



Eight-year-old twins with type 1 diabetes Olivia and Hannah, with their dad Martin.

## Accelerating Life-Changing Breakthroughs

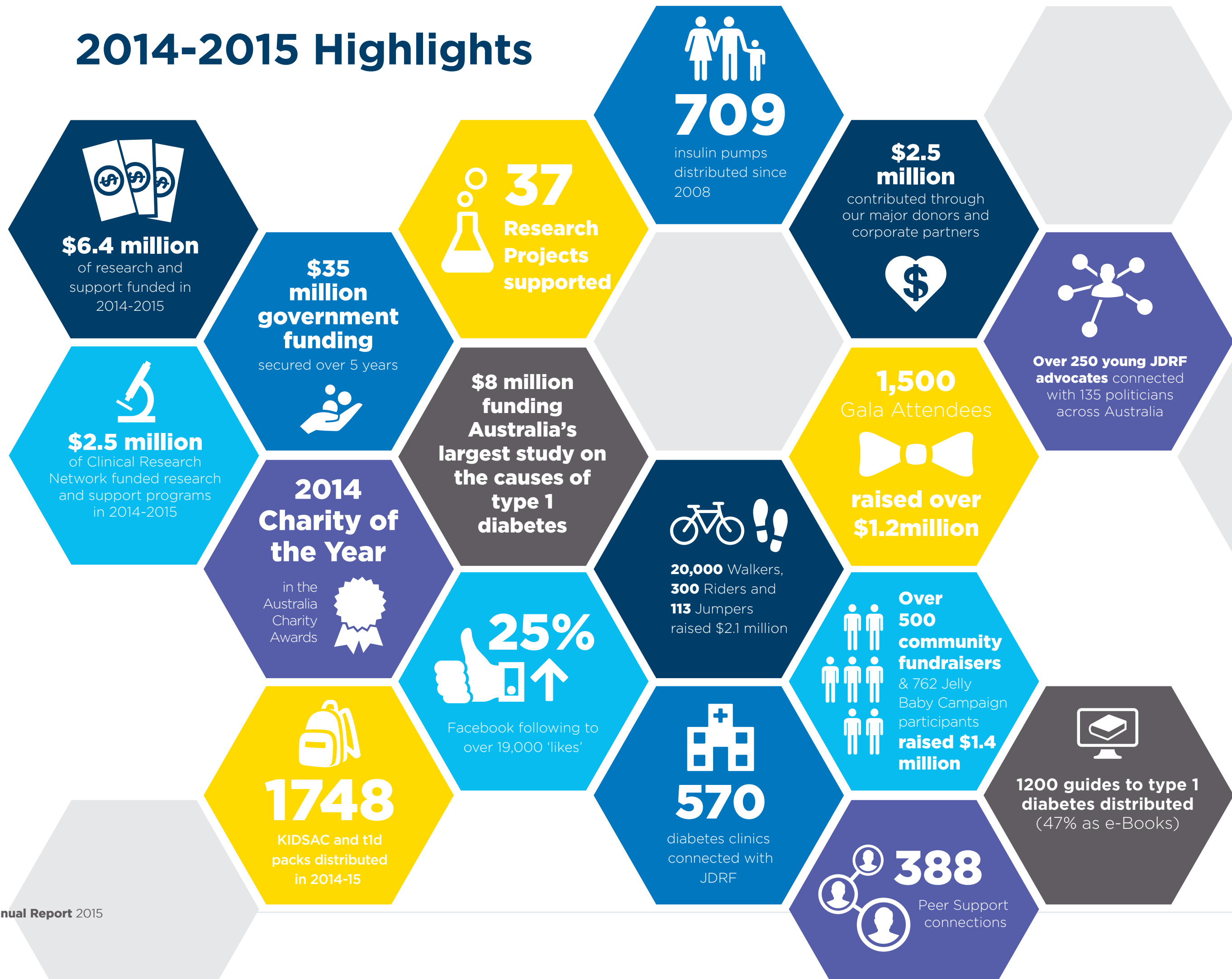


**JDRF** IMPROVING  
LIVES.  
CURING  
TYPE 1  
DIABETES.

Annual Report  
2014-15



# 2014-2015 Highlights



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## About JDRF & Type 1 Diabetes

### Who is JDRF?

JDRF is the leading global organisation funding type 1 diabetes (T1D) research. JDRF Australia is built on a grassroots model of people connecting in their local communities, collaborating regionally for efficiency and broader fundraising impact, and uniting on an international stage to pool resources, passion, and energy.

Our mission is to accelerate life-changing breakthroughs to cure, treat and prevent type 1 diabetes and its complications.

To accomplish this, JDRF has invested nearly \$2 billion globally in the best research since our inception. We collaborate with academic institutions, policymakers, and corporate and industry partners to develop and deliver a pipeline of innovative therapies to people living with type 1 diabetes.

JDRF Australia supports diabetes research via the strategic provision of funding, investing over \$100 million into Australian research to date. In addition to funding local research, JDRF Australia plays a key role in advising and influencing health policy direction across all levels of government and building community awareness of type 1 diabetes.

JDRF Australia also provides support and information to the type 1 diabetes community through a number of programs including:

- KIDSAC: a support and information resource for newly diagnosed children and their families;
- t1d pack: a support and information resource for adults with type 1 diabetes;
- Peer Support: connecting newly diagnosed families with an experienced mentor;
- Government advocacy: providing the opportunity for youth advocates and adults to raise; awareness of type 1 diabetes, develop skills, and influence Australia's political decision makers.

### What is type 1 diabetes?

Type 1 diabetes is a life-long autoimmune disease that usually occurs in childhood but can be diagnosed at any age, currently affecting over 120,000 people in Australia. Type 1 diabetes is caused by the immune system mistakenly turning on itself, destroying beta cells within the pancreas and removing the body's ability to produce insulin. Without insulin the body literally starves as it cannot process food to create energy. Type 1 diabetes has no connection with poor day-to-day diet or lifestyle factors.

For those living with type 1 diabetes it means a life-long dependency on insulin administered through daily injections or via pump infusion. In addition, multiple daily finger pricks, continual carbohydrate counting and diminished mental wellbeing are common everyday challenges in the life of a child or adult with type 1 diabetes.





# Chairman's Message

When a loved one is diagnosed with type 1 diabetes your first reaction is to do whatever you can to make a difference. When my daughter was diagnosed at 14 my first instinct was to support JDRF Australia, and I am incredibly proud to have now been Chairman for two years.

In this position I have seen how JDRF Australia continues to evolve to work more effectively towards achieving our mission: to accelerate life-changing breakthroughs to cure, treat and prevent type 1 diabetes and its complications.

As a Board we believe that, to achieve our mission, our focus must be shared between three broad areas of strategic focus: maximising JDRF's influence on the translation of research from the laboratory to patients, transforming JDRF Australia's fundraising and resource generating ability, and working closely with others in alliances to leverage our impact.

This is because breakthrough discovery research is critical, but this research must then be supported through human trials, gain pharmaceutical interest and investment, and receive regulatory approval and support for reimbursement from government. The process that delivers scientific research into treatments for patients is complex, which is why we are extending JDRF's role in advocacy, shaping the research agenda and measuring outcomes that will help drive further support.

JDRF is also looking to develop new sources of funding in addition to traditional fundraising campaigns, such as large scale philanthropy, key partnerships, and other novel ways of attracting capital to medical research.

As an organisation it's important to recognise our mission cannot be achieved alone, and that our impact is multiplied when we work closely in alliances with like-minded organisations. A good example of this was our collaboration with Multiple Sclerosis Research Australia with support from the Macquarie Group Foundation focusing on potential overlaps between MS and type 1 diabetes, both of which are autoimmune diseases.

The Board recognises that JDRF's evolution to achieve these goals should be matched by a managed process of Board and organisational renewal. This has seen five of our long term serving directors depart the Board in the past financial year, and the addition of four new directors. I would like to thank Rob Antulov, Tim Morphy, Kristen Mason, Trevor Allen and Michael White for their service to JDRF, and welcome Professor Jim Best, Jeffrey Browne, Phil Chronican, and Kate Aitken to the Board.

I would also like to thank the many supporters who help drive JDRF's success; volunteers, donors, members of the Advisory Board, and our key partners. Together we will defeat this disease.



**Paul Heath**  
Chairman

# CEO's Message

JDRF Australia is an organisation driven by a shared and deeply held belief in our mission: to accelerate life-changing breakthroughs to cure, treat and prevent type 1 diabetes and its complications. Our achievements and progress this year are something of which the entire organisation – volunteers, supporters, staff, and partners should be proud.

JDRF was recognised this financial year as the 2014 Charity of the Year in The Australian Charity Awards. This recognition is also an encouragement to maintain our high standards and aspirations. This achievement would not have been possible without the support of everyone involved with JDRF.

## Driving Research Progress

Success for JDRF requires that we are not only getting the best science funded, we are also putting that science to work for those who can benefit from it. Key to this is the substantial growth of the Australian Type 1 Diabetes Clinical Research Network (T1DCRN) administered by JDRF – the single largest investment in type 1 diabetes Australia has ever seen.

The translation of research into treatments is important because success for us isn't measured in dollars; it's measured in the changes we can deliver for people living with type 1 diabetes.

JDRF also seeks to positively influence decision making about policies that impact upon people with type 1 diabetes. As a member of the Federal Government's National Diabetes Strategy Advisory Group, reporting to the federal Health Minister the Hon Sussan Ley MP, JDRF is assisting in the development of a national response to diabetes. Many of you participated in the public consultation that encouraged Australians to provide their thoughts and ideas on the national action plan – thank you for your contribution.

## Generating Revenue and Resources:

JDRF's total revenue for the year was \$11.7m compared with \$12.2m in FY14. Fundraising revenue was down slightly on last year in a challenging environment, although we continue to refresh and rebalance our fundraising portfolio towards higher growth and higher margin activities. Our cash reserves remain strong, reflecting funding received from the Federal Government for the T1DCRN as part of the five year, \$35m commitment commenced in 2014.

## Engaging the Type 1 Diabetes Community:

At JDRF we share a real sense of urgency with the Australian type 1 diabetes community.

Your energy drives us and your commitment inspires us. You established us in Australia back in 1982 and have continued to sustain us through your passion and unwavering commitment to finding a cure and to preventing and better treating the disease.

With continued support from the type 1 diabetes community, volunteers and supporters I am confident that together we can achieve a world without type 1 diabetes, and look forward to working towards that goal with all our stakeholders.



**Mike Wilson**  
Chief Executive Officer and Managing Director



Focused on bringing life-changing therapies from the laboratory to the community by impacting every stage of the research pipeline.



Funded and managed \$6.4 million of Australian type 1 diabetes research and support programs



Managed \$2.5 million of clinical research and support programs through the JDRF Australian Type 1 Diabetes Clinical Research Network, with \$35m of government funding secured for five years [↗](#)



Supported 15 early career researchers through awarding targeted grants

## Mission

Accelerate life-changing breakthroughs to cure, treat, and prevent type 1 diabetes and its complications.



Led a ground-breaking partnership to deliver \$8 million in funding to Australia's largest study on the causes of type 1 diabetes, ('Early environmental determinants of pancreatic islet autoimmunity' Study, or ENDIA).



Delivered the Government-funded Insulin Pump Programme, reaching 709 recipients since inception in 2008. JDRF allocated 66 subsidised insulin pumps in 2014-15 to children who would otherwise not be able to access the technology.



Partnered with Multiple Sclerosis Research Australia on a grant from the Macquarie Group Foundation focusing on potential overlaps between Multiple Sclerosis and type 1 diabetes

## Research Progress

JDRF supports the best researchers performing the most promising, cutting-edge science to cure, treat and prevent type 1 diabetes. JDRF drives research that transforms the lives of people with type 1 diabetes. We want a cure, and we won't stop until we find one. Along the way, we will continue to drive scientific progress that delivers new treatments and therapies that make day-to-day life with type 1 diabetes easier, safer and healthier, as well as to find ways to prevent the disease from occurring in those at risk.

For more than four decades, JDRF has funded studies to unravel the mysteries of type 1 diabetes and develop therapeutic interventions to try to bring the body back to normal after the disease strikes. Each study has added to our understanding of what's necessary to stop the immune system from destroying insulin-producing islet cells, keep these cells healthy and functional, and restore the body's normal ability to produce insulin.



Translational research



Clinical development



Regulatory approval



Reimbursement and clinical adoption



Delivery to patients

Research investment  
Advocacy & partnerships

## MISSION PARTNERSHIPS

Our progress is accelerated through the support of our key research partnerships. JDRF is grateful and pleased to be working with mission partners:

- [The Leona M. and Harry B. Helmsley Charitable Trust \(Helmsley Charitable Trust\)](#)
- [Immune Tolerance Network \(ITN\)](#)
- [Multiple Sclerosis Research Australia](#)

# Cure

Managing type 1 diabetes and keeping blood glucose within a safe range is a complicated, time-consuming task. Everyone living with the disease experiences high and low blood sugar episodes, because insulin therapy is an imperfect science.

Encapsulated beta cell replacement therapies could be a game changer. These therapies involve packaging insulin-producing islet cells in a protective barrier before implanting them into the body to protect them from the immune system. Other research into a cure for type 1 diabetes includes repurposing a tried and tested hypertension medication with a potential for reversing beta cell destruction in the pancreas; and the discovery of a natural occurring protein found in the skin of frogs that has shown potential for regenerating insulin producing beta cells. The results of these projects could help liberate people with type 1 diabetes from the burdens of managing their disease all day, every day.

## Reprogramming

### ENGINEERED BETA CELL MASS PRODUCTION

A cure for type 1 diabetes is in sight after scientists create millions of beta cells in the laboratory. JDRF-funded researchers from Harvard in the US have finally succeeded in generating fully functioning, mature beta cells in large quantities from human stem cells. They have developed a detailed protocol for genetically rewinding human cells back to a stem cell state, and then reprogramming them to regenerate into hundreds of millions of insulin-producing beta cells. When the cells were transplanted into diabetic mice, the mice were cured, and their blood glucose levels remained stable even with repeated testing and glucose challenges.

#### Next Steps:

People with T1D can be temporarily “cured” for up to 5 years with a transplant of donor pancreatic islets. The scarcity of donor islets means that this treatment is only available to a tiny proportion of people with T1D. The ability to produce functioning islets on an industrial scale could allow this treatment to become available to everyone with T1D in the future.

## Restoring

### WORLD FIRST STEM CELL TRIAL

In an historic milestone for type 1 diabetes research, a person with type 1 diabetes has received the first ever implant of protected stem cell derived islets. JDRF funded partner Viacyte developed the stem-cell innovation which consists of immature islets encapsulated within a protective barrier, shielding them from immune rejection. The encapsulated cells are implanted under the skin in a minor procedure where they mature into insulin-producing islets. In animal studies the encapsulated cells were able to sense changing blood glucose levels and release the exact amount of insulin required, just like islets in a normal pancreas.

#### Next Steps:

A two stage human trial is currently taking place to first establish safety as well as longevity and functionality of the implanted cells, followed by a longer and larger group study focusing on patients’ ability to maintain insulin independence. This study is a major milestone in ultimately restoring the body’s ability to produce insulin in people with type 1 diabetes without the need for immune suppression treatment, freeing them from the burden of daily blood glucose management.

## Repurposing

### EXISTING DRUG – NEW POTENTIAL

JDRF funded researchers from the University of Alabama at Birmingham have shown that verapamil, a common blood-pressure medication, was able to completely reverse type 1 diabetes in mice. Verapamil reduces the levels of TXNIP, a protein that is involved in the death of beta cells, in the pancreas. When scientists administered verapamil to mice with established diabetes, beta cells survived and began to produce insulin again effectively curing the mice of diabetes. JDRF is now funding a potentially ground-breaking clinical trial for verapamil to be tested in humans in 2015.

#### Next Steps:

As verapamil has been used for years to treat high blood pressure, treatment is unlikely to have any serious side-effects. If verapamil works in humans like it does in mice, people with type 1 diabetes may be able to begin producing their own insulin again, without the use of immunosuppressive drugs. This opens up an entirely new field for diabetes drug discovery.

## Regenerating

### NATURAL SOLUTION FOR BETA CELL REGENERATION

The Australian Blue Mountains tree frog could hold the key to regenerating insulin production in the pancreas. The skin of the frog contains a peptide called caerulein which researchers in the US have used to regenerate insulin production in the pancreas in a totally new procedure. When caerulein, a protein that stimulates digestive enzyme production, was injected into diabetic mice whose insulin-producing beta cells had been almost completely destroyed, the alpha cells in their pancreas were converted into beta cells. To see if the same results could be achieved in humans with type 1 diabetes, the researchers then tested caerulein in human pancreatic tissue sourced from the JDRF-sponsored Network for Pancreatic Organ Donors with Diabetes (nPOD), and found strong evidence that caerulein was also converting alpha cells into beta cells, regardless of tissue age.

#### Next Steps:

The ability to convert pancreatic alpha cells into insulin-producing beta cells is an important but early step in the development of beta cell regeneration therapies for type 1 diabetes. The next step is to develop a more targeted drug that can be safely given to humans, and to couple this with immunotherapies to prevent the destruction of regenerated beta cells.

# Treat

JDRF is continuing to push for faster-acting insulin, optimised blood-glucose sensing technology and the development of completely automated closed-loop systems that replicate, as closely as possible, the operations of a normal pancreas to create better treatment options and avoid complications of type 1 diabetes.

## Making life easier

### SMARTPHONE AP (Artificial Pancreas)

A major focus of JDRF-funded type 1 diabetes research in recent years has been the development of a smartphone-linked artificial pancreas, a system capable of seamlessly controlling blood glucose levels within five per cent of ideal by automatically adjusting the amount of insulin infused in response to changing blood glucose levels.

A team of engineers from the University of Newcastle and scientists from the Hunter Medical Research Institute have developed a portable artificial pancreas as part of the JDRF supported Australian Artificial Pancreas Program. This artificial pancreas is smarter than other similar devices being developed. It uses a highly sophisticated algorithm that calculates and delivers insulin in precise amounts.

#### Next Steps:

With a clinical trial in patients occurring in 2015, this potential breakthrough for people with type 1 diabetes is an important step in the development of a fully functioning artificial pancreas. The device could control blood glucose with greater accuracy and take the guesswork out of diabetes management, freeing people with type 1 diabetes from much of the daily burden of managing their insulin needs. Early artificial pancreas systems, with the ability to predict blood sugar trends and dose accordingly, are expected to enter the market as early as 2017.

## Health impact

### MAINTAINING BRAIN FUNCTION

Both high and low blood glucose levels (BGLs) are associated with acute changes in brain activity in adolescents with type 1 diabetes, according to a T1DCRN-funded study from The Royal Children's Hospital in Melbourne. The results of the study revealed that hypoglycemia was associated with decreased neuron activity in major brain regions involved in working memory. Hyperglycemia was also linked to an abnormal increase in brain activity in other brain regions. Even after recovery to normal BGLs, neuron activity was different to that observed at baseline. Neuronal damage can be a common complication of type 1 diabetes and still occurs in 30-50 per cent of people with the condition.

Encouragingly, Australian researchers have discovered that people with type 1 diabetes who use insulin pumps have near-normal nerve function, even if they have had type 1 diabetes for a long time.

#### Next Steps:

Insulin pump therapy may have a protective effect on nerve function, which may be related to less variability in blood glucose levels. This research highlights the benefits of advancements in pump technology and its ability to better manage the condition and reduce the risk of complications. Further investigation into the impact of different insulin therapies on long-term health outcomes in type 1 diabetes is needed to identify the best therapeutic strategies to prevent diabetes-related health complications.

# Prevent

Type 1 diabetes is a chronic, life-threatening autoimmune disease that is currently not preventable. Eighty-five per cent of people who develop the disease have no family history, and epidemiologists predict a threefold increase in the number of young people who have type 1 diabetes by 2050. At JDRF, we want to change that outlook and make it possible that no one ever again develops type 1 diabetes.

We are also committed to stopping the progression of type 1 diabetes so we can prevent dependency on insulin therapy. JDRF-funded research has identified a number of potential triggers associated with the onset of type 1 diabetes, including viruses and environmental conditions. These discoveries could point to ways of developing vaccines that will stop the triggers and prevent autoimmune attacks on the body's insulin-producing cells.

## Causality

### KILLER CELLS FOUND IN T1D PANCREAS

JDRF funded researchers from the St Vincent's Institute used the pancreas of a 19 year old organ donor who died from type 1 diabetes complications to investigate why the islet cells were destroyed. The researchers observed a specific type of immune cell known as CD4+ T cells clustering around the islets in the donor pancreas. These T cells only infiltrated the donor cells that carried the HLA-DQ8 gene, which is strongly associated with type 1 diabetes risk. In contrast, T-cells did not appear to infiltrate islets from donors without type 1 diabetes.

The researchers also found that the CD4+ T cells bound to pro-insulin, which is a precursor to insulin. Pro-insulin produced in the islet cells seemed to attract the CD4+ T cells to the islets, resulting in T cell infiltration and destruction of the islets.

#### Next Steps:

The next phase of this research is to pinpoint the specific changes in pro-insulin and other suspect proteins that cause the CD4+ T cells to recognise the islets as foreign and destroy them. Now that scientists have an understanding of the type of immune cells and the proteins they target, the development of immune therapies to stop this from happening is another step closer, and may one day prevent the development of type 1 diabetes.

## Vaccine

### POTENTIAL NANOTECHNOLOGY VACCINE

JDRF partner Selecta is developing a new technology that could lead to a vaccine for type 1 diabetes. The novel technology involves the creation of tiny packages of nanoparticles that contain special immune-modulating agents and type 1 diabetes antigens (substances that induce an immune response in the body). These packages are then targeted towards specific cells in the immune system to teach them to tolerate type 1 diabetes antigens, rather than initiating the autoimmune attack that leads to type 1 diabetes.

#### Next Steps:

The success of this technology in its initial laboratory tests is very promising. JDRF has recently renewed its partnership with Selecta in conjunction with pharmaceutical company Sanofi, and testing of the new technology will now begin in mouse models of type 1 diabetes. If preclinical animal testing is successful, this technology can progress to human clinical trials, and ultimately may lead to the development of a vaccine to prevent type 1 diabetes from occurring.



# Australian Type 1 Diabetes Clinical Research Network



Australia has made a significant contribution to the global advancement of type 1 diabetes research, but there remains an urgent need to develop new strategies and therapies to treat, prevent and ultimately cure type 1 diabetes. Clinical research is research that involves people, their tissues, or health information. Transforming promising new ideas developed in the laboratory into real-life therapies for people living with type 1 diabetes requires the efficient translation of research through all stages of development from the laboratory to human clinical research, and eventually adoption into clinical practice.

The Type 1 Diabetes Clinical Research Network (T1DCRN) is a network of clinicians, researchers and people connected to type 1 diabetes who are dedicated to accelerating clinical research progress to increase access to new treatments and therapies for all people living with type 1 diabetes.

The network brings together world-class researchers from multiple research fields to answer the most critical type 1 diabetes clinical research questions. The T1DCRN will enable the efficient and effective delivery and adoption of clinical research, and build long-term research capacity in Australia.

The T1DCRN was originally launched by JDRF Australia in June 2010 through a \$5 million grant from the Australian Government through the Department of Health and Ageing (DoHA). The network's success in accelerating clinical research prompted over 250 young JDRF advocates to meet with 135 politicians from electorates across the country. These dedicated young people spoke about the realities of life with type 1 diabetes and the need for more research.

In 2014 their efforts culminated in a \$35 million funding commitment from the government through the Australian Research Council (ARC) in the form of a Special Research Initiative. This funding is the largest ever single commitment to type 1 diabetes in Australia and we are proud to be delivering on its promise to promote and accelerate type 1 diabetes clinical research.

**Photo: The Hon Christopher Pyne MP with JDRF advocates: Jordan Cirocco & Andrew Brennan at the announcement of the \$35m funding commitment in July 2014**

*"It's very difficult to fund the research that I do through traditional funding bodies – indeed, I think it would be true to say that many researchers spend up to 40% of their time trying to secure more funds and grant-writing when that time could be spent actually conducting research! Having an organisation like JDRF dedicated to funding type 1 diabetes research makes our lives as researchers a lot easier."*

**Dr Stuart Mannering, Head of the Human T-Cell Laboratory at St Vincent's Institute of Medical Research, and the recent recipient of the JDRF/Macquarie Group Global Innovation**



## The T1DCRN – This Year

The T1DCRN supports and promotes the most promising researchers and research projects in type 1 diabetes in Australia. With leadership from JDRF and leading Australian researchers in type 1 diabetes, the T1DCRN's innovative model facilitates national and international collaboration and cutting edge research projects.





# Changing the Future with Clinical Trials

## A world first in progress towards close-looped insulin pump technology

Access to life-changing technology is now a step closer for Australians with type 1 diabetes. Four-year-old Xavier Hames (diagnosed at 22 months) has become the first child in the world to receive breakthrough insulin pump technology to help manage type 1 diabetes.



This new technology has been researched and tested through a series of clinical trials run by a team of specialists at Princess Margaret Hospital for Children (PMH) and a network of hospitals across Australia funded by JDRF and JDRF's Government-funded Australian Type 1 Diabetes Clinical Research Network.

The pump system mimics a 'normal' pancreas in response to low glucose levels and stops insulin delivery up to 30 minutes prior to a predicted hypoglycaemic event. This avoids the serious consequences of low glucose such as coma, seizure and potential death.

PMH Professor Tim Jones who was one of the leading clinicians involved in the research and trials for the new device, says:

*"This is an instrumental development in the management of type 1 diabetes. This device can predict hypoglycaemia before it happens and stop insulin delivery before a predicted event. This coupled with the fact that the pump automatically resumes insulin when glucose levels recover is a real medical breakthrough."*

Xavier's mother Naomi said that the pump system was a breakthrough:

*"Having the pump gives us the reassurance that Xavier is safe when we are all asleep at night, and during the day. We are so delighted to be part of this milestone event and to be receiving the very best treatment for our little boy."*

# Supporting Early Career Researchers

The T1DCRN supports the brightest minds in type 1 diabetes research through our Career Development programs.

## Mentored Clinician Researcher Fellowship

The T1DCRN encourages clinicians who are interested in research to receive high quality research training through our Mentored Clinician Researcher Fellowship (MCRF). The Fellowship provides salary support for one to two days per week of dedicated research time for a clinical research project, allowing active clinicians to take time away from their clinic duties. Recipients of the MCRF are mentored by a leading clinical researcher to develop research skills and assist them in establishing their research career in type 1 diabetes.

## 2015 Mentored Clinical Researcher Fellowship Recipients

Dr Martin De Bock

Dr Bala Krishnamurthy

## Travel Grants

Researchers and allied health and nursing professionals are supported in the early stages of their career by the JDRF Travel Grants Program. With a focus on increasing opportunities for scientific visits or exchanges, grant recipients get the opportunity to collaborate and connect with established researchers and broaden their experience and knowledge in the field of type 1 diabetes.

## 2015 Travel Grant Recipients

Dr Danielle Borg

Ms Claudia Loetsch

Dr Stephan Gray

Dr Jen Yie Chan

Dr Jay Jha

Dr Sybil McAuley

Mr Ryan Farr

Ms Megan Paterson

Dr Jonathan Noonan

Dr Darling Rojas-Canales

Dr Devy Delyanti

Dr Carmel Smart

Dr Martin De Bock

Ms Kai Lin Giam

# Australian JDRF Funded Research 2014-15

## JDRF Grants

Investigator	Title	Institution	State
Prof Mark Cooper	New targets and therapies in diabetic complications	Baker IDI Heart and Diabetes Institute	VIC
Dr Karen Dwyer	VCP746, a novel adenosinergic therapeutic, promotes beta-cell regeneration	University of Melbourne	VIC
Dr Chris Tikellis	ACE2 in the vascular complications of type 1 diabetes	Baker IDI Heart and Diabetes Institute	VIC
Dr Vicki Bonke	Synergistic actions of NADPH oxidase and PKC in diabetic nephropathy	Baker IDI Heart and Diabetes Institute	VIC
A/Prof David O'Neal	Overnight Closed-Loop in the Home: Metabolic Control	University of Melbourne	VIC
Dr Michael Ward	Mitochondrial dysfunction in diabetic kidney disease	Mater Medical Research Institute	QLD
Dr Katie Edwards	Novel corneal nerve tests in diabetic neuropathy; growth rate and mapping	Queensland University of Technology (QUT)	QLD
Prof Carol Pollock	KCa3.1 as a therapeutic target in diabetic nephropathy	Northern Clinical School, University of Sydney	NSW
Dr Gavin Higgins	Impaired MnSOD causes dysregulation of mitophagy and accumulation of dysfunctional mitochondria in diabetic nephropathy	Baker IDI Heart & Diabetes Institute	VIC
Dr Jinhua Li	Targeting Smad3 acetylation in the treatment of diabetic nephropathy	Monash University	VIC
A/Prof Melinda Coughlan	Targeting the C5a-CD88 axis in diabetic nephropathy	Baker IDI Heart & Diabetes Institute	VIC
Prof Karin Jandeleit-Dahm	Nox5 is a new target for diabetic nephropathy	Baker IDI Heart & Diabetes Institute	VIC
Dr Bryna Chow	The therapeutic potential of Compound 21 (Angiotensin II type 2 receptor agonist) in diabetic nephropathy	Baker IDI Heart and Diabetes Institute	VIC
Prof Timothy Jones	Adolescent diabetes intervention trial: Australia	University of Western Australia	WA
Prof Timothy Jones	Improving the lives of young people with Type 1 Diabetes Care using State-of -the Art Therapies	The University of Western Australia	WA
Prof Nathan Efron	A longitudinal study of ophthalmic markers of neuropathy in Type 1 diabetes	Queensland University of Technology	Qld
Prof Peter Colman	Type 1 Diabetes TrialNet International Site - Australia/New Zealand	Walter and Eliza Hall Institute of Medical Research	

## JDRF Grants (Continued)

Investigator	Title	Institution	State
Prof Anthony Purcell	Presentation of post-translationally modified antigenic peptides in T1D	Monash University	VIC
Prof Len Harrison	CD52hi T cells as biomarkers in type 1 diabetes	Walter and Eliza Hall Institute of Medical Research	VIC
A/Prof Helen Thomas	Preventing beta cell-T cell interactions with Jak inhibitors	St Vincent's Institute of Medical Research	VIC
Dr Eliana Marino	Gut permeability, inflammation and microbiota modulate type 1 diabetes	Monash University	VIC
Dr Esteban Gustov	The role of PTPN2 & PTPN22 in pancreatic β-cell function and survival.	St Vincent's Institute of Medical Research	VIC
Prof Len Harrison	Methylation and miRNA expression as biomarkers in type 1 diabetes	Walter and Eliza Hall Institute of Medical Research	VIC
Dr Emma Hamilton-Williams	A genetic link between gut microbial flora and T1D susceptibility	University of Queensland	QLD
Dr Stuart Mannering	Molecular and functional analysis of human islet-infiltrating T cells	St Vincent's Institute of Medical Research	VIC
Dr Stuart Mannering	JDRF Macquarie Group Foundation Global Innovation Award	St Vincent's Institute of Medical Research	Vic
Dr Jane Mullaney	A link between the gut microbiome and type 1 diabetes	University of Queensland	QLD
Prof Jennifer Couper	Centre of Research Excellence for pancreatic beta-cell protection and preservation	University of Adelaide	SA
Prof Jennifer Couper	Early environmental determinants of pancreatic islet autoimmunity (ENDIA)	University of Adelaide	SA
Prof Anthony Purcell	A peptidomics approach to understanding the fate and antigen presentation of post-translationally modified proteins in type 1 diabetes	Monash University	VIC
Dr John Wentworth	Type 1 Diabetes TrialNet International Site - Australia/New Zealand	Walter and Eliza Hall Institute of Medical Research	VIC
Prof Len Harrison	Intranasal Insulin Trial II	Walter and Eliza Hall Institute of Medical Research	VIC
Prof Thomas Kay	Identifying islet factors that stimulate effector capacity in CTLs	St Vincent's Institute of Medical Research	Vic
Dr Hanna Skarstrand	JDRF Macquarie Group Foundation Global Innovation Award	Lund University Diabetes Centre, Sweden	
Prof Ranjeny Thomas	Antigen-specific peptide immunotherapy targeting dendritic cells in type 1 diabetes	University of Queensland	QLD
Prof Ranjeny Thomas	Biomarker signature in children with recent-onset T1D	University of Queensland	QLD
Dr Mugdha Joglekar	Inhibition of cytotoxic T lymphocyte-mediated beta cell killing	University of Sydney	NSW



# Australian Type 1 Diabetes Clinical Research Network Clinical Grants

Investigator	Title	Institution	State
Prof Anandwardhan Hardikar	(CRN I): A clinical study for validating beta cell death in type 1 diabetes	University of Sydney	NSW
Dr Paul Benitez-Aguirre	(CRN I): Australia CRN Mentored Clinician Researcher Fellowship	The Children's Hospital at Westmead	NSW
Dr Melinda Coughlan	(CRN I): Elucidating mitochondrial defects in human diabetic nephropathy	Baker IDI Heart & Diabetes Institute	VIC
Prof Grant Morahan	(CRN I): Enhancing Australian T1D DNA archive to predict T1D and complications risk	The University of Western Australia	WA
Dr Michele O'Connell	(CRN I): Exploring the acute impact of hypo-&hyperglycaemia on brain function in T1D	Murdoch Childrens Research Institute	VIC
Prof Timothy Jones	(CRN I): Hypoglycemia prevention with predictive suspension of insulin delivery	The University of Western Australia	WA
Prof Alicia Jenkins	(CRN I): Improving Health Outcomes in Type 1 Diabetes - REMOVAL substudy	University of Sydney	NSW
Prof Jenny Gunton	(CRN I): Machine-Intelligent Artificial Pancreas System	Garvan Institute of Medical Research	NSW
Prof Ranjeny Thomas	(CRN I): Prognostic and pre-clinical stratification biomarkers for type 1 diabetes	The University of Queensland	QLD
Prof Ecosse Lamoureux	(CRN I): Retinal vascular function during hyperglycaemia and the role of vitamin C	Centre for Eye Research Australia	VIC
Prof Lin Perry	(CRN I): Telehealth to support insulin pump users in regional and rural Australia	University of Technology Sydney	NSW
A/Prof Maria Craig	(CRN I): The Australasian Diabetes Data Network Biobank	Australasian Paediatric Endocrine Group	NSW
Prof Stephen Twigg	(CRN I): Type 1 Diabetes and Exercise RCT of an On-Line Educational Tool	University of Sydney	NSW
A/Prof Maria Craig	(CRN I): The Australasian Paediatric Endocrine Group Clinical Trials Network	Australasian Paediatric Endocrine Group	NSW
Dr Martin DeBock	(CRN 1 MCRF): Closed Loop Insulin Therapy for Type 1 Diabetes: From Hospital to Home	Princess Margaret Hospital Perth	WA
Dr Bala Krishnamurthy	(CRN 1 MCRF): Antigen-specific tolerance of effector memory T cells in type 1 diabetes	St Vincent's Institute Melbourne	VIC

# Influencing Policy and Decision Makers

## The JDRF community is actively involved in influencing policy for type 1 diabetes

This year the federal government released for public comment a draft paper developed by the [National Diabetes Strategy Advisory Group](#). Our community was passionate that the strategy delivers a strong focus on type 1 diabetes and helped ensure the following issues were included in the consultation:

- Better access is needed for new technologies and treatments for people with type 1 diabetes.
- Education of healthcare professionals and the general community necessary to help reduce the percentage of people with type 1 diabetes who present with diabetic ketoacidosis on diagnosis.
- More support is needed for the quality of life and mental health burden of type 1 diabetes
- Support for increased research funding should continue

Many JDRF advocates also started conversations with their MPs about access to diabetes technologies, and about the need for a clear access pathway for new and emerging technologies that could result in individual and system wide savings.

## JDRF Advocates turbo charge our impact in influencing government policy.

Jennifer Biggin, a volunteer fundraiser and JDRF Advocate, together with her mum Jacqui, met with Shadow Attorney General Chris Bowen on 13th April 2015 to give him a letter thanking the Australian Labor Party for the initial \$5 million to get the Type 1 Diabetes Clinical Research Network up and running, and to explain why technology like her insulin pump is life changing for people living with type 1 diabetes.

Jennifer lobbied Mr Bowen on the need for greater funding for diabetes research and insulin pumps. Jennifer expressed the importance of clinical research into type 1 diabetes and urged the community to get involved in the T1DCRN so that together we can all help create a better future for people living with type 1 diabetes.

Inspired by her passion, Mr Bowen sent Jenifer’s letter on to Sussan Ley MP, the Minister for Health, as well as the Catherine King MP, the Shadow Minister for Health.

Within the hour Mr Bowen had posted a photo of his meeting with Jennifer on Facebook.



The Hon. Chris Bowen together with JDRF advocate Jennifer Biggin (age 10)



# Improving Access to Diabetes Technology

## Insulin Pump Programme (IPP)

The Type 1 Diabetes Insulin Pump Programme (IPP) is the result of collaboration between the Australian Government and JDRF to provide subsidies for insulin pumps for people under 18 years of age. Since inception in 2008, the IPP has provided subsidies for over 700 insulin pumps.

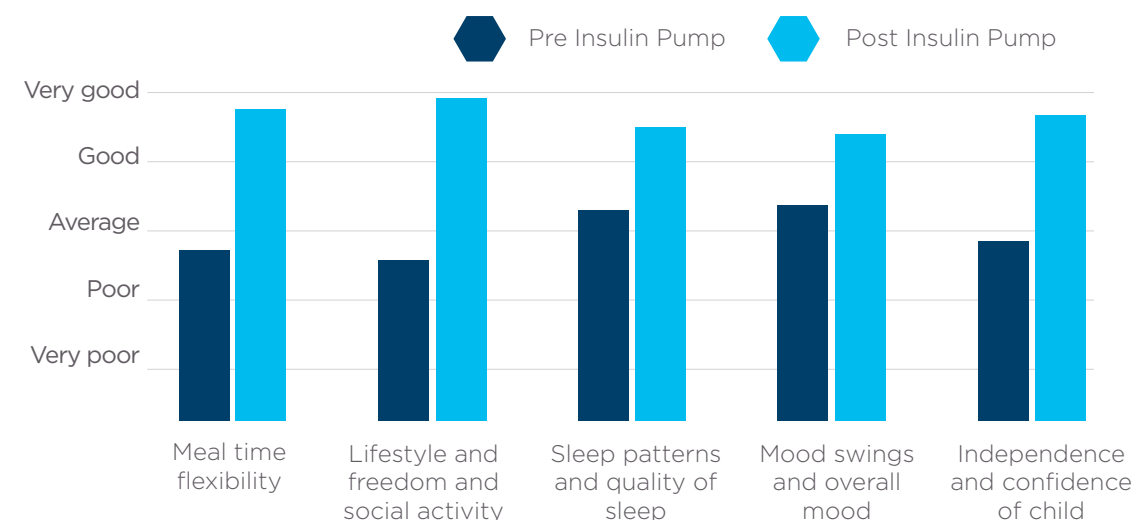
**709 pumps distributed** in total since inception in 2008

**66 families received a subsidised insulin pump** in 2014-15 financial year

The Australian Government recently announced funding to support the continuation of the Type 1 Diabetes IPP for the 2015-16 financial year, funding a further 68 subsidised insulin pumps for the families of young children with type 1 diabetes who would otherwise not have access to this life-changing technology.

The IPP has done more than provide access to insulin pump technology for these families. JDRF's post insulin pump surveys, completed by families six months after receiving the pump, have indicated that families observe significant improvement in the child's independence and confidence, lifestyle and mood, as well as greater flexibility around meals when compared with pre-insulin pump survey results.

### Quality of Life Survey Results



# Changing Lives with Insulin Pumps

My three-year-old son Janko was diagnosed with type 1 diabetes in July last year. The diagnosis was a complete shock as we have no family history of diabetes and up until that point, never knew anyone that had diabetes.

Like everyone else before us who gets diagnosed, we had to make a lot of changes and adjustments to our life. Janko's three older sisters have been really awesome in checking what their little brother eats, and being alert to changes in his behaviour.

Janko became very insulin-sensitive quickly, and we had to try and force him to eat more food to cover a 0.5 unit insulin injection. We even had a time where we skipped injections, and in March of this year, Janko had a severe hypoglycaemic seizure.

Our once happy, active little boy became a shadow of who he once was in just a few short months.

He wouldn't eat, he had no energy, and he woke up every morning crying because he just felt terrible.

Janko received an insulin pump in May this year through the JDRF-administered Federal Government Insulin Pump Programme, and I would like to thank all of you from the bottom of my heart for that.

Although it's still been a tough few months in getting all the pump settings right, Janko is a different little boy. He wakes up smiling, he's back to grazing all day long, but most of all he is happy and smiling again.

He is my little hero and a really brave little trooper.

Thank you for giving my gorgeous little boy back to me.

**Simone Booyse**  
Mother of Janko who lives with type 1 diabetes.



# Supporting the T1D Community



## Peer Support Program

This year JDRF's Peer Support Program reached out to 980 newly diagnosed families to offer support in the new challenges they face living with type 1 diabetes. 388 families requested support from one of our 108 active Peer Support mentor volunteers across Australia.

Here's what they had to say about their experiences:

### Peer Support mentored T1D Community members

*"My mentor validated many of my feelings and concerns, offered very practical advice about dealing with issues, didn't judge me and reassured me that, whilst life will never be the same again for us, it will get easier to accept."*

*"My mentor has been so amazing and understanding and supportive. I find her incredibly inspirational."*

*"It made me feel like I wasn't alone on this new journey."*

### Peer Support Mentors

*"I found the program to be very rewarding. To be able to help others going through the same things [I have]. Support is so important. Sometimes just the smallest idea or comment can make a huge difference to a family with a T1D child. I love what I do. I am very passionate about supporting families raising awareness."*

*"I used the program and found it really positive. As a volunteer I like making contact with new families and helping them through the early stages."*

*"Families are always happy to hear from someone who has been through similar things. A lot of families don't know any other children with diabetes, so they are happy to hear about other kids living with it."*

JDRF would like to thank all the committed volunteer mentors of the Peer Support Program who have given their own time and shared their own personal experiences to connect with newly diagnosed families and ensure they felt supported and not alone at this life-changing time.

# Appreciating our Supporters' Contributions

**Over \$3.7 million raised from over 3,000 supporters**

All JDRF supporters are dedicated to achieving great impact in type 1 diabetes research and show great commitment to achieving progress. Whether they are philanthropists with a special interest in medical research, supporters whose monthly gift continues for many years or Gala Ball guests who support JDRF through Fund a Cure Donations, together they are changing the future of people living with type 1 diabetes.

Please see below for a list of some of this year's distinguished supporters.

## Major Supporters

Alan Steele	Helen Bunning	Begley	Richard and Janine Goyder
Amanda Tassone	Ian and Wendy Coghill	Miss Maud	Rosanna and John Hindmarsh
Brian and Maureen White	Jeffrey Browne	Niamh Lysaght and Ronan Mac Domhnaill	Roy Edwards
Brian Nasr	Jimmy Wilson	Nick Kaitse	Simon Nestor
Craig Pinn	Joanne Crosby and Carey Lyon	Pam Clouten	Ted and Mandy Yencken
Desleigh and Ian Rose	Josh Butterfield	Paul and Linda Heath	Terry Cogill
Dr Lloyd McGuire	Laurence and Natasha Mandie	Paul Montauban	The Walter Family
Gabrielle Krohn	Leslie and Eve Cupper	Peter and Rosemary Appleton	Yvonne Butterfield
Garry and Toni Ralston	Mark and Kimberly Robinson	Peter and Wendy Bot	
Greg Meyerowitz	Mark Morley	Phil Chronican	
Harrisberg Family in support of Drew's Daily Dose	Max and Jeanette	Rebecca Barrow	

## Organisations

Abbott Diabetes Care	City Beach	Medtronic Australasia	TOLL IPEC
Accenture Pty Ltd.	Coles	Motorola Solutions	UBS
AMSL Diabetes	Direct Connect	Novo Nordisk	Viatek
ANZ	Eli Lilly Australia	QBD The Bookshop	Weldtech Solutions
Australian Football League	Ford Motor Company	Roche Diagnostics Care	Wesfarmers Limited
Benz Insulation Services WA	JVA Financial Services	Sanofi	Westpac Group
Canberra Labor Club	King & Wood Mallesons	Serv Corp	Woodside Energy
	Kmart	Telstra	Wynnum Golf Club Inc

## Trusts and Foundations

ABN Foundation	Hacket Foundation	Macquarie Group Foundation	The G W Vowell Foundation Limited
Advertiser Foundation	Helpful Foundation	Maple-Brown Family Charitable Foundation	The Pace Foundation
Australian Executor Trustees	IOOF Foundation	Rees Family Foundation	Woodend Pty Ltd
Chain Reaction Challenge Foundation	Jack and Merleen Sheedy Foundation	Peta Seymour Foundation	
CMV Foundation	Jackson Family Foundation	Shirley W Greathead Foundation	
Emorgo Foundation	Jones Family Charitable Fund		
	Lacetree Pty Ltd		

## Bequests

The Estate of M E Huon	The Estate of George D Lister
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JDRF makes every effort to ensure the accuracy of these lists.

If you have any questions, please contact us on [info@jdrf.org.au](mailto:info@jdrf.org.au)





# A community united for a better future

## Team Cure Diabetes, Jelly Babies and Big Red Run

**\$1.4 million raised**

**1500 participants**

Enthusiastic, passionate and motivated to make a difference is the way to describe these dedicated fundraising community members. Whether it was being part of one of Australia's great running events, or selling Jelly Baby Merchandise at school or at their workplaces around the country, our community took steps together for a brighter future.

Top independent fundraising event 2015 - Big Red Run, Central Australia

Top inaugural fundraising event 2015 - Celebrity Sports Quiz Masters Brisbane

Top in-kind support for a fundraising campaign - TOLL IPEC for nationwide deliveries of Jelly Baby Merchandise

# Teaming up to make a difference

## Walking, Riding and Jumping

**\$2.1 million raised**

**Over 5,000 registered participants**

**More than 20,000 attendees on event days**

Across Australia these events empower our community to change the future through a variety of fun experiences, each special in their own way. The impact created by bringing together family, friends and colleagues around a single cause is reflected in the fundraising results achieved.

The Walk and Jump events take place at nearly 50 different sites, bringing together thousands of people to raise awareness and funds for JDRF. The Ride is so much more than just a day of cycling, with Riders making a million dollar impact on type 1 diabetes research. Their experience cycling the many kilometres in the Barossa Valley is unforgettable.

Ride Day Rider Spirit Award - Lexie and Graeme Anderson

Ride Weekend Spirit Award - Pauline Clancy

Ride Top corporate team 2015 - Telstra

Walk Top Team 2015 - Walkers of Merrett, Victoria

# Inspiring Fundraiser

Shannon is a superstar, raising nearly \$50k through JDRF One Walk over the past five years. Beyond her amazing fundraising efforts though, Shannon has also been an enthusiastic and talented competitive swimmer since she was three-months-old taking baby classes.

At the age of 12 though, her mum Debbie noticed something wasn't right.

*"One Saturday watching her train, she looked listless in the water and she had lost a lot of weight. I thought that it was due to the increased training. Then she had two days off sick from school, saying her stomach felt spongy. She had some blood tests done at the doctors, and that night, I received a phone call to tell me to take her immediately to the emergency room as her sugar level was 27."*

It took two years for Shannon to get back into the water consistently and train and compete. On many occasions, she's had to get out of the water to test her levels. Her recent inclusion on the Pan Pacific School Team was a real dream come true!

Shannon is an amazing young lady and, from the time she was diagnosed, she has embraced type 1 diabetes and not treated this as a setback. Her attitude is inspirational and many of us are in awe of her courage and her dedication to helping find a cure, not just for herself, but for future generations.



# Awarding Volunteers

JDRF originated as a volunteer led organisation, and the passion and dedication of those who provide time, resources, and experience is the key to our growth and continued progress in the search for a cure. Volunteers have always been embedded in our business and hold diverse roles within JDRF. Volunteers are our heritage, the heart of JDRF and will be the key to our future success.

## 2015 National Volunteer of the Year Award Winners



### National Volunteer of the Year: Katie Coulter

Nominated for her involvement with the Walk to Cure Diabetes in Albury, raising over \$35k in two years. Katie has also helped out at the Canberra Walk and Jelly Baby Month, and is an enthusiastic government advocate and media spokesperson. She's an active member of the ACT JDRF Family Committee, and gets involved with all local activities

Katie (right) with her daughter Sophie, who has T1D



### National Young Volunteer of the Year: Kirilly White

Kirilly was nominated for her leadership skills and passion for helping others by beginning a support group for other kids and teenagers with type 1 diabetes in her local area. She also started an orientation program at school, where she supports the newly enrolled students with type 1 diabetes to become comfortable with the transition from primary to high school.

## State Volunteer of the Year Award Winners

### Australian Capital Territory

- State Volunteer of the Year: Michelle Butters
- State Young Volunteer of the Year: Lyndsey Savage

### New South Wales

- State Volunteer of the Year: Jonathan Salmon
- State Volunteer of the Year: Marita Perry

### Queensland

- State Volunteer of the Year: Desleigh Rose
- State Young Volunteer of the Year: Chelsea Line

### South Australia

- State Volunteer of the Year: Lexie & Graeme Anderson
- State Volunteer of the Year: Ryan Perry
- State Young Volunteer of the Year: Emilia Dolphin

### Victoria

- State Volunteer of the Year: Paul Tadich
- State Young Volunteer of the Year: Greg King

### Western Australia

- State Volunteer of the Year: Gary & Judy King
- State Volunteer of the Year: Steve Harris
- State Young Volunteer of the Year: Maya Barnett

# JDRF Governance

## The Board of Directors

The Board operates in accordance with the broad principles set out in its Constitution was updated and adopted by the company on 27 November 2014

A Board Charter has been approved by the Directors and aids in guiding the operation and activities of the Board. Board members are responsible to the members for the performance of the company and seek to work in the best interests of the company. For a full list of Board members, please refer to pages 33-36.

## Board Committees

The Board has established five committees to assist in the execution of its duties and to allow detailed consideration of complex issues.

These Committees are:

- The Finance & Audit Committee
- The Talent Committee (formally the Nominations & Remuneration Committee)
- The Research Committee (formally the CRN Committee)
- The Ambassadors Committee
- The Funding Committee

The Ambassadors Committee and The Funding Committee were both formed in FY15.

## Risk assessment and management

The Board is responsible for ensuring there are adequate policies in relation to risk management, compliance and internal control systems. Considerable importance is placed on maintaining a sufficiently strong control environment. Company policies are designed to ensure strategic, operational, legal, reputation and financial risks are identified, assessed, effectively and efficiently managed, and monitored to enable achievement of the organisation's objectives.

A risk management plan has been developed and continues to be implemented. Where risks have been identified, mitigating strategies and actions have been put in place, or are being put in place. Regular reporting has been provided to the Finance and Audit Committee during the 2014-15 financial year.

# Board of Directors

<b>Paul Heath</b>	Chairman Chair of the Talent Committee
Year appointed:	2012
Qualifications and experience:	CEO, Koda Capital Member, Endowment Investment Committee of the Benevolent Society Former CEO of JBWere Pty Ltd Father of a daughter with type 1 diabetes
<b>Natasha Mandie</b>	Vice Chair Chair of the Ambassadors Committee
Year appointed:	2009
Qualifications and experience:	B Comm (Hons), LLB (Hons), GAICD Managing Director, EM Advisory Non executive Director of a number of private technology companies Former Director of Corporate Advisory Solutions, Credit Suisse Has type 1 diabetes
<b>Stuart Green</b>	Treasurer (from June 2015) Chair of the Finance and Audit Committee
Year appointed:	2010
Qualifications and experience:	B.A. (Hons), MBA, FCA, ACMT Executive Director, Macquarie Group Limited Group Treasurer, Macquarie Group Limited
<b>Mike Wilson</b>	Director Company Secretary and CEO
Year appointed:	2011
Qualifications and experience:	BSc, BEc (Hons), GAICD Director, Glycemic Index Foundation Director, Somark Innovations CEO of JDRF Australia since 2004
<b>Trevor Allen</b>	Treasurer (to June 2015) Former Chair of the Finance and Audit Committee
Year appointed:	2008 (resigned June 2015)
Qualifications and experience:	B Coms (Hons), CA, FF, MAICD. Director, Australian Childcare Projects Limited Director, Freedom Food Group Limited Director, Peet Flagstone City Pty Limited Brother of a sister with type 1 diabetes



<b>Robert Antulov</b>	Director
Year appointed:	2005 (resigned March 2015)
Qualifications and experience:	BE, MBA, MAICD Corporate Advisor and Company Director Executive Director, Venture Advisory Pty Ltd Director, Medianext Pty Ltd Director, Choice Australian Consumer Association Father of a son with type 1 diabetes
<b>Professor James Best</b>	Director Member of the Research Committee
Year appointed:	2014
Qualifications and experience:	MB BS, MD (Melb), Hon MD (St Andrews), FRACP, FRCPPath, FRCP (Edin) Dean, Lee Kong Chian School of Medicine, Singapore Former Professor of Medicine and Head of School of Medicine, University of Melbourne Former Chair of the Research Committee, National Health and Medical Research Council
<b>Jeffrey Browne</b>	Director Member of the Advisory Board
Year appointed:	2015
Qualifications and experience:	LLB Former Director, Sky News Limited Former Managing Director and Director, Nine Network Australia Pty Ltd Non-Executive Chairman and Chairman of Remuneration and Nomination Committee, carsales.com Limited Chairman of Holden Special Vehicles Father of a daughter with type 1 diabetes
<b>Philip Chronican</b>	Director Member of the Advisory Board
Year appointed:	2015
Qualifications and experience:	Director of the NSW Treasury Corporation and Chair of the Audit & Risk Committee Former CEO, ANZ Australia Former CEO, Westpac Institutional Bank Former CFO, Westpac Group Husband of late wife with type 1 diabetes

<b>Mike Chuter</b>	Director Chairman of Victorian Corporate Committee
Year appointed:	2013
Qualifications and experience:	Joint Managing Director Publicis CUBED Founding Partner, CUBED Communications Co-Founder, Thankful Board Director, Association of Data Driven Marketing and Advertising Former Board Director, Comic Relief Australia Father of a daughter, and son of a father, with type 1 diabetes
<b>Rebecca Davies</b>	Director Chair of the Research Committee Member of the Advisory Board Member of the Board of JDRFI Member of the JDRFI Research and Nominating and Governance Committees
Year appointed:	1997
Qualifications and experience:	LLB (Hons), BEc, FAICD Company Director Former Partner and Board member of a major national law firm Director and chair of various companies in the arts, hospitals, medical research and health sectors Member of the Medical Innovations and Australian Health Ethics Committees of the National Health and Medical Research Council Mother of a daughter with type 1 diabetes
<b>Kristen Mason</b>	Director Member of the Talent Committee Chair of the NSW Ball Committee
Year appointed:	2005 (resigned March 2015)
Qualifications and experience:	BA, MBA Senior Manager, Travel Partner Network JAPA, American Express Former Director, Foundation – Kambala Mother of a daughter with type 1 diabetes
<b>Timothy Morphy</b>	Director
Year appointed:	2005 (resigned November 2014)
Qualifications and experience:	BA, LLB, Grad. Dip. Legal Prac, MBA. CEO and Director, MedHealth Group and its wholly owned subsidiaries MLCOA, NextHealth, Assess Medical Group and CaseWorks Former Managing Director, Healthways Australia Pty Ltd

<b>Jonathon Salmon</b>	Director Chair of the Funding Committee Member of the Talent Committee Member of the Research Committee
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Year appointed:	2012
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Qualifications and experience:	MAICD Managing Director, Viatek Technology Director, Adscensio Director, Unlisted Marketplace Founder, DNS IT and Hosted IT Father of a son with type 1 diabetes
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<b>Cathryn Urquhart</b>	Director
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Year appointed:	2013
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Qualifications and experience:	BJuris, LLB. Learning and Development Consultant Adjunct Lecturer, College of Law Former Lawyer- Professional Development and Risk Management, Law Society of Western Australia Former Senior Associate, Allens Arthur Robinson Mother of a son, and wife of a husband, with type 1 diabetes
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<b>Michael L. White</b>	Director Member of JDRFI Board of Chancellors
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Year appointed:	2010 (resigned March 2015)
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Qualifications and experience:	BA in History, MBA CEO RBW Companies JDRFI Research Committee Member ViaCyte Board of Directors, JDRF Observer Father of a son with type 1 diabetes
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For more information and full biographies, please visit [www.jdrf.org.au](http://www.jdrf.org.au)

## Advisory Board

JDRF is fortunate to have the assistance of a highly experienced Advisory Board, comprising leaders of science and industry. The Advisory Board convenes approximately annually, with each meeting including significant initiatives on which the feedback and experience of the members of the Advisory Board is sought.

Name	Experience
Richard Goyder AO (co-chair)	CEO & Managing Director, Wesfarmers
Ian Narev (co-chair)	CEO, Commonwealth Bank
Tim Bednall	Partner and Ex-Chairman, King & Wood Mallesons
Jeffrey Browne	Chair, Carsales and HSV
Phil Chronican	Former CEO, ANZ Bank (Australia)
Rebecca Davies	Ex-Partner and Board Member, Freehills
Professor Ian Frazer AC	Director, Diamantina Institute, University of Queensland
Matthew Grounds	CEO, UBS Australia
Paul Heath	Chairman, JDRF
Steve Higgs AM	Ex-Chairman, JDRF
Belinda Hutchinson AM	Chancellor, University of Sydney
Shaun Larkin	Managing Director, HCF
Peter Mason AM	Ex-Chairman, AMP and David Jones
Howard McDonald	Chairman, Rodd & Gunn
Simon McKeon AO	Chairman, AMP and CSIRO
Nicholas Moore	CEO, Macquarie Group
Sir Ralph Norris KNZM	Director, Origin Energy
Rod Pearse OAM	Ex-CEO & Managing Director, Boral
Andy Penn	CEO, Telstra
Professor John Shine AO	Chair, CSL
Mark van Dyck	Managing Director, Compass Group Australia
Bill Wavish	Former Executive Chair, Myer
Mike Wilson	CEO & Managing Director, JDRF
Peter Wilson	Ex-CEO, Spotless Group

# Financial Statements

## STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2015

	2015	2014
	(\$)	(\$)
<b>Revenue</b>		
Fundraising revenue	7,406,485	8,625,787
Government grants	3,742,324	3,205,206
Other revenue	599,306	398,687
	<u>11,748,115</u>	<u>12,229,680</u>
<b>Expenses</b>		
Administration expenses	(310,790)	(400,574)
Advertising, promotion and printing expenses	(211,641)	(256,603)
Communication and technology expenses	(188,688)	(191,029)
Depreciation and amortisation	(100,661)	(123,105)
Employee benefits expense	(3,053,144)	(2,626,883)
Education and support expenses	(135,232)	(142,092)
Fundraising expenses	(1,337,546)	(1,167,620)
Occupancy expenses	(295,225)	(319,296)
Research, travel and pump grants expenses	(6,255,138)	(6,873,405)
	<u>(11,888,065)</u>	<u>(12,100,607)</u>
<b>Surplus (deficit) before income tax</b>	(139,950)	129,073
Income tax expense	-	-
<b>Surplus (deficit) for the year</b>	(139,950)	129,073
<b>Other comprehensive income</b>	-	-
<b>Total comprehensive income (loss) for the year</b>	<b>(139,950)</b>	<b>129,073</b>

## STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2015

	2015	2014
	(\$)	(\$)
<b>ASSETS</b>		
<b>Current assets</b>		
Cash and cash equivalents	18,714,790	14,007,532
Trade and other receivables	421,222	447,271
Inventories	20,514	96,326
<i>Total current assets</i>	<u>19,156,526</u>	<u>14,551,129</u>
<b>Non-current assets</b>		
Property, plant and equipment	109,574	38,026
Intangible assets	59,405	57,616
<i>Total non-current assets</i>	<u>168,979</u>	<u>95,642</u>
<b>TOTAL ASSETS</b>	<u>19,325,505</u>	<u>14,646,771</u>
<b>LIABILITIES</b>		
<b>Current liabilities</b>		
Trade and other payables	6,914,696	10,240,951
Provisions	50,128	43,435
<i>Total current liabilities</i>	<u>6,964,824</u>	<u>10,284,386</u>
<b>Non-current liabilities</b>		
Trade and other payables	8,161,710	-
Provisions	80,190	103,654
<i>Total non-current liabilities</i>	<u>8,241,900</u>	<u>103,654</u>
<b>TOTAL LIABILITIES</b>	<u>15,206,724</u>	<u>10,388,040</u>
<b>NET ASSETS</b>	<b>4,118,781</b>	<b>4,258,731</b>
<b>EQUITY</b>		
Accumulated funds	4,118,781	4,258,731
<b>TOTAL EQUITY</b>	<b>4,118,781</b>	<b>4,258,731</b>



## STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2015

	2015	2014
	(\$)	(\$)
<b>Cash flows from operating activities</b>		
Receipts from fundraising activities	7,576,785	8,469,185
Government and partnership grants received	10,178,508	8,381,465
Interest received	384,350	477,285
Other revenue	47,635	30,522
Payments to suppliers and employees	(6,915,652)	(3,913,830)
Grants and travel awards paid	(6,390,370)	(7,015,497)
<i>Net cash inflows from operating activities</i>	4,881,256	6,429,130
<b>Cash flows from investing activities</b>		
Purchase of property, plant and equipment	(129,425)	(7,548)
Purchase of intangible assets	(44,573)	(84,026)
<i>Net cash (outflows) from investing activities</i>	(173,998)	(91,574)
Net increase in cash and cash equivalents	4,707,258	6,337,556
Cash and cash equivalents at the beginning of the financial year	14,007,532	7,669,976
Cash and cash equivalents at the end of the financial year	<b>18,714,790</b>	<b>14,007,532</b>



To the community members and advocates who speak up on behalf of JDRF and all people with type 1 diabetes



To the many fundraisers who participate in JDRF-led fundraising events or take the initiative to run their own fundraising events



To the donors who give to us through a direct gift, a regular monthly gift, payroll giving, or leaving a bequest



To all the committed volunteers who are involved in the Peer Support Program, office and events support who give their time, passion, enthusiasm and personal touches

# Thank you

Thank you to the many supporters who help JDRF achieve its mission to accelerate life-changing breakthroughs to cure, treat and prevent type 1 diabetes and it's complications



To all the dynamic people all around Australia who engage with JDRF online through the website, social media and our newsletter



To the dedicated staff, board, committees and panel members who give their time, skills and knowledge



The corporate and industry partners who support us through donations, employee engagement programs, and lending of their skills, knowledge and resources



The trusts and foundations that support JDRF research projects through the award of grants.

With your support, JDRF is influencing and progressing research for improved health outcomes and better technologies for people with type 1 diabetes into the future.



# Connect with JDRF

## Contact details

Phone: 1300 136 126

Email: [info@jdrf.org.au](mailto:info@jdrf.org.au)



[jdrf.org.au](http://jdrf.org.au)



[facebook.com/jdrfoz](https://facebook.com/jdrfoz)



[twitter.com/JDRFAus](https://twitter.com/JDRFAus)



[linkedin.com/company/jdrf-australia](https://linkedin.com/company/jdrf-australia)



[instagram.com/jdrfaus](https://instagram.com/jdrfaus)

## Our Offices

### Australian Capital Territory

16 Thesiger Court  
Deakin ACT 2600

### New South Wales

Level 4, 80-84 Chandos Street  
St Leonards NSW 2065

### Queensland

Level 5, Wickham House  
155-157 Wickham Terrace  
Spring Hill QLD 4000

### South Australia

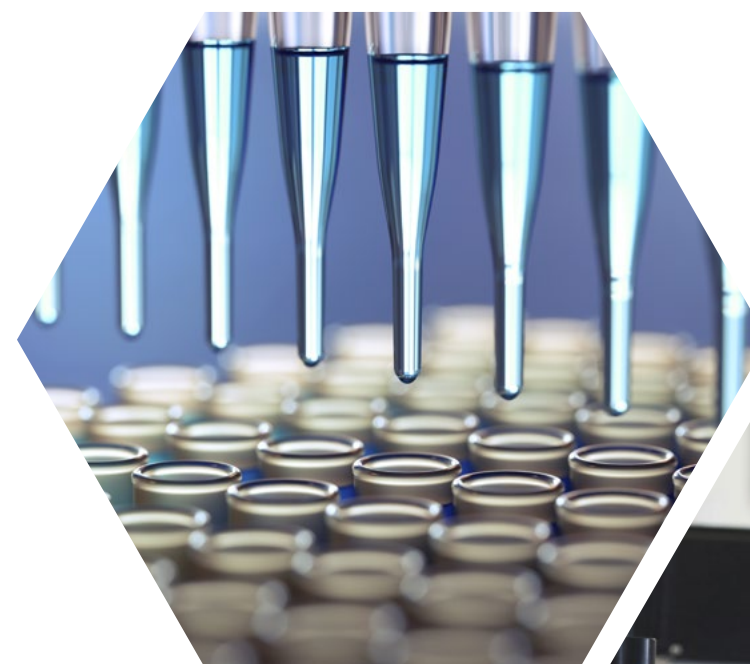
Unit 3, 497 Marion Road South  
Plympton SA 5038

### Victoria

Whitten Oval  
Level 1, 417 Barkly Street  
Footscray West VIC 3012

### Western Australia

Unit 3, 181 Main Street  
Osborne Park WA 6017





**JDRF** IMPROVING  
LIVES.  
CURING  
TYPE 1  
DIABETES.

# Annual Report 2014-15



Front cover photograph  
by Ina J Photography  
[www.inajphotography.com](http://www.inajphotography.com)