SUPPORT GROUPS ESTABLISHED IN ADELAIDE BRISBANE MELBOURNE PERTH SYDNEY FOR GAY & BISEXUAL MEN

50 SUPPORT GROUPS
It is a tremendous privilege to be the national chairman of Prostate Cancer Foundation of Australia at a time of such change and innovation.

Since I was diagnosed with prostate cancer in 1996, awareness of prostate cancer and support for patients have improved beyond recognition. Researchers are now making real advances that are seeing improved survival rates and better long term outcomes. More men are aware of the need to have a conversation with their doctor about testing. And a network of support groups and specialised health professionals around the country is helping more and more men to navigate their cancer journey.

As the peak body for prostate cancer in Australia, PCFA is ensuring that these gains are maintained into the future. We are successfully advocating at Federal and State level to increase funding and support for men with prostate cancer. We are channelling research funding and obtaining the evidence we needed to make positive changes that will impact the lives of men and their families. We are working at community level to provide support for men, their partners and families and raise awareness of prostate cancer around the country.

But we are more than a peak body. We are also a broad-based community organisation served by a vast team of people around Australia who contribute to our support, awareness raising and research activities. I thank each and every one of them, no matter how large or small their role, for the valuable contribution they have made in the last year. It has been a wonderful team effort.

The 2012-13 financial year has been challenging for the not-for-profit sector in general. I am very pleased to report that we have obtained a

“As well as being the peak body for prostate cancer in Australia, we are a broad-based community organisation. Our roots are firmly within the community we serve – no matter what their role, a vast team around Australia are making a valuable contribution to our work.”
good set of financials and are well set to embark on the exciting projects ahead. This is in no small part due to the healthy state of our governance structures and the individual and collective efforts of our dedicated national directors.

I would like to sincerely thank Associate Professor Philip Stricker, Desmond Grogan and David Gregory, who departed the Board this year, and extend a warm welcome to Distinguished Professor Judith Clements, who joined the Board in August and Peter Gebert who joined the board in October.

I would also like to acknowledge the invaluable contribution of our state/territory boards, whose local knowledge and influence mean PCFA’s national strength can truly be translated into real outcomes for people at a local community level.

One of the most significant contributions PCFA is making is to bring experts together from around the country to agree on a set of evidence-based national guidelines around PSA testing. Men continue to be faced with conflicting information, and we have worked hard to bring together all stakeholders in a world-first collaboration to bring clarity and consistency to the message we are giving them. When the guidelines are published late next year, clinicians will for the first time be able to give a consistent message and men will have clear facts on which to base their decisions.

A significant part of our work is raising community awareness about prostate cancer. Our ambassadors take our message to communities around the country, both raising our profile and imparting important information about early detection and prevention, treatment options and caring for someone with prostate cancer. This year, the ambassador program has been overhauled, with new material and training given to presenters and 60 new ambassadors employed.

PCFA has the broadest membership base of any member of the Union for International Cancer Control (UICC), and this year we have been working hard to nurture partnerships and collaborations. We have had a strong representation at national conferences, enabling us to forge important links with our medical professional colleagues, researchers and others who work on the front line of prostate cancer care. We are also continuing to develop relations with like organisations internationally, including The Prostate Net and UsToo in the United States, and Prostate Cancer Foundation of New Zealand.

We are expanding our support group network and aim to grow the number from 150 to 200 by June, 2014. We have developed new resources for support group leaders and held a very successful training conference in Melbourne in May. We are also establishing Australia’s first prostate cancer support groups for gay and bisexual men, which will provide information and support targeted at the unique needs of this demographic. Groups in Brisbane, Sydney, Melbourne, Adelaide and Perth are in various stages of establishment with Darwin and Hobart in the pipeline.

This year we awarded three prestigious Max Gardner Awards to acknowledge the work of support group network leaders in spreading the awareness message, promoting research and supporting men and their families affected by prostate cancer. Warm congratulations to Terry Wheeler, former Chairman NSW/ACT Chapter Council, David Gregory, former Chairman of the National Support Group Committee and Les Payne of Townsville Prostate Cancer Support Group.

It would be remiss of me not to mention the professionalism that Associate Professor Anthony Lowe brings to the CEO role. His impact on our evidence-based strategies, new resources, media profile and government relations in particular have been very significant. Likewise, the support I have received from our Deputy Chairman Jim Hughes AM has been second to none. His tireless efforts have been truly outstanding in every respect, and are very much appreciated.

None of our work would be possible without the incredible generosity of our sponsors and supporters. I thank you all for your help during this last year and I look forward to working together to continue to provide the best outcomes possible for men with prostate cancer, together with their partners and families.

It has been a great team effort and, with such a highly committed and dedicated group of people across Australia, augurs well for another very successful year.

David Sandoe OAM
National Chairman
I am pleased to report that 2012-13 was another year of positive development in all aspects of PCFA’s work.

Research
Prostate cancer research in Australia is set to reach new heights with PCFA’s new research program strategy which was launched on 7 July at our Annual Research Update in Melbourne.

Thanks to the generosity of the Movember Foundation, over the past five years PCFA has invested over $35 million into prostate cancer research projects right across the country. These projects cover the full spectrum from basic science through to survivorship issues such as psychological interventions and exercise programs.

The key aim of our new strategy is to build on the successes of the past and harness the strengths of new researchers. In developing our new five year plan, we have taken into account the feedback and views of scientists, clinical specialists, support group members and ambassador speakers, men’s health organisations and other interested parties.

The new plan will deliver a clear map of future priorities and focuses on the following keys areas:

• Growing and strengthening the funding base for PCFA’s established research program
• Increasing national and international collaboration between prostate cancer research teams
• Diversifying our research program by supporting innovative projects and accelerating current research into clinical trials
• Supporting and promoting sustainability for the Australian prostate cancer research workforce.
As part of this new strategy, we were delighted to announce two multi-million dollar Movember Revolutionary Team Awards in partnership with The Movember Foundation. These awards of $5.25 million each over three years will fund two collaborative research teams that have the scientific and clinical expertise to have a near-term, revolutionary and transformative impact on the clinical management of prostate cancer. The first team will focus on advanced prostate cancer and the second on localised disease. This significant initiative is part of Movember’s global research strategy to build powerful, collaborative teams that accelerate improved clinical tests and treatments for prostate cancer.

Awareness

In August 2013 the results of PCFA’s 11th annual community attitudes survey were published in a report entitled Prostate Cancer: The Next Generation. The research was conducted in March and April 2013. Previously, our community attitudes survey focused on men aged 40 to 74; largely because less than 3% of prostate cancer diagnoses occur in men younger than 50. This year we focused on the next generation – men aged 18 to 50.

We found that younger men clearly see prostate cancer as an important male health issue alongside obesity and heart disease. They also clearly believe that community awareness of prostate cancer is increasing, with 56% of participants saying it is “rising a lot” or “rising a little”, although many are unable to identify the factors which have led to this view. However, the increase in community awareness has not led to a corresponding increase in personal awareness. The level of self-reported knowledge of prostate cancer is significantly lower than in the group of men aged 40 to 74 who participated in PCFA’s 2012 Community Attitudes Survey. Forty-one per cent (41%) of participants said they know “a lot” or “a little” about prostate cancer compared to 63% of men aged 40 to 74 in the 2012 survey. Furthermore, only 12% of participants say they feel more informed about prostate cancer over the last 12 months.

Clearly, more work must be done to educate men under age 50 about prostate cancer. They may not yet be at serious risk of developing the disease, but it is important that men develop a level of awareness and understanding before they reach their mid-forties.

This survey also marked the first time we have asked participants about their sexual orientation. We were surprised that more than 13% of respondents identified as being gay or bisexual, or did not identify as being heterosexual. The absence of information about sexual orientation in much of prostate cancer research means that the experiences of gay and bisexual men with prostate cancer are poorly understood. It is therefore important, and exciting, that we were able to provide a meaningful insight into the experiences of this group of men for whom prostate cancer is a significant health issue. Gay and bisexual men who participated in the survey reported that they experience more significant health issues than the heterosexually identified participants. Consistent with existing research findings, the gay and bisexual participants also reported a higher incidence of depression and anxiety. This is of concern given these mental health issues are likely to be experienced by men with prostate cancer in general.

In terms of support, the support network utilised by gay and bisexual participants is different to that of heterosexual men, for they are more likely to draw support from their friends. This highlights the importance of non-family members as significant members of gay and bisexual men’s support network, and challenges the notion that a family member or partner is the person’s main support.

Support

With funding from the Federal Government through Cancer Australia, PCFA is in the final stages of developing a new suite of resources, including resources for men with advanced prostate cancer, younger men, gay and bisexual men, and partners and carers. We are also translating key resources into five languages – Arabic, Chinese, Greek, Italian and Vietnamese – and developing a resource for Aboriginal and Torres Strait Islander men. These resources are being developed through the Supporting men with prostate cancer through evidence-based resources and support project, a Cancer Australia initiative funded by the Australian Government.

In September 2013 we launched the first of these new resources, the revised Localised Prostate Cancer Pack, which was developed with generous funding from Gandel Philanthropy. We are grateful to the National Support Group Committee and our colleague health professionals for their expert advice and input in the development of the pack. It includes the most up to date information on the treatment and management of localised prostate cancer. We are also very pleased and proud that all the new resources feature photography of the PCFA community - support group members, ambassadors, prostate...
CEO’S REPORT

cancer specialist nurses, PCFA-funded researchers, clinical specialists and other health professionals we work closely with. Thank you to everyone who generously agreed to be part of the photo shoot.

The revised Localised Prostate Cancer Pack is now available on the PCFA website (www.pcfa.org.au) and also in USB format. Copies of the packs and USBs can be obtained by calling the National Office on 1800 22 00 99 or by using the order form on the PCFA website. The next set of the resources, the Advanced Prostate Cancer Pack, will be available shortly.

Following the announcement that cancer funding was a priority for the 2013-2014 Federal Budget, we were delighted that on 14 July then Federal Minister for Health Tanya Plibersek announced that $7 million would be allocated to the Prostate Cancer Specialist Nursing Program. The additional funding will be sufficient to place an additional 13 nurses in locations around the country with an emphasis on regional Australia. This will make a total of 25 nurses across Australia.

With the generous support of The Movember Foundation, PCFA launched the specialist service in May 2012 to address the needs of people living in metropolitan and regional Australia who have been affected by prostate cancer. The Movember Foundation generously contributed $3.6 million to secure the program and recruit its first nurses. The program has currently placed 12 nurses in major metropolitan and regional hospitals in Queensland, New South Wales, ACT, Victoria, South Australia, Tasmania, Western Australia and the Northern Territory.

Thank you to our supporters

PCFA’s work would not be possible without our many wonderfully generous supporters and volunteers who contribute their time and money to the cause. In particular, I would like to acknowledge the very generous support of our major benefactor, The Movember Foundation.

I would also like to thank Commonwealth Bank for their support as major sponsor of our September fundraising and awareness campaign, The Big Aussie Barbie. Commonwealth Bank staff at branches around Australia generously contributed their time to raise awareness of prostate cancer and funds for PCFA. Commonwealth Bank is PCFA’s longest standing partner and it is a partnership of which PCFA is very proud.

PCFA also received very generous support from Pirtek through the Pirtek Fishing Challenge and other fundraising initiatives. This year was the biggest ever, with 7,500 anglers from all over Australia – mums, dads, kids and grandparents – chasing species from golden perch to barramundi in a one-day fishing challenge unlike any other competition.

I would like to extend my sincere gratitude to PCFA’s National Chairman, David Sandoe OAM and National Deputy Chairman, Jim Hughes AM for the time, effort and expertise they contribute in continuing to strengthen and develop PCFA. Their tireless commitment has helped to drive significant achievements and momentum for the organisation.

Finally, I would like to give my heartfelt thanks to the thousands of support group members and ambassador speakers around Australia who generously contribute their time supporting men, their partners and their families affected by prostate cancer and raising awareness of the disease. Together we can be justifiably proud of PCFA’s work in research, awareness and support.

Associate Professor Anthony Lowe
Chief Executive Officer
National office PCFA team
PROGRAMS
Research Program 2012-2013

As one of Australia’s leading sources of prostate cancer research funding, PCFA aims to support research that will contribute significantly to the global fight against prostate cancer.

We support the transition of young researchers into independent prostate cancer investigators of the future, to encourage scientists of any discipline to apply their ideas to prostate cancer, to foster collaboration amongst Australian prostate cancer researchers and to increase innovation in prostate cancer research.

In the 2012 funding round, PCFA received a total of 84 applications. These ranged from new concepts for biomarker discoveries, new therapies, small clinical interventions and survivorship. Almost one third of applications received focused on survivorship research, 18 were submitted by early career researchers in the Young Investigator category, and 52 were New Concepts.

PCFA’s structured Research Program allocated $3.7 million to 18 research projects across Australia, representing a success rate of 21%. This would not have been possible without the generosity of Movember.

2012 also marked the second year of PCFA’s partnership with the Cure Cancer Australia Foundation (CCAF). Two of the four successful Young Investigators in this funding round were supported by CCAF in their first year of the award.
Evaluation

PCFA has funded research since 2004, but in 2007 its structured, formalised Research Program was established. In total, this program has allocated approximately $5 million annually to fund 136 research projects into prostate cancer, making it one of the leading funding sources of prostate cancer research in Australia. Of these, 132 were funded or co-funded by Movember.

At the program’s fifth anniversary, PCFA’s Board of Directors and Research Advisory Committee brought together experts in prostate cancer research, consumers and other stakeholders to determine the impact of this major investment and to review its funding strategy and consider how best PCFA can respond to changing research priorities.

The evaluation confirmed that PCFA research funding has had a major impact in the community. It has supported rigorous research proposals that will provide direct, tangible benefits to men with prostate cancer as quickly as possible, and enabled the purchase of equipment necessary to conduct prostate cancer research.

During the course of the Research Program, 170 peer reviewed articles have been published, mostly in major impact journals, with new research findings presented in more than 200 national and international forums. Four patents have been lodged in the last three years with the help of PCFA funding and investigational products supported by two of these patents have entered clinical trials.

A central aim of the Research Program has been to encourage young investigators to undertake research into prostate cancer, support investigators on their journey to becoming independent researchers, and stimulate senior scientists to bring innovative proposals to PCFA.

More than 90% of principal investigators funded during 2007-11 have been promoted and 80% of young investigators who have completed funding are now independent scientists.

The program has provided a logical, consistent and transparent framework and schedule for the submission of grant applications, review and selection of applications for funding. Most of the research funded has been catalytic, providing seed funding to increase capacity and lead to further funding opportunities.
PCFA’s evaluation of its Research Program has led to the development of a new five-year Research Strategy. This new strategy reflects changing research needs and prioritises research involving better collaboration and higher rates of translation to accelerate the pace of discovery and improve diagnosis, treatment and management of prostate cancer.

Our new Research Strategy provides a clear, long term funding strategy. Its central mission is to fund discoveries which will improve the length and quality of life of men with prostate cancer, especially prostate cancer which cannot be cured by surgery or radiation therapy.

PCFA’s funding priorities are projects which will provide quick improvements to patients’ quality of life; develop non-invasive tests to detect prostate cancer and determine whether a cancer is curable; discover new biomarkers to predict the future course of prostate cancer and its likely response to treatment; and to discover new molecular targets for chemotherapy of metastatic prostate cancer.

To reach the Research Program’s mission, goals and objectives, research funding will now be offered under the following categories:

**Team Awards:** Total funding of $5 million over three years to foster collaboration and translation. The Team Award will support a competitive, multi-state, multidisciplinary translational research program.

**Clinical Trials Awards:** Up to $200,000 per year over three years for investigator-driven small to medium sized clinical trials focused on new molecular targets for chemotherapy, new non-invasive tests or new biomarkers.

**Young Investigator Awards:** Salary support (up to $150,000 per year for four years) for the brightest young basic science and clinical science researchers.

**Enabling Grants:** Grants to assist Australian researchers to continue high quality research.

**Think Tanks:** Financial support to enable prostate cancer researchers, health professionals, policy makers and consumers to come together to generate new ideas and directions for prostate cancer research.
By funding research into bright ideas, PCFA aims to help researchers make the discoveries that will one day change the lives of men with prostate cancer. For researcher Gail Risbridger, PCFA funding led to world-first work that sheds new light on the roles of different cells within prostate cancer tumours – a discovery that will one day lead to better diagnosis and prognosis for patients.

The composition of prostate tumours is highly complex. Not only are prostate cancers different from man to man, but within each tumour there are several different points from which the disease develops (known as foci). To complicate matters further, there are many different types of cell within each foci, some of which drive its growth and resistance to treatment.

Understanding how this all works is central to categorising tumours so that doctors can predict how they will grow and what treatment will work. Gail and her team have developed a way of taking tumour specimens from men with localised prostate cancer, keeping them alive in mice so they can study them as the disease progresses, and then watching what happens during androgen deprivation therapy (hormone therapy).

They have found that a type of cell which is resistant to hormone therapy is present in tumours long before castrate resistance develops. The presence of these cells could signify that a man will eventually go on to develop advanced prostate cancer, so targeting them early may prevent him from ever developing castrate resistant disease.

By developing tests to measure these cells and how they multiply, it will one day be possible to interpret biopsies much more accurately and predict how each man’s unique tumour will respond to treatment.

“Understanding the basic biology of prostate cancer is fundamentally important to being able to improve cancer diagnosis and prognosis, to being able to treat and monitor each patient,” says Gail, who has researched prostate cancer for 15 years.

“It’s great that PCFA will fund these important questions, enabling researchers to establish a concept without fear they might be proved wrong.”
Movember Revolutionary Team Awards

Both PCFA and its long term partner, Movember, have moved towards supporting large, collaborative grants. We have now come together to offer two large awards, the Movember Revolutionary Team Awards (MRTAs).

Funded by Movember, the MRTAs will provide $5.25 million for projects over three years that bring together some of the country’s leading scientists to take a collaborative approach to research pressing questions in the clinical management of prostate cancer.

There are two categories of MRTA: one for advanced prostate cancer and the other for localised disease. Each aims to harness existing strengths; seize future opportunities; foster a collaborative approach to research; and enable the Australian prostate cancer research community to contribute to a revolutionary impact on the clinical management of prostate cancer.

These awards aim to build on existing strengths within Australia and to link with and build on research in Europe and North America. Recognising that the whole is greater than the sum of its parts, this collaborative approach aims to catalyse existing national strengths in prostate cancer in Australia to a position of greater international stature.
Some of Our Newly-Funded Projects 2012

PCFA funds research that will make a real difference to the lives of men with prostate cancer. Here are some of the projects funded through PCFA’s Research Program in the 2012 funding round:

STUDYING THE HIDDEN POPULATION: SEXUAL WELLBEING AND QUALITY OF LIFE AFTER PROSTATE CANCER FOR GAY AND BISEXUAL MEN AND THEIR PARTNERS

Movember New Concept Grantee Professor Jane Ussher
University of Western Sydney

Some of the most negative effects of prostate cancer on men’s quality of life are changes to sexual functioning, relationships, and sense of self. Previous studies on sexuality and intimacy in men with prostate cancer have focused on heterosexual men, but for the first time this study will look at the gay and bisexual population. It is estimated that 600 to 1,000 gay men are diagnosed with prostate cancer every year, but little is known about how potentially important differences in sexuality, identity and intimate relationships impact on gay and bisexual men’s experience of prostate cancer. The results of this work will inform health education and health promotion to gay and bisexual men and lead to better support for this population.

A NEW TYPE OF RADIOTHERAPY OFFERS CHANCE OF A CURE FOR METASTATIC PATIENTS

Movember New Concept Grantee Dr Farshad Foroudi
University of Melbourne

At present there is no cure for patients who have up to three tumours that have spread from the prostate to bone or lymph nodes. This research involves a new, non-invasive, high-precision radiotherapy technique called “stereotactic ablative body radiosurgery” (SABR) which may offer a cure for these patients. This treatment is delivered as a single, high dose, precision treatment which is painless and can be done while the patient is fully awake – a radical departure from conventional palliative radiotherapy. SABR has previously been used in other cancers as well as for prostate cancer confined to the prostate, but this trial will be one of the first in patients whose prostate cancer has spread.
HELPING PATIENTS DECIDE WHETHER TO PARTICIPATE IN A CLINICAL TRIAL

Movember Young Investigator Dr Puma Sundaresan
University of Sydney

Clinical trials are essential in determining the effectiveness of new treatments – but it can often be difficult to recruit patients to take part in them. This means potentially lifesaving treatments can be delayed. In order for people to participate in a trial, they need to understand why it is being run, the pros and cons of joining the trial, and how these weigh against their own circumstances and values. This study aims to assess the use of decision aids in a prostate cancer clinical trial to help men understand more about clinical trials, help them to make an informed decision, and reduce their conflict and anxiety when they’re deciding whether or not to take part.

AN EXCITING NEW WAY OF IMAGING PROSTATE CANCER

Movember New Concept Grantee Associate Professor Andrew Katsifis
Royal Prince Alfred Hospital

The new imaging technique Positron Emission Tomography (PET) is revolutionising understanding and management of prostate cancer. This project aims to improve the ability to image the growth, proliferation, metastases and immune response of tumours. It will develop ‘radiotracers’ – radioactive isotopes used as tracers that can be used to gain a more accurate picture of tumours. In particular, this project concentrates on radiotracers which target a specific protein called the ‘Translocator Protein’, or TSPO, high levels of which are found in cancerous prostate tissue. The outcomes of the project have the potential to significantly enhance care of prostate cancer patients through better understanding of the disease, by complimenting existing imaging techniques, and through better assessing current and new treatments.

WHY DON’T MORE MEN WITH CASTRATE RESISTANT PROSTATE CANCER RESPOND TO CHEMOTHERAPY?

Movember New Concept Grantee Dr Alexander Swarbrick
Garvan Institute of Medical Research

Drugs like docetaxel and cabazitaxel are still the best we have for chemotherapy in men with castrate-resistant prostate cancer (CRPC), but still fewer than half of men benefit from these drugs. This project aims to work out a better way of managing CRPC by investigating the role of a newly-discovered class of genes called ‘microRNAs’, which are believed to play a critical role in controlling prostate cancer response to chemotherapy. A multi-disciplinary, multi-institutional team will use a first-of-its-kind technology to find microRNAs that control the response of CPRC to chemotherapy. Ultimately, these microRNAs may become a promising new target for new therapies.
Financial Implications of Prostate Cancer

The costs of treatment for prostate cancer in Australia are not well understood. There has never been a comprehensive study into the total outlay patients face, or of who pays – the patient, the public health system or health insurers.

We do know that prostate cancer costs include initial treatment, secondary treatment, managing side effects, time taken off work, travel to and from hospital and doctors’ appointments, plus additional costs such as exercise programs, incontinence pads and increased insurance premiums. With most men being diagnosed after the age of 50, many of this financial burden falls on retired men.

PCFA is also concerned that anecdotal evidence suggests men are not well informed about ways of sourcing financial assistance, what their health insurance will cover, and how to negotiate their finances if they are still in the workforce.

PCFA is working with a group of health economists from Griffith University, led by Dr Louisa Gordon, to calculate the costs of prostate cancer. To collect the necessary data, men are being asked to participate in an online survey.

The project’s findings will inform PCFA to be able to develop better information and resources to help men handle these costs, and to advocate for a better deal for men with prostate cancer.
Research has a direct impact on the future of men living with prostate cancer. In June, PCFA teamed up with Ovarian Cancer Australia to update the community on outcomes of prostate cancer research funded through PCFA’s Research Program.

Held in Melbourne and Sydney, this year’s Annual Research Update focused on survivorship. The one-day events were attended by men living with prostate cancer and their families, allied health professionals, researchers, community donors and corporate sponsors and the media. The vast majority of the 170 people who attended each meeting rated it as very good.

Some of Australia’s leading researchers including Professor Afaf Girgis, Professor Suzanne Chambers, Professor Paul De Souza, Professor Daniel Galvao, Professor Trish Livingstone, Professor Rob Newton and Professor Susan Clark presented their latest data and thoughts on important issues related to prostate cancer such as prevention, life after prostate cancer diagnosis and quality of life.

A panel of experts comprising psycho-oncologists, researchers, nurses and oncologists answered specific questions posed by the audience about survivorship and what it means to live with cancer.

The highlight of the meeting was the consumer panel. Several men with prostate cancer and women living with ovarian cancer were interviewed. Their message was that men and women with cancer choose life and a life of quality post cancer diagnosis. The audience heard about the difficult cancer journey and its challenges, ways of coping and living with the disease and thoughts on addressing unmet needs of cancer survivors. Many inspiring and courageous stories emerged.

In 2014 we anticipate holding an Annual Research Update in Brisbane and one in Melbourne. Both events will be advertised via the web, social media and email.
Prostate cancer remains a significant killer of men in Australia yet understanding about the disease is lacking in many sectors of the broader population.

PCFA is working proactively to inform the entire community about this important health issue. We aim to target men of all ages with specific information about prostate cancer to increase general awareness and enable men to be better informed when making decisions about how to manage their own health.
Targeted Resources

PCFA has identified a need to target prostate cancer information toward different audience groups. As part of the Supporting men with prostate cancer through evidence-based resources and support project, a Cancer Australia initiative funded by the Australian Government, PCFA has produced a series of information booklets to cater to different sectors of the community.

Each series contains four booklets covering Diagnosis, Treatment, Side Effects of Treatments, and Wellbeing. Each booklet can be read as a standalone resource or as part of the set. The resources will be available through PCFA’s Support Group network, hospitals, from Prostate Cancer Specialist Nurses and general cancer centres as well as GPs from early 2014.

While the information they contain is not intended to replace men’s discussions with their healthcare professionals, the resources are designed to better inform men about what to expect and what to ask their doctor. We aim to equip men with the information they need to be able to base their decisions on their own preferences and lifestyles if possible.

The booklets’ contents were reviewed by a multidisciplinary advisory group consisting of consumers and health professionals. The first resources became available in September 2013, with the others to be rolled out during the coming year.
Targeted Resources (Continued)

**Localised prostate cancer:** With the generous support of Gandel Philanthropy we have revised and refreshed our existing resources about localised prostate cancer to incorporate more current information about different treatment options and supportive care.

**Advanced prostate cancer:** These resources are targeted at men diagnosed with advanced disease to inform them about the newest treatment options and help them to cope with the emotional impact of their condition.

**Younger men:** PCFA has identified a particular lack of awareness about prostate cancer in men under 50, a cohort which often reports feeling isolated after diagnosis. These resources answer questions about issues pertinent to this group, including fertility, supporting a family during treatment, and sexuality.

**Gay and bisexual men:** These resources address prostate cancer issues specific to gay and bisexual men including differences around intimate relationships, social networks and support mechanisms, and perceptions of discrimination in the health system.

**Partners and carers:** Prostate cancer particularly affects partners and carers because of the impact treatments can have on sexuality and relationships. Through these resources PCFA urges that partners and carers are involved in treatment decisions and receive support throughout the cancer journey.

**Aboriginal and Torres Strait Islander men:** Men from these communities are more likely to die of prostate cancer than other men. PCFA will produce culturally-sensitive educational flip charts for health workers to use in Indigenous communities.

**Men from non-English speaking backgrounds:** PCFA is translating key resources about prostate cancer awareness, support groups and information for partners and carers into the most commonly spoken non-English languages in Australia.

**Other resources:** PCFA is also producing general resources about:
- psychological care
- urinary function
- bowel function
- a model of care to help consumers with cancer services navigation
- sexual function
- hormone treatment
- surgical treatment
- brachytherapy.
Ambassador Program

The Ambassador Program is a community education program aiming to raise awareness of prostate cancer and provide resources from which participants can further their knowledge. One hundred and five ambassadors are currently trained to deliver presentations to the public about prevention and early detection, treatment options and challenges.

This year the Ambassador Program has been revised with the presentation contents completely rewritten and brought up to date. Existing and new ambassadors have been invited to participate in a national training program to familiarise themselves with the new material and enable them to deliver presentations in different contexts.

PCFA ambassadors delivered presentations at approximately 90 speaking events, reaching thousands of people. These talks occurred in a wide range of locations including rugby clubs, city councils, churches and men’s sheds. Many workplaces also hosted Ambassadors to educate their workforce, including military bases, construction and machinery companies, mine sites and Qantas, a corporate partner of PCFA.

Ambassadors reside in all States and Territories, in both rural and urban areas. Many have had first-hand experience of prostate cancer, are the partner or carer of someone who has, are health professionals, or are simply passionate about men’s health.

THE AMBASSADOR

MARK FORBES
Carpenter and PCFA Ambassador
Toowoomba, Queensland

Mark Forbes, 42, endured an upset stomach for 18 months before he went to see his GP, but when he finally made the trip it saved his life.

His doctor ordered a PSA test along with the other regular blood tests he needed to diagnose Mark’s complaint. The score came back a 6, and within two months it had risen to 13.*

“That was in September 2011 and in the November I was diagnosed with a biopsy as having localised prostate cancer,” Mark says. His children were 11 and 17, and his wife 40. “It was a bit of a learning curve.”

Having recovered from a radical prostatectomy, Mark realised how unusual it is for younger men to receive a diagnosis of prostate cancer - only 3% of cases occur in men under 50. “It put me at a bit of an advantage to talk to younger guys about prostate cancer,” he says.

As one of more than 100 PCFA Ambassadors who give talks throughout Australia to raise awareness, Mark is now spreading the message to younger men that prostate cancer is not just an older man’s disease.

In the last year he’s addressed more than 800 people, tailoring his dynamic presentations to each audience and their type of work. His story never fails to grab their attention.

“I’m probably the last person to be lecturing men about their health - I was also reluctant to see my doctor,” Mark says. “But if I hadn’t gone, where would I be now?”

* Mark’s PSA score was unrelated to his stomach complaint.
There remains significant confusion within the community around PSA testing, largely due to a lack of consensus and policy both within Australia and internationally. PCFA consulted with key stakeholders and concluded it would be possible to bring together a broad group of experts to develop national clinical guidelines on PSA testing and consequent care – the first time such as collaboration has occurred in the world.

Cancer Council Australia is partnering with PCFA to lead development of the evidence-based guidelines using their guidelines development team and Wiki-based approach. Once developed, the guidelines will be submitted to the National Health and Medical Research Council (NHMRC) for approval.

The clinical guidelines are being developed with input from an Expert Advisory Panel consisting of the relevant medical colleges, all specialities involved in the diagnosis and management of prostate cancer, and consumer representatives.

Work commenced on the guidelines in November 2012 and we anticipate the documents will be available for public consultation toward mid-2014 and published and disseminated following the consultation and review process.

These clinical guidelines will be an Australian world first and will remove the confusion over PSA testing, thereby ensuring men are able to make informed decisions about PSA testing in consultation with their doctor.
Roadshow in the Bush

Education programs about prostate cancer have traditionally been delivered through metropolitan service providers, disadvantaging men in regional and rural areas. To address this deficit, PCFA has developed a Rural Education Roadshow program attending each State and Territory in Australia, funded by the Department of Health.

The aim of these Roadshows is to deliver consistent, robust educational messages to people in their local communities to enable them to make informed decisions about prostate cancer. This year PCFA has delivered Roadshows in Port Pirie, Nhulunbuy (Gove), Katherine (13/14 financial year), with the program continuing to be rolled out across all states and territories.

Two education sessions are delivered at each site, one for community members and one for GPs and other healthcare professionals. These sessions have been designed by PCFA based on expert advice and are delivered by a Specialist Cancer Nurse and experts in urology, radiation oncology or medical oncology.

Men who attend the Roadshows are empowered to be better equipped to manage prostate cancer where they live and to understand the treatment pathways available to them.

The program also aims to increase professional expertise in regional areas so that patients with an existing prostate cancer diagnosis are better supported through their cancer journey. As well as the delivery of structured information, the forum enables the exchange of information, ideas and practical advice to empower local service providers and ultimately reduce the need for men from rural communities to travel long distances to access tertiary services.

The project will develop a potentially sustainable model for providing outreach education to healthcare providers and consumers in regional Australia. The project is being evaluated to ensure key performance indicators have been met.

THE ROAD SHOW EDUCATOR

He recently travelled with Urologist Trent Farebrother, Radiation Oncologist Gerard Adams and Medical Oncologist Narayan Karanth to Gove, in the north eastern corner of Arnhem Land, to the remote Pacific Aluminium bauxite mine and refinery to bring information about prostate cancer to a group of miners.

“There were men there from their mid-twenties to their sixties, fathers and sons, all with a basic idea that they had prostates and there was a chance of cancer, but all with a lot of questions,” he says.

“There are so many misconceptions about the treatment for prostate cancer and its side effects, so it was really valuable for us to answer some of these questions and help clarify things.”

After the Road Show, several of the miners who attended called for more information about their situation and have since sought medical advice.

Based at the Royal Darwin Hospital, Lachlan jumped at the opportunity to become a Prostate Cancer Specialist Nurse following his own father’s journey with prostate cancer. His main role is to support men with prostate cancer in the Northern Territory, coordinating support, continuing care when specialists are unavailable, and educating the community.
Awareness

Advocacy: Zytiga listed on the PBS

One of PCFA’s key commitments is to ensure men diagnosed with prostate cancer have the best available treatment options available to them throughout their prostate cancer journey. This year PCFA successfully lobbied to have the new drug abiraterone acetate (Zytiga) listed on the Pharmaceutical Benefits Scheme (PBS) for men with advanced prostate cancer.

There are an estimated 22,000 men with advanced disease in Australia and all of them will eventually become resistant to androgen deprivation therapy. Men with this hormone therapy resistant disease who have failed chemotherapy have a shortened life expectancy and a poorer quality of life.

Zytiga is the first of a new class of drugs which target the androgen-receptor signalling pathway to slow cancer growth. These new therapies can substantially improve survival and quality of life and may one day be used prior to chemotherapy to fundamentally improve outcomes of advanced prostate cancer.

For many men with advanced prostate cancer, Zytiga is the only remaining option. But before it was listed on the PBS the drug cost $3,000 per month, putting it out of the reach of many prostate cancer patients.

PCFA and drug manufacturer Janssen Cilag established an advocacy campaign, Tomorrow Counts, which rallied the community of men with advanced prostate cancer to share their stories and lobby for Federal Government funding for Zytiga.

In February PCFA Chief Executive Anthony Lowe joined with Mr John Stubbs, Executive Officer of canSpeak, to write to the then Minister for Health, Tanya Plibersek, to request that the listing of Zytiga be fast-tracked.

PCFA was delighted when, on 1 August 2013, Zytiga was listed on the PBS, enabling Australian men with advanced prostate cancer to benefit from this game changing new therapy.

Tony Sonneveld OAM
Patient

Since his diagnosis 10 years ago, Tony Sonneveld has refused to let prostate cancer get him down: he walked the Kokoda Track a month after his external beam radiation treatment, he’s renovated an entire factory space, tends a local park and enjoys tennis, snowboarding and water skiing.

The 67 year-old has also been a long-time advocate for PCFA, telling his story to journalists, lobbying politicians and lending his time as PCFA’s NSW Chairman to ensure a better situation for other men with prostate cancer.

This year he has spent hundreds of hours supporting PCFA’s campaign to have the drug Zytiga listed on the Pharmaceutical Benefits Scheme. He’s appeared in several newspapers, organised a letter writing campaign, and lobbied his local MP.

That the campaign was ultimately successful, with Zytiga being listed from August 1, is particularly relevant for Tony as his own health has started to change.

With early signs that his hormone therapy has stopped working, access to the drug means a better chance of survival. It is offering hope to men with hormone therapy resistant prostate cancer worldwide.

“I still wake up every day and think ‘I’ve got cancer’ - but then I fill my day as long and hard as I can so I don’t dwell on it,” he says.
Community Attitudes Survey

As less than three per cent of prostate cancer cases occur in men under the age of 50, little work has been conducted in this age group to determine the level of awareness about prostate cancer. To redress this, PCFA’s 2013 Community Attitudes Survey, Prostate Cancer: The Next Generation, provided insight into the attitudes, experiences and perceptions about prostate cancer among men aged 18 to 50.

A national survey of 1,243 younger men confirmed that, like older men, they saw prostate cancer as the most significant health issue affecting men. This was particularly true among men aged 18 and 19, 38% of whom named prostate cancer as the most significant disease for men.

The majority of respondents did not know the symptoms of prostate cancer, especially those in younger age groups. Only one third had a reasonable knowledge about prostate cancer testing – much lower than in older men – while 73% did not think the information available to them clearly set out the tests they should have or what the tests entailed.

Surprisingly, despite their lack of knowledge about testing, men reported being tested from a very young age. Six per cent of 18 to 24 year olds had been tested, while by their forties a quarter had been tested. Most of the men said they were tested at the instigation of their GP, illustrating that Australia has an unorganised de facto screening program for prostate cancer and would benefit from evidence-based clinical guidelines around PSA testing.

For the first time, the survey asked respondents to nominate whether or not they were heterosexual. Thirteen per cent identified themselves as gay or bisexual or did not identify themselves as heterosexual, enabling PCFA to elicit valuable information about attitudes to prostate cancer in this community.

Significantly, gay and bisexual men were more likely than heterosexual men to report significant health issues, including depression and anxiety. They were also less likely than heterosexual men to have someone to whom they could turn for emotional support. Since treating mental health issues is an important part of prostate cancer care, this finding suggests that extra support needs to be targeted toward this population of men.

Gay and bisexual men under 40 were more likely to have been tested for prostate cancer and, despite perceived or real discrimination in the healthcare system, they were more aware than heterosexual men of the importance of health checks and monitoring. Gay and bisexual men were also susceptible to over-testing for prostate cancer and, like heterosexual men, appeared to lack adequate knowledge about symptoms, testing and treatment options. This highlights the need for information resources targeted at this community.
A central part of PCFA’s activities is to support men and their families affected by prostate cancer through the development and delivery of evidence-based information and through our extensive network of Support Groups and Prostate Cancer Specialist Nurses.

This year has seen significant growth in the services PCFA provides, with our educators, nurses and supportive mates reaching more men throughout Australia.

Support Groups
PCFA’s network of Support Groups has grown in the last year to 150 groups across Australia, sharing information, providing encouragement and raising awareness amongst men diagnosed with prostate cancer and their families.

Support Groups provide invaluable reassurance to men with prostate cancer from others who have personal experience of the challenges they are facing. Men who attend Support Groups are able to talk through the pros and cons of treatment options with other men, compare their physical and mental wellbeing and outcomes, and benchmark their own progress along the cancer journey.

With Cancer Australia funding through the Supporting men with prostate cancer through evidence-based resources and support project, PCFA is working to increase the number of Support Groups nationally to 200 by June 2014.

For the first time, the grant has enabled PCFA to offer a national training conference for Support Group leaders. An evidence-based manual has been developed to provide useful and practical information that reflects current practice and that leaders may easily apply.

A series of modules tailored to Support Group leaders’ needs covers different types of support groups, the importance of a group purpose statement, welcoming new members, different leadership styles, managing challenging behaviours, and avoiding burnout.

The new training material has been delivered by Support Group and Outreach Coordinators in each of PCFA’s five Chapters, who are trained to support Support Group leaders on the ground and through formal training programs.

National Support Group Training Conference
The inaugural National Support Group Leader Training Conference, held in Melbourne in May 2013, brought together more than 200 Support Group leaders and PCFA members from across Australia.

Delegates were able to network, attend facilitator-led workshops to introduce the new Support Group leader training material, and listen to some of Australia’s most respected experts on men’s health and prostate cancer.

Information was imparted by a mix of external and internal presenters at plenary and expo sessions, workshops and by a number of exhibitors.
Max Gardner Awards

When Max Gardner AM, a former Chairman of PCFA, died of prostate cancer in 2004 at the age of 71, he believed earlier diagnosis could have saved his life. He had become an advocate for early diagnosis and worked tirelessly to raise the level of community awareness and research into prostate cancer.

Max’s work and dedication are remembered to this day through the Max Gardner Award, which is presented annually to PCFA volunteers who have made outstanding efforts to spread awareness, promote research and support men and their families affected by prostate cancer.

Now in its fifth year, the Max Gardner Award has been received by 28 people for their services to PCFA. This year, the recipients were Terry Wheeler, David Gregory and Les Payne.

Max Gardner Award Recipients

<table>
<thead>
<tr>
<th>Name</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Allen</td>
<td>NSW</td>
</tr>
<tr>
<td>Don Baumber</td>
<td>QLD</td>
</tr>
<tr>
<td>Gary Bowes</td>
<td>SA</td>
</tr>
<tr>
<td>Spence Broughton</td>
<td>QLD</td>
</tr>
<tr>
<td>Con Casey</td>
<td>NSW</td>
</tr>
<tr>
<td>Bob Collard MBE</td>
<td>NSW</td>
</tr>
<tr>
<td>Dr John Conroy OAM</td>
<td>NSW</td>
</tr>
<tr>
<td>Peter Dornan AM</td>
<td>QLD</td>
</tr>
<tr>
<td>John Dowsett</td>
<td>TAS</td>
</tr>
<tr>
<td>Colin Farmer</td>
<td>WA</td>
</tr>
<tr>
<td>John Goodall</td>
<td>NSW</td>
</tr>
<tr>
<td>David Gregory</td>
<td>TAS</td>
</tr>
<tr>
<td>Alan Hall</td>
<td>SA</td>
</tr>
<tr>
<td>Trevor Hunt</td>
<td>SA</td>
</tr>
<tr>
<td>Daryl Hyland</td>
<td>QLD</td>
</tr>
<tr>
<td>Les Mather</td>
<td>VIC</td>
</tr>
<tr>
<td>Jayne Matthews</td>
<td>NSW</td>
</tr>
<tr>
<td>Bill McHugh</td>
<td>QLD</td>
</tr>
<tr>
<td>Michael O’Neill</td>
<td>NSW</td>
</tr>
<tr>
<td>Les Payne</td>
<td>QLD</td>
</tr>
<tr>
<td>Robert Phillips</td>
<td>VIC</td>
</tr>
<tr>
<td>Jim Reid</td>
<td>VIC</td>
</tr>
<tr>
<td>Jeff Roberts</td>
<td>SA</td>
</tr>
<tr>
<td>Ron Schmarr</td>
<td>NSW</td>
</tr>
<tr>
<td>Max Shub</td>
<td>VIC</td>
</tr>
<tr>
<td>Robert Slade</td>
<td>NSW</td>
</tr>
<tr>
<td>John Stead</td>
<td>QLD</td>
</tr>
<tr>
<td>Terry Wheeler</td>
<td>NSW</td>
</tr>
</tbody>
</table>

**JEFF’S YEARS OF SERVICE TO PCFA**

Fourteen years after his radical prostatectomy, Jeff Roberts is still heavily involved in promoting prostate cancer awareness in South Australia.

A long term member of the Prostate Cancer Action Group along with two other support groups, Jeff was awarded the Max Gardner Award in 2009.

“As a general rule men don’t tend to pursue their health situation as much as they should,” he says. “But the thing about prostate cancer is if you have a low to moderate grade you would be unlikely to have any symptoms so it’s very important to be tested regularly. The more people are aware of this and inform themselves, the better placed they are to take the right options and therefore end up with either a cure or able to maintain a good quality of life.”

Jeff says the thing he enjoys most about his voluntary work is the feedback from men with prostate cancer. “They appreciate being able to talk, they like to get information, reassurance and support from someone who has experienced prostate cancer himself.”
New Support for Gay and Bisexual Men

As part of PCFA’s Gay and Bisexual Men’s Prostate Cancer Initiative, a collaboration between PCFA, Malecare, Cancer Council Victoria, La Trobe University and others, researchers at La Trobe University audited resources available to this community and discovered that gay and bisexual men were almost entirely invisible in existing material.

There was no targeted information addressing issues such as support mechanisms, the effects of treatments on sexuality, or other issues of concern to this community. For fear of discrimination many gay and bisexual men did not reveal their sexual orientation to their doctor, meaning they never discussed issues that were relevant to them.

In addition to the development of information resources specifically targeted at gay and bisexual men, PCFA is establishing Support Groups nationally for this community. These groups are up and running in Sydney, Melbourne, Brisbane, Adelaide and Perth and PCFA is in the process of establishing groups in Hobart and Darwin.

THE SUPPORT GROUP LEADER

with no support. Then he started researching possible treatment options and called a Support Group, which advised him not to mention to anyone else in the group that he was gay.

“I can understand that husbands and wives may find homosexuality a bit confronting when they’re on their own journey and looking for support – but there was nowhere else for gay men like me to go for advice,” he says.

Gay and bisexual men may have different questions and concerns about prostate cancer, including the impact of treatments and side effects on their sex life, a possible lack of close relationships to provide support, and perceived or real discrimination in the health system.

PCFA is in the process of establishing Support Groups for gay and bisexual men in every state and territory in Australia. It is also developing a set of information resources targeted at this community and its specific issues.

Peter has now become the leader of Perth’s first Support Group for gay and bisexual men. It is welcoming transgender and transsexual men as well as anyone else who may not wish to attend a mainstream Support Group.

Men who attend are able to gain information, share experiences and meet others who can provide support.

“Prostate cancer is a male disease,” says Peter. “Men are men, no matter what their sexuality is.”

PETER BASTOW
Perth Support Group for gay and bisexual men

As a 54 year-old gay man living in Perth, Peter Bastow’s 2013 diagnosis with localised prostate cancer was particularly challenging.

After his Urologist confirmed Peter’s cancer by telephone, he spent two weeks in a haze and

Joe Cassidy, OUTinPerth

Karina Ysche, Photograph by Jim Lister
The Prostate Cancer Specialist Nursing Service was officially launched in May 2012 with generous initial funding from Movember. In July 2013, then Minister for Health Tanya Plibersek provided additional federal funding of $7 million through the Department of Health to further expand the program, enabling PCFA to place an additional 13 nurses around the country and bring the total number to 25.

Prostate Cancer Specialist Nurses work as part of a multidisciplinary team to provide a point of contact for men and offer continuity of care from diagnosis onwards. They see patients at any point during their cancer journey and help patients and their families to navigate the complex system of health services, make decisions about treatment options, and manage side effects of treatment.

Prostate Cancer Specialist Nurses are primarily hospital-based positions, with most referrals coming through the hospital system, but some offer community-based intervention if this is required in their area. Up to 50% of the new Federally funded nursing positions will be in community settings. The nurses’ roles continue to evolve as nurses have responded to local need within a structured framework.

The current Prostate Cancer Specialist Nurses had a total of 5,732 patient-related contacts during the service’s first year. Of these, 1,751 were new patient contacts and 3,981 were review contacts of patients who were already known to the nursing service. There were 2,349 rural patients and 3,383 metropolitan patients for this period. More than a third of patient contacts have been conducted by phone.

The nurses are involved in providing specialised and tailored information and education, psychological support and clinical care. Most of their work involves offering psycho-social assessment and support of patients and their carers, provision of information, care coordination, advice on continence or sexual function, and communication with the treating team.

The nursing program provides professional development and support for nurses from the start of their induction through training and beyond via monthly teleconferences and site visits.

Practice Framework for Nurses

Prostate Cancer Specialist Nurses are relatively new to Australia and there is no commonly accepted accreditation. PCFA was concerned this could lead to variations in practice and consequently in March 2013 released Practice Framework and Competency Standards for Prostate Cancer Specialist Nurses.

The guidelines provide structure and clarity to the profession, competency standards for nurses to work towards, and a robust framework to guide the practice of Prostate Cancer Specialist Nursing.

The guidelines were developed following a series of consultations with key stakeholders in healthcare delivery, strategic service development and nursing professional bodies representing all States and Territories in Australia, as well as an extensive literature review.

The guidelines have been adapted as course reading material for the Prostate Care Nursing short course at La Trobe University. This is the only specialised course of study in Australia that prepares Registered Nurses to care for men living with prostate cancer and their families.

Professional Development

PCFA also funds training for nurses to develop their skills in prostate cancer nursing and enable them to develop professional contacts.

This year PCFA funded nurses to attend three national cancer conferences, the Cancer Nurses Society of Australia (CNSA) Annual Winter Congress in Brisbane in July, the Australian and New Zealand Urogenital and Prostate (ANZUP) Cancer Trials Group Annual Scientific Meeting on the Gold Coast in July, and the Prostate Cancer World Congress in Melbourne in August.

PCFA has also funded travel scholarships for nurses enabling them to spend time developing their understanding about prostate cancer care, building professional networks, and then returning to their local area to apply their knowledge in a local context.
A diagnosis of prostate cancer is unlike a diagnosis of any other cancer because there are so many different treatment options, each with the potential for significant side effects. Patients’ cancer journeys can sometimes last for many years and they need a range of health professionals to support them during this time.

Sharon became one of Australia’s first Prostate Cancer Specialist Nurses in June 2012 and since then has seen demand for her services grow to encompass the New England Area Health Clusters and the townships of Quirindi, Murrurundi and Werris Creek just south of Tamworth.

Based at Tamworth Hospital, where Sharon identifies many of her patients from admissions for prostatectomy or as they attend medical oncology or radiotherapy clinics, she realised there was a desperate need for information and support for men in more remote areas.

“There were a lot of men who were finding out they had prostate cancer and then feeling as though they are just being sent off into the world to work it out for themselves,” she says.

“In rural areas you often have visiting general practitioners who are only there for six months, so people have commented they don’t feel they are really getting to know them. It’s a long drive for them to come for a half hour consultation at the hospital and not everyone wants to talk on the telephone or via video conferencing.”

Sharon established an outreach clinic and now visits men with prostate cancer in a large geographic area spanning from Mungindi to Walcha. To let men know she’s there for them, she has sent out nearly 100 flyers to GPs, liaises with Medicare Locals, and visits small rural and regional clinics to deliver presentations.

In the last year she has guided many men through treatment decisions, helping them to understand their choices and tailoring care to their individual needs.

“I’ve helped to put things in order for them, provided information which has giving them the permission to know their own body, and what treatment options will best suit them, their families and their lifestyles.”
September is International Prostate Cancer Awareness month, and the month Australia unites to host barbies to raise funds and awareness for PCFA.

500 barbies across the country

More than $900,000 raised

Commonwealth Bank staff raised $57,000

Having watched his father’s journey since his prostate cancer diagnosis five years ago, former Australian cricketer Matthew Hayden has become the face of PCFA’s major fundraising event, the Big Aussie Barbie.

Now in its fifth year, the Big Aussie Barbie encourages Australians everywhere to host a barbecue to support the work done by PCFA and to encourage all Australians – not just men in the high risk age group – to discuss prostate cancer and be aware of the risks.

The social atmosphere of a barbecue is the ideal place for men to discuss men’s issues, including their health – and Matthew wants to encourage everyone to consider PSA testing, in consultation with their doctor.

In 2013, he spearheaded the campaign with a new television commercial, website, online and direct marketing elements. The campaign was officially launched in Sydney at Customs House on Tuesday 20th August ahead of International Prostate Cancer Awareness Month in September and was followed up with launch events in Brisbane, Melbourne, Perth and Adelaide.

The Big Aussie Barbie is proudly supported by national sponsor the Commonwealth Bank, whose staff volunteered at launch events and raised $57,000 at a staff cook-off in September, which saw the Retail Banking, Business and Private
Banking, Institutional Banking & Markets, Risk Management & Financial Services and Wealth Management teams compete against each other for the best barbecue. This year PCFA also welcomed McCormick as the new supporting sponsor of the Big Aussie Barbie. McCormick very generously provided delicious barbecue marinades and spice rubs to each of the launch events and barbie host welcome packs in addition to hosting their own staff barbecue at their head office in Melbourne.

“Our aren’t very good about talking about men’s health issues and a lot of us think we’re bulletproof. To make progress in the fight against prostate cancer we first need to get it out in the open and start talking about it.”

Former Australian Cricketer, Matthew Hayden
A group of 26 men raised significant funds for PCFA by spending 11 days riding from Perth to Melbourne on former postie motorbikes.

The ‘Male Bag Ride’ was devised by Julian Dewan and Tony Clayton, who led the 4,500km journey on board Honda 110cc bikes. “We started The Male Bag Ride as we saw the Postie Bike journey from Perth to Melbourne as the perfect platform to raise much needed funds for PCFA and awareness for prostate cancer,” says Julian.

Having initially hoped to raise $200,000, the group more than doubled their target and helped spread the work of PCFA by attracting huge media attention across Australia, which included a fantastic feature on Channel Ten’s The Project.

The men raised funds through online donations and sponsorship including principal sponsors Australia Post, Boral, Bendigo Bank, the Murray Meander, Honda, Adelaide Airport, Qantas, Perth Airport, Grill’d, Cyclotek, Fasco Air Systems and Wolf Blass.

Fundraising events along the route included a Sport Night in Adelaide attended by numerous guest speakers, including basketball legend Jan Stirling and Olympic cyclist Patrick Jonker.

The men were joined along the way by patron, AFL legend David Parkin OAM. “Together, we can break down the barriers of embarrassment that men have when discussing male cancer so that diseases such as prostate cancer are caught much earlier,” he says.

The journey ended at Melbourne’s iconic MCG. The men took a rest to watch a game and made an honorary lap of the stadium during half time, when the cheque was presented to PCFA to huge cheers from the crowd.

The money raised went towards funding PCFA’s work in developing national evidence-based clinical guidelines on PSA testing and early management of test-detected prostate cancer, which aim to maximise the lives saved through testing, whilst minimising the negative side effects.

The Male Bag Ride will be taking place again in 2014 in Tasmania from 15-23 March 2014.

"These men have raised awareness of prostate cancer to the many hundreds of people they spoke to along their journey and through the media attention the ride attracted.

As a result of the funds raised the men will have a lasting national and international legacy by funding the National Clinical Guidelines on PSA Testing.”

PCFA CEO,
Associate Professor Anthony Lowe
The Long Ride 2013

The Long Ride is an annual national charity event to raise awareness of prostate cancer and men’s health. Nearly 2,000 motorbike riders have taken part since the event began in 2007 and have raised more than $500,000 for PCFA.

The event is designed to encourage people to do something totally different in their life: “It is about life on the road, meeting new people, and exploring yourself as you do something you love to do – ride your motorcycle,” say Chris and Gail Dunne, the founders of the ride.

Bike riders leave from every capital city and follow country roads to finish at a different point every year. In 2013, 400 riders took part and spread awareness of prostate cancer throughout regional areas in Australia and raised just over $250,000.

All the riders came together at the end of the ride in Cairns, with some riders sporting blue nails, hair and beards at a big end of ride celebration.

PCFA is continually grateful to Chris and Gail for organising and bringing together a truly inspirational group of motorbike riders all with the one aim of raising awareness of prostate cancer.

Sponsors:
Gasoline Alley
Harley-Davidson
Alucom
Berkeley IT
Boeing
Coolaz
Defence Housing Australia
The Murray Meander

The Murray Meander is a truly unique event which sees teams travelling the length of the Murray River in a fleet of tinnies in three one-week stages over three years.

Organised by the Horizon Committee, with Garet Stobus as Chairman and Dick Philips as event coordinator, the event is held over three legs with the current Meander starting in 2012. The final leg of the challenge will be completed in 2014.

In 2013, the event drew 29 teams from Adelaide, Sydney, Melbourne, the Hunter region of NSW as well as regional Victoria to complete the second part of the journey. In 2014 the event hopes to attract 40 teams to complete the last section from Mildura to Goolwa, covering a total of 887km.

All teams who have taken part in the event are asked to raise funds for prostate and breast cancer support services. PCFA extends much gratitude to the committee for their support and organisation of this event, which attracts huge interest and raises not only funds but awareness about prostate cancer.
Biggest Ever Blokes Lunch brings together large numbers of community participants in regional areas across Australia to enjoy barbecues and raise funds for PCFA.

The Biggest Ever Blokes Lunch was founded by McPherson Media Group managing director and former prostate cancer patient Chris McPherson in 2009, when he gathered a group of men who had all been affected by prostate cancer. With their passion and enthusiasm they created the first Biggest Ever Blokes Lunch in Shepparton, Victoria.

Chris has recruited Biggest Ever Blokes Lunch committees across regional Victoria, all of which will hold events every year to raise funds for prostate cancer research and awareness. More than $1 million has been raised to date.

We are continually grateful to Chris for coming up with this great concept and spreading his passion for this event to help increase awareness and funds for PCFA.
Community Fundraising Highlights

QLD

Shags on a rock and roll
Shag Islet Cruising Yacht Club (SICYC) is a rapidly growing social network of cruising yachties and individuals who have a passion for the sea. The concept is to create a network of cruising yachties all with the same title of Vice Commodore and each representing a different location.

Each year club members gather for a rendezvous on Shag Islet in the Gloucester Passage in the Whitsundays. There to the sounds of Jimmy Buffet’s music Parrot Head and Pirate Parties are held to raise money for charity.

This year the Rendezvous attracted 270 cruising yachts with nearly 1,000 people attending the main event. So far over $40,000 has been donated to PCFA from this year’s event.

Ride the Range
USQ Ride the Range challenges all types of bicyclists with medium to high levels of skill to ride either 50, 88 or 100km to raise money for PCFA and local and international charity projects.

Run by the Rotary Club of Toowoomba and sponsored by the University of Southern Queensland (USQ), the event has raised more than $30,000 for PCFA since it was launched in 2011.

The challenging ride starts and finishes at Picnic Point in Toowoomba before meandering through the Lockyer Valley and Gatton District and before the cruel climb back to the start.
Challenge event organising committee member Mrs Jo Capp said organisers had received positive feedback from the 270 riders. “The riders find it very hard but a really good challenge,” she said.

Southside Club’s Big Prostate Breakfast
Southside Sport and Community Club is combating prostate cancer by raising funds and breaking down taboos. The November Big Prostate Breakfast, in its fourth year, raised $25,000 for PCFA, bringing the total to over $100,000.

To deliver the Big Prostate Breakfast, all staff work on a volunteer basis, including entertainers. Raffle prizes are donated by businesses and even the food is kindly donated by suppliers.

4WD club hitch wagon to PCFA
The Ipswich Four Wheel Drive Club has taken the lead in their community by fundraising for PCFA. The Club first formed a subcommittee and $2,000 was put aside to get the event under way. Within three months of canvassing Ipswich businesses the Club had $15,500 worth of quality products and a 6x4 trailer to put them all in.

Companies such as Battery World, Economy Trailers, Snap on Tools, Coolana Contracting on PRO-ex each gave more than $1,000 worth of products. The Boonah business community was also very generous with its donations.

The goods were raffled off over a year with the competition yielding $22,000 to PCFA.
**Thiess Blue Truck**

The Thiess Mount Owen Mine painted one of its heavy duty dump trucks blue and distributed blue high visibility vests for all staff to wear within the mining company. The campaign, which ran for a month in June 2012, raised just shy of $20,000 and much needed awareness of prostate cancer across this predominantly male industry.

**Noel and Jeanette Cox**

Noel and Jeanette have been heavily involved with PCFA, running and supporting the Illawarra Prostate Cancer Support Groups and the Batemans Bay Prostate Cancer Support Groups (PCSG). When one of Noel’s dear friends and support group member passed away from prostate cancer, Noel and Jeanette decided to fundraise for PCFA. Their first event was a Gala Dinner called ‘Reach for the Stars’, which raised an incredible $32,311. This was followed by a prostate cancer information session which raised $6,300. Noel and Jeanette are a well-respected and inspirational couple who have gone above and beyond at every opportunity to support PCFA.

**Mango Auction**

PCFA has been the beneficiary charity of the auction of the season’s first mangos since 2009. This year, Tony Abbott made an appearance and auctioned off the mangos to the highest bidder for an incredible $30,000. Tony Abbott and Joe Hockey stopped by the PCFA tent and placed their thumb prints of support on PCFA’s huge artwork dedicated to men who have died from prostate cancer. To date PCFA has received more than $95,000 from this fantastic partnership with Sydney Markets Foundation.

**The Victory Ball**

The Victory Ball was held at The Victoria Army Barracks at Paddington in September 2012. Two hundred and thirty guests, including Air Chief Marshal Angus Houston, attended the three course dinner and dance and together raised over $30,000. The organising committee consisted of Peter Iannazzo, Sally Osborne, Di McKenzie, Alexandra Mayhew, Charlie Barnett, Wendy Farrow, Cassandra Birch and Anne Thomas.
That’s a Dam Good Beard
Brandon Perrin, Ryan Madden & Jayden Cotte started the fundraising initiative called the ‘Dam Good Beard’. Together they decided to grow beards and not shave until the completion of the Cotter Dam project on which they were all working during 2012. This ended up with them growing beards for six months and raising $44,000 along with creating an immense amount of awareness through their mining companies.

Scott Jeffery
Scott Jeffery is a 34-year-old Northern Beaches boy who in 2011/12 spent 440 lonely days covering 23,000km on his bicycle from his father’s birth place in Kent in the United Kingdom to his birthplace at Mona Vale Hospital in Sydney. Scott raised a truly inspiring $7,000 and spread awareness of prostate cancer throughout his journey.

Chris Carter
Being the face of younger men diagnosed with prostate cancer, Chris Carter has held two events to create much needed awareness and funds for PCFA in his local community. Collectively the events have raised $18,000. He is now a PCFA ambassador with his own personal journey with prostate cancer featuring in our Big Aussie Barbie 2013 campaign.

ICAP Charity Day
PCFA was lucky enough to be one of 14 Australian charities to benefit from the 20th ICAP Charity Day on 5th December 2012. We were the recipient of $50,000 from the day’s trade which saw the greatest return to date through the donation of revenues and commissions. Thanks to the efforts of ICAP customers, staff and suppliers, an amazing £11 million / US$ 17.7 million was raised internationally. PCFA was thrilled to join the event at the ICAP Sydney office with PCFA celebrity supporters Angry Anderson and Les Hill.

Pirtek Fishing Challenge
PCFA received very generous support from Pirtek through the Pirtek Fishing Challenge. This year was the biggest ever, with 7,500 anglers from all over Australia – mums, dads, kids and grandparents – chasing species from golden perch to barramundi in a one-day fishing challenge unlike any other competition. The event raised $150,000 for PCFA.
Run For Dad
The inaugural Run for Dad was held on Father’s Day in Bendigo and proved to be an enormous success yet again in 2013. It featured almost 300 registered runners and raised more than $4,000. Bendigo’s Biggest Loser father and son, Gerald and Todd Nester, were the faces for this year’s event. Special thanks to Mark Nally and his committee at St John of God Hospital for creating such a wonderful father and son event.

‘Hope For Tomorrow’ Annual Dinner Dance
Robert Troiani and the Hope for Tomorrow committee created an annual fundraising dinner event in Melbourne to promote prostate cancer awareness. The nights have always been sell-out events and to date have raised more than $100,000 for PCFA in the 7 years it has been running.
Simon’s Prostate Cancer Ball
Stuart Ralph created Simon’s Prostate Cancer Ball in memory of his father. The event, held in Hobart, is now in its fourth year and has raised more than $43,000 for PCFA to date. It is always a huge success and provides a fun evening showcasing comedic entertainment and other local talents.

Rotary Club of Altona City Bike Ride
Members of the Rotary Club of Altona City rode their bicycles from Sydney to Melbourne in one week in April to raise awareness about prostate cancer. PCFA admires their efforts and training to undertake such a challenge. Together they raised close to $6,000.

Whisky Live
PCFA has been lucky to benefit from Whisky Live since 2012, with over $13,000 raised. Whisky Live, a Whisky tasting event showcasing prime aged local and imported whiskies, travels throughout Australia each year, with exhibitors donating a bottle of their whisky to the Big Whisky raffle.
Community Fundraising Highlights

WA, SA & NT

2012

JULY  AUGUST  SEPTEMBER  OCTOBER  NOVEMBER  DECEMBER

Chevron City to Surf (WA)
PCFA gathered a team of supporters to walk the City to Surf route together, all dressed in PCFA singlets and caps, raising the profile of PCFA. WA Support Groups and our WA prostate cancer specialist nurse also joined the team, which raised $3,800.

September Big Aussie Barbie Launch (WA)
Mike Hussey attended as WA ambassador for the Big Aussie Campaign in Perth. The event was a wonderful success and presented a great opportunity to strengthen relationships with Corporate Partners and other community supporters, as well as raising $8,950.

Roughrider Rudling Golf Day (WA)
In honour of Peter Rudling, a former client of both Giles Partners and Interwest who lost his life to prostate cancer, this annual event raises awareness and funds for prostate cancer. This year it raised $10,175.

Office fit-out (WA)
Warmly received funds of $61,250 from a Lotterywest Grant allowed completion of the new WA office fit-out. The new office fit-out provided the WA team with a boardroom, a meeting room and three work stations in an open plan arrangement. We thank Lotterywest for their generous support.

Round the Rock (WA)
A team of three set off on two motorbikes with a support vehicle, travelling over 30,000km around Australia covering all States and Territories, raising awareness of prostate cancer along the way. Along with a pre-trip raffle and event, the team raised $9,500.
Doc Henning (WA)
Doc gains great support from his local communities and has been a much valued community fundraiser for PCFA for several years. People and businesses in the Rockingham, Mandurah and surrounding areas have very generously supported his fundraising efforts on an ongoing basis. This past year Doc has raised over $8,800, taking his total fundraising for PCFA over $30,000.

The Good Guys (SA)
The national electrical retail chain The Good Guys confirmed PCFA as one of its charities of choice. Its Local Giving Program has raised over $5million in recent times, donated to more than 150 local community organisations around Australia. PCFA is thrilled to be associated with The Good Guys in SA. An added bonus to the relationship was the news that PCFA would continue to be supported into 2014.

Joint Promotions (SA)
Big cheques were received in the first half of the year from joint promotions and events including $10,000 from Robern Menz GIANT FruChocs campaign with Triple M, Channel 9, GEM and GO TV, including numerous SA identities and celebrities such as Wayne Phillips, Mark Woodforde, Roger Rasheed, Dario Vidosic, Mitch Creek and Brett Maher. Nearly $17,000 was received from the Saverglass Wickets for Wine cricket event with superstar Stuart MacGill, while $2,400 came from the Association of Financial Advisors. The Coopers WIN TV Golf Day in Mt Gambier yielded around $15,000, with funds benefiting the local community.

Celebration Homes Beard Off (WA)
Male staff at Celebration Homes were given one month to grow a beard and raise funds for prostate cancer. Awards were given to the best beards at the end of the month. Staff did a fantastic job raising $6,500 for PCFA.

Tony Brebners Camino for Cancer (WA)
It was an incredible effort by Tony, a prostate cancer survivor; Tony walked the Camino de Santiago, an 800km pilgrimage from St Jean Pied du Port in France to Santiago de Compostela in northern Spain, raising funds for PCFA, and raised $9,560.
BOARDS AND COMMITTEES

National Board
National Chairman:
David Sandoe OAM
National Deputy Chairman:
Jim Hughes AM
Roz Baker
Steve Callister
Distinguished Professor
Judith Clements
Peter Gebert
David Gregory – to November 2012
Des Grogan – to September 2012
Chris Hall
Dr David Malouf
Emeritus Professor Villis Marshall AC
Professor John Mills
John Palmer
Terry Koltasz
Tony Sonneveld OAM
Associate Professor Phillip Stricker – to November 2012

Finance & Operations Committee
Chairman: Chris Hall
Jim Hughes AM
David Sandoe OAM
Graeme Johnson
John Palmer
Associate Professor Anthony Lowe
Helen Falconer

Awareness & Education
Chairman: Dr David Malouf
Julie Sykes
Associate Professor Anthony Lowe
Dr Tim Wong
David Sandoe OAM

Research
Chairman: Professor John Mills
Dr Bruce Kynaston Consumer Representative
Associate Professor Richard Pearson
Professor Suzanne Chambers
Professor Robert (Frank) Gardiner AM
Associate Professor Howard Gurney
Associate Professor Susan Henshall
Associate Professor Lisa Horvath
Professor Peter Leedman
Professor Afaf Girgis
Professor Pamela Russell AM

National Support Group Committee
Chairman: David Sandoe OAM
Terry Harbour – to October 2012
Ian Wagner – from November 2012
Terry Koltasz
Dr Bruce Kynaston
Associate Professor Anthony Lowe
Bill Richmond
Terry Wheeler – to June 2013
Dr Ray Dart – from June 2013
State Boards

New South Wales & Australian Capital Territory State Board
Chairman: Tony Sonneveld OAM
Neil Adams – to February 2013
Charlie Barnett
Jack Fraenkel
Peter Haylen
Dr Michael Izard
The Hon. Jim Lloyd – to May 2013
Mike McClellan
David Nomchong
Graeme Postlethwaite – to August 2013
Dr Ray Dart – from August 2013
Marty Rhone – to August 2012
Lyn Thurnham

Victoria & Tasmania State Board
Chairman: Peter Gebert
Graeme Johnson
Darren Alexander
Mike Brady AM
Jonathon Oppy
David Schmidt
Geoff Underwood
Bill Richmond
Steve Whelan – to June 2013
Chris McPherson – from July 2013
Professor Gail Risbridger – from July 2013
Dr Nathan Lawrentschuk – from July 2013
Peter Antonius – from July 2013

Western Australia State Board
Chairman: Roz Baker
Deputy Chair: Bill Munro
Terry Koltasz
Jeffery Leach
Adrian Lester
Dr Ken Michael AC
Dr Siobhan Ng
Dr Tom Shannon
Morgan Soloman

Queensland State Board
Chairman: Distinguished Professor Judith Clements
Warren Cameron
Dr Bruce Kynaston
Ian Smith
Mark Irwin – from June 2013
Jim Hughes AM – to December 2012

South Australia & Northern Territory State Board
Chairman: Emeritus Professor Villis Marshall AC
Margie Andrewartha
David Baker
Michael Barrett
The Hon Nick Bolkus
Michael Brock
Helen Dundon
Peter Hurley
Justin Jamieson
Jeff Roberts
Dr Peter Sutherland
Will Taylor
Steven Trigg
Dr Dick Wilson
David White
## CEO’s Office

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associate Professor Anthony Lowe</td>
<td>Chief Executive Officer</td>
</tr>
<tr>
<td>Kelly Foster</td>
<td>Executive Assistant</td>
</tr>
<tr>
<td>Ross Anderson</td>
<td>National Office Coordinator</td>
</tr>
</tbody>
</table>

## Research

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Associate Professor Miranda Xhilaga</td>
<td>Director, Research Programs</td>
</tr>
<tr>
<td>Anne Maerz</td>
<td>Research Programs Coordinator</td>
</tr>
</tbody>
</table>

## Health Programs and Education

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Julie Sykes</td>
<td>Director, Health and Education Programs</td>
</tr>
<tr>
<td>Vanessa Purkiss</td>
<td>Health and Education Programs Administrator</td>
</tr>
<tr>
<td>Dr Tim Wong</td>
<td>Senior Project Officer, Health and Education</td>
</tr>
<tr>
<td>Tim Earnshaw</td>
<td>Project Officer, Health and Education</td>
</tr>
<tr>
<td>Katie Dundas</td>
<td>Project Support Administrator, Health and Education</td>
</tr>
<tr>
<td>Jessica Roberts</td>
<td>Project Officer, Rural Education Roadshow</td>
</tr>
<tr>
<td>Suzanne Flynn</td>
<td>Coordinator of Nursing</td>
</tr>
</tbody>
</table>

## Support Network

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charlotte Houghton</td>
<td>Project Support Administrator, Support Groups</td>
</tr>
<tr>
<td>Carla Demos</td>
<td>Administrator, Support Group Operations</td>
</tr>
<tr>
<td>Evan Kallipolitis</td>
<td>Support Group &amp; Outreach Program Coordinator, NSW/ACT</td>
</tr>
<tr>
<td>Emilia Hay</td>
<td>Support Group &amp; Outreach Program Coordinator, WA</td>
</tr>
<tr>
<td>Amanda Pomery</td>
<td>Support Group &amp; Outreach Program Coordinator, VIC/TAS</td>
</tr>
<tr>
<td>Ian Richards</td>
<td>Support Groups &amp; Outreach Program Coordinator, SA/NT</td>
</tr>
<tr>
<td>Lorraine Hagaman</td>
<td>Support Groups &amp; Outreach Program Coordinator, QLD</td>
</tr>
</tbody>
</table>
### Marketing & Fundraising

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adrian Mitchell</td>
<td>Supporter Services Manager</td>
</tr>
<tr>
<td>Merran Davies</td>
<td>Supporter Care &amp; Database Assistant</td>
</tr>
<tr>
<td>Janett Hanisch</td>
<td>Individual Giving Manager</td>
</tr>
<tr>
<td>Kathryn Jones</td>
<td>Community Fundraising &amp; Campaigns Manager</td>
</tr>
<tr>
<td>Suzanne Benson</td>
<td>Big Aussie Barbie Campaign Manager</td>
</tr>
<tr>
<td>Cassandra Birch</td>
<td>National Fundraising Coordinator</td>
</tr>
<tr>
<td>Graeme Higgs</td>
<td>State Manager, Queensland</td>
</tr>
<tr>
<td>Paula Truesdale</td>
<td>Office and Events Coordinator, QLD</td>
</tr>
<tr>
<td>Tracey Cullen</td>
<td>Office &amp; Events Coordinator, VIC/TAS</td>
</tr>
<tr>
<td>Cate Harman</td>
<td>State Manager, WA</td>
</tr>
<tr>
<td>Belinda Katz</td>
<td>Office and Events Coordinator, WA</td>
</tr>
<tr>
<td>Salima Garcia</td>
<td>Office &amp; Events Coordinator, WA</td>
</tr>
<tr>
<td>Karyn Foster</td>
<td>State Manager SA/NT</td>
</tr>
<tr>
<td>Ramin Tehrani</td>
<td>Online Manager <em>(from August 2013)</em></td>
</tr>
<tr>
<td>Kris Alisch</td>
<td>Corporate and Individual Philanthropy Manager</td>
</tr>
</tbody>
</table>

### Finance & Operations

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helen Falconer</td>
<td>Financial Controller</td>
</tr>
<tr>
<td>Lynn Li</td>
<td>Accountant</td>
</tr>
<tr>
<td>Stephanie Sin</td>
<td>Finance Officer</td>
</tr>
</tbody>
</table>

### Human Resources

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Priya Subrahmanyan</td>
<td>Manager, Human Resources</td>
</tr>
</tbody>
</table>
The audited consolidated financial statements for the year ended 30 June 2013 are included in this report. These financial highlights are intended to provide an overview of the financial statements and to highlight matters of interest. They are not intended to replace or modify the content of the separate audited consolidated financial statements.

**PCFA has fundraising income from:**

- **Movember**
- **Events** – including The Big Aussie Barbie and community fundraising events
- **Individual Giving** – including direct mail, major gifts, monthly pledges and bequests
- **Government and Other Grants**
- **Trusts and Foundations**
- **Corporate Partnerships**
- **Merchandise Sales**

The distribution between these categories in 2012/13 was:

<table>
<thead>
<tr>
<th>Category</th>
<th>Income ($000)</th>
<th>Percentage of Fundraising Income (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Movember</td>
<td>5,000.0</td>
<td>40.7</td>
</tr>
<tr>
<td>Events</td>
<td>3,115.7</td>
<td>25.3</td>
</tr>
<tr>
<td>Government and Other Grants</td>
<td>1,652.2</td>
<td>13.4</td>
</tr>
<tr>
<td>Individual Giving</td>
<td>1,435.6</td>
<td>11.7</td>
</tr>
<tr>
<td>Trusts and Foundations</td>
<td>635.1</td>
<td>5.2</td>
</tr>
<tr>
<td>Corporate Partnerships</td>
<td>447.8</td>
<td>3.6</td>
</tr>
<tr>
<td>Merchandise Sales</td>
<td>15.9</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12,302.3</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>
The principal activities of PCFA during the 2012/13 financial year were focused on reducing the impact of prostate cancer on Australian men, their partners, families and the wider community.

PCFA continued to benefit from generous support provided by The Movember Foundation. The funds provided by Movember continued to support PCFA’s research program. Movember has also provided support for PCFA’s Prostate Cancer Specialist Nursing Program.

Income from community fundraising activities continued to be an important source of funds. Community involvement in and support of fundraising activities events saw event income grow to $3.1 million in 2012/13.

The Federal Government continued to provide funding to strengthen and grow PCFA’s Affiliated Support Group Network, develop evidence-based information and educational resources, and to devise and implement easily accessible web based resources through internet based social network tools. Additional funding from the Federal Government via the Department of Health and Ageing enabled the “Prostate Cancer Rural Education Road Show” project to commence during the 2012/13 financial year.

The level of income received from Trusts and Foundations and from Corporate Partnerships also grew during the 2012/13 financial year.

**Investments**

PCFA raises in full the amount required to fund research grants before committing to funding grants. The funds raised are then invested over the duration of the grant period and released in periodic intervals.

PCFA’s investment policy is to hold short term funding requirements on deposit at the Commonwealth Bank where they are available for immediate withdrawal without penalty. The balance of funds is invested in Commonwealth Bank term deposits. In addition, PCFA has a small managed investment portfolio with Macquarie Bank which is in the process of being sold.

At 30 June 2013 the cash investments amounted to $14.1 million and the managed investment portfolio amounted to $198,798. During the year PCFA benefited from investment income of $534,264.

**Fundraising costs $1.389 million, or 11% of fundraising income**

PCFA endeavours to control costs, and benefit from donated goods and services whenever possible. Direct fundraising costs were $1.389 million or 11% of fundraising income.

**Future commitments to research grant funding and Prostate Cancer Specialist Nursing Program of $9.6 million**

At 30 June 2013 future commitments to research grant funding and the Prostate Cancer Specialist Nursing Program amounted to $7.6 million and $2.0 million respectively.
DIRECTORS’ REPORT

Your directors present their report together with the consolidated financial statements of the Group, which comprises Prostate Cancer Foundation of Australia Limited and its controlled entity Prostate Cancer Foundation of Australia (“PCFA”) for the year ended 30 June 2013.

Directors

The names of each person who has been a director during the year and to the date of this report are:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr David Sandoe OAM</td>
<td>Chairman</td>
</tr>
<tr>
<td>Ms Rosalind Baker</td>
<td></td>
</tr>
<tr>
<td>Mr Steve Callister</td>
<td></td>
</tr>
<tr>
<td>Distinguished Professor Judith Clements</td>
<td>Appointed 12/8/2012</td>
</tr>
<tr>
<td>Mr Peter Gebert</td>
<td>Appointed 24/10/2012</td>
</tr>
<tr>
<td>Mr David Gregory</td>
<td>Retired 8/11/2012</td>
</tr>
<tr>
<td>Mr Des Grogan</td>
<td>Retired 30/9/2012</td>
</tr>
<tr>
<td>Mr Chris Hall</td>
<td></td>
</tr>
<tr>
<td>Mr Jim Hughes AM</td>
<td></td>
</tr>
<tr>
<td>Dr David Malouf</td>
<td></td>
</tr>
<tr>
<td>Emeritus Professor Villis Marshall AC</td>
<td></td>
</tr>
<tr>
<td>Professor John Mills</td>
<td></td>
</tr>
<tr>
<td>Mr John Palmer</td>
<td></td>
</tr>
<tr>
<td>Mr Tony Sonneveld OAM</td>
<td></td>
</tr>
<tr>
<td>Associate Professor Phillip Stricker</td>
<td>Retired 6/11/2012</td>
</tr>
</tbody>
</table>

Directors have been in office since the start of the year to the date of this report unless otherwise stated.

Company Secretary

Dr Anthony Lowe held the position of Company Secretary at the end of the financial year.
Principal Activities

The principal activities of PCFA during the 2012/13 financial year were focused on reducing the impact of prostate cancer on Australian men, their partners, families and the wider community. We did this by:

- Promoting and funding world leading, innovative research into Prostate Cancer
- Implementing awareness campaigns and education programs for the Australian community, health professionals and Government; and
- Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses.

PCFA continued the Specialist Nursing Program with funds provided from Movember and also continued the project “Supporting men with Prostate Cancer through evidence-based resources and support” with funds provided from the Australian Government. The project “Prostate Cancer Rural Education Road Show” was commenced with funds from the Chronic Disease Prevention and Service Improvement Fund developed by the Commonwealth of Australia as represented by the Department of Health and Ageing.

Members Guarantee

In accordance with the company’s constitution, each member is liable to contribute $10 in the event the company is wound up. The total amount members would contribute is $1,050.

Operating Result

The operating surplus / (deficit) of PCFA for the year ended 30 June 2013 amounted to $1,265,531 (2012: $(980,983)).

Dividends

PCFA is limited by guarantee and is not permitted to pay dividends.

Review of Operations

PCFA’s operations for the year resulted in a surplus of $1,265,531 (2012 deficit of $980,983) after the approval of research grants and specialist nursing program totalling $4.19 million (2011/12 $8.21 million). PCFA deliberately allocated funds to the Specialist Nursing Program and has undertaken the activities funded by the Australian Government in order to expand the activities that are consistent with PCFA’s mission of reducing the impact of prostate cancer on the Australian community.

A detailed review of operations can be found in the annual report which accompanies this financial report.

Significant Changes in State of Affairs

No significant changes to PCFA’s state of affairs occurred during the financial year.

After Balance Date Events

No further matters or circumstances have arisen since the end of the financial year which significantly affected or may affect the operations of PCFA, the results of those operations, or state of affairs of PCFA in future financial years.

Future Developments

PCFA expects to maintain the present status and level of operations and hence there are no likely significant developments in PCFA’s operations.
Environmental Issues

PCFA’s operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

Objectives

PCFA’s objectives are:

• Be the peak independent body driving research into prostate cancer
• Improve early detection rates
• Be known as the best source for support and information regarding prostate cancer
• Be a sustainable organisation capable of delivering the mandate now and in the future

To achieve these aims PCFA has continued to fund high quality research through its national grants program, as noted above; promoted and supported the establishment of additional support groups which, nationally, now number in excess of 140; and raised awareness of prostate cancer through the production of several new publications and our regular newsletter, all of which are accessible via the PCFA website.

Options

No options over issued shares or interests in PCFA were granted during or since the end of the financial year and there were no options outstanding at the date of this report.

Information on Directors

Mr David Sandoe OAM
- Dip. BIA, MBA, ANZIIF (Fellow), CIP, MCMi, FAiM, FAIcD
David is the National Chairman of PCFA, Acting Chairman of PCFA’s National Support Groups Committee, Chairman of Foundation Diane, Chairman of ACT Insurance Authority Advisory Board and Co-leader with his wife Pam of the Sydney Adventist Hospital – Prostate Cancer Support Group Network. He is also a member of Defence Service Homes Insurance Authority Advisory Board.

He has held various Chairmanships, board and committee roles with Cancer Voices NSW, Cancer Voices Australia, PCFA’s Support and Advocacy Committee – Public Awareness and Education Committee and the NSW Board, the Institute of Magnetic Resonance Research, Cancer Council of NSW and the Cancer Institute’s NSW Oncology Group – Urology.

He retired from his roles as General Manager and a Principal of Finity Consulting Pty Limited, an Australasian specialist general and health insurance actuarial and management consulting practice on the 31/12/12. David has also held a number of insurance industry senior executive roles in Australia, New Zealand, UK and Ireland and is a former President of the Australian & New Zealand Institute of Insurance and Finance and a former National President of the Swiss Australian Chamber of Commerce. He is an honorary life member of both organisations.

Ms Rosalind Baker
- Advanced Cert of Business (Real Estate), Counselling Diploma
Rosalind built a successful real estate and export company in Zimbabwe for 20 years. Since arriving in Australia 17 years ago, she has been property developer and business broker, now with Ellis Corporate assisting migrants to find businesses and investments. A member of Perth Rotary Club she is involved with community projects that train or mentor students and entrepreneurs. Rosalind represented Rotary on the WA Board of PCFA following her husband’s affliction with prostate cancer, and was subsequently invited to become the chair in 2012. Member of REIWA, BBAWA and CCI.

Mr Steve Callister
- B.Bus., MBA, FCPA, FAICD, FAIM
Steve is Managing Director and Partner of an import wholesale company, dealing with all major retailers in Australia and New Zealand. Former roles include Convener of St Vincent’s Prostate Cancer Support Group, Chairman of the NSW SAC, delegate to the National SAC and Chairman of the NSW Board. Steve became Chairman of PCFA’s Marketing and Fundraising Committee of the National Board in May 2009.

Distinguished Professor Judith Clements
- BASc., MASc., PhD (Endocrinology)
Judith leads the Cancer Program at the Institute of Health and Biomedical Innovation, Queensland University of Technology (QUT), based at the Translational Research Institute on the Princess Alexandra Hospital Biomedical Precinct. She is also the Scientific Director at the Australian Prostate Cancer Research Centre – Queensland (APCRC-Q), a dedicated prostate cancer research centre that is a collaboration between QUT and the Princess Alexandra Hospital. Judith is the Chair of the virtual
national prostate cancer tissue bank – the Australian Prostate Cancer Bio Resource, which is an important resource that underpins prostate cancer research nationally – and is co-leader of the Queensland node of the international genetics study for prostate cancer, PRACTICAL. She is a two-time winner of the Alban Gee Prize from the Urological Society of Australasia, and has also been the recipient of the QUT Vice Chancellor’s Award for Research Excellence. She was recently awarded the Queensland Women in Technology Biotech Outstanding Achievement Award for 2012.

Mr Peter Gebert

Peter has been employed in various Executive and Managerial roles with Cbus from 1996 to 2012. Previously he worked within superannuation institutions and served ten years in the Army Reserve reaching the ranking of Captain. He has been involved with PCFA for over seven years and is currently Chair of the Vic/Tas Board. He has been a Victorian Chapter Council member for six years and was the Chair of the National Support and Advocacy Committee. Peter is also a convener of a Prostate Cancer Support Group in Melbourne.

Mr David Gregory

David worked as National Sales Manager, Golden Poultry Farming Industries, Ingham’s Enterprises, Goodman Fielder and others prior to setting up as a Food Broker to the Foodservice Industry. David worked as a volunteer for the Cancer Council Tasmania, and has had the role of Convener of the Hobart Support Group and was elected to the VIC/TAS Chapter Council (Deputy Chairman) and as SAC Representative for Tasmania. He was further elected to the Chair of the National Support & Advocacy Committee in 2010 and the Chair of the newly formed National Support Groups Committee in January 2012. Retired from the board 8/11/2012.

Mr Desmond Grogan

- Dip.C.E., M.Eng. Sc., Fellow VPELA
Desmond retired from the Consulting Engineering practice he founded after a career as a Civil & Traffic Engineer. At retirement the practice had grown to a multi-disciplinary group of 120 people with offices in Brisbane and Melbourne, where it was the largest traffic engineering group in Victoria. Desmond joined the Victorian PCFA board in late 2005 and was trained as an ambassador in the pilot study initiated by the PCFA. Retired from the board 30/9/2012.

Mr Chris Hall

- B.Comm. (Hons), CA
Chris joined the Board of PCFA in May 2007 as Finance Director. He is a partner and member of the National Executive Committee of KPMG, having previously been a board member. He was also a member of the Australian Auditing and Assurance Standards Board, until January 2011.

Mr Jim Hughes AM

- GAICD, Snr Assoc. ANZIIF
Jim has held senior positions in the insurance industry throughout Australia over many years and is actively involved in community activities. He is a Senior Associate of the Australian and New Zealand Institute of Insurance and Finance and a Graduate of the Australian Institute of Company Directors. He also lectures on corporate risk management and business strategy formulation on behalf of the Australian Institute of Company Directors. Jim is a Director of Youi Insurance. He is a Director of the Apex Foundation of Australia and a Life Governor of the Apex Clubs of Australia. Jim is currently the Deputy National Chairman of PCFA.

Dr David Malouf

- MBBS, FRACS (Urol)
David graduated from the University of Sydney in 1990. He completed his Urology training in Sydney prior to undertaking a Fellowship year at the Hammersmith Hospital in London, specialising in surgical oncology and renal transplantation. His special interests include uro-oncology, brachytherapy for prostate cancer, erectile dysfunction and the management of urinary tract calculi. David is a Past President of the Urological Society of Australia and New Zealand and a past Chair of the Australian and New Zealand Association of Urological Surgeons. He is the Chair of the Awareness and Education Committee of the Prostate Cancer Foundation of Australia. He serves on the Board of the Australasian Brachytherapy Group and is a Director of the British Journal of Urology International. In addition to being a member of the Urological Society of Australia and New Zealand, David is a member of the European Association of Urology, the American Urological Association, and an Honorary Member of the British Association of Urological Surgeons. He is a clinical teacher at the University of New South Wales Medical School and is a VMO at St George Hospital, Hurstville Private Hospital and The Mater Private Hospital.
Emeritus Professor Villis Marshall AC
- MBBS, MD (Adel), FRAC

Villis is Chair of the Australian Commission on Safety and Quality in Health Care, Commissioner for the Health Services Gifts Board, Clinical Professor of Surgery Adelaide University. He was previously General Manager of the Royal Adelaide Hospital, Sub Prior of the Order of St John, and Chairman of the Australian Cancer Network for the development of guidelines for the management of advanced prostate cancer. Villis is Past President of the Urological Society of Australia and New Zealand and Chair of Kidney Health Australia. He was also Director of Surgical and Specialty services at the Royal Adelaide Hospital and Director Freemason’s Centre for Men’s Health.

Professor John Mills
- SB (Chicago), MD (Harvard), FACP, FIDSA, FRACP, ARCPA

John is a specialist physician, internationally-recognized scientist and biotech businessman. He currently holds positions as the Professor of Medicine, Epidemiology & Microbiology, Monash University; Professor of Microbiology, RMIT; Consulting Physician, Alfred Hospital and several positions on biotechnology venture capital and company boards. From 1992 to 2002 he was Director of the Burnet Institute for Medical Research and Public Health. Prior to immigrating to Australia he was Professor of Medicine, Microbiology, Laboratory Medicine and Clinical Pharmacy at the University of California, San Francisco. He is the Director of Research and Development at Tissupath Specialist Pathology; in that position he has co-authored five research papers on prostate cancer since 2010.

Mr John Palmer
- B.A, B.Sc. App (Building) Class 1 Hons, FAIM, FAIB, MIAA, Chartered Builder, JP.

John is a Past President of the Rotary Club of Lane Cove and a Rotarian of 35 years. In 1997 he was the second Chairman of PCFA. He is a retired Associate Lecturer University of Technology Sydney. John is a Chartered Builder and the owner and sole director of Building Durability Pty Ltd, T A Taylor (Aust) Pty Ltd and Research & Applied Technologies Pty Ltd. In 1991 John established a joint venture with and was a Board Member of the TIANAO Building Repair Materials Institute in Tianjin China until 2002.

Mr Tony Sonneveld OAM
- Dip. Met. RMIT

As a qualified metallurgist, Tony has held several managerial / directorship positions in construction related businesses around Australia, New Zealand and South East Asia over the past 40 years. He has honorary memberships in Australian Institute for Non Destructive Testing, International Committee for NDT, Officer Training Unit, Scheyville Army Association, and Victoria Barracks Officers’ Mess.

In August 2007, Tony joined the NSW Board of PCFA as a Consumer Advocate and Ambassador Speaker to actively promote prostate cancer awareness, education and fund raising and became NSW Chairman in May 2009. He is a member of ANZUP Consumer Advisory Panel and participates in the Cancer Council NSW Annual Strategic Research Partnership Grants Consumer Review of Applications.

Associate Professor Phillip Stricker
- MBBS (New South Wales) (Honours), FRACS

Phillip is an international expert on the management of prostate cancer, one of Australasia’s most experienced. His current interests are in maximizing clinical outcomes, new forms of therapy, and imaging and perfecting surgical techniques to maximize potency in prostate cancer. In addition, he has been an integral part of education to GPs and the public in the areas of prostate cancer with his book written with Professor Kerryn Phelps, now in its third edition.

Phillip is Clinical Director of The National Prostate Cancer Research Centre NSW, Chairman of the Department of Urology at St Vincent’s campus in Sydney, and the Director of the St Vincent’s Prostate Cancer Centre, of which he is also chairman of the Fellowship Training Program and was an inaugural director of the National Board of the Prostate Cancer Foundation of Australia.

Retired from the board 6/11/2012.
Meetings of Directors

During the year, 4 meetings of directors were held. Attendances by each director were as follows:

<table>
<thead>
<tr>
<th>Directors</th>
<th>Meetings attended</th>
<th>Eligible to attend</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr David Sandoe OAM</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Ms Rosalind Baker</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mr Steve Callister</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Distinguished Professor Judith Clements</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mr Peter Gebert</td>
<td>3</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Mr David Gregory</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Mr Des Grogan</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Mr Chris Hall</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mr Jim Hughes AM</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Dr David Malouf</td>
<td>4</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Emeritus Professor Villis Marshall AC</td>
<td>4</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Professor John Mills</td>
<td>4</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Mr John Palmer</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Mr Tony Sonneveld OAM</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Associate Professor Phillip Stricker</td>
<td>2</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>
Indemnifying Officers or Auditor

During the financial year, PCFA paid a premium of $4,400 (2012: $4,400) to insure the directors and secretaries of the company and its controlled entities.

The liabilities insured are legal costs that may be incurred in defending civil or criminal proceedings that may be brought against the officers in their capacity as officers of entities in the group, and any other payments arising from liabilities incurred by the officers in connection with such proceedings. This does not include such liabilities that arise from conduct involving a wilful breach of duty by the officers or the improper use by the officers of their position or of information to gain advantage for themselves or someone else or to cause detriment to the company. It is not possible to apportion the premium between amounts relating to the insurance against legal costs and those relating to other liabilities.

Proceedings on Behalf of PCFA

No person has applied for leave of Court to bring proceedings on behalf of PCFA or intervene in any proceedings to which PCFA is a party for the purpose of taking responsibility on behalf of PCFA for all or any part of those proceedings. PCFA was not party to any such proceedings during the year.

Auditor’s Independence Declaration

The lead auditor’s independence declaration for the year ended 30 June 2013 as required under section 307c of the Corporations Act 2001 has been received and can be found on page 71.

Auditor

PWC continues in office in accordance with section 327 of the Corporations Act 2001.

Signed in accordance with a resolution of the Board of Directors.

Chris Hall
Director

Dated this 22nd day of October 2013
Sydney, NSW
**Auditor’s Independence Declaration**

As lead auditor for the audit of Prostate Cancer Foundation of Australia Limited for the year ended 30 June 2013, I declare that to the best of my knowledge and belief, there have been:

a) no contraventions of the auditor independence requirements of the *Corporations Act 2001* in relation to the audit; and

b) no contraventions of any applicable code of professional conduct in relation to the audit.

This declaration is in respect of Prostate Cancer Foundation of Australia Limited and the other entities it controlled during the period.


date

**James McElvogue**

Partner

PricewaterhouseCoopers

Dated this 22nd day of October 2013

Sydney, NSW

Liability limited by a scheme, approved under Professional Standards Legislation.
## CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME

**FOR THE YEAR ENDED 30 JUNE 2013**

<table>
<thead>
<tr>
<th>Note</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Revenue</td>
<td>12,885,652</td>
<td>13,211,425</td>
</tr>
<tr>
<td>Administration employee benefit expenses</td>
<td>(1,691,670)</td>
<td>(1,489,869)</td>
</tr>
<tr>
<td>Direct fundraising expenses</td>
<td>(1,389,007)</td>
<td>(915,127)</td>
</tr>
<tr>
<td>Direct support group expenses</td>
<td>(699,459)</td>
<td>(707,023)</td>
</tr>
<tr>
<td>Research grants &amp; Specialist Nursing Program</td>
<td>(4,189,120)</td>
<td>(8,211,278)</td>
</tr>
<tr>
<td>Direct awareness activity expenses</td>
<td>(698,503)</td>
<td>(969,269)</td>
</tr>
<tr>
<td>Project and other administration expenses</td>
<td>(2,860,459)</td>
<td>(1,875,695)</td>
</tr>
<tr>
<td>Loss on sale of financial assets</td>
<td>(91,903)</td>
<td>(24,147)</td>
</tr>
<tr>
<td>Surplus/ (Deficit) before income tax</td>
<td>1,265,531</td>
<td>(980,983)</td>
</tr>
<tr>
<td>Income tax expense</td>
<td>2 (a)</td>
<td>–</td>
</tr>
<tr>
<td>Surplus/ (Deficit) after income tax</td>
<td>1,265,531</td>
<td>(980,983)</td>
</tr>
<tr>
<td><strong>Other Comprehensive Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Items that will be reclassified subsequently to profit and loss when specific conditions are met:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss on revaluation of available for sale financial assets</td>
<td>(9,438)</td>
<td>(55,656)</td>
</tr>
<tr>
<td><strong>Total comprehensive income/(loss) for the year</strong></td>
<td><strong>1,256,093</strong></td>
<td><strong>(1,036,639)</strong></td>
</tr>
</tbody>
</table>

The accompanying notes form part of these consolidated financial statements.
# CONSOLIDATED STATEMENT OF FINANCIAL POSITION

**AS AT 30 JUNE 2013**

<table>
<thead>
<tr>
<th>Note</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

## ASSETS

### CURRENT ASSETS
- Cash and cash equivalents 6: 14,174,500  15,095,467
- Trade and other receivables 7: 3,808,938  3,962,978
- Other current assets 8: 327,594  452,294
- Inventory 9: 73,683  103,871

**TOTAL CURRENT ASSETS**: 18,384,715  19,614,610

### NON-CURRENT ASSETS
- Financial assets 10: 204,454  930,089
- Plant and equipment 11: 246,204  212,183
- Leasehold Improvements 11: 112,928  8,756

**TOTAL NON-CURRENT ASSETS**: 563,586  1,151,028

**TOTAL ASSETS**: 18,948,301  20,765,638

## LIABILITIES

### CURRENT LIABILITIES
- Trade and other payables 12: 716,715  769,090
- Research grants payable 13: 4,925,415  5,840,289
- Specialist Nursing Program payable 13: 1,233,884  1,137,493
- Provisions 14: 90,959  55,477

**TOTAL CURRENT LIABILITIES**: 6,966,973  7,802,349

### NON-CURRENT LIABILITIES
- Trade and other payables 12: 91,780  25,851
- Research grants payable 13: 2,689,883  3,618,737
- Specialist Nursing Program payable 13: 799,881  2,237,792
- Provisions 14: 36,557  65,678

**TOTAL NON-CURRENT LIABILITIES**: 3,618,101  5,948,058

**TOTAL LIABILITIES**: 10,585,074  13,750,407

## NET ASSETS

**EQUITY**
- Reserves 15: (51,888)  (134,353)
- Retained earnings: 8,415,115  7,149,584

**TOTAL EQUITY**: 8,363,227  7,015,231

*The accompanying notes form part of these consolidated financial statements.*
## CONSOLIDATED STATEMENT OF CHANGES IN EQUITY

### FOR THE YEAR ENDED 30 JUNE 2013

<table>
<thead>
<tr>
<th>Note</th>
<th>Retained Earnings</th>
<th>Asset Revaluation</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Balance at 30 June 2011</td>
<td>8,130,567</td>
<td>(90,688)</td>
<td>8,039,879</td>
</tr>
<tr>
<td>Total comprehensive income</td>
<td>(980,983)</td>
<td>(55,656)</td>
<td>(1,036,639)</td>
</tr>
<tr>
<td>Reserve written back on realisation of financial assets</td>
<td>-</td>
<td>11,991</td>
<td>11,991</td>
</tr>
<tr>
<td>Balance at 30 June 2012</td>
<td>7,149,584</td>
<td>(134,353)</td>
<td>7,015,231</td>
</tr>
<tr>
<td>Total comprehensive income</td>
<td>1,265,531</td>
<td>(9,438)</td>
<td>1,256,093</td>
</tr>
<tr>
<td>Reserve written back on realisation of financial assets</td>
<td>-</td>
<td>91,903</td>
<td>91,903</td>
</tr>
<tr>
<td>Balance at 30 June 2013</td>
<td>8,415,115</td>
<td>(51,888)</td>
<td>8,363,227</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these consolidated financial statements.
## CONSOLIDATED STATEMENT OF CASH FLOWS

**FOR THE YEAR ENDED 30 JUNE 2013**

<table>
<thead>
<tr>
<th>Note</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>CASH FLOWS FROM OPERATING ACTIVITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receipts and contributions from the public and government</td>
<td>12,997,326</td>
<td>10,678,920</td>
</tr>
<tr>
<td>Payments to suppliers and employees</td>
<td>(7,639,241)</td>
<td>(5,774,712)</td>
</tr>
<tr>
<td>Research grants and Specialist Nursing Program paid</td>
<td>(7,374,368)</td>
<td>(7,007,829)</td>
</tr>
<tr>
<td>Interest and distributions received</td>
<td>584,610</td>
<td>1,096,825</td>
</tr>
<tr>
<td>Net cash (used in) operating activities</td>
<td>(1,431,673)</td>
<td>(1,006,796)</td>
</tr>
<tr>
<td><strong>CASH FLOWS FROM INVESTING ACTIVITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proceeds from investments</td>
<td>740,084</td>
<td>307,294</td>
</tr>
<tr>
<td>Payments for investments</td>
<td>(23,887)</td>
<td>(14,739)</td>
</tr>
<tr>
<td>Payments for plant and equipment</td>
<td>(205,491)</td>
<td>(54,667)</td>
</tr>
<tr>
<td>Proceeds from disposal of plant and equipment</td>
<td>-</td>
<td>24,440</td>
</tr>
<tr>
<td>Net cash generated in investing activities</td>
<td>510,706</td>
<td>262,328</td>
</tr>
<tr>
<td>Net increase in cash held</td>
<td>(920,967)</td>
<td>(744,468)</td>
</tr>
<tr>
<td>Cash at the beginning of the financial year</td>
<td>15,095,467</td>
<td>15,839,935</td>
</tr>
<tr>
<td><strong>Cash at the end of the financial year</strong></td>
<td>14,174,500</td>
<td>15,095,467</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these consolidated financial statements.
Note 1: Corporate Information

The financial report of Prostate Cancer Foundation of Australia for the year ended 30 June 2013 was authorised for issue in accordance with a resolution of the directors on 16 October 2013.

Prostate Cancer Foundation of Australia Limited (the Company) is a company domiciled in Australia, the sole activity of which is to act as the corporate trustee of Prostate Cancer Foundation of Australia (the Trust). The consolidated financial statements as at and for the year ended 30 June 2013 comprise the Company and the Trust, collectively referred to as PCFA. PCFA is a not for profit entity. The nature of the operations and principal activities of PCFA are described in the Directors’ Report.

Note 2: Statement of Significant Accounting Policies

Basis of Preparation

The financial report is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards-Reduced Disclosure Requirements (including Australian Accounting Interpretations), the Corporations Act 2001, the Charitable Fundraising Act 1991 and its associated regulations. Australian Accounting Standards set out accounting policies that the AASB has concluded would result in a financial report containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of this financial report are presented below and have been consistently applied unless otherwise stated.

The financial report has been prepared on an accrual basis and is based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets and financial assets. All amounts are stated in Australian Dollars and in presenting the financial report are rounded to the nearest dollar.

(a) Revenue

Fundraising proceeds, bequests and donations are accounted for when received and when PCFA is legally entitled to the income. Movember income is accounted for on an accrual basis as part of its arrangements with an external agent.

Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets. All revenue is stated net of the amount of goods and services tax (GST) payable to the Australian Taxation Office.

Revenue from the sale of goods is recognised when control passes to the buyer.

(b) Government Contributions

PCFA receives non-reciprocal contributions from federal and state governments. These contributions are received on the condition that specified services are delivered or conditions fulfilled. These contributions are recognised at the fair value upon receipt at which time an asset is taken up in the Statement of Financial Position and the revenue recognised in the Statement of Comprehensive Income.

(c) Donations in Kind

Items donated for use are included at the fair value to PCFA where this value can be quantified and a third party is bearing the cost.

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

(d) Expenditure

Expenditure is accounted on an accrual basis and has been classified under headings that aggregate all costs relating to that category. The categories in the consolidated statement of comprehensive income reflect PCFA activities.
Note 2: Statement of Significant Accounting Policies (continued)

(e) Plant & Equipment

Plant and equipment are measured on the cost basis, less depreciation and impairment losses.

The carrying amount of plant and equipment is reviewed annually by directors to ensure it is not in excess of the recoverable amount from these assets. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the asset’s employment and subsequent disposal. The expected net cash flows have been discounted to their present value in determining their recoverable amounts.

Plant and equipment that have been contributed at no cost, or for nominal cost, are valued at the fair value of the asset at the date it is acquired.

Depreciation

The depreciable amount of all fixed assets is depreciated on a diminishing value basis over the asset’s useful life to PCFA commencing from the time the asset is held ready for use.

Leasehold improvements are depreciated over the unexpired period of the lease.

The useful life applied for each class of depreciable assets is:

<table>
<thead>
<tr>
<th>Class of Fixed Asset</th>
<th>Useful Lives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer equipment</td>
<td>1-5 years</td>
</tr>
<tr>
<td>Office furniture and equipment</td>
<td>10-20 years</td>
</tr>
<tr>
<td>Leasehold improvement</td>
<td>3-5 years</td>
</tr>
</tbody>
</table>

The assets’ residual values and useful lives are reviewed, and adjusted if appropriate, at each balance sheet date. Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains or losses are included in the Statement of Comprehensive Income.

(f) Leases

Leases of fixed assets, where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership, are transferred to PCFA are classified as finance leases.

Leasehold leases, which transfer to PCFA substantially all the risks and benefits incident to ownership of the leased item, are capitalised, recording an asset and a liability equal to the present value of the minimum lease payments, including any guaranteed residual values.

Leased assets are depreciated on a straight line basis over their estimated useful lives where it is likely that PCFA will obtain ownership of the asset. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Leas e payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses on a straight-line basis over the life of the lease term.

Lease incentives under operating leases are recognised as a liability and amortised on a straight-line basis over the life of the lease term.

(g) Inventories

Inventories of goods purchased for resale are valued at the lower of cost or net realisable value.

(h) Financial Instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when PCFA becomes a party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that PCFA commits itself to either purchase or sell the asset (i.e. trade accounting is adopted). Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified “at fair value through profit or loss” in which case transaction costs are expensed to profit or loss immediately.

Classification and subsequent measurement

Financial instruments are subsequently measured at either fair value, amortised cost using the effective interest rate method or cost. Fair value represents the amount for which an asset could be exchanged or a liability settled, between knowledgeable, willing parties. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as:

   i. the amount at which the financial asset or financial liability is measured at initial recognition;
   ii. less principal repayments;
   iii. plus or minus the cumulative amortisation of the difference, if any, between the amount initially recognised and the maturity amount calculated using the effective interest method; and
   iv. less any reduction for impairment.
The effective interest rate method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or, when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cash flows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense in profit or loss.

(i) Financial assets at fair value through profit or loss

Financial assets are classified at ‘fair value through profit or loss’ when they are held for trading for the purpose of short-term profit taking, or where they are derivatives not held for hedging purposes, or when they are designated as such to avoid an accounting mismatch or to enable performance evaluation where a group of financial assets is managed by key management personnel on a fair value basis in accordance with a documented risk management or investment strategy. Such assets are subsequently measured at fair value with changes in carrying value being included in profit or loss.

(ii) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are subsequently measured at amortised cost.

(iii) Held-to-maturity investments

Held-to-maturity investments are non-derivative financial assets that have fixed maturities and fixed or determinable payments, and it is PCFA’s intention to hold these investments to maturity. They are subsequently measured at amortised cost.

(iv) Available-for-sale financial assets

Available-for-sale financial assets are non-derivative financial assets that are either not capable of being classified into other categories of financial assets due to their nature, or they are designated as such by management. They comprise investments in the equity of other entities where there is neither a fixed maturity nor fixed or determinable payments. Available-for-sale financial assets are classified as non-current assets.

(v) Financial liabilities

Non-derivative financial liabilities (excluding financial guarantees) are subsequently measured at amortised cost.

Fair Value

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value of all unlisted securities, including recent arm’s length transactions, reference to similar instruments and option pricing models.

Impairment

At each reporting date, PCFA assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether impairment has arisen. Impairment losses are recognised in the Statement of Comprehensive Income.

Derecognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expires or the asset is transferred to another party whereby PCFA no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are either discharged, cancelled or expired. The difference between the carrying value of the financial liability, which is extinguished or transferred to another party and the fair value of consideration paid including the transfer of non-cash assets or liabilities assumed is recognised in profit or loss.

(i) Impairment of Assets

At each reporting date, PCFA reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset’s fair value less costs to sell and value in use, is compared to the asset’s carrying value. Any excess of the asset’s carrying value over its
recoverable amount is expensed to the
Statement of Comprehensive Income.
Where the future economic benefits
of the asset are not primarily
dependent upon on the assets ability
to generate net cash inflows and
when PCFA would, if deprived of the
asset, replace its remaining future
economic benefits, value in use is
depreciated cost of an asset.
Where it is not possible to estimate
the recoverable amount of an assets
class, PCFA estimates the recoverable
amount of the cash-generating unit to
which the class of assets belong.
Where an impairment loss on a
revalued asset is identified, this
is debited against the revaluation
reserve in respect of the same
class of asset to the extent that the
impairment loss does not exceed the
amount in the revaluation reserve for
that same class of asset.

(j) Research Grants and
Specialist Nursing Program

Research grants are expensed through
the Statement of Comprehensive Income and recognised as a liability when PCFA has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

It is considered that upon PCFA
National Board approval of the
research grants or placement
application and notification of success
to the applicant organisation, PCFA
is constructively obliged to fund
the contract whereby an economic
benefit will be required to settle the
obligation and a reliable estimate
can be made of the amount of the
obligation.

(k) Employee Benefits

Employee benefits comprise wages
and salaries, annual, sick and long
service leave, and contributions to
employee superannuation funds.
Provision is made for PCFA’s liability
for employee benefits arising from
services rendered by employees
to balance sheet date. Employee
benefits, expected to be settled within
one year, together with benefits
arising from wages, salaries and
annual leave which may be settled
after one year, have been measured
at the amounts expected to be paid
when the liability is settled. Other
employee benefits, payable later than
one year, have been measured at the
net present value.
Contributions are made by PCFA
to employee superannuation funds
and are charged as expenses when
incurred. PCFA has no further
obligation to pay further contributions
to these funds if the funds do not hold
sufficient assets to pay all employees
benefits relating to employee service
in current and prior periods. Liabilities
for sick leave are recognised when the
leave is taken and are measured at the
rates paid.

(l) Cash and Cash
Equivalents

Cash and cash equivalents in the
consolidated statement of financial
position include cash at bank, cash
on hand, short-term deposits held
with banks with an original maturity
of six months or less that are readily
convertible to known amounts of cash
and which are subject to insignificant
risk of changes in value, other short-
term highly liquid investments and
bank overdrafts.
For the purposes of the statement of
cash flow, cash and cash equivalents
consist of cash and cash equivalents
as defined above, net of any
outstanding bank overdrafts.

(m) Accounts Receivable
and other debtors

Accounts receivable which are
expected to be collected within 12
months are classified as current
assets. All other receivables are
classified as non-current assets.
Accounts receivable are initially
recognised at fair value.
Collectibility of accounts receivable
is reviewed on an ongoing basis.
Amounts that are known to be
uncollectible are written off when
identified.
Note 2: Statement of Significant Accounting Policies
(continued)

(n) Goods and Services Tax
Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Balance Sheet are shown inclusive of GST. The amount of GST recoverable from or payable to the ATO is included with other receivables or payables in the Statement of Financial Position. Cash flows are presented in the Statement of Cash Flows on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

(q) Comparative Figures
Where required by Accounting Standards, comparative figures have been adjusted to conform with changes in presentation for the current financial year.

(r) Accounts payable and other payables
Accounts payable and other payables represent liabilities outstanding at the end of the reporting period for goods and services received by PCFA during the financial year which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability. The carrying amount of the payables is deemed to reflect fair value.

Key judgements – Available-for-sale investments
PCFA maintains a portfolio of managed funds with a carrying value of $198,798 at reporting date. Should investment prices decline in value for an extended period of time, PCFA has determined that such investments will be considered for impairment in the future.

(t) Basis of Consolidation
Subsidiaries are entities controlled by the Group. The consolidated financial statements incorporate the assets and liabilities of all subsidiaries as at 30 June and results for the year then ended. Intragroup balances and transactions, and any unrealized income and expenses arising, are eliminated in preparing the consolidated financial statements.

(o) Income Tax
No provision for income tax has been made as PCFA is a charitable institution for the purposes of Australian taxation legislation and therefore exempt from income tax under Division 50 of the Income Tax Assessment Act 1997.

(p) Provisions
Provisions are recognised when PCFA has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions recognised represent the best estimate of the amounts required to settle the obligation at reporting date.

(s) Critical Accounting Estimates and Judgements
The directors evaluate estimates and judgements incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within PCFA.

Key Estimates – Impairment
PCFA assesses impairment at each reporting date by evaluating conditions specific to PCFA that may be indicative of impairment triggers. Recoverable amounts of relevant assets are reassessed using value-in-use calculations which incorporate various key assumptions.
Note 3: Fundraising Appeals Conducted During the Financial Year

The following disclosures for the current period are included to comply with the Charitable Fundraising Act 1991.

During the financial year PCFA raised funds primarily through:
• Solicited corporate and general donations;
• Gifts and bequests; and
• Charity events such as Movember.

<table>
<thead>
<tr>
<th>RESULTS FROM FUNDRAISING APPEALS</th>
<th>2013</th>
<th>%</th>
<th>2012</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross income from fundraising and donations</td>
<td>$12,302,357</td>
<td>11%</td>
<td>$12,216,383</td>
<td>7%</td>
</tr>
<tr>
<td>Total cost of fundraising</td>
<td>$(1,389,007)</td>
<td>11%</td>
<td>$(915,127)</td>
<td>7%</td>
</tr>
<tr>
<td>Net income after fundraising costs</td>
<td>$10,913,350</td>
<td>89%</td>
<td>$11,301,256</td>
<td>93%</td>
</tr>
<tr>
<td>Total income</td>
<td>$12,885,652</td>
<td>13,211,425</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total expenditure</td>
<td>$11,620,121</td>
<td>14,192,408</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total payments to support services, research grants and specialist nursing service program, awareness activities, plus projects</td>
<td>$7,192,515</td>
<td>10,803,114</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments support services, research grants and specialist nursing service program, awareness activities, plus projects as a percentage of total income</td>
<td>56%</td>
<td>82%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments to support services, research grants and specialist nursing service program, awareness activities, plus projects as a percentage of total expenditure</td>
<td>62%</td>
<td>76%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Further information on the application of the net surplus from fundraising and other income is contained in the Statement of Comprehensive Income and the Statement of Cash Flows.
## Note 4: Revenue

<table>
<thead>
<tr>
<th>Source</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue from government and other grants</td>
<td>1,652,231</td>
<td>1,310,000</td>
</tr>
<tr>
<td>Fundraising revenue:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Donations</td>
<td>412,498</td>
<td>524,093</td>
</tr>
<tr>
<td>- Corporate donations</td>
<td>447,809</td>
<td>400,938</td>
</tr>
<tr>
<td>- Major gifts</td>
<td>401,264</td>
<td>249,144</td>
</tr>
<tr>
<td>- Direct mail</td>
<td>621,788</td>
<td>710,531</td>
</tr>
<tr>
<td>- Movember</td>
<td>5,000,000</td>
<td>6,100,000</td>
</tr>
<tr>
<td>- Major events</td>
<td>3,115,686</td>
<td>2,399,447</td>
</tr>
<tr>
<td>- Trusts and foundations</td>
<td>635,132</td>
<td>493,501</td>
</tr>
<tr>
<td>- Merchandise sales</td>
<td>15,949</td>
<td>28,729</td>
</tr>
<tr>
<td>Total fundraising revenue</td>
<td>10,650,126</td>
<td>10,906,383</td>
</tr>
<tr>
<td>Other revenue</td>
<td>49,031</td>
<td>147,219</td>
</tr>
<tr>
<td>Interest and dividends received</td>
<td>534,264</td>
<td>847,823</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>12,885,652</strong></td>
<td><strong>13,211,425</strong></td>
</tr>
</tbody>
</table>
## Note 5: Net Surplus/ (Deficit) for the Year

<table>
<thead>
<tr>
<th>Description</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Surplus/ (Deficit) for the year has been determined after the following expenses:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project – Specialist Nursing Program</td>
<td>189,589</td>
<td>219,538</td>
</tr>
<tr>
<td>Project – Supporting men with prostate cancer through evidence-based resources and support</td>
<td>1,189,899</td>
<td>915,544</td>
</tr>
<tr>
<td>Project – Prostate Cancer Rural Education Road Show</td>
<td>154,064</td>
<td>–</td>
</tr>
<tr>
<td>Project – Prostate Cancer Survivorship Research Centre</td>
<td>42,725</td>
<td>–</td>
</tr>
<tr>
<td>Project – PSA Testing Guidelines</td>
<td>49,283</td>
<td>–</td>
</tr>
<tr>
<td>Project – iPad App Development</td>
<td>69,462</td>
<td>–</td>
</tr>
<tr>
<td>Depreciation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Furniture and equipment</td>
<td>38,096</td>
<td>19,407</td>
</tr>
<tr>
<td>- Leasehold Improvements</td>
<td>29,202</td>
<td>2,744</td>
</tr>
<tr>
<td>Employee benefits expense</td>
<td>2,545,966</td>
<td>2,111,891</td>
</tr>
<tr>
<td>Rental expense on operating leases</td>
<td>347,486</td>
<td>330,154</td>
</tr>
<tr>
<td>Auditor Remuneration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Audit services</td>
<td>42,500</td>
<td>40,000</td>
</tr>
<tr>
<td>- Other audit services re government grant acquittal</td>
<td>–</td>
<td>2,200</td>
</tr>
<tr>
<td></td>
<td>42,500</td>
<td>42,200</td>
</tr>
<tr>
<td>Donation to Brady Urological Research Institute (USA)</td>
<td>100,000</td>
<td>–</td>
</tr>
</tbody>
</table>
Note 6: Cash and Cash Equivalents

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Cash at bank</td>
<td>4,456,379</td>
<td>3,888,842</td>
</tr>
<tr>
<td>Cash on hand</td>
<td>3,071</td>
<td>2,050</td>
</tr>
<tr>
<td>Term deposits</td>
<td>9,715,050</td>
<td>11,204,575</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>14,174,500</td>
<td>15,095,467</td>
</tr>
</tbody>
</table>

Note 7: Trade and Other Receivables

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>136,752</td>
<td>242,023</td>
</tr>
<tr>
<td>Movember income receivable</td>
<td>3,600,000</td>
<td>3,600,000</td>
</tr>
<tr>
<td>Interest receivable</td>
<td>16,675</td>
<td>17,989</td>
</tr>
<tr>
<td>GST receivable</td>
<td>55,511</td>
<td>102,966</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,808,938</td>
<td>3,962,978</td>
</tr>
</tbody>
</table>

Note 8: Other Current Assets

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accrued income</strong></td>
<td>–</td>
<td>187,243</td>
</tr>
<tr>
<td>Prepayments</td>
<td>283,963</td>
<td>265,051</td>
</tr>
<tr>
<td>Other deposits</td>
<td>43,631</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>327,594</td>
<td>452,294</td>
</tr>
</tbody>
</table>
Note 9: Inventory

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>CURRENT</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Inventory (at cost)</td>
<td>73,683</td>
<td>103,871</td>
</tr>
</tbody>
</table>

Note 10: Financial Assets

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>NON CURRENT</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Available-for-sale financial instruments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managed investment portfolio</td>
<td>198,798</td>
<td>843,354</td>
</tr>
<tr>
<td>Direct share portfolio</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Held to Maturity financial instruments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental deposits</td>
<td>5,656</td>
<td>86,735</td>
</tr>
</tbody>
</table>

Available-for-sale financial assets comprise of investments in managed funds and listed trusts and listed shares. There are no fixed returns or fixed maturity dates attached to these investments. A gain or loss on an available-for-sale financial asset is recognised directly in equity, through the statement of changes in equity, except for impairment losses and foreign exchange gains and losses, until the financial asset is derecognised, at which time the cumulative gain or loss previously recognised in equity shall be recognised in profit or loss. PCFA does not hold these assets for trading or for short term profit making.

Held to maturity financial assets are comprised of bank deposits held.
**Note 11: Plant & Equipment and Leasehold Improvements**

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Plant and equipment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At cost</td>
<td>401,070</td>
<td>328,954</td>
</tr>
<tr>
<td>Less accumulated depreciation</td>
<td>(154,866)</td>
<td>(116,771)</td>
</tr>
<tr>
<td><strong>Total plant and equipment</strong></td>
<td>246,204</td>
<td>212,183</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Leasehold Improvements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At cost</td>
<td>144,875</td>
<td>11,500</td>
</tr>
<tr>
<td>Less accumulated depreciation</td>
<td>(31,947)</td>
<td>(2,744)</td>
</tr>
<tr>
<td><strong>Total plant and equipment</strong></td>
<td>112,928</td>
<td>8,756</td>
</tr>
</tbody>
</table>

** Movements in Carrying Amounts **

<table>
<thead>
<tr>
<th></th>
<th>Plant and equipment</th>
<th>Leasehold improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2012</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Balance at the beginning of year</td>
<td>212,863</td>
<td>-</td>
</tr>
<tr>
<td>Additions at cost</td>
<td>43,167</td>
<td>11,500</td>
</tr>
<tr>
<td>Disposals</td>
<td>(24,440)</td>
<td>-</td>
</tr>
<tr>
<td>Depreciation expense</td>
<td>(19,407)</td>
<td>(2,744)</td>
</tr>
<tr>
<td><strong>Carrying amount at end of year</strong></td>
<td>212,183</td>
<td>8,756</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Plant and equipment</th>
<th>Leasehold improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2013</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Balance at the beginning of the year</td>
<td>212,183</td>
<td>8,756</td>
</tr>
<tr>
<td>Additions at cost</td>
<td>72,117</td>
<td>133,374</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Depreciation expense</td>
<td>(38,096)</td>
<td>(29,202)</td>
</tr>
<tr>
<td><strong>Carrying amount at end of year</strong></td>
<td>246,204</td>
<td>112,928</td>
</tr>
</tbody>
</table>
Note 12: Trade and Other Payables

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors and accruals</td>
<td>$626,981</td>
<td>$646,561</td>
</tr>
<tr>
<td>Short-term employees benefits</td>
<td>$181,514</td>
<td>$148,380</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>808,495</strong></td>
<td><strong>794,941</strong></td>
</tr>
</tbody>
</table>

Financial liabilities at amortised cost classified as trade and other payables.

Trade and other payables
- Total current | $716,715 | $769,090 |
- Total non-current | $91,780 | $25,851 |
**Total** | **808,495** | **794,941** |
Less short term employee benefits | (181,514) | (148,380) |
**Financial liabilities as trade and other payables** | **626,981** | **646,561** |

Note 13: Research Grants and Specialist Nursing Program Payable

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>CURRENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research grants payable</td>
<td>$4,925,415</td>
<td>$5,840,289</td>
</tr>
<tr>
<td>Specialist Nursing Program payable</td>
<td>$1,233,884</td>
<td>$1,137,493</td>
</tr>
<tr>
<td>NON CURRENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research grants payable</td>
<td>$2,689,883</td>
<td>$3,618,737</td>
</tr>
<tr>
<td>Specialist Nursing Program payable</td>
<td>$799,881</td>
<td>$2,237,792</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>9,649,063</strong></td>
<td><strong>12,834,311</strong></td>
</tr>
</tbody>
</table>

Research grants payable relate to 53 (2012: 57) approved applications to which PCFA are presently committed. These will be paid over the next 4 financial years according to the agreed letters of offer.

Specialist Nursing Program payable is based on funds received from or committed by Movember during previous financial years and retained for this purpose. Contracts have been awarded to provide nurses in hospitals at various locations around Australia and funds also set aside for evaluation of the program. These funds are to be expended over several years.
Note 14: Provisions

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long service leave</td>
<td>5,259</td>
<td>13,514</td>
</tr>
<tr>
<td>Nursing education</td>
<td>70,093</td>
<td>34,611</td>
</tr>
<tr>
<td>Lease incentive</td>
<td>52,164</td>
<td>73,030</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>127,516</td>
<td>121,155</td>
</tr>
</tbody>
</table>

Provision for long-term employee benefits

A provision has been recognised for employee entitlements relating to long service leave. In calculating the present value of future cash flows in respect of long service leave, the probability of long service leave being taken is based on historical data. The measurement and recognition criteria relating to employee benefits have been included in Note 2 to this report.

Provision for Nursing education

A provision has been recognised for amounts provided for education purposes for nurses. These claims are expected to be settled in the next financial year. The provision is based on funds received from an endowment.

Provision for Lease incentive

The company entered into a new operating lease for PCFA’s Sydney headquarters on 1 January, 2011 for a period of 5 years. PCFA received a rent free incentive of $104,330 in the form of rent, outgoings and parking. This incentive will be amortised over the life of the lease.
Note 15: Reserves

Asset Revaluation Reserve

This reserve records the revaluation of financial assets classified as available-for-sale, which is the difference between the asset’s carrying value and market value at balance sheet date.

In the prior year, the opening balance of the reserve at 1 July 2011 was reduced by $187,106 through a transfer to retained earnings. The transfer relates to available-for-sale assets which were realised in previous periods.

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening balance 1 July</td>
<td>(134,353)</td>
<td>(277,794)</td>
</tr>
<tr>
<td>Revaluation of available for sale assets</td>
<td>(9,438)</td>
<td>(55,656)</td>
</tr>
<tr>
<td>Reserve written back on realisation of financial assets</td>
<td>91,903</td>
<td>11,991</td>
</tr>
<tr>
<td>Adjustment</td>
<td>–</td>
<td>187,106</td>
</tr>
<tr>
<td>Balance 30 June</td>
<td>(51,888)</td>
<td>(134,353)</td>
</tr>
</tbody>
</table>

Note 16: Capital and Leasing Commitments

(a) Operating lease commitments

Non-cancellable operating leases contracted for but not capitalised in the financial statements.

Payable – minimum lease payments
- not later than 12 months | 303,137 | 314,375 |
- later than 12 months but not later than 5 years | 442,031 | 517,348 |
- greater than 5 years | – | – |

Total | 745,168 | 831,723 |

The property lease commitments are non-cancellable operating leases contracted for but not capitalised in the financial statements within a three year term. No capital commitments exist in regards to the operating lease commitments at year-end. Increase in lease commitments are in line with the lease agreements at an average increase of 4% upon each anniversary date. PCFA are able to renew the term of operating leases for a further three years upon termination of the current lease period.

(b) Capital commitments

PCFA have no capital commitments that require disclosure in this report.
Note 17: Contingent Liabilities and Assets

PCFA has a bank guarantee at 30 June 2013 for the performance of certain office lease commitments amounting to $135,765 (2012: $115,793).

Note 18: Events After Balance Sheet Date

Subsequent to 30 June 2013 PCFA entered into a Funding Agreement with the Australian Government as represented by the Department of Health and Ageing for additional funding for Prostate Cancer Nurses. These funds, totalling $6,796,000 (inclusive of GST) are to be provided from the Chronic Disease Treatment Program for a term to end on 30 August 2017 (approximately 4 years hence).

No other matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of PCFA, the results of those operations, or the state of affairs of PCFA in subsequent financial years.

Note 19: Related Parties and Related Party Transactions

Directors’ compensation

The directors act in an honorary capacity and receive no compensation for their services.
### Note 20: Cash Flow Information

Reconciliation of cashflow from operations with (deficit) / surplus from ordinary activities after income tax.

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surplus/(Deficit) from ordinary activities</td>
<td>$1,265,531</td>
<td>$(980,983)</td>
</tr>
<tr>
<td><strong>Non-cash flows</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loss on Sale of Financial Assets</td>
<td>91,903</td>
<td>24,147</td>
</tr>
<tr>
<td>Depreciation</td>
<td>67,298</td>
<td>22,151</td>
</tr>
<tr>
<td><strong>Changes in assets and liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decrease /(increase) in trade receivables and other assets</td>
<td>154,040</td>
<td>(1,248,437)</td>
</tr>
<tr>
<td>Decrease /(increase) in other current assets</td>
<td>124,700</td>
<td>(298,965)</td>
</tr>
<tr>
<td>Decrease /(increase) in inventory</td>
<td>30,188</td>
<td>(103,871)</td>
</tr>
<tr>
<td>(Decrease)/ increase in program &amp; grants payable</td>
<td>(3,185,248)</td>
<td>1,203,449</td>
</tr>
<tr>
<td>Increase in trade and other payables</td>
<td>13,554</td>
<td>458,306</td>
</tr>
<tr>
<td>Increase/ (decrease) in provisions</td>
<td>6,361</td>
<td>(82,593)</td>
</tr>
<tr>
<td></td>
<td>(1,431,673)</td>
<td>(1,006,796)</td>
</tr>
</tbody>
</table>

### Note 21: Foundation Details

The registered office and principal place of business of PCFA is:

Level 3, 39-41 Chandos Street
St Leonards, New South Wales, 2065
Note 22: Parent Entity Financial Information

The individual financial statements for the parent entity show the following aggregate amounts:

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Balance Sheet</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total Assets</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total Liabilities</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Shareholders’ Equity</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Profit or Loss for the year</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Comprehensive Income</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Prostate Cancer Foundation of Australia Limited (ABN 42 073 253 924), a company limited by guarantee, is the corporate trustee for its only controlled entity, Prostate Cancer Foundation of Australia (ABN 31 521 774 656).

Prostate Cancer Foundation of Australia Limited is incorporated under the Corporations Act 2001. If it is wound up, the constitution states that each member is required to contribute a maximum of $10 each towards meeting any outstanding and obligations of PCFA. As at 30 June 2013 the number of members was 105 (2012: 99)
Directors’ Declaration

The directors of PCFA declare that:

1. the consolidated financial statements and notes, as set out on pages 10 to 33, are in accordance with the Corporations Act 2001:
   (a) comply with Australian Accounting Standards-Reduced Disclosure Requirements and the Corporations Regulations 2001; and
   (b) give a true and fair view of the financial position as at 30 June 2013 and of the performance for the year ended on that date of PCFA.

2. in the directors’ opinion there are reasonable grounds to believe that PCFA will be able to pay its debts as and when they become due and payable.

3. pursuant to Schedule 1, Section 7(3) of the NSW Charitable Fundraising Regulations 2008:
   (a) the Consolidated Statement of Comprehensive Income is drawn up so as to give a true and fair view of income and expenditure of PCFA for the year ended 30 June 2013 with respect to fundraising appeals;
   (b) the Consolidated Statement of Financial Position and Statement of Cash Flows are drawn up so as to give a true and fair view of the state of affairs of PCFA as at 30 June 2013 with respect to fundraising appeals;
   (c) the provisions of the Charitable Fundraising Act 1991 and the regulations under the Act and the conditions attached to PCFA have been complied with for the year ended 30 June 2013; and
   (d) the internal controls exercised by PCFA are appropriate and effective in accounting for all income received and applied by PCFA from any of the fundraising appeals.

This declaration is made in accordance with a resolution of the Board of Directors.

Chris Hall
Director
Dated this 22nd day of October 2013
Sydney, NSW
Report on the financial report

We have audited the accompanying financial report of Prostate Cancer Foundation of Australia Limited (the company), which comprises the statement of financial position as at 30 June 2013, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and the directors’ declaration for Prostate Cancer Foundation of Australia (the consolidated entity). The consolidated entity comprises the company and the entities it controlled at year’s end or from time to time during the financial year.

Directors’ responsibility for the financial report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the Corporations Act 2001 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor’s responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor’s judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the consolidated entity’s preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Independence

In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001.
Basis for Qualified Opinion

Cash from donations and other fundraising activities are a significant source of revenue for the company. The company’s directors have determined that it is impracticable to establish control over the collection of revenue from these sources prior to entry into its financial records. Accordingly, as the evidence available to us regarding revenue from cash donations and other fundraising activities was limited, our audit procedures with respect to revenue from these sources had to be restricted to the amounts recorded in the company’s financial records. As a result, we are unable to express an opinion as to whether revenue from cash donations and other fundraising activities is complete.

Qualified Opinion

In our opinion, except for the possible effects of the matter described in the Basis for Qualified Opinion paragraph, the financial report of Prostate Cancer Foundation of Australia Limited is in accordance with the Corporations Act 2001, including:

(a) giving a true and fair view of the company’s financial position as at 30 June 2013 and of its performance for the year ended on that date, and

(b) complying with Australian Accounting Standards – Reduced Disclosure Requirements including the Australian Accounting Interpretations and the Corporations Regulations 2001.

PricewaterhouseCoopers

James McElvogue
Partner

Dated this 22nd day of October 2013
Sydney, NSW
THANK YOU
PCFA relies on the generosity of the community, companies and individuals to advance its research, raise awareness and provide support to men diagnosed with prostate cancer and their families. PCFA sincerely thanks all donors and supporters who generously made a contribution during the 2012/2013 financial year.

Listed below are the individuals who contributed $1,000 or more, and companies and community fundraisers who contributed $5,000 or more.

**Rotary**

In 1996 the members of the Rotary Club of Lane Cove established the Prostate Cancer Research Foundation. The company merged in 1999 with the Australian Prostate Cancer Foundation which was also founded in 1996, and the Association of Prostate Cancer Support Groups, which was established in 1998, and changed its name to Prostate Cancer Foundation of Australia on 12 July 1999. Since this time, the organisation has grown tremendously to become the peak body for prostate cancer in this country. Like its Founders, the organisation is dedicated to making an impact on the lives of men with prostate cancer and their families. PCFA would like to acknowledge Rotary for its ongoing commitment to the organisation and its mission.

- Rotary Club of Kaniva
- Rotary Club of Lane Cove
- Rotary Club of Lightning Ridge
- Rotary Club of Lismore West
- Rotary Club of Macksville
- Rotary Club of Mansfield
- Rotary Club of Monbulk and District
- Rotary Club of Moranbah
- Rotary Club of Mosman
- Rotary Club of Mundaring
- Rotary Club of Rossmyrne
- Rotary Club of Ryde
- Rotary Club of Summerland Sunrise
- Rotary Club of Swan Hill
- Rotary Club of Taree North
- Rotary Club of Terang
- Rotary Club of Theodore
- Rotary Club of Toowoomba Inc
- Rotary Club of Tumut
- Rotary Club of Tuncurry-Forster Inc
- Rotary Club of Wagga Wagga
- Rotary Club of Warrnambool East
- Rotary Club of Wangim
- Rotary Club of Wynnnum & Manly
- Rotary Club of Bentleigh Moorabbin Central
- Rotary Club of Biloela
- Rotary Club of Brighton
- Rotary Club of Campbelltown
- Rotary Club of Canberra Westton Creek
- Rotary Club of Casey
- Rotary Club of Condobolin
- Rotary Club of Coonabarabran
- Rotary Club of Corio Bay Inc
- Rotary Club of Crows Nest
- Rotary Club of Devonport North Inc
- Rotary Club of Encounter Bay
- Rotary Club of Fitzroy
- Rotary Club of Frenchs Forest
- Rotary Club of Goolwa
- Rotary Club of Harvey
- Rotary Club of Henley Beach
- Rotary Club of Hobart
- Rotary Club of Holdfast Bay
- Rotary Club of Hornsby
- Commonwealth Bank of Australia
- Corporate Rugby Tens Pty Ltd
- CSR Gyprocks
- Digi Direct
- Fox Collection
- Giles Partners Pty Ltd
- Grewlan Investments Pty Ltd
- Iaker Pty Ltd
- ICAP Australia
- Independent Gaming Corporation
- J Rowe & Son Pty Ltd
- JJ Richard & Sons Pty Limited
- John Holland Group Pty Ltd
- Lotterywest
- Major League Corporate Marketing
- Mann Family Settlement
- Nine Network Australia
- Origin Alliance
- Pirtek Fluid Systems Pty Ltd
- Premier PR
- Prostate Cancer Alliance Inc
- Qantas
- Redink Homes
- Reece Australia Limited
- Retracom Group
- Roads and Maritime Services
- Robern Menz
- Rockhampton Base Hospital
- Rosella Foods
- Rumble Riders
- Rush Events & Communications
- Sanofi-Aventis Australia Pty Limited
- Simson Cards
- Sinclair Knight Merz
- Southern Cross M Austereo Pty Ltd
- Stream Group
- Sydney Market Foundation
- Table 4 Ten
- The Conservatory Rooftop Bar
- The Horizon Committee Inc
- The Movember Group Pty Ltd
- The Tradies Group
- The Western Herald
- Thiers Pty Ltd
- Thiers Pty Ltd, Mt Owen Mine
- Think Pink Realty
- Thomas Hare Investments Ltd
- Thomson Reuters
- Thor Specialties Pty Ltd
- Three’s a Crowd Design Pty Ltd
Tish n’ Enigma Books
Tour de Cure Ltd
Tyrolit Australia Pty Ltd
Versace Timbers
Wescose Distribution Pty Ltd
Whisky Live Sydney

Trusts
Advertiser Sunday Mail Foundation
Bell Charitable Fund
Campaspe Family Trust
Comiskey Family Foundation
Cure Cancer Australia Foundation
David Z Burger Foundation
Gandel Philanthropy
H & L Hecht Trust
Harwood Foundation Trustee
Macquarie Group Foundation
Mannkal Economic Education Foundation
Mather Foundation Ltd
Paul Ainsworth Family Foundation
Perpetual Philanthropic Services
Protrust Pty Ltd
RobMeree Foundation
Stan Perron Charitable Trust
Steadfast Foundation
Sydney Markets Foundation Inc
The Good Guys Foundation

Clubs
Altona RSL Sub-Branch
Ashgrove Gps Rugby Union Club
Barossa Grape & Wine Association
Bathurst RSL Club Ltd
Bayview Golf Club
Blackwater Mineworkers Club
Carbrook Golf Club
East Malvern Tennis Club
Illawarra Retirement Trust-Links Seaside
Ipswich Kart Club
Ipswich 4 Wheel Drive Club Prostate Committee
Leeton & District Bowling Club
New South Wales Golf Club
Royal Fremantle Golf Club
Shag Islet Cruising Yacht Club
Southside Sport and Community Club
St Alberts Rugby Union Football Club
The Long Ride Supporters
The Luncheon Group
WA Monaro Nationals 2012
West Arana Hill Rugby League Football Club

Estates
Estate of the Late Cecil Allan Henry Hedger
Estate of the Late Frank Kuster
Estate of the Late Mervyn Alfred Legge
Estate of the Late Bill Dudley Norman
Estate of the Late Manlio Pratelli
Estate of the Late Thomas Alexander Tonkin

In Memoriam
Robert Adamson
William Ambridge
Edwyn Anderson
Colin Mervyn Anson
Mark M Arnold
Robert Dennis Arnold
Bob Arnold
Douglas Edward Baker
Donald Bartle
Lyn Barton
Colin M Batten
John Andrew Lindsay Bell
George Benson
Donald Bickford
Giuseppe Boccanfuso
Ronald Leslie Brame
John Brennan
Jack Brennan
Michael Brent
Charles C Britten
Harry Charles Brittin
Ronald Brooking
Thomas Brown
Tom Brown
Alexander Brown
Anders Buch
George Bucsa
Leo James Burke
Cliff Bursle
Romeo Calcinotto
Gordon Carlyle Cameron
Allen Edward Carroll
Stefano Cincotta
R Clayson
Sydney Cleeland
Noel Bernard Coleman
Harold Coleman
Max Leonard Collins
Alexander Coulter
Laurence Maxwell Coyne
Phil Critchley
Gregory William Crowe
Frank Cullen
Ken Darkin
William Davies
Giuseppe De Pasquale
Lawrence Boyd Delroy
Lawrence Boyd Delroy
Dennis Demmead
Rosa Di Bella
O B B Dinham
Douglas Francis Doody
Frank Doolan
Stan Douglas
Ronald William Dowling
Robert Eaton
Christopher Ellis
Harald Falkenhagen
Trevor Raymond Fendt
John Fleming
Luciano Fonda
Tony Forgan
Dennis Foster
Leslie Oswin French
Limo Freschi
Dennis Frosham
Francesco Galati
Robert Boyd Gardner
Eric Gill
Herbert John Gilmour
John Gosbell
Albert Ian Greig
Claire Grimes
Bruce Haberfield
Edward Hale
Garth Hamley
Kevin Hammond
John Laurie Harris
Dermot Hatfield
Tim Healey
Kevin Healy
Ted Hebblewhite
Laszlo Hegyi
William Henderson
Guy Henderson
Robert Herschauen
John Hofstede
Brian John Horrocks
John Hose
Lionel Huth
Graham Douglas Irons
Graham Douglas Irons
Robert Henry Jesse
Trenton Hedley Jones
Robert Jones
David Kacan
John Kerras
Allan Kilpis
Harry Kousis
Barrie Kirby
Giacomo Lacchiana
Julio Cesar Laguzzi
Michele Lalio
Keith Larsen
Terry Lawrence
Ross Ellis Lay
Joe Lindsay
Jim Lowe
Leon Lawrence Lurner
James Macdonald
Giuseppe Mallamo
Tony Marsh
Lang Martin

ANNUAL REPORT 2012-2013 99
Thank You

Doylah Ernest Martin
P Martino
Lyell Mather
Ken Matthew
James McDonald
Charles McKendry
Brian Mecham
Anthony John Merrick
Brian Mills
Trevor Mitchell
Leslie Mitchell
Eiryn Rees Mort
William Moyle
George Moyle
Cyril Mudge
Edith Muir
Shaun Augustine Murray
Barry Neve
Robert Arthur Nugent
John Calvert O’Donnell
Graeme O’Toole
Roland Otto
Vito Pancari
Bruce Barnett Paterson
Peter Patmore
Harold James Paynter
Raymond John Peacock
John Peacock
Gordon Pettit
Gregory Priest
Murray Pryor
Keith Ronald Purdey
Phil Randell
Erwin Rasche
Douglas John Rawling
Ron Reading
Graham Richards
Barry Roberts
Graeme Robertson
Clive Roche
Steve Rodriguez
Norman Ross
Antonino Russo
Paul Samuels
Gordon Peter Sawyer
Luigi Scandelin
Norman Joseph Schofield
Robert Scholl
Anthony Schramko
Alessio Scodellaro
Edward Scrutton
Giovanni Serafin
Richard Sheridan
David Simpson
John Skinner
Basil Peter Smidt
Joe Smithyman
Harry Spilsbury
Corbert James Stewart
John Stobart
Tony William Surmon
Eric John Sykes
Elwyn Keith Syphers
Rodney Tartakouer
Eugene Teiermanis
Roy Thorburn
William Tracey
Doug Tregenza
Len Tripp
Len Usher
Harry van Daesdonk
Pietro Venditti
Roger Vinall
Wayne Waitai
Ken Walker
Jim Walton
Robert Frank Warden
John Watts
Mervyn Welke
Keith Weston
Leslie John Williams
Francis John Williams
John Edward Wills
Roger David Woods
William Wright
Terrance Wayne Young
Terry Young
Philip Bruce Young
Silvio Zambelli
Robert Zeven

Individuals

Leonard Ainsworth
Matthew Amos
Linda Attard
Ross Beckhouse
Imelda Bilato
Colin Bloomfield
Jason Boladeras
Ian Boucher
Stephen Bowden
Robert Brakspear
Wesley Brown
Ann Browne
Lea Browne
Kate Buechner
Peter H Butts
E Calder
John Cameron
Bj Chapman
Martin Clark
Brian Coates
Julie Cobb
Timothy Cohen
Michael Cohn
Melissa Cooke
Michael Coorey
P Cox
Stephen Crozier
Murray David
Glenn De Vries

John Delano
Sherryn Ellis
Kerry Eupene
Lindsay Evans
Joan Evenden
Don Faithfull
C W & J A Farmer
John Farrell
Martin Fausch
Colin Flint
Freer
A Garg
G R & E M Godden
A J Goebels
J Grace
Alan Green
Alex Green
B Hacker
William Hardy
John & Rhonda Hawley
J L Hoge
Graham Horton
Jim Hughes AM
Bill Jauncey
Graeme Johnson
Robert Johnston
Helen Jones
James Kerrigan
Alison Kittle
Bruce Kynaston
JN Lake
Graham Lennon
Antony Lo
Peter Lyons
Ruth MacMillan
Tony Madden
Samir Malek
A & S Malouf
Theo & Julie Marinis
Tom Marish
Simon Mathams
Lesley McAulay
David McManus
Geoffrey Meggs
Ian Miller
Sam Miller
Professor John Mills
Warren Morley
Robert Mostyn
Murilo Moura
Leonie Myers
John Newcomb
Ian Payne
Luigi Piccone
M W F Powell
Deborah Pulton
Grant Pursey
Leigh Reeves
Dulcie Richards
Kathryn Rigney
Ken Roberts
Community Fundraisers

2013 Gold Coast Airport Marathon
Allphones Arena Rocks City 2 Surf team
Aussie Adventurers Rally for Cancer
Australian Defence Force
Bairnsdale Big Blokes Barbeque
Ballarat’s Biggest Ever Blokes Lunch
Baw Baw Big Blokes BBQ
Bendigo Biggest Ever Blokes Lunch
Berkeley IT
BR5 Trail Ride
BTing Cancer Walk 2012 Prostate
Will Bosma
Bulk Water Alliance Fundraising Page
Bull N’ Bush Hotel PCFA Fundraiser
David Cadden
Casper Dekker
Echuca Biggest Ever Blokes Lunch
Phil Endersbee’s
Greg Fordham
Fundraiser In Memory Of Peter Rapp
Gasoline Alley Australia Pty Ltd
Robert Glover
Wayne Grady and Brian Jones Pro-Am Series
Jenni Greaves’ Big Aussie Barbie
Michael Grogan & Committee
Amine Haddad’s Big Aussie Barbie
How Good Are These Puppies
Hungry Haydo’s Eating Challenge
- Taking a Bite Out of Cancer!
Ipswich Kart Club Inc
Latrobe’s Biggest Ever Blokes BBQ
Doug Marshall
Mates 500 Relay
Ross Mitchell
Muscle On The Mountain

Neil’s BBQ for the Boys & Carswell Classic Golf Tournament
No Joke Bloke Campaign
Norm Ross Memorial Cricket Day
Dave O’Callaghan
David Parkin OAM
Perth to Margaret River Cycle
Port Bike Rally 2012 – 10th Anniversary
Andrew Powis
Pull Ups 4 Prostate
QLD Long Riders
Paul Rayner
Reach For the Stars
Rockhampton Base Hospital
Round the Rock 4 PCFA
SEQLD Defence Riders
Shepparton’s Biggest Ever Blokes Lunch
Simoni’s Prostate Cancer Ball
The Long Ride 2013
The Luncheon Group
The Male Bag Ride
WA Monaro Nationals 2012 Committee
Wombat’s Head & Beard Shave

Pro Bono Support
PCFA is appreciative of the ongoing generous contributions of the following companies:

Adelaide 891 ABC
Adelaide Audio Visual
Adelaide City Council
Adelaide Hills Magazine
Adelaide Plastics
Aliens Lanklater
Angove Wines
Arte Graphica
Bakers Delight
Barossa Fine Foods
Black Billy & Clarence Hill Wines
BMG Gallery
Carat
Carlton United Breweries
Complete Hospitality Group
Coopers Brewery
East End Cellars
Festival Theatre
Finity Consulting
From Nature Foods
Grant Burge Wines
Graphic Print Group
Greenhill Galleries
Matthew Hayden AM
Heli-Air
Henry Bucks
Hill Smith Fine Art
Hurley Hotel Group
KPMG
Longview Winery
Master Butchers Association

Minijumbuck
Northcote Pottery
Penny’s Hill Winery
Peter Engel Nurseries
Peter Lehmann Wines
Port Lincoln Hotel
SA Life Magazine
Schweppes
Subway
Swim with the Sharks and Tuna
The Good Guys
The Metropolitan Fire Service SA
The Mushroom Growers Association
The United Fire Fighters Union SA
Wholesale Plants & Products

Honorary Life Members
Connie Cameron
Roger Climpson OAM
Emeritus Professor Dexter Dunphy AM
Bruce Fisher
Peter Hledik
Graeme Johnson
James O’Ryan
Professor Pamela Russell AM
Patricia Watson
Tom Tait

PCFA Award Recipients
Lindsay May
The Hon Wayne Swan
Chris McPherson
Dr Carole Pinnock AM

Members
Neil Adams
Trevor Anderson
Roz Baker
Peter Ball
Charlie Barnett
Robyn Barrett
Michael Barrett
Professor Robert Baxter
Donna Benstead
Mike Brady
Steve Callister
John Cameron
Christine Carberry
Bob Cartwright
David Chapman
Harry Clarsen AM
Distinguished Professor Judith Clements
John Coates
Paul Cook
Professor Tony Costello
John Cronly
David Curtain QC
Chris Curtis
THANK YOU

Dick Dawes
John Dillon
John Donald
Phil Dudgeon
Emeritus Professor Dexter Dunphy AM
Dominique Fisher
Jack Fraenkel
John Fraser
Jim Freemantle AO
Win Gafney
Peter Gebert
Andrew Giles
Noel Gladen
David Gregory
Des Grogan
Tom Grozier
Chris Hall
Peter Haylen
Jim Holmes
Jim Hughes AM
Dr Michael Izzard
Terry Jackman
Ian Jagelman
Justin Jamieson
Dr Phillip Katelaris
Jeff Leach
Adrian Lester
The Hon Jim Lloyd
Ian Longbottom
Associate Professor Anthony Lowe
David Madson
David Mah Chut
Emeritus Professor Villis Marshall AC
Lindsay May
Jenny May
Mike McClellan
Bill McHugh
Dr Ken Michael AC
Chris Mihos
Professor John Mills
Alan Moran OAM
Des Moulday
William Munro
John Newcomb
John Norris
Karen Olesnicky
Jonathon Oppy
John Palmer
Les Payne
Ted Pollock
Graeme Postlethwaite
John Preston
Marty Rhone
Dr John Rogers
Frank Rule
David Sandoe OAM
David Schmidt
Dr Tom Shannon
James A Shevlin
Professor Martin Slink AM
Ann Smith

Ian Smith
Dr Ross Snow
Morgan Solomon
Anthony L Sonneveld OAM
Associate Professor Phillip Stricker
Lyn Thumham
Geoff Underwood
Glenda Von Wootten
Philip Wade
Kaye Walker
Roger Wescombe
Terry Wheeler
Anita Ziemer

Research Partners
The Movember Foundation
Cancer Australia
Cure Cancer Australia
Griffith University
ANZUP
PCFA support groups help people with prostate cancer to navigate their cancer journey.