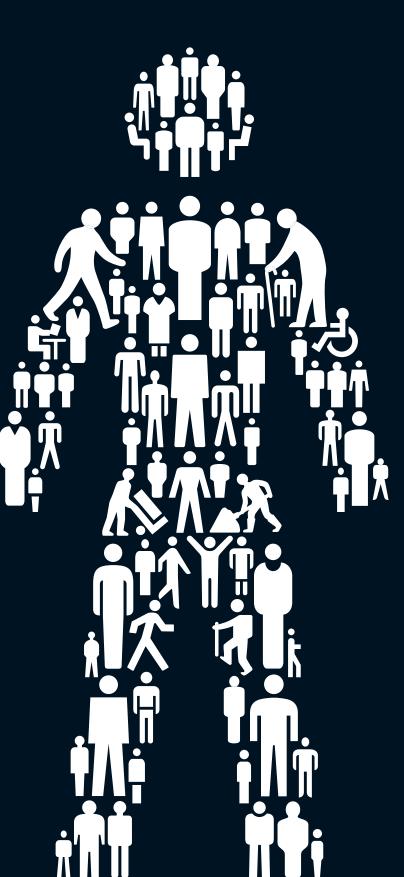
Annual report and financial statements

for the year ended 31 March 2020

PROSTATE Cancer uk



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Overview of the year

The year ended 31 March 2020 was a significant year for progress towards Prostate Cancer UK's ambitious goal of a future where lives are not limited by prostate cancer. We have seen significant research breakthroughs, improved diagnosis using MRI up front becoming the norm, more people accessing support and information and higher awareness levels than ever before. During the year we completed a comprehensive review of the prostate cancer research landscape and stand poised with a new research strategy focussed on the highest impact research. Our plan to grow our income to give us the firepower to accelerate progress towards our goals bore fruit with record income levels, 31 per cent up on the previous year. There is more detail on these achievements and many others in the pages which follow.

Reflecting on these much needed steps forward and the momentum gathered behind the fight against prostate cancer, makes it all the more heart-breaking to see the devastating impact of the COVID-19 crisis for those facing the disease and for our work towards a better future. It has created a real setback, throwing diagnosis and treatment pathways into disarray, with consequences for men both in the short term and for the longer term too. It has also significantly disrupted research programmes, both because of direct operational obstacles due to the lockdown and because of the impact on our fundraising which we rely on for funding our research.

At the same time as responding to the negative aspects of the crisis, we have been considering how the seismic change brought about by the pandemic may change the way we do things and create opportunities to accelerate progress in innovative ways.

Delivering progress has never been more important. This year, we saw prostate cancer become the most commonly diagnosed cancer in the UK, and new data revealed the number of deaths has exceeded 12,000 a year for the first time ever. It's more important than ever that we continue to invest in research to halt the rise in deaths and that we continue to be here for the ever increasing numbers of people facing the disease.

As the COVID-19 crisis started to hit in March, our support and information services stepped up to the plate, adapting quickly to meet the new needs. We



provided specific information about the implications of coronavirus for men with prostate cancer, and these pages had nearly 34,000 views in late March. At the same time our Specialist Nurses saw a spike in demand from those concerned about delayed treatments and vulnerability due to the virus. We were able to provide video conference options for support groups not able to meet in person, which helped them stay connected. We were ready with a proven alternative model of care to help reduce hospital visits - the Supported Self-Management approach developed in partnership with Movember and we have been successful in getting men access to alternative drugs to reduce their COVID-19 risk. I am proud that we have been able to stand with and for men during this very difficult time.

None of this would be possible were it not for our generous supporters and partners and I'd like to take this opportunity to say a huge thank you to everyone who has helped us during the past year. We never take this for granted and work hard to ensure we are always deserving of the trust people place in us when they choose to donate. Whilst the years ahead will be very challenging, our life-saving work is needed more now than ever and with our loyal partners and supporters alongside us, we are determined to redouble our efforts. Men, we are with you.

pyple alhane

A message from our Chairman

It's with mixed emotions that we reflect on the past year. On the one hand 2019/2020 was a record year for Prostate Cancer UK. On the other hand as the year end approached it was clear that the pandemic would have a profound impact on men facing prostate cancer and their families. It is also likely to significantly reduce our income for 2020/21 and therefore our ability to invest in the important research and support that's so important for men and their families.

Despite the current uncertainties, I feel prouder than ever to lead the Board of Trustees as Chair of this charity which is making such a difference for men facing prostate cancer and their families.

The ambitious growth plans have borne fruit and the new research strategy leaves us poised to invest for maximum impact over coming years. Before the pandemic took its toll, benefits were being felt by men across the whole of the UK from improvements in diagnostic pathways and with hope in sight from the first precision medicine for prostate cancer coming down the line.

I feel fortunate to work with a strong and effective Board of trustees, who are so generous with their time and who unite around the shared vision of a future where lives are not limited by prostate cancer. I'd like to thank everyone for their hard work and particularly to recognise the contribution of Steve Ford, who retired from the Board at the end of the year and would like to welcome Cristian Cussen, Henry Obi and Samia al Qadhi who join the board.

We take our responsibility for overseeing the good governance of the charity very seriously and have continued to challenge ourselves to maintain the highest standards of transparency and accountability. Resilience has never been more important and I am pleased to report that we entered the period of the pandemic crisis in robust shape both in terms of financial stability and organisational capability. Our actions in response to the situation are aimed at ensuring that remains the case, even as the world changes and new challenges and opportunities arise.

Keeping up the rate of progress in the face of the COVID-19 challenges will be tough, but I am confident that we are taking the right steps to secure the future



of the charity so that the life-saving work can continue. The trustees are grateful to Angela and the rest of the leadership team for their hard work and commitment throughout the past year, which has enabled so much to be achieved, but especially for the extra effort to rise to the unprecedented challenges of the pandemic since it hit in March. All our people have had to make sacrifices to help the charity continue its important work in the face of this situation. I have been reminded yet again how fortunate we are to have such a dedicated team of employees and volunteers.

Prostate Cancer UK has built up a broader supporter base than ever and it is our supporters – whether those who have been part of our efforts for many years or those who have come on board more recently – who enable us to continue our vital work.

Thank you to you all.

CM. Paulie

Investing in pioneering research

The past 12 months have been incredibly exciting for prostate cancer research around the world, the work of Prostate Cancer UK, and for the men and their families affected by this disease.

This year, we saw decades of research investments come to fruition, as positive clinical trial results paved the way for the world's first precision medicine for prostate cancer: a landmark achievement that is set to revolutionise treatment of the disease. A further £6.5 million was invested in promising new projects, taking our total research spend to an outstanding £66 million. Our new research strategy announced in January will see us take an even more focussed approach to delivering improvements to the outcomes for men with prostate cancer in the years to come.

Early research investments paving the way to a new era of treatment

New research presented at the European Society for Medical Oncology (ESMO) conference in late 2019 showed the drug olaparib (Lynparza) could be the first-ever precision medicine treatment for prostate cancer.

Precision medicine is an exciting and effective approach to cancer care that uses information about the genetics of a man's tumour to work out the best treatment for him. In October, ovarian and breast cancer drug, olaparib, was shown to delay the progression of advanced prostate cancer in men whose cancer cells have certain genetic mutations by four months, compared to standard treatments like enzalutamide and abiraterone. Early results suggested this could translate to several months of survival time for men with this incurable form of the disease.

Olaparib is a type of drug known as a PARP inhibitor, which targets cancer cells' ability to repair damage to their DNA. Early research funded by Prostate Cancer UK and Movember indicated men with defects in their DNA damage repair genes were likely to respond to PARP inhibitors like olaparib, and paved the way for the drug to be tested in men with prostate cancer in the PROfound phase III clinical trial. Our research helped lead to the test that would be used to select only the men most likely to respond to the drug, and ultimately provide the final piece of the puzzle that will allow olaparib to become the world's first targeted medicine for prostate cancer.



Prostate Cancer UK's funding was critical to build a platform that allowed testing of prostate cancer patients from across the UK. That was huge. It allowed us to start selecting patients who would benefit from olaparib. It also allowed us to work out the best ways to test and select men in future.

Dr Joaquin Mateo, lead researcher for Prostate Cancer UK's olaparib research

A strong year for research investments

This year, we funded $\pounds 6.5$ million worth of outstanding research projects, to improve treatment, diagnosis and our understanding of prostate cancer.

Research Innovation Awards

Our Research Innovation Awards are dedicated to funding the most impactful and innovative projects the field has to offer. They focus on new and ambitious ideas, which approach prostate cancer from a completely new angle. Since the programme was launched in 2017, these awards have spurred innovation in the field, helped us plan longer-term investments, and ultimately, brought us closer to the day prostate cancer is no longer a killer.

This year's awards, worth over £2.8 million, were no exception. From a pioneering new drug about to hit clinical trials, to a revolutionary home urine test for prostate cancer, they are poised to have big rewards for men.

LEAD INVESTIGATOR	PROJECT TITLE	INSTITUTION	COST	STRATEGIC PRIORITY
Professor John Callan	Targeted chemo-sonodynamic therapy for the treatment of locally recurrent prostate cancer.	University of Ulster	£209,125	Better Treatment
Professor Jason Carroll	Exploiting transcription factor networks to improve prostate cancer outcomes.	University of Cambridge	£267,414	Better Treatment
Professor Johann de Bono	Targeting the Heat Shock Factor-1 (HSF-1) stress response to abrogate persistent androgen receptor (full-length and splice variant) signalling in lethal prostate cancer.	Institute of Cancer Research	£422,275	Better Treatment
Professor Simon Mackay and Professor David Waugh	Development of a first-in-class preclinical IKKa inhibitor for the treatment of castrate-resistant prostate cancer.	University of Strathclyde	£553,255	Better Treatment
Professor Colin Cooper	A Urine Risk Classifier For Predicting Outcome In Prostate Cancer Patients.	University of East Anglia	£273,818	Better Diagnosis
Professor Noel Clarke	Influence of metformin on metabolic changes associated with androgen deprivation therapy: Analysing samples from the prospective STAMPEDE Trial.	University of Manchester	£341,990	Better Treatment
Professor Charlotte Bevan	Identifying and exploiting androgen receptor coregulators that drive therapy resistance in prostate cancer.	Imperial College London	£404,553	Better Treatment
Dr Nina Tunariu and Professor Dow-Mu Koh	Improving diagnosis and treatment of advanced prostate cancer (APC) through better imaging with whole-body magnetic resonance imaging with diffusion weighted imaging (WBMRI).	Royal Marsden Hospital	£340,868	Better Diagnosis and Treatment

Targeted calls: Existing Trials, New Answers

In addition to our annual Research Innovation Awards, this year saw the launch of two new targeted calls, aimed at tackling key areas in prostate cancer research we believe will make a big impact for men.

The first of these, 'Existing Trials, New Answers', sought research proposals which looked to build on knowledge locked away in existing trials, data sets or tissue collections. Too often we start from scratch with research, but these awards encouraged researchers to ask new questions of data or samples already collected as part of other initiatives. The projects represented a new way of thinking about research, that could answer new and important questions more quickly and more efficiently than the standard model of cancer research. We were pleased to be able to fund four promising projects as part of this new initiative, worth over \pounds 1.6 million, and look forward to sharing details of the individual projects once contracting completes.

Targeted calls: Immunology and Immunotherapy

Our second targeted call looked to push prostate cancer boundaries in a new way, by focusing on research to harness the power of men's immune systems against the disease.

The immune system is the body's natural defence system. It patrols the body, seeking and destroying anything that could cause us harm. And by using vaccines and medicines, its power can be enhanced against new diseases, including cancer. This is a rapidly expanding and exciting field called immunotherapy. And already, we've seen miraculous results in some patients with skin or blood cancers. In fact, immunotherapies are now an available treatment in some cancer types. Yet these miraculous results have been notably absent for men with prostate cancer in the UK, with a variety of attempts yielding disappointing results.

In June 2018, Prostate Cancer UK brought together leading researchers from across the world, and from a variety of different disciplines, to identify the main challenges for the delivery of effective immunotherapies for the treatment of the disease. The key outcome was the identification of five significant knowledge gaps, the addressing of which would accelerate progress and enable immunotherapy to become a much-needed reality for men with prostate cancer.

This year, we launched a funding call for research proposals looking to meet this rational framework for new immunotherapies to be developed. The following table sets out the five awards made as a result of this call totalling $\pounds1.7$ million.

LEAD INVESTIGATOR	PROJECT TITLE	INSTITUTION	COST	STRATEGIC PRIORITY
Professor Hardev Pandha	Oncolytic Virotherapy recruitment of early innate immune response converts immunotherapy- resistant prostate tumours into checkpoint blockade therapy sensitive T-cell-inflamed microenvironments	University of Surrey	£397,809	Better Treatment
Dr Richard Bryant and Dr Eileen Parkes	STING signalling in prostate cancer: response to radiotherapy and immune strategies for treatment	University of Oxford	£465,713	Better Treatment
Professor Katherine Vallis	Improving [177Lu]PSMA therapy of prostate cancer by understanding and exploiting the immune response to targeted radiotherapy	University of Oxford	£278,022	Better Treatment
Professor Aled Clayton	Resetting the TiME (Tumour Immune Micro- Environment)	Cardiff University	£231,307	Better Diagnosis
Professor Mark Linch	RationalE Approach to Combination immunoTherapy In prOstate caNcer (REACTION)	University College London	£334,050	Better Diagnosis

Fostering collaboration and sparking new ideas

As well as supporting the prostate cancer research field through grant-funding, we're dedicated to giving individuals the skills and platforms they need to make it possible.

In the UK, we're lucky to have an incredible pool of globally recognised leaders in prostate cancer research. But in order to maintain this talent in the coming years and decades, it's crucial we support researchers in the early stages of their careers today. In October, we hosted our largest ever annual early career researcher networking event, Making Progress Day, for 80 of the UK's most promising early career researchers. The day had a focus on networking, giving the researchers a vitally important opportunity to expand their relationships with other researchers, institutions and funders. In previous years, this has laid the foundations for future collaborations and for fresh ideas to develop across different research areas.

The event also focused on helping the researchers develop key skills needed to forge a career in prostate cancer research, present their work, and meet internationally leading senior researchers.

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Making Progress Day was a stand-out meeting for me. It provided a unique opportunity to network with senior and early career researchers, all together in one room, to build new friendships and collaborations.

Dr Adam Sharp, attendee of Making Progress Day

More cures, less harm: a new research strategy for 2020

This year, as we entered the new decade, we were proud to announce a new 10-year research strategy which sets out a newly focused framework for bringing us closer to our goal of stopping prostate cancer limiting lives.

The strategy addresses the key issues we believe we face in prostate cancer today: too few cures, in exchange for too much harm. We want to bring closer the day that all men's prostate cancer is caught early, while it's still localised and contained within the prostate and possible to cure. And we want a future where these treatments will be successful at giving men this cure, without leaving them with unnecessary side effects.

Our strategy aims to help us make real and tangible progress towards this future by 2030, by focussing on three key areas:

Better diagnosis

By supporting the development of a screening programme for prostate cancer, we want to increase the proportion of men whose cancer is caught before it's spread, and diagnose it accurately, so they can be given the best treatments from the start.

Better treatment

We'll continue to fund the best ideas from across the research spectrum to transform prostate cancer treatment. We'll have a new and much-needed focus on improving outcomes for men with localised disease treated with surgery, radiotherapy or other new combination therapies, to ensure treatments are more likely to cure men and less likely to harm them.

For advanced prostate cancer, we'll work out how treatments can be used to keep men alive for longer, by optimising the dose and sequence of drugs, and determining which treatments are best for which men. And we'll continue to fund high-quality early stage research focused on the discovery and development of new therapies to bring us closer to a cure.

Smarter data

We plan to harness the power of big data against prostate cancer. By working with partners to analyse and combine data from tens of thousands of men with prostate cancer, we aim to find patterns in when the cancers started, how they developed and how aggressive they are to lead to the development of a personalised tool to make treatment and diagnostic choices easier for men, and help make sure these decisions are most likely to result in a cure.



Supporting men, driving change

While pioneering new research is crucial to bring better treatments to the fore, we are determined to ensure that men can get the best available treatment, care and support wherever they live and whatever their background. We do this by supporting men and their families directly, and by driving change in the way that care is delivered, as well as influencing government policy and the way that resources are allocated. We take a flexible approach, directing our resources to where they are most needed based on our knowledge of care delivery and men's experiences across the UK.

Supporting men

Our clinical and information services continue to empower men and demystify prostate cancer for those who have questions that need to be answered. Our services have been there for men throughout 2019/20, and have been particularly important towards the very end of the year as men with prostate cancer and their families have tried to understand the implications of the coronavirus outbreak for their treatment and the risk to themselves.

There were 14,986 contacts to our Specialist Nurses in the year. This is only 2 per cent fewer than our highest ever level in 2018/19, with the 2018 figures being strongly influenced by contacts from men after Stephen Fry and Bill Turnbull bravely spoke about their diagnoses of prostate cancer that year. This near record year was driven in part by a significant jump in calls and Live Chat requests from mid-March with over a third of the contacts in March relating to the coronavirus outbreak.

We have developed further the support we provide to service users whose sexual wellbeing has been affected by their or another's treatment for prostate cancer. This is a difficult area for people to talk about, and is not well covered by other services, so it is a priority area for us. We are providing more in-depth information and support to help people deal with the sexual impact of prostate cancer treatment and help empower them to find their own solutions that can lessen the impact of this on their lives.

We also saw a significant jump in people visiting the health information pages on our website in 2019/20, with 1.96 million unique visitors, up from 1.55 million in

2018/19. We provided some specific information about the implications of coronavirus for men with prostate cancer, and these pages had nearly 34,000 views in late March. We distributed 561,558 printed publications throughout the year – this was a 17per cent drop on last year. This is partly explained by preferences continuing to switch from print to digital, and partly due to the spike in demand caused by the increase in awareness in 2018. We also began updating all our information to better reflect who can get prostate cancer by including reference to trans women and some people who are non-binary or intersex.

Support groups are an important resource for men diagnosed with prostate cancer. We support independent groups with advice, resources, training and small grants. We continue to look for ways to ensure that everyone can benefit from the support of others who have experience of prostate cancer. With groups unable to meet face to face from mid-March, we have offered access to video-conferencing to enable groups to continue to offer their vital support. Having piloted virtual support groups for men on active surveillance and for gay and bisexual men with prostate cancer, we were in a strong position to move quickly to support traditional face to face groups to use this medium when coronavirus impacted on all our lives. Our online community also continues to be an important resource for many to share their stories and support each other.

Driving change

Improving awareness

Until a screening programme is in place, one of the ways we can influence earlier diagnosis is by making sure that men at higher risk of prostate cancer are aware of that increased risk. We have been running a major campaign – Stronger Knowing More – to alert black men to their increased risk of prostate cancer. 1 in 4 black men will get prostate cancer in their lifetime compared to 1 in 8 in the population as a whole. Evaluation of our campaign showed that it reached over a third of black men in the target areas, and also led to action. Of the black men over 45 who saw our campaign, 17 per cent said that they had spoken to their GP as a result and 9 per cent said they had asked their GP for a PSA test. We are now working to build our learning from this campaign into wider action to reduce late stage diagnosis.

Improving diagnosis

To achieve earlier diagnosis for the greatest number of men we need to get to the point where there is a screening programme for prostate cancer, because early stage prostate cancer usually has no symptoms. To be approved by the UK National Screening Committee, the screening programme would need to achieve more benefit than harm, i.e. the benefit of lives saved would need to exceed the damage done by unnecessary testing, diagnosis and treatment. In 2018/19 we commissioned a major health economic study from the University of Sheffield School of Health and Related Research to establish whether the current pathway of PSA testing followed by mpMRI has already reduced the harms of over-diagnosis enough to justify screening. This is due to complete in the next few months and will determine our next steps towards screening.

Our activity to ensure all men have access to a highquality multiparametric MRI (mpMRI) scan before a biopsy took a big step forwards once again during the year and we were delighted to see endorsement of this approach in the updated NICE guidelines for prostate cancer, published in May. Our most recent survey showed that 63 per cent of men in the UK were getting high quality mpMRI scans before biopsy compared to around 30 per cent when we started our focus on mpMRI in 2017, and 72 per cent of Trusts and Health Boards are offering it to the highest quality. The remaining Trusts and Health Boards are offering pre-biopsy MRI but not to the standard recommended by NICE, so our efforts now will be focused on quality improvement.

We have been instrumental in ensuring that men whose prostate cancer comes back will soon have access to a PET-CT scan across England. We have also been supporting clinicians in Wales to make these scans available to all the men that will benefit. Evidence shows that these scans can detect cancer when there are very early signs of prostate cancer recurrence, which can enable men to have quicker access to second-line treatments and a greater likelihood of a cure.

Access to treatment

We continued our work to promote the robust and consistent use of active surveillance in the prostate cancer pathway. Active surveillance is a structured approach used to monitor men with low risk disease who may be able safely to avoid treatment. New NICE guidance in May supported the recommendations of our active surveillance clinical consensus in March 2019. We developed and rolled out training and health information resources to help ensure that all men get this high standard of care.

As explained in the research section, we are on the threshold of having the first precision medicine for prostate cancer. Called olaparib, this treatment will target specific tumour mutations that can be identified through genetic tests. While waiting for the trial results to publish and the health technology assessments for olaparib to get underway, we worked across the four UK nations to make sure that the right genetic tests will be available. This means that as soon as olaparib is approved for use on the NHS, the men who can benefit from it will get access.

We have been working to promote the availability of abiraterone for men with high-volume newly diagnosed metastatic prostate cancer, specifically for those men who are unable to have docetaxel chemotherapy. The two treatments have been shown to have equivalent impact in terms of extending life, but not everyone will be able to tolerate chemotherapy. Access has now been successfully achieved for men in Scotland, but not yet in England, Wales and Northern Ireland. Availability of alternatives is particularly important during the time of the coronavirus outbreak, as undergoing chemotherapy weakens men's immune systems. We have been instrumental in ensuring the interim availability of enzalutamide as an alternative to chemotherapy in England and supported use of abiraterone for men in Wales and Northern Ireland.

In the last few weeks of the year, we worked closely alongside other cancer charities and the NHS across all four nations to monitor and take urgent action to address the impact of the coronavirus outbreak on men's ability to be diagnosed, treated and supported for prostate cancer. During that time many men were asked to wait for curative treatment until the risk of infection was lower, with the temporary use of hormone treatment. We emphasised the importance of communicating well and taking these decisions in a personalised way, based on each individual's risk and involving men and their families in the decision is critical. We are aware that a significant treatment backlog has built up and are working to make sure that men's needs and outcomes are given the right level of priority. We are also concerned that referrals from GPs have fallen significantly - the chance of early diagnosis could be missed if men are not talking to their GPs about risks and symptoms.

Improving care

We have been leading eight major projects across the UK under the TrueNTH programme funded by Movember, tackling critical areas of prostate cancer care. We are using the findings to roll out improvements more widely across the UK. We have continued rollout of the Supported Self-Management model of care, which enables men to have a level of follow up to their treatment which is personalised to their needs and degree of risk, enabling them to access high quality support while avoiding unnecessary hospital appointments. This approach to providing care has been mandated across the whole of England and Wales and is being implemented in parts of Scotland. Our team worked with Trusts across the UK to support them to implement the TrueNTH model. The two projects developing resources to support men with impacts of their treatment on continence and sexual wellbeing also completed in 2019/20, and the resources they created and tested are now being rolled out for general use.

We have updated our Best Practice Pathway across the whole of diagnosis, treatment and support for prostate cancer, with input and oversight from leading clinical experts. This can be found at **prostatecanceruk.org/** for-health-professionals/our-projects/best-practice-pathway. As well as promoting it for use

by health professionals, we are using the pathway as a basis for identifying the highest priority areas for improving care standards across the UK.

Working with health professionals

We have continued to provide online education on our own platform and via other providers with 6,094 modules completed by health professionals during the year, which will help them provide better care. We continued our successful approach from last year of delivering sessions on prostate cancer and the use of the PSA test as part of wider GP conferences – combined with our own masterclasses this enabled us to reach 1,975 GPs during the year (2,201 healthcare professionals in total).

We also developed and tested a new approach to leading change alongside clinicians. The Improvement Programmes support clinicians to develop and use their leadership skills to drive change and improvement in their organisations. We delivered three programmes during the year, one for urology clinical leads (focusing particularly on the diagnostic pathway), one on implementing the Supported Self-Management approach, and one on improving care for men with advanced disease. 60 clinicians have attended the programmes, representing all four UK nations and the multi-disciplinary workforce (urologists, oncologists, radiologists, clinical nurse specialists, GPs and radiographers). Evaluation has shown that real improvements in care for men have already happened as a result of the programme - for example an evaluation looking at the impact achieved by just 13 delegates in the clinical leads' programme showed their projects could improve care for 14,000 men each year.

Engaging people to tame prostate cancer

Public awareness of the impact of prostate cancer, the unnecessary suffering of too many men and their families and the work of Prostate Cancer UK in tackling the many issues is crucial. Such awareness can help drive behavioural change, leading men at higher risk of prostate cancer to seek advice about their risk and any action they should take (see 'driving change, improving awareness' above). It can help drive volunteering, enabling us to get our message out to more people and support men and their families even more effectively. And it can help us raise funds to continue to fund innovative research.

In Spring 2020 we generated substantial news coverage of the announcement that, in the most recent year for which figures are available, prostate cancer had killed more than 12,000 men for the first time. We worked hard to ensure that journalists gave a balanced interpretation of what could be an alarming story. Our nurses were very involved in answering questions from men and their families about the news and putting it into context.

Annually, our online social media presence grew by 11 per cent, with 4.5 million engagements (likes, comments, shares) across all social platforms. Key media partners, for example Quest and talkSPORT, and advocates such as Bill Turnbull, Jeff Stelling and football managers on prime-time TV, have continued to help us engage the attention of men and their families. We are proud to have been rated THE most improved charity in YouGov's Charity brand health index in 2019. All of this contributes to our ability to raise awareness, change behaviours and fund our important work.



Learning more about our audience

We have continued our work to learn more about people engaging with Prostate Cancer UK and have used this to ensure we are offering what people need and want from us. Our online supporter panel has been invaluable in helping us to develop and improve our communications, events and activities and to create new ways that people can engage with and support us. We survey our supporters and people engaging with us to understand how we can improve levels of satisfaction with what we offer and how we engage with people.

Preparing for growth

In May 2019, we launched our new campaign centred around our core philosophy – **Men, we are with you**. This philosophy runs through the veins of Prostate Cancer UK and sits at the heart of our decisions. The campaign celebrates men and focuses on building an emotional connection to the cause. Feedback from many of our supporters, health professionals we work with, donors and corporate and other partners has been very good. But more importantly the general public reacted positively, with many engaging online and sharing our messages with friends and family.

Growing our income

We have made careful investment over the past year to help increase our income and our resources to undertake our important work. Through the year, we have seen increasing numbers of people make a regular donation with an increase from 25,000 to over 41,000 supporters. The support we have received from people taking part in our sporting activities like the March for Men walking programme, leaving gifts in their Wills and raising money in their communities has been, as always, incredible. It has enabled us to grow our fundraised income to £30.6 million in 2019/20 (excluding our donation from Movember), our highest ever and a 31 per cent increase on the previous year.

As the impact of coronavirus became apparent in the last few weeks of March, our income started to drop away steeply with sporting events and community fundraising activities being postponed or cancelled. In addition to the income we have generated, the Movember Foundation has generously donated $\pounds4.7$ million from their 2019 campaign, an increase of $\pounds1.2$ million from the previous year.

None of the impressive growth last year would be possible were it not for our generous supporters and partners. Whilst the years ahead will be very challenging, it has given us a stronger base from which to weather the storm. The progress we have made in recent years is under threat and it is more important now than ever that we are here to support men with prostate cancer, so we are immensely grateful to everyone who is able to contribute to help us keep the improvements coming.

Fundraising income growth 2018/19 to 2019/20

2018/19: £23.3 million



2019/20: £30.6 million

Highlights of the year

March for Men: Our walking programme, March for Men, grew to 10 flagship local walks across the country in June. Additionally we held football marches across all four nations, led by our Ambassador, the TV presenter Jeff Stelling and received support from walks organised by the public. In total, this raised £1.83 million directly from the public, of which our flagship walks raised £794,000. In addition, we received £85,000 in corporate donations in support of the walking programme (£60,000 from The Stars Group and £25,000 from Burton).

Partnerships with companies across a range of

business sectors: 2019-20 proved another successful year for our partnerships team with a number of long-term commitments from partners, many of whom continued to engage their workforce in fundraising challenges and vital health awareness raising initiatives. Cabin crew and passengers of easyJet helped raise over £400,000 for Breast Cancer Now and Prostate Cancer UK, as our Lifesaving Journeys campaign continued into its second year and was shortlisted at the Business Charity Awards 2020.

Keyline Civils Specialists celebrated the 10th year of partnership, and we received valuable support from Toyota Manufacturing UK Charitable Trust, and benefitted from funds raised at ICAP's annual Charity Day. Alongside these ongoing partnerships we welcomed two new partners, EDF and Coral.

Our Trust, Foundation and Major Donor supporters have been incredibly generous this year, providing over £5.6 million towards our vital prostate cancer care and research programmes. We were delighted to receive a host of extraordinary donations, of particular note the contribution from the Constance Travis Charitable Trust, as well as a £4 million from a donor who wishes to remain anonymous towards Better Diagnosis. In addition, through our new research strategy, the Specialist Nurses matched funding scheme, our influential network of supporters known as the Pioneers and our ever-popular Panel Debate and Dinner event we were able to inspire more philanthropists to support us than ever before. There has been welcome growth in regular gifts again this year and these now account for just over 10 per cent of the total fundraised income (up by just over $\pounds 1$ million on the previous year).

We take our responsibilities to our supporters very seriously, and this year have continued to ensure that they can control how they hear from us, as well as ensuring that we continue to comply fully with GDPR guidelines. We contact people by telephone and email only if they specifically agree to it. While some of our supporters have told us they no longer want to hear from us, we are encouraged that a vast number of people are still responding warmly to our communications.

GDPR has, without doubt, increased the cost and complexity of attracting new supporters. However, we are committed to providing everyone who comes into contact with us with a positive experience that meets their needs. As such, each time we communicate with our supporters, we are pleased to provide them with a choice of changing their communication preferences and frequency.

We are a member of the Fundraising Regulator and adhere to its Code of Fundraising Practice. Our Board of Trustees continue to take a close interest in the programme of work and we work hard to ensure our fundraising activities are compliant with all relevant rules and regulations, remain ethical and deliver to high standards.

We have a complaints handling process for members of the public that handles complaints in an open and honest manner without prejudice. In 2019/20, we received 208 complaints relating to fundraising, which accounts for just one in every 71,000 of all our outbound communications. This represents 0.001% of all outbound communications and is at a similar level to the previous year. We regularly track and review all complaints so we can learn from them and update our processes and procedures in real time. All complaints are regularly fed back to the fundraising regulator.

Our volunteers



We rely on our incredible volunteers to help us spread the word about prostate cancer, raise funds, promote our initiatives, and support our work across the UK. Over 2,000 people volunteered this year and November saw our busiest ever month for volunteer activity.

Our aim is to reach as many people as possible with our life-saving messages. We have worked with our volunteers to develop new ways of working and new kinds of partnerships. Workplace wellbeing initiatives like the West Midlands Combined Authority Thrive at Work programme and NHS Tayside's Healthy Working Lives enable us to engage employers to raise awareness of prostate cancer across sectors.

This year saw a new partnership launched with the Scottish Fire and Rescue Service where we work with their Occupational Health team. As part of their wellbeing programme, we will reach their 8,000 employees at 356 stations across Scotland over the next three years.

We are grateful to our volunteers for their feedback on how we are doing and their support in helping us to improve and grow. Thanks to this active involvement we are able to continue to make our work with volunteers really count and to retain our Investing in Volunteers accreditation. The Volunteer Engagement Advisory Group, Volunteer Hubs and our biennial volunteer engagement survey are some of the ways we listen to volunteers. This year's survey gave us some areas to improve and told us volunteers feel valued, supported, and listened to.

Our Volunteer Hubs across the UK continued to grow in membership and activity this year. Although we paused most volunteer activity in response to COVID-19, Hubs continue to meet virtually, support our new initiatives and plan future activity. Volunteers have told us of the connection and strength they gain from our Hub network. Our volunteers are the strong foundation and community that will help us build our new future.

Financial review

In 2019/20 the group's total income was £36.0 million, which represented an £8.5 million (31 per cent) increase on the previous year. This includes the donation from the Movember Foundation this year totalling £4.7 million, an increase of £1.2 million over 2018/19. We have continued to record a strong performance across the charity's other income streams, which showed an overall increase of 31 per cent to £31.3 million. The key drivers of this increase include £4.1 million resulting from additional income from a larger number of regular donors and a strong year for legacy income, together with an exceptional year in major donors and charitable trusts, thanks in particular to a one-off £4 million received from a donor who wishes to remain anonymous.

Total group expenditure for the year was $\pounds30.6$ million (2018/19: $\pounds28.5$ million). This included charitable activity expenditure totalling $\pounds19.8$ million (2018/19: $\pounds18.3$ million), made up of $\pounds6.3$ million on research; $\pounds4.8$ million on supporting men and their families and influencing change in the delivery of care, and $\pounds8.7$ million on awareness activities. Total charitable expenditure in the year amounted to 65p of every $\pounds1$ expended (2018/19 64p). The investment in income growth over the past two years was made in order to enable a transformative increase in our investment in research, support and awareness.

The activity levels in 2019/20 resulted in a surplus of £5.4 million for the year (2018/19: £1.1 million deficit). Expenditure was slowed in March once the COVID-19 crisis became apparent, resulting in a higher surplus than had been planned. Our restricted reserves increased by £3.7 million to £9.6 million as at 31 March 2020 and our unrestricted reserves increased by £1.7 million to £10.7 million at the year end. Our reserves policy on page 22 and Note 18 on movements in funds provide further detail.

The group holds cash and short-term deposits of £26.2 million, compared to £19.7 million at the start of the year, reflecting the strong income received in 2019/20. These funds will enable us to meet our £18.6 million commitment to long-term projects (see Note 6) on both our research and programme awards. Our treasury policy on page 22 provides information on how the charity invests balances held.

The charity also operates a wholly-owned subsidiary, Prostate Cancer Trading Limited (PCTL), which is responsible for all commercial activities of the group. All surplus funds earned are paid under gift aid to the charity. The company has its own board of directors, responsible for all governance matters. Financial details for PCTL are shown in Note 3.

Plans for the future

The impact of the COVID-19 pandemic on our work remains unclear at this time but we have taken a scenario approach to identify a sensible range of outcomes so that prompt action can be taken. We have adjusted activity plans to take account of the anticipated impact on the challenges for men facing prostate cancer, and changes affecting the health system and research community. We have also looked hard at our cost base and taken some tough decisions to reshape the organisation so that it is fit for the future, recognizing that income will be lower compared to our previous plans for the coming year and beyond, although our ambition remains undimmed.

A review of our strategic priorities has confirmed that the focus on early and accurate diagnosis, better treatments and support for men is still the right way for us to achieve our goal of a future where lives are not limited by prostate cancer. We will work to stop prostate cancer being a killer and damaging bodies and lives. We will continue to unite the brightest minds in science and healthcare and the most passionate and caring people to help men live long and live well.

Whilst uncertainty remains a feature as we head into the new financial year, flexibility, using a more agile planning approach, will come to the fore. We will be responsive, to maximise opportunities for accelerating progress within this overall strategic direction. This will enable us to navigate the uncertainty without losing forward momentum.

We are also taking a step back to recognise permanent changes in the world around us, so that we can spot the innovation opportunities and better ways of doing things, which have now become a realistic possibility. Our working principles have always guided us towards being bold, energetic, responsive and flexible, and our aim now is to lean on these attributes to adapt quickly in a fast changing world. We aim to come back fitter than ever and with renewed focus on our goal to stop prostate cancer being a killer and damaging bodies and lives. With diagnoses of prostate cancer now outstripping those of any other cancer, the need for our work will continue to grow. We aim to inspire those supporters already engaging with our work, showing them how their support helps us to make a difference. And we will shine an even brighter light on the problems and injustices prostate cancer brings to so many men and families, so that more people will chose to join our movement to stop prostate cancer in its tracks.



Structure, governance and management

Objects

The charity's objects, set out in its Memorandum and Articles of Association are to invest in prostate cancer research and to make available useful results, to provide information and support to men and their families affected by prostate cancer and to raise public awareness of prostate cancer and other prostate diseases and their symptoms.

Within the Trustees' report is the strategic report, required under Section 414C(11) of the Companies Act 2006, which summarises the charity's activities, achievements and performance.

Structure

The Members of the Council of Management ('The Trustees') of Prostate Cancer UK ('the charity'), who are also Directors of the charity for the purposes of the Companies Act, submit their annual report and the audited financial statements for the group for the year ended 31 March 2020.

The charity is a charitable company limited by guarantee and was set up on 14 October 1991. The Strategic Report provides information on the charity's activity and set out below are details of its financial performance from April 2019 to March 2020.

The charity has a trading subsidiary, Prostate Cancer Trading Limited (06157784) and also owns the following dormant companies: The Prostate Cancer Charity Limited (08183613), Prostate Cancer Research Foundation (05926197) and Prostate Action (07149009).

Governance

Overall strategy and policy for the charity are agreed by the Council of Management (known as the 'Board of Trustees'), advised by the Chief Executive and Executive Directors who attend all meetings.

Trustees and Officers of the Board

The Chairman, Treasurer and Vice Chairman are all elected for an initial term of three years. They are then eligible for election for a further final term of three years. These terms are extendable, exceptionally, at the discretion of the Board of Trustees.

It is our policy to look to recruit a diverse mix of Trustees from the widest field of applicants and with a good spread of relevant skills. A number of the Trustees have been personally affected by prostate cancer. During the year, one Trustee resigned, one new Trustee was appointed and two further new Trustees join the Board in July 2020.

We ensure new Trustees have the knowledge and skills to perform their roles. New Trustees undertake an induction programme, meeting with staff from across the charity and are provided with relevant background briefing information.

The Board of Trustees uses the Charity Governance Code as a reference point for a rolling review of governance, to ensure standards always remain high.

An important tool informing this governance focus, is the regular Board effectiveness review. This was undertaken during the previous financial year, facilitated by an independent third party organisation. It helped to highlight the many strengths in the way the Board works, as well as some areas where improvements can be made. These were mainly in the area of updating and formalizing Committee terms of reference, delegations and certain policies. Improvements have been made in these areas over the last year and we plan to perform another Board Effectiveness Review during the 2020/21 financial year, to help identify the next priorities for improvement.

The charity has put in place Trustee indemnity insurance.

Trustees met on 22 occasions during the year, either as a full Board or in the committees.

Trustees and Directors

The Trustees and Directors who served the charity during the period were:

(Trustees are members of the committees as indicated by the numbers in brackets)

- Professor Jonathan Waxman (President) (2,5)
- Charles Packshaw (Chairman) (1,2,3,4,5)
- Mike Tye (Vice Chairman) (2,4)
- Lynne Robb (Treasurer) (1,2)
- Cristian Cussen (from 19.03.2020)
- Henry Obi (from 23.07.20)
- Samia al Qadhi (from 23.07.20)
- Professor Sara Faithfull (3)
- Steve Ford (3)
- Simon Hammett (1,5)
- Marion Leslie (1)
- Andrew Mitchell (4)
- Professor David Neal CBE (5)
- Professor Martin Roland CBE (2,3,5)
- Tom Shropshire (2,3)
- Simon Peck (4)

Resigned in period:

• Steve Ford (resigned 19.03.2020)

Independent committee members serving during the period:

- William Dickinson (Finance Risk and Audit Committee)
- Nick Kendall (Engagement Fundraising and Communications Committee)
- Nick Lemoine (Board Research Committee)
- David Matheson (Support & Influencing Committee)

Committees of the Board

- 1. Finance Risk and Audit
- Reviews in-depth budget and financial plans
- Monitors the charity's financial performance and compliance with accounting requirements
- Makes recommendations to the Board on financial policy matters
- Reviews strategic HR issues
- Scrutinises support services
- Leads on external audit matters
- Reviews arrangements for the management of risk, including those around data protection and safeguarding
- 2. Nominations Committee
- Recommends to the Board the reward arrangements and appointment of new Trustees, Officers and the Chief Executive
- 3. Support and Influencing Committee
- Provides oversight on behalf of the Board of the charity's delivery of support services and of its influencing work
- Monitors delivery of support and influencing activities against the business plan
- Monitors the charity's compliance with campaigning and lobbying regulations
- 4. Engagement Fundraising and Communications Committee
- Reviews existing income generation and communications-related activity, as well as considering future opportunities in these areas
- Reviews progress against the strategy to develop deeper and long-lasting relationships with our supporters, both existing and potential and with all those who need our services
- Monitors the charity's compliance with fundraising regulations

- 5. Board Research Committee
- Reports to the Board on general matters relating to research
- Monitors the research strategy, including its implementation

Terms of reference for the committees were reviewed in 2019.

Research Advisory Committee and Research Strategy Group

These committees exist to advise the Board of Trustees and Chief Executive by making recommendations as to which research grants the charity should support, and in which areas the charity should focus its research effort. The membership of both bodies, which includes independent clinicians/researchers, has been carefully selected to ensure a broad range of opinions and advice.

Prostate Cancer UK is a member of the Association of Medical Research Charities (AMRC) and complies with its guidelines. The AMRC is dedicated to helping medical and health charities deliver high quality research that improves people's lives.

Executive Team

Executive team as at 31 March 2020:

- Chief Executive
 Angela Culhane
- Director of Research Dr David Montgomery (resigned 05.06.20)
- Director of Support & Influencing Heather Blake
- Director of Engagement Tracey Pritchard
- Director of Resources George Jenkins (appointed 10.06.19)

Legal and administrative details of the charity

Registered in England and Wales with the Charity Commission under charity number 1005541.

Registered in Scotland by the Office of the Scottish Charity Regulator under charity number SCO39332.

Registered company number 02653887.

Registered address and principal place of business

Prostate Cancer UK, Fourth Floor The Counting House 53 Tooley Street London SE1 2QN

prostatecanceruk.org

Prostate Cancer UK (Scotland) Unit F22-24 Festival Business Centre 150 Brand Street Glasgow G51 1DH

Banker

National Westminster Bank plc Park Royal Branch 1 Abbey Road, London NW10 7RA

Auditor

MHA MacIntyre Hudson (until 31 October 2019) Chartered Accountants & Statutory Auditor New Bridge Street House 30-34 New Bridge Street, London EC4V 6BJ

Haysmacintyre LLP (from 1 November 2019) 10 Queen Street Place, London EC4R 1AG

Legal Advisor

Macfarlanes LLP 20 Cursitor Street London EC4A 1LT

Reserves policy

The charity operates within a reserves policy which is reviewed at least annually and as part of the charity's budget and planning processes.

The charity holds free reserves to ensure uninterrupted delivery of the charity's objectives regardless of short to medium term fluctuations in income and expenditure. The Trustees review reserves levels to ensure there are adequate funds available to support the work of the charity. During the year, the Trustees considered that a sufficient level of reserves for the organisation would be between three and six months of forward-looking operating expenditure. The free reserves requirement is monitored on a monthly basis, with formal reporting to the Board of Trustees on a quarterly basis.

The level of free reserves at the balance sheet date in March 2020 was £10.1 million. At year end March 2020 this represented 4.5 months cover based on our 'pre COVID-19' budget and plans. However, as we swiftly adjusted our plans to reflect reduced income projections and lower future expenditure, the free reserves now represent 9.4 months of unrestricted expenditure at the revised and lower 2020/21 budget levels. This is higher than our current policy level due to the actions taken to reduce expenditure in 2020/21 in response to COVID-19, and its impact on the charity's income. When we start to increase future expenditure the unrestricted reserves will move back within the policy range of three to six months cover.

A designated fund of £624,000 was held, representing the net book value of fixed assets.

The charity had restricted reserves of £9.6 million at the year end. Of this, £7.7 million relates to funds from the Movember Foundation, which will be fully committed to spending across the areas of research and survivorship.

Treasury Policy

The charity has a risk-averse treasury policy, which is reviewed annually by Trustees.

The charity has a low risk appetite with regard to deposits, with a primary objective of capital preservation, and a secondary objective of generating income. Deposits are restricted to cash or near-cash products, held in:

- Individual banking institutions;
- UK government debt instruments;
- Pooled funds.

It is our policy to spread funds to mitigate risk and to take into account institutions' credit ratings.

Balances held are managed in order to meet working capital requirements, with accessibility maintained should phasing assumptions for income or expenditure be changed.

Grants Policy

The charity awards grants for research funding in line with the standards and guidelines set out by the Association of Medical Research Charities.

Calls for applications are advertised through our website, research newsletter and appropriate specialist media. All applications for funding are sent to a minimum of three external independent expert reviewers who provide a written assessment of the quality, novelty, importance and relevance of the proposal. We also seek input from men affected by prostate cancer, and/ or their families, to ensure that the research proposed has been explained well for a lay audience and that it has the potential to make a difference from their experience. Once all peer reviews are received a final funding recommendation is made by our Research Advisory Committee.

Remuneration Policy

The charity's remuneration policy is designed to attract, retain and motivate a high performing team to deliver the charity's aims as well as to demonstrate to our stakeholders an effective use of charitable funds. The objectives of our remuneration policy are to:

- reward staff appropriately and enable the recruitment of high-calibre staff
- ensure the proper use of the charity's resources in accordance with its aims and within affordable limits based on the financial circumstances of the charity
- be non-discriminatory, just and equitable in the evaluation of jobs and their remuneration by providing a stable framework for the remuneration of the team
- operate within the law
- pay at a competitive level taking account of external market rates, with the aim being to set pay at the median level or above for comparable posts in the voluntary sector, subject to the charity's financial position.

Remuneration is reviewed on an annual basis and agreed by the Board of Trustees. When setting pay levels, the charity gives consideration to external benchmark comparators, changes in the national average earnings index, affordability and other internal and external pressures including recruitment and retention.

The above policy applies to all staff, including the charity's key management personnel (as defined on page 21). The annual salary of the Chief Executive (pre salary sacrifice), was £118,126 at 31 March 2020 (£118,126 at 31 March 2019); this is overseen by the Nominations Committee.

Public benefit

We have considered the Charity Commission's guidance on public benefit when reviewing our aims and objectives and in planning future activities.

The public benefit of the charity is in mitigating the effect of prostate cancer and prostate disease in the United Kingdom. Our strategic aims and the charity's activities are designed to achieve this benefit.

The beneficiaries of our work are men and their families – reached either directly or through healthcare professionals. Some of those who have benefited from our services are detailed in this report. Our service is open to all men in the United Kingdom and their families, without charge.

As a result of the above, the Trustees consider that Prostate Cancer UK satisfies the public benefit test.

Principal risks and uncertainties

The principal risks to which the charity is exposed, as identified by the Trustees, have been reviewed and systems have been established to mitigate these risks. A risk register summarises the principal risks facing the charity, graded according to their likelihood and impact, and identifies actions to manage them. The register is regularly reviewed and updated by risk owners, the Executive Team, and the Finance Risk and Audit Committee. Any 'red light' issues are brought to the attention of the Board of Trustees. In response to COVID-19 risks have been reviewed again in detail; there has been a particular focus on income and our mitigating actions to address the expected decline.

RISK	MITIGATION
Failure to make the right strategic choices that result in the best impacts for men.	 regular review of our strategy, including horizon scanning and monitoring the external environment.
There is a significant shortfall in our income restricting our ability to deliver our charitable objectives in a sustainable way.	 exposure to this risk is reduced by increasing the spread of fundraising sources effectiveness of fundraising activities is closely monitored with corrective action taken as necessary close control over commitments with expenditure on grants only agreed when we have funds available
Material loss or significant interruption to services/ activities, or reputational damage due to failure in controls or a legal/ compliance failure in areas such as GDPR/data breaches; cyber-security or serious fraud.	 regular review and training, with access to specialist resource in key areas such as data protection and legal to support operations continuing technology strategy to drive IT improvements and strengthen infrastructure and security to protect the charity's assets proactive detection, investigation and reporting of potential adverse events proactive and reactive media plan clear whistleblowing policy
Reputational damage as a result of fundraising activities (either our own, contracted staff or third parties), those of the wider fundraising sector or the activities of other partners.	 regular review of fundraising practices risk assessments undertaken for all events due diligence on our service providers carried out before engaging with them and ensuring we have effective contract terms that minimise the risks to the charity fundraisers all trained in the Institute of Fundraising code of practice
Attracting, developing and retaining talented staff and volunteers in a competitive market.	 employee and volunteer engagement surveys and action follow ups an active communication plan to ensure our people are always informed on the strategy and progress against it review of compensation and benefits approach and ongoing benchmarking ongoing proactive staff and volunteer recruitment campaigns

Trustees' responsibility statement

The Trustees (who are also Directors of Prostate Cancer UK for the purposes of company law) are responsible for preparing the Trustees' Annual Report (including the Strategic Report) and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company and the group for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities Statement of Recommended Practice (SORP) 2015 (FRS102) second edition;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company and the group will continue in operation.

The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charity and the group and enable them to ensure that the financial statements comply with the Companies Act 2006, the Charities and Trustee Investment (Scotland) Act 2005, the Charities Accounts (Scotland) Regulations 2006 (as amended) and the provisions of the charity's constitution. They are also responsible for safeguarding the assets of the charity and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Trustees are aware:

- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The Trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditor

The Trustees review the appointment of the auditor on an annual basis and have delegated power to set the auditor's remuneration to the Finance Risk and Audit Committee.

MHA MacIntyre Hudson was the charity's auditor until 31 October 2019. Following the annual review, Haysmacintyre LLP was appointed as the charity's auditor on 1 November 2019.

The Trustees' Annual Report and Strategic Report were approved by the Council of Management (Board of Trustees) on 23 July 2020 and authorised to be signed on its behalf by:

C.M.Paulie

Charles Packshaw, Chairman

Independent Auditor's Report to the members and Trustees of Prostate Cancer UK

Opinion

We have audited the financial statements of Prostate Cancer UK for the year ended 31 March 2020 which comprise the Group and Charity Statement of Financial Activities Including Summary Income and Expenditure Accounts, the Group and Charity Balance Sheets, the Group Statement of Cash Flows, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and parent charitable company's affairs as at 31 March 2020 and of the group's and parent charitable company's net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of trustees for the financial statements

As explained more fully in the trustees' responsibilities statement (set out on page 25), the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group's or the parent charitable company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' Report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Report (which includes the strategic report and the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the Trustees' Report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report (which incorporates the strategic report and the directors' report).

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charity Accounts (Scotland) Regulations (as amended) require us to report to you if, in our opinion:

- adequate accounting records have not been kept by the parent charitable company, or returns adequate for our audit have not been received from branches not visited by us; or
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Use of our report

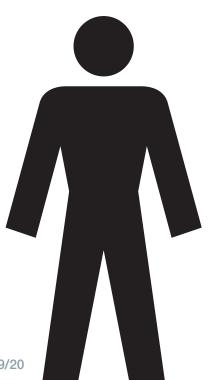
This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, section 44(1) (c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an Auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

AnnaBennett

Anna Bennett (Senior Statutory Auditor) For and on behalf of Haysmacintyre LLP, Statutory Auditors 2020

10 Queen Street Place, London EC4R 1AG

Date: 4th August 2020



Group statement of financial activities including summary income and expenditure account for the year ended 31 March 2020

	Notes	Unrestricted Funds £'000	Restricted Funds £'000	Total 2020 £'000	Total 2019 £'000
INCOME FROM					
Donations and legacies	2	24,658	10,710	35,368	26,826
Other trading activities	3	422	-	422	483
Investments – bank interest		226	-	226	153
Total		25,306	10,710	36,016	27,462
EXPENDITURE ON					
Raising funds	2	10,789	-	10,789	10,226
Charitable activities	5	12,863	6,966	19,829	18,291
Total		23,652	6,966	30,618	28,517
Net income/(expenditure)	4	1,654	3,744	5,398	(1,055)
Transfers between funds	18	-	-	-	-
Net movement in funds		1,654	3,744	5,398	(1,055)
Reconciliation of funds:					
Total funds brought forward		9,091	5,889	14,980	16,035
Total funds carried forward	18	10,745	9,633	20,378	14,980

The comparative figures for each fund are shown in the notes to the accounts.

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

Charity statement of financial activities including summary income and expenditure account for the year ended 31 March 2020

	Unrestricted Funds £'000	Restricted Funds £'000	Total 2020 £'000	Total 2019 £'000
INCOME FROM				
Donations and legacies	24,919	10,710	35,629	27,149
Investments	226	-	226	153
Total	25,145	10,710	35,855	27,302
EXPENDITURE ON				
Raising funds	10,633	-	10,633	10,090
Charitable activities	12,858	6,966	19,824	18,267
Total	23,491	6,966	30,457	28,357
Net income/(expenditure)	1,654	3,744	5,398	(1,055)
Transfers between funds	-	-	-	-
Net movement in funds	1,654	3,744	5,398	(1,055)
Reconciliation of funds:				
Total funds brought forward	9,091	5,889	14,980	16,035
Total funds carried forward	10,745	9,633	20,378	14,980

The comparative figures for each fund are shown in the notes to the accounts.

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above.

Balance sheets as at 31 March 2020

		GROUP		CHARITY	
	N lata a	2020	2019	2020	2019
Fixed assets	Notes	£'000	£'000	£'000	£'000
Intangible assets	10	57	58	57	58
Tangible assets	11	567	385	567	385
Investments	12	-	-	-	-
Total fixed assets		624	443	624	443
Current assets					
Stocks	13	40	63	-	-
Debtors	14	15,862	18,201	16,220	18,616
Short-term deposits		15,517	14,266	15,517	14,266
Cash at bank and in hand		10,728	5,483	10,390	5,096
Total current assets	-	42,147	38,013	42,127	37,978
Liabilities:					
Creditors: Amounts falling due within one year	15	11,577	14,040	11,557	14,005
Net current assets	-	30,570	23,973	30,570	23,973
Total assets less current liabilities		31,194	24,416	31,194	24,416
Creditors: Amounts falling due after more than one year	16	10,816	9,436	10,816	9,436
Net assets	-	20,378	14,980	20,378	14,980
Funds:					
Restricted income funds	18	9,633	5,889	9,633	5,889
Unrestricted funds					
General	18	10,121	8,648	10,121	8,648
Designated	18	624	443	624	443
	-	10,745	9,091	10,745	9,091
Total funds		20,378	14,980	20,378	14,980

Approved and authorised for issue by the Council of Management (Board of Trustees) on 23 July 2020 and signed on its behalf by: Charles Packshaw, Chairman (Company registration number 02653887).

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Group statement of cash flows for the year ended 31 March 2020

		2020)	2019	
	Notes	£'000	£'000	£'000	£'000
Cash flows from operating activities:					
Net cash provided by (used in) operating activities	22		6,650		(780)
Cash flows from investing activities:					
Interest		226		153	
Purchase of fixed assets		(380)	_	(116)	
Net cash provided by (used in) investing activities			(154)		37
Change in cash and cash equivalents in the reporting period		-	6,496	_	(743)
Cash and cash equivalents at the beginning of the reporting period			19,749		20,492
Cash and cash equivalents at the end of the					
reporting period			26,245		19,749
Changes in net debt:					
Cash and cash equivalents at start of year					19,749
Cashflows					6,695
Other non-cash changes					(199)
Cash and cash equivalents at end of year				_	26,245

Notes forming part of the financial statements for the year ended 31 March 2020

I. General information and basis of preparation

- 1.1 Prostate Cancer UK is a charitable company limited by guarantee incorporated in England, Wales and Scotland. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity. The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared under the historical cost convention in accordance with the Financial Reporting Standard Applicable in the UK and Republic of Ireland (FRS102), the Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Charities SORP (FRS102)) and the Charities Act 2011 and the Companies Act 2006. The significant accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented unless otherwise stated.
- 1.2 These financial statements consolidate the results of the charitable company and its whollyowned active subsidiary Prostate Cancer Trading Limited on a line-by-line basis. Transactions and balances between the charitable company and its active subsidiary have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes to the charitable company's balance sheet. The three dormant subsidiaries are not consolidated as their inclusion is not material in order to provide a true and fair view. The financial statements are prepared in sterling which is the functional currency of the group, and rounded to the nearest £000.

Going concern

1.3 The financial statements have been prepared on a going concern basis as the trustees consider that there are no material uncertainties about the group's ability to continue as a going concern. This is on the basis of the charitable company and its active subsidiary having sufficient income and levels of reserves to continue for at least 12 months from the date of authorising these financial statements.

Accounting policies

- 1.4 Income is shown gross.
- 1.5 Donations and legacies are accounted for when the charity has entitlement, the amount can be measured reliably and the receipt is probable. Information that is received after the balance sheet date is adjusted for where the financial effect is material. Legacies in the form of property or investments are included at fair value when recognised.
- 1.6 Registration fees for specific fundraising events received in advance of the event are deferred until the events take place.
- 1.7 Donated goods and services are included at the estimated value to Prostate Cancer UK. These include goods and services provided for use within the charity, with amounts received stated in Note 2. In accordance with Charities SORP (FRS 102), no amounts have been included in these financial statements to reflect the value of services provided free of charge to the charity, by volunteers.
- 1.8 Income tax recoverable in relation to donations received under Gift Aid is recognised at the time of production of the claim and allocated to the appropriate income stream.
- 1.9 Expenditure is recognised in the period in which it is incurred. Expenditure includes attributable VAT, which cannot be recovered.

Notes forming part of the financial statements for the year ended 31 March 2020

- 1.10 Charitable activities include expenditure associated with research, support and influencing and awareness.
- 1.11 Grants awarded are included in the Statement of Financial Activities, when approved by the Trustees and agreed with the recipient organisation.
- 1.12 Expenditure on raising funds relates to the costs of attracting income, and that incurred in trading activities that raise funds.
- 1.13 Expenditure on awareness includes delivering national and local integrated communications campaigns, to raise awareness of the cause and the brand.
- 1.14 Governance costs include the costs of governance arrangements which relate to the general running of the charity, as opposed to the direct management functions inherent in charitable activity and fundraising activities. These include external audit, trustee indemnity insurance and strategic planning processes, that relate to the future development of the charity.
- 1.15 Support costs (including governance costs) are allocated between fundraising and charitable activities, on the basis of a combination of staff numbers and the use of resources within the department for each activity.
- 1.16 Rentals payable under operating leases are charged to the Statement of Financial Activities over the life of the lease, on a straight line basis.
- 1.17 Most employees are members of a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in independently administered funds. Contributions in respect of the scheme are charged against net incoming resources in the year in which they are due.
- 1.18 When employees have rendered service to the charity, short-term employee benefits to which the employees are entitled are recognised at the undiscounted amount expected to be paid in exchange for that service.

- 1.19 Termination benefits, including redundancy costs, are recognised when the charity has an obligation to pay the benefits and they can be measured reliably.
- 1.20 Critical accounting estimates and areas of judgement:

The following judgements (apart from those involving estimates) have been made in the process of applying the above accounting policies that have had the most significant effect on amounts recognised in the financial statements:

- Allocation of support costs
- Depreciation rates for tangible fixed assets
- Useful economic lives of assets
- Legacies
- Basis of valuation for gifts in kind and donated services received
- 1.21 Intangible fixed assets and amortisation:

Expenditure on individual intangible assets (software) with a value greater than £5,000 is capitalised. Software is stated at amortised historical cost. Amortisation is provided on a straight line basis at the following annual rate in order to write off each asset over its estimated useful life:

Software 33%

1.22 Tangible fixed assets and depreciation:

Expenditure on individual tangible assets with a value greater than £5,000 is capitalised. Tangible assets are stated at depreciated historical cost. Depreciation is provided on a straight line basis at the following annual rates in order to write off each asset over its estimated useful life:

Lease improvements	over period of Lease
Computer equipment and website developments	33%
Fixtures and fittings	33%

- 1.23 Stock: Stock consists of purchased goods for resale, which are valued at the lower of cost and net realisable value on a first-in first-out basis. Provision is made for any obsolete or slowmoving items.
- 1.24 Short term deposits: Short term deposits are highly liquid investments and are held at fair value. These include cash on deposit and cash equivalents with a maturity of less than one year.
- 1.25 Financial assets and liabilities: Financial assets and financial liabilities, including debtors and creditors, are recognised when the charity becomes party to the contractual provisions of the instrument. Additionally, all financial assets and liabilities are classified according to the substance of the contractual arrangements entered into. Financial assets and liabilities are initially measured at transaction price (including transaction costs) and are subsequently remeasured where applicable at amortised cost.
- 1.26 The following funds are held by the charity:

Restricted:

These are funds that can only be used for particular restricted purposes. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Unrestricted:

These are funds which can be used in accordance with the charitable objects at the discretion of the Council.

Designated:

These are funds set aside by the Council out of unrestricted funds for specific purposes.

1.27 Grant commitments and other long term liabilities are measured at cost and, in accordance with accounting practice, are discounted where material.

1.28 Financial Instruments

The Group only holds basic Financial Instruments. Financial Instruments are classified and accounted for according to the substance of the contractual arrangement as financial assets or financial liabilities. The financial assets and financial liabilities of the Group are as follows:

- Debtors trade and other debtors (including accrued income) are financial instruments and are debt instruments measured at amortised cost as detailed in note 14.
 Prepayments amounting to £876,101 (2019: £1,012,000) for the Group and Charity are not financial instruments.
- Cash at bank is classified as a basic financial instrument and is measured at face value.
- Liabilities trade creditors, accruals and other creditors are classified as financial instruments, and are measured at amortised cost as detailed in note 15 and 16. Amounts due for taxation and social security are not included in the financial instruments disclosure. Deferred income amounting to £14,348 (2019: Nil) for the Group and Charity is not deemed to be a financial liability, as the cash settlement has already taken place and there is simply an obligation to deliver charitable services rather than cash or another financial instrument.

Notes forming part of the financial statements for the year ended 31 March 2020

2. Income from donations and legacies and expenditure on raising funds

	INCOME 2020		2020	2019
	Unrestricted	Restricted	Total income	Total income
	£'000	£'000	£'000	£'000
Individual donors and legacies	12,413	741	13,154	9,078
Community and events	9,054	51	9,105	9,491
Movember Foundation	-	4,744	4,744	3,566
Major donors and charitable trusts	658	4,947	5,605	2,049
Corporate donors	1,558	227	1,785	1,983
Donated goods and services	615	-	615	250
Other donations	360	-	360	409
	24,658	10,710	35,368	26,826

Restricted Unrestricted

5,129 21,697 26,826

	EXPENDITURE ON RAISING FUNDS		2020	2019
-	Direct	Support	Total costs	Total costs
	£'000	£'000	£'000	£'000
Individual donors and legacies	5,307	750	6,057	6,128
Community and events	2,821	398	3,219	2,733
Major donors and charitable trusts	518	73	591	585
Corporate donors	697	99	796	644
Trading	126	-	126	136
-	9,469	1,320	10,789	10,226

All expenditure on raising funds was unrestricted in both years.

For a breakdown of prior year comparatives see note 24.

3. Net income and assets of activities of trading subsidiary

The charity has a wholly-owned subsidiary incorporated in England and Wales, Prostate Cancer Trading Limited (registered number 06157784), which raises funds through trading activity, marketing and the sale of goods. The company pays its profits under Gift Aid to Prostate Cancer UK under a legal obligation created by a deed of covenant between the two entities. Audited accounts are filed with the Registrar of Companies. A summary of its trading results, which represent unrestricted funds in both years, is as follows:

	2020	2019
	Total £'000	Total £'000
Turnover	422	483
Cost of goods sold	(149)	(149)
Gross profit	273	334
Administrative expenses	(94)	(87)
Interest payable	-	(1)
Net profit	179	246
Income transferred by Gift Aid	(179)	(246)
Retained in subsidiary		-
	0000	0010
		2019
	Total £'000	Total £'000
Total current assets as at 31 March	379	455
Total current liabilities as at 31 March	(379)	(455)
Net assets held as at 31 March		-

Other subsidiaries wholly owned or controlled by Prostate Cancer UK are Prostate Cancer Research Foundation, The Prostate Cancer Charity Limited and Prostate Action, all of which are dormant and have nil net assets.

4. Net income/(expenditure) for the year

This is stated after charging:

	2020	2019
	£'000	£'000
Depreciation and amortisation	199	152
Accountants – advisory services	3	1
Auditor's remuneration – audit services	33	31
Operating lease rentals – property	529	499

5. Charitable activities

			2020	2019
	Direct costs	Support costs	Total costs	Total costs
	£'000	£'000	£'000	£'000
Research	6,112	157	6,269	6,744
Support and influencing	3,822	1,021	4,843	4,529
Awareness	7,400	1,317	8,717	7,018
	17,334	2,495	19,829	18,291
Of which in 2019:				
Restricted				5,391
Unrestricted				12,900
				18,291

Expenditure on charitable activities has increased by £1.5 million from 2019. Expenditure on raising funds has also risen following the second year of a planned investment in growing income, resulting in the proportion of expenditure on charitable activities in year increased from 64p to 65p per £1. This planned investment is aimed at supporting the continued growth in income needed to enable delivery of our strategy to tame prostate cancer.

For a breakdown of prior year comparatives see note 24.

6. Grants awarded

Grant commitments comprise research commitments and programme commitments.

Research grants are awarded to fund Researchers in the keys areas of better treatment and better diagnosis in line with our Research strategy.

	2020	2019	BETTER TREATMENT	BETTER DIAGNOSIS
Research grants were awarded to the following institutions:	Total £'000	Total £'000		
University of Oxford	1,422	-	\checkmark	\checkmark
The Institute of Cancer Research	1,223	2,240	\checkmark	\checkmark
University College London	739	-	\checkmark	\checkmark
University of Strathclyde	553	-	\checkmark	
Imperial College London	405	1,972	\checkmark	
University of Surrey	398	-	\checkmark	
University of East Anglia	352	-		\checkmark
University of Manchester	342	565	\checkmark	
Royal Marsden Hospital	341	-	\checkmark	\checkmark
University of Cambridge	267	-	\checkmark	
Cardiff University	231	-	\checkmark	
University of Ulster	208	-	\checkmark	
Queen's University Belfast	-	685		
University of Birmingham	-	275		
Queen Mary University of London	-	245		
University of Glasgow		242		
_	6,481	6,224		

Research grants awarded in the year were for the following projects:

- Research Innovation Awards: eight awards totalling £2.8 million to fund bold, innovative research that has the real potential to impact the way prostate cancer is diagnosed, treated or even prevented.
- Major Awards in Immunology and Immunotherapy: £1.7 million towards five projects to advance our understanding of prostate cancer immunology and provide the rational framework for new immunotherapies to be developed.
- Major Awards Existing Trials, New Answers: four awards totalling £1.66 million, funded in partnership with Movember. These projects will ask new questions of data or samples already collected as part of other initiatives to address additional important questions.
- In partnership with Cancer Research UK, we have awarded £300,000 to fund the Pan Prostate Cancer Group Initiative, building upon the efforts of the International Cancer Genome Consortium.

6	Grante	awarded	(continued	١
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2020	2019
£'000	£'000
18,611	17,928
6,481	6,224
(947)	(329)
(5,496)	(5,212)
18,649	18,611
2020	2019
£'000	£'000
8,053	9,498
10,596	9,113
18,649	18,611
	£'000 18,611 6,481 (947) (5,496) 18,649 2020 £'000 8,053 10,596

The split of future payment dates is based upon contractual terms.

Programme commitments, included within Support and Influencing, comprise the following:

Funding for TrueNTH, a global initiative, led by the Movember Foundation, tackling critical areas of prostate cancer care. It puts the spotlight on helping men with prostate cancer and their families to overcome a range of prostate cancer side-effects, helping them return to a good quality of life following diagnosis and treatment. No further awards were committed to this programme in the year.

Funding for Life After Prostate Cancer Diagnosis, a three-year programme. This research, funded by the Movember Foundation, aims to find out the impact of prostate cancer on everyday life by asking men and their families. The results will be key to improving the lives of men diagnosed with prostate cancer now and in the future. No further awards were committed to this programme in the year.

Funding to the School of Health and Related Research at Sheffield University for health economics modelling that will determine the potential for the new prostate cancer diagnostic pathway and other testing approaches to enable a UK population-wide screening programme. The outcomes from this work will either shape our influencing activity on screening or direct what research we invest in to achieve a screening programme in the future.

6. Grants awarded (continued)

	2020	2019
Total programme commitments:	Total £'000	Total £'000
TrueNTH	297	383
SchARR screening programme	71	-
Life After Prostate Cancer Diagnosis	4	139
Health & Social Care Professionals (HSCP)	-	28
	372	550
	2020	2019
Reconciliation of programme grants payable:	£'000	£'000
Commitments at 1 April	550	1,294
Commitments made in the year	107	-
Grant adjustments and cancellations	-	(44)
Grants paid during the year	(285)	(700)
Commitments at 31 March	372	550
	2020	2019
Outstanding programme commitments at 31 March 2020 are payable as follows:	Total £'000	Total £'000
Within one year (note 15)	372	550
After more than one year (note 16)	-	-
	372	550

The split of future payment dates is based upon contractual terms.

7. Council of management and employee information

No member of the Council received any remuneration from the charity in either year. Directly incurred expenses are reimbursed, if claimed.

Trustees' expenses represents the payment or reimbursement of travel and subsistence costs or other out of pocket expenses which for the year were £876 for one trustee (2019: Nil) relating to attendance at a Research meeting in their capacity as a primary care expert.

The key management personnel of the charity comprises the members of the Council of Management (Board of Trustees), the Chief Executive and the Executive Directors, as stated on pages 20-21 of the Annual Report. The total employee benefits of the key management personnel of the charity were £585,477 paid to five posts (2018/19: £574,018 paid to five posts). No new interest-free travel loans were provided to key personnel (2018/19: £6,912 to two key personnel). The amounts outstanding at the year end amounted to £Nil (2018/19: £6,999).

The above benefits relate to the Chief Executive and Executive Directors only.

The average full-time equivalent number of persons employed by the group during the year was:

	2020	2019
Fundraising	60	59
Research	8	7
Support and Influencing	51	43
Communications	37	35
Resources, People and Facilities	32	31
Engagement	17	11
	205	186

The average number of employees (head count based on number of staff employed) during the year was as follows:

	2020	2019
Fundraising	63	62
Research	8	7
Support and Influencing	52	46
Communications	38	37
Resources, People and Facilities	34	32
Engagement	17	11
	212	195

7. Council of management and employee information (continued)

Amounts paid in respect of employees were:

	2020	2019
	£'000	£'000
Salaries and wages	7,811	7,139
Social security costs	823	757
Pension costs	838	724
Termination payments	43	26
Total emoluments of employees	9,515	8,646
Agency staff	158	213
Total emoluments	9,673	8,859

The number of employees whose emoluments for the year were over £60,000 was:

	2020	2019
£60,001 to £70,000	6	5
£70,001 to £80,000	2	3
£80,001 to £90,000	3	1
£90,001 to £100,000	-	-
£100,001 to £110,000	1	-
£110,001 to £120,000	-	1

The changes in banding in the above table reflect movements within the senior team during the year, as shown on page 21 as well as changes to salary sacrifice pension contributions for 1 individual.

The charity made pension contributions under a defined contribution scheme amounting to £138,572 (2018/19: £95,629), in respect of the 12 employees in the table above (2018/19: 10).

Trustee indemnity insurance for the year was set at £5 million cover collectively at a cost of £4,445 (2018/19: £3,780).

8. Pension costs

The charity operates a defined contribution pension scheme. The assets of the scheme are held separately from those of the charity in independently administered funds. The pension cost, which represents contributions paid by the charity to these funds, amounted to £837,946 (2018/19: £724,264). The amount payable at the year end was $\pounds75,303$ (2018/19: $\pounds65,015$).

9. Analysis of support costs

The breakdown of support costs and how these are allocated is shown below.

			2020	2019
	Raising funds £'000	Charitable activities £'000	Total costs £'000	Total costs £'000
Staff and similar costs	696	1,317	2,013	1,813
Supplies and services	139	262	401	567
Premises costs	435	822	1,257	1,120
Depreciation	39	73	112	75
Governance costs	11	21	32	39
	1,320	2,495	3,815	3,614

Governance costs comprise:	2020	2019
	Total costs £'000	Total costs £'000
Audit fees	33	32
Legal fees	1	7
	34	39

For a breakdown of prior year comparatives see note 24.

IO. Intangible fixed assets - Group and charity

	Software
Cost	£'000
At 1 April 2019	217
Disposal	(7)
Additions	36
At 31 March 2020	246
Amortisation	
At 1 April 2019	159

	155
Disposal	(5)
Charge for the year	35
At 31 March 2020	189

Net book value

Net book value at 31 March 2019	58
Net book value at 31 March 2020	57

II. Tangible fixed assets - Group and Charity

	Lease improvements	Fixtures and fittings	Computer equipment and website development	Total
Cost	£'000	£'000	£'000	£'000
At 1 April 2019	601	582	1,102	2,285
Disposals	-	-	(1)	(1)
Additions	-	5	339	344
At 31 March 2020	601	587	1,440	2,628
Depreciation				
At 1 April 2019	339	581	980	1,900
Disposals	-	-	(1)	(1)
Charge for the year	62	2	98	162
At 31 March 2019	401	583	1,077	2,061
Net book value				
Net book value at 31 March 2019	262	1	122	385
Net book value at 31 March 2020	200	4	363	567

12. Investments - Charity

The Charity's investment in its active subsidiary undertaking Prostate Cancer Trading Limited (06157784) amounted to £100, being 100 ordinary shares, representing the entire share capital. The Charity also wholly owns the following dormant companies: The Prostate Cancer Charity Limited (08183613), Prostate Cancer Research Foundation (05926197) and Prostate Action (07149009), which are not consolidated in these financial statements.

I3. Stock

	GROUP		CHARITY	
	2020	2019	2020	2019
	£'000	£'000	£'000	£'000
Stock for resale	40	63	-	-

I4. Debtors

	GROUP	GROUP		,
	2020	2019	2020	2019
	£'000	£'000	£'000	£'000
Trade debtors	37	23	37	23
Amounts due from subsidiary undertaking	-	-	359	421
Prepayments	876	1,012	876	1,012
Accrued income	414	1,016	413	1,010
Other debtors	910	1,057	910	1,057
_	2,237	3,108	2,595	3,523
Movember Foundation accrued income	13,625	15,093	13,625	15,093
Total debtors	15,862	18,201	16,220	18,616

The group has been notified of certain legacies which have not been accrued in the financial statements as the recognition criteria in line with the Charities SORP had not been met at the year end.

There are no specific security or repayment terms in respect of the working capital agreement with the subsidiary company.

The donation from the Movember Foundation is confirmed and committed by them each year following the success of that year's fundraising campaign. Funds are then received in line with the programme committed expenditure.

15. Creditors - falling due within one year

	GROUP		CHARITY	
	2020	2019	2020	2019
	£'000	£'000	£'000	£'000
Trade creditors	2,214	2,754	2,203	2,746
Research commitments	8,053	9,498	8,053	9,498
Programme commitments	372	550	372	550
Other taxes and social security	280	240	280	221
Accruals and deferred income	262	583	253	575
Other creditors	396	415	396	415
	11,577	14,040	11,557	14,005

Deferred income relating to fundraising activities taking place after the year end amounted to £14,348 (2018/19: Nil).

Deferred income analysis:	GROUP		CHARITY	,
	2020	2019	2020	2019
-	£'000	£'000	£'000	£'000
Balance at 1 April	-	7	-	7
Amounts released to incoming resources	-	(7)	-	(7)
Amount deferred in the year	14	-	14	-
Balance at 31 March	14	_	14	-

I6. Creditors – falling due after more than one year

	GROUP		CHARITY			
	2020 2019		2020 2019 2020		2020	2019
	£'000	£'000	£'000	£'000		
Research commitments	10,596	9,113	10,596	9,113		
Other creditors	220	323	220	323		
	10,816	9,436	10,816	9,436		

Other creditors consist of the initial rent-free period of the lease at Counting House. This will be released over the next three years and three months, being the remainder of the lease period.

I7. Analysis group net assets between funds

	General funds £'000	Designated £'000	Restricted £'000	Total funds £'000
Fixed assets (note 10 and 11)	-	624	-	624
Current assets	13,493	-	28,654	42,147
Liabilities due within one year	(3,152)	-	(8,425)	(11,577)
Liabilities due after more than one year	(220)	-	(10,596)	(10,816)
Net assets at 31 March 2020	10,121	624	9,633	20,378

For a breakdown of prior year comparatives see note 24.

18. Movement in funds - Group

	As at 01.04.2019	Incoming	Outgoing	Transfers	As at 31.03.2020
	£'000	£'000	£'000	£'000	£'000
Restricted funds:					
Movember Foundation	5,497	4,744	(2,498)	-	7,743
Other restricted funds:					
General research	-	5,121	(3,657)	-	1,464
IT architecture project	256	-	(22)	-	234
Specialist Nurses Service	41	715	(636)	-	120
Other restricted funds	95	130	(153)	-	72
Total other restricted funds	392	5,966	(4,468)	-	1,890
Total restricted funds	5,889	10,710	(6,966)	-	9,633
Unrestricted funds	8,648	25,306	(23,453)	(380)	10,121
Designated funds:					
Fixed asset reserves	443	-	(199)	380	624
Total designated funds	443	-	(199)	380	624
Total unrestricted funds	9,091	25,306	(23,652)	-	10,745
Total funds	14,980	36,016	(30,618)	-	20,378

18. Movement in funds - Group (continued)

The transfers between funds reflect adjustments made as a result of reconciliations during the year to reflect movements in the value of fixed assets.

For a breakdown of prior year comparatives see note 24.

19. Purposes of restricted funds

Movember Foundation	Movember Foundation income from its campaigns, restricted to spend on research and survivorship services for men with prostate cancer.
General research	Funding received to support either specific research awards or to be put towards other unfunded research activity.
IT Architecture Project	Funding received to support the Charity's IT data architecture and website development.
Specialist Nurses Service	Funding for the Specialist Nurses Service to increase access and support for men and their families affected by prostate cancer.

20. Purposes of designated funds

Designated funds – funds set aside from the general fund for objectives stated below:

Fixed asset reserves Amount representing the net investment in fixed assets.

21. Commitments under operating leases

The group has commitments under operating leases due within the periods stated below:

	PROPERTY	(
	2020	2019
	£'000	£'000
Less than one year	609	609
Two to five years	1,369	1,972
Greater than five years	-	-
	1,978	2,581

22. Note to group statement of cash flows

Reconciliation of net income/(expenditure) to net cash inflow from operating activities.

	2020	2019
	£'000	£'000
Net income/(expenditure) for the reporting period (as per the statement of financial activities)	5,398	(1,055)
Adjustments for:		
Dividends and interest	(226)	(153)
Depreciation charges	197	152
Disposal	2	-
Decrease/(increase) in stocks	23	(29)
Decrease/(increase) in debtors	2,339	(867)
(Decrease)/increase in creditors	(1,083)	1,172
Net cash used in operating activities	6,650	(780)

23. Related party transactions

This note lists transactions with other entities in which either Trustees or key management personnel of Prostate Cancer UK or their close family members hold positions of authority.

Related party: University of Surrey

Connected party: Professor Sara Faithfull – a Trustee of Prostate Cancer UK from 1 March 2016 and project lead for the Exercise and Diet project within the TrueNTH programme at the University of Surrey.

Detail of
transactions:Total commitment of £430,782 with an outstanding commitment at 31 March 2019 of £11,304.
which remains outstanding at 31 March 2020

This commitment was made before Professor Faithfull became a trustee of the charity.

Aggregate donations received from trustees, key management personnel and connected parties during the year amounted to £4,735 (2018/19: £2,448).

Event and merchandise purchases by trustees, key management personnel and connected parties amounted to £844 (2018/19: £5,912).

There were no other related party transactions in either year.

24. Comparative note only

Note 2 – Income from donations and legacies and expenditure on raising funds

	INCOME	INCOME		
	Unrestricted £'000	Restricted £'000	Total income £'000	
Individual donors and legacies	9,022	56	9,078	
Community and events	9,488	3	9,491	
Movember Foundation	-	3,566	3,566	
Major donors and charitable trusts	625	1,424	2,049	
Corporate donors	1,903	80	1,983	
Donated goods and services	250	-	250	
Other donations	409	-	409	
	21,697	5,129	26,826	

		EXPENDITURE ON RAISING FUNDS	
	Direct costs £'000	Support costs £'000	Total costs £'000
Individual donors and legacies	5,226	902	6,128
Community and events	2,331	402	2,733
Major donors and charitable trusts	499	86	585
Corporate donors	549	95	644
Trading	136	-	136
	8,741	1,485	10,226

24. Comparative note only (continued)

Note 5 – Charitable activities

			2019
	Direct costs £'000	Support costs £'000	Total costs £'000
Research	6,412	332	6,744
Support and influencing	3,592	937	4,529
Awareness	6,158	860	7,018
	16,162	2,129	18,291

Note 9 – Analysis of support costs

			2019
	Raising funds £'000	Charitable activities £'000	Total costs £'000
Staff and similar costs	745	1,068	1,813
Supplies and services	233	334	567
Premises costs	460	660	1,120
Depreciation	31	44	75
Governance costs	16	23	39
	1,485	2,129	3,614

Note 17 – Analysis of group net assets between funds

	General funds £'000	Designated funds £'000	Restricted funds £'000	Total funds 2019 £'000
Fixed assets (note 10 and 11)	-	443	-	443
Current assets	12,963	-	25,305	38,013
Liabilities due within one year	(3,992)	-	(10,048)	(14,040)
Liabilities due after more than one year	(323)	-	(9,113)	(9,436)
Net assets at 31 March 2019	8,648	443	5,889	14,980

24. Comparative note only (continued)

Note 18 – Movement in funds – Group

	As at 01.04.2018	Incoming	Outgoing	Transfers	As at 31.03.2019
	£'000	£'000	£'000	£'000	£'000
Restricted funds:					
Movember Foundation	5,051	3,566	(2,826)	(294)	5,497
Other restricted funds:					
General research	876	811	(2,049)	362	-
IT architecture project	-	256	-	-	256
Specialist Nurses Service	57	441	(457)	-	41
Other restricted funds	99	55	(59)	-	95
Total other restricted funds	1,032	1,563	(2,565)	362	392
Total restricted funds	6,083	5,129	(5,391)	68	5,889
Unrestricted funds	9,473	22,333	(22,974)	(184)	8,648
Designated funds:					
Fixed asset reserves	479	-	(152)	116	443
Total designated funds	479	-	(152)	116	443
Total unrestricted funds	9,952	22,333	(23,126)	(68)	9,091
Total funds	16,035	27,462	(28,517)	-	14,980

The transfers between funds reflect adjustments made as a result of reconciliations during the year and to reflect movements in the value of fixed assets.

Thank you

All our donors that wish to remain anonymous All our volunteers Alastair Gibbons Angela Milne Angus McCaffery Anonymous Pioneers Astellas **Barry Family Foundation** Bayer **Bill Smail** Brian and Jill Moss Charitable Trust BTG now part of Boston Scientific **Burton Menswear** CAF Grant Fund Cardy Beaver Foundation Caroline Jowett-Ive Cato Stonex **Charles River Group** Chris Field Club Insure David A Pretty, CBE David Lyon David Sullivan Devon and Somerset Fire & Rescue Service Don Robert Duncan Heath easyJet plc EDF Essity UK F. P. Herting & Son plc Fuller Smith & Turner plc **GB** Railfreight Gerry Pack Gordon Gilby Hadyn Cunningham Hugh Orange lain Wilson

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