

annual report 2009/2010

*To have my quality of life
returned would be priceless.
A cure would be the
greatest gift of all.*



2014
TO CURE DIAB
412

TO CURE DIAB

tour down
LUCY PROTOR
BIRMINGHAM JANUARY 2014

our mission

The Juvenile Diabetes Research Foundation's mission has been constant since it was founded in 1970 in the US and 1982 in Australia:

**to find a cure for type 1 diabetes
and its complications through the
support of research.**

Highlights of 2009/10

Delivering progress

- \$9.8 million was invested by JDRF into Australian diabetes research and our mission
- Politicians were engaged in thousands of conversations about type 1 diabetes and research funding at Parliament House and around the country, culminating in a Federal Government commitment of \$5 million for a Type 1 Diabetes Clinical Trial Network
- The Type 1 Diabetes Research Agenda laid out a first-of-its-kind roadmap to a cure with input from Australia's top diabetes researchers
- Nationwide events and campaigns delivered research funds and built partnerships with diverse Australian businesses and the community
- More than 25,000 members of the type 1 diabetes community were connected with research and each other, through JDRF.

Research and community comes together through fundraising

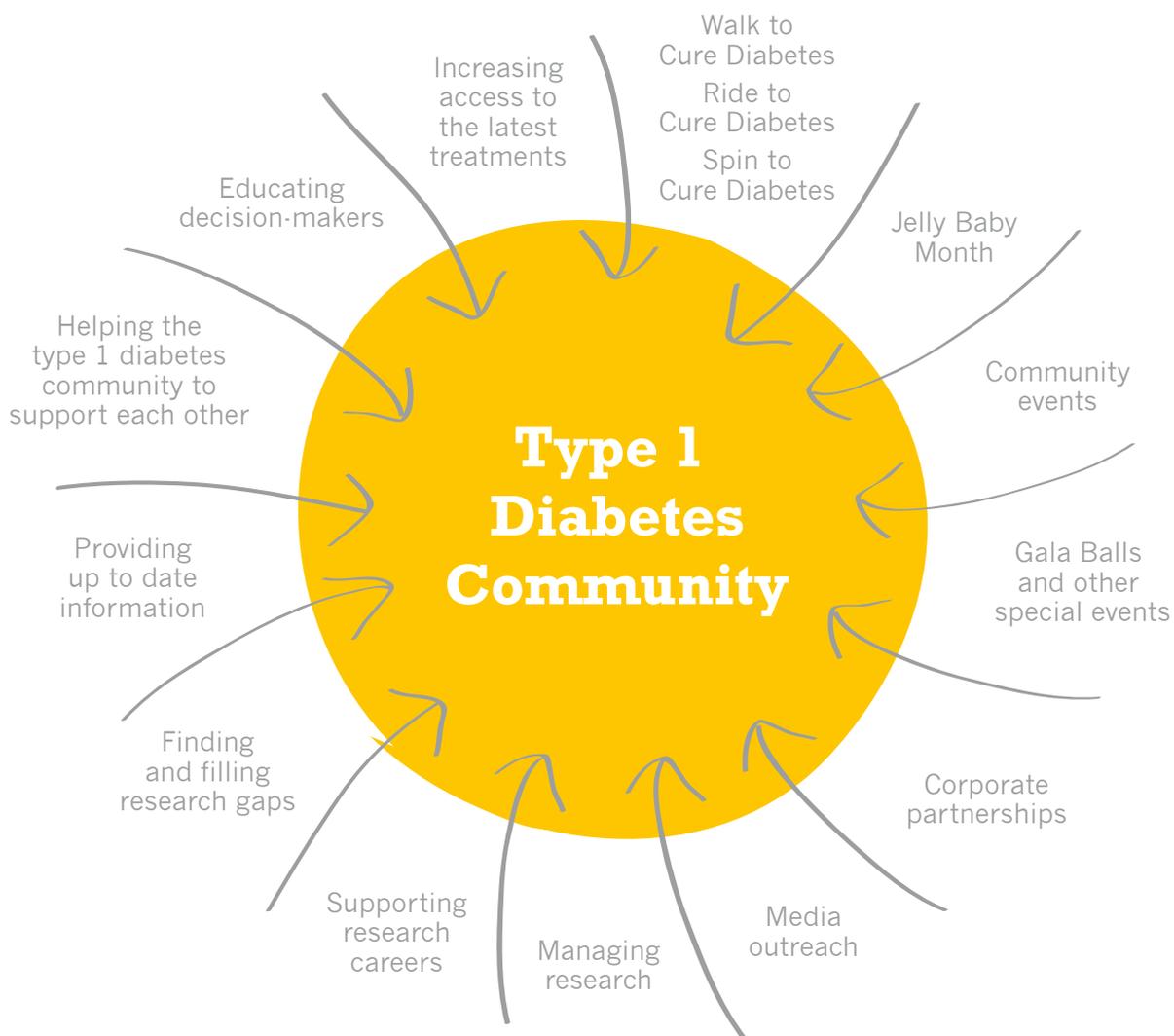
- The Walk to Cure Diabetes brought together 40,000 families, friends and workmates who share the hope for a cure for type 1 diabetes, to raise \$1.9 million
- Three hundred courageous people put up their hands for the challenging Ride to Cure Diabetes and raised more than \$1 million
- Jelly Baby Month in May reached out to people – through supermarkets Woolworths and Safeway, as well as Amcal pharmacies, and a legion of volunteers – to raise over \$1 million
- The Spin to Cure Diabetes helped businesses use spin for good and raised over \$250,000
- Glamorous Gala Balls held in Melbourne, Sydney and Perth, Golf Days and other special events raised over \$1 million
- Generous donors, income from bequests and support from trusts and foundations contributed nearly \$2 million to our mission

\$9.8 million was invested by JDRF into Australian diabetes research and our mission.

JDRF – part of the type 1 diabetes community

JDRF’s mission is to find a cure for type 1 diabetes and its complications through the support of research. While seeking a cure, JDRF is also working tirelessly to develop new and better treatments to improve the lives of people who have type 1 diabetes and to help them stay as healthy as possible.

JDRF brings together researchers, businesses, governments and most importantly, members of the type 1 diabetes community to ensure that scientific breakthroughs become improvements in the lives of people with type 1 diabetes as quickly as possible.



Type 1 diabetes

Type 1 diabetes is a lifelong autoimmune disease that destroys the body's ability to produce insulin, which is vital for life. It is generally diagnosed in childhood but can arise at any age.

The causes of the disease are not fully understood, but scientists believe that a person's genes play a role along with a variety of identified environmental factors. Type 1 diabetes is not caused by an unhealthy day-to-day diet or obesity.

People with type 1 diabetes must take up to six insulin injections or receive a continuous infusion of insulin through a pump every single day, just to stay alive.

**122,300
Australians have
type 1 diabetes.
There are 6 new
cases every
day in Australia.**

Australia has one of the highest rates of type 1 diabetes in the world.

Every day I think about the life of freedom and infinite possibilities that is currently denied to the 122,300 Australians with type 1 diabetes. Only research will deliver that freedom.

President of JDRF Australia, Susan Alberti AO, HonLLD



Chairman's Message

2010 marked a major milestone for the Juvenile Diabetes Research Foundation, the biggest non-government funder of type 1 diabetes in the world: internationally JDRF commemorated 40 years of seeking a cure for type 1 diabetes.

Forty years is a long time. My child is now 31 years old and I recall that when we first received his diagnosis, I had hopes that he would be cured before he reached adulthood. I don't want to skim over it: there is a small part of me that is disappointed that JDRF has not yet been successful in putting itself out of business.

It's no secret that a combination of hope, hard work and imagination is necessary to keep moving forward on the long road to a cure. JDRF's tenacity comes from our vision for a future free of type 1 diabetes, the knowledge that the pace of research change is increasing and that our efforts really are driving progress forward.

I continue to be impressed at the progress achieved by researchers in this country and around the world. To mark their 40th year seeking a cure, JDRF compiled an overview of research progress since our formation. It's available online through www.jdrf.org.au and is well worth a look.

It is incredible to think that just 40 years ago researchers did not know that type 1 diabetes was an autoimmune disease. That might sound a little strange, but without that knowledge a cure for this disease would be nothing short of impossible. That finding was a quantum leap in research and the job of JDRF today is to continue making such important leaps.

Better health, fewer complications, and a mechanical cure possible in just a few years these are things we can confidently state that we have delivered. We know there is much work still to do.

Progress is being made.

Towards vaccines, so that families never again have to face that life-changing diagnosis.

Towards a cure for people who have lived with type 1 diabetes for a long time, to deliver freedom from constant monitoring of BGLs and injections.

Towards the refinement of treatments for the complications of diabetes, so that more people with type 1 diabetes enjoy long healthy lives.

I offer my sincere thanks to all those that help to make research progress possible. This vital group of people includes the JDRF Board of Directors, the Advisory Board and the Lay and Professional Advisory Panels. It also includes state-based Corporate and Family Committees and Chapters who give so generously of their time.

This report attempts to capture the energy and passion invested by families, businesses and employees across Australia in the search for a cure for type 1 diabetes. To all those that offered donations, gifts, corporate sponsorship, your time or pro bono support, thank you.

Finally, I pay tribute to the researchers, scientists and clinicians, working in the field of type 1 diabetes. They are truly exceptional, and with enough funding and resources they hold the key to a cure.

**Steve Higgs,
Chairman**



Message from the CEO

JDRF was founded by people who chose not to accept that there was no cure for type 1 diabetes. Their legacy informs and motivates everything we do.

JDRF acts as a vital interface between medical research and those who can benefit from its progress – all people with type 1 diabetes, both children and adults. We do this by driving progress to a cure, while also pursuing treatments that keep people who have type 1 diabetes as healthy as possible today.

This year JDRF released Australia's first Type 1 Diabetes Research Agenda, drawing on the expertise of over one hundred of the nation's top researchers to chart the path and hasten the pace of progress towards a cure. The Agenda takes a new approach to identifying and defining areas of research promise, and plans for overcoming systemic hurdles and funding obstacles. It reinforces Australia's important global role in diabetes research.

JDRF's dialogue with governments in Australia delivered significant outcomes for the type 1 diabetes community. Two Kids in the House events this year provided JDRF Youth Ambassadors with opportunities to tell their own stories of type 1 diabetes to the most senior decision makers in this country.

In a gesture of solidarity, over 100 Federal MPs and Senators simultaneously pricked their fingers and did a blood sugar reading at Parliament House in Canberra. \$5m of new government funds were committed on the spot towards the establishment of a Type 1 Diabetes Clinical Trial Network (CTN) in Australia, in response to a leadership donation of \$500,000 made by Susan Alberti AO, the President of JDRF Australia.

This Government commitment will enable the initiation of the CTN, which will increase access to the latest technologies and treatments for type 1 diabetes for Australians. JDRF is seeking a further \$35m from the Government to secure the future of this critical investment in human clinical trials, and plans to also raise \$10 million from JDRF donors.

JDRF continues to deliver innovative events and campaigns that generate funds to invest in research, often with the support of partnerships with some of Australia's most successful businesses.

This year, these campaigns and events helped raise \$8.9 million, and with a further \$870,000 contributed by JDRF International, this represents an investment of \$9.8 million by JDRF into diabetes research in Australia in 2009/10.

It is through events and communications that we perform one of our most important tasks, connecting the type 1 diabetes community with research progress and each other. JDRF's e-newsletter now has more than 25,000 subscribers.

It goes without saying that finding a cure for type 1 diabetes is a challenging, complex and lengthy journey, and yet it remains a hopeful one.

To all those who contributed to bringing a cure closer this year – volunteers, donors, government supporters, employees, corporate partners, directors, members of our various advisory, scientific and lay review boards, the academic and commercial science communities, pro bono supporters and suppliers, and most importantly, people with type 1 diabetes – JDRF offers our sincere thanks.

**Mike Wilson,
Chief Executive Officer**

Research in focus

This year, JDRF funded more than \$101 million in type 1 diabetes research globally, including \$9.8 million to support 58 Australian research projects.

JDRF is dedicated to pursuing the most promising paths to cure, better treat, and prevent type 1 diabetes.

By bringing together research, business, governments and members of the type 1 diabetes community, JDRF increases the overall volume and impact of research conducted in Australia.

Australian scientists attract the highest per capita allocation of competitive research investment by JDRF internationally, a direct reflection of the quality of Australian diabetes research.



*Research!
Research! Research!
Please, let's find a
type 1 diabetes cure.*

Valinda, WA

Charting the path to a cure: the Type 1 Diabetes Research Agenda

In 2010 JDRF released Australia's first Type 1 Diabetes Research Agenda, which draws on the expertise of the nation's top researchers to chart a path to a cure.

By imagining and then planning for a future free of type 1 diabetes, JDRF recognises that type 1 diabetes is a whole-body condition that demands a coordinated and inclusive approach to research, incorporating a range of expertise and infrastructure.

The Agenda was developed in close collaboration with over 100 Australian researchers, clinicians, patient representative groups and funding bodies. Leading researchers from a range of research fields contributed their insights and experience, with reviews by a panel of international experts.

The Type 1 Diabetes Research Agenda provides new insights into:

- the current state of type 1 diabetes in Australia
- the widening gap between laboratory research and clinical application
- ways to accelerate and better enable progress
- Australia's most effective contributions to global type 1 diabetes research

The Type 1 Diabetes Research Agenda will help to deliver support for financial, regulatory, structural and intellectual needs. This means that research progress will get to where it is needed most – people living with type 1 diabetes – more quickly.

JDRF recognises that type 1 diabetes is a whole-body condition that demands a coordinated and inclusive approach to research, incorporating a range of expertise and infrastructure.

Research Update

Partnering for the future

Partnerships with industry allow JDRF to accelerate the development of new treatments and technologies and make them available to people with type 1 diabetes as soon as possible. JDRF now has more than 20 industry partnerships worldwide, encompassing research from the laboratory to final stage human clinical trials.

In Australia, JDRF has productive and long-standing partnerships with the Australian Department of Health and Ageing, the National Health and Medical Research Council, the Diabetes Vaccine Development Centre, the Islet Transplantation Program and the Insulin Pump Program.

Clinical trials

Clinical trials are the final stages of research before a new treatment is approved for wider use on people. They test the safety and effectiveness of treatments on volunteer participants. JDRF currently supports more than 40 clinical trials around the world including a number in Australia.

JDRF Australia has initiated the establishment of the Type 1 Diabetes Clinical Trial Network with the goal of increasing access to the latest treatments and trials for people with type 1 diabetes in this country. This initiative was one of the key recommendations of the Type 1 Diabetes Research Agenda.

JDRF currently supports more than 40 clinical trials around the world.

This year, JDRF's global research strategy features a streamlined group of four research pathways. Finding a cure remains the overarching priority.

JDRF's research strategy facilitates the delivery of improved treatments, such as an artificial pancreas that can ease people's daily lives and reduce their risk of complications.

JDRF's strategy recognises the need to keep people with type 1 diabetes healthy enough to fully benefit from the cure when it is found. Also, it gives more scope for the shared goal of preventing the disease in future generations.

Cure. Treat. Prevent.

Research Pathways

Immune Therapies:

to stop the immune system's attack on the body's insulin-producing beta cells that causes type 1 diabetes

Beta Cell Therapies:

to restore the body's ability to make insulin through the regeneration or replacement of insulin-producing cells

Glucose Control:

to improve blood glucose control while avoiding dangerous highs and lows in people at all stages of type 1 diabetes

Complications Therapies:

to prevent and reverse the devastating long-term complications that can accompany diabetes, including diseases of the eyes, nerves, and kidneys

An overview and progress update for each Research Pathway is provided on the following pages.

Research Pathways:

Immune Therapies

Immune Therapies aim to prevent, stop and reverse the autoimmune process that kills off the insulin-producing beta cells and causes the onset of type 1 diabetes.

This therapeutic area addresses the body's complete immune system response as well as the genetic and environmental basis of the disease. JDRF is committed to delivering immune therapies to people at all stages of type 1 diabetes; preventing the onset of the disease in people at risk, delaying the need to take insulin and optimising glucose control in the newly diagnosed and stopping the recurrence of the disease in people with established disease who have undergone therapy to replace beta cell function.

What has been achieved this year?

Researchers manipulate immune system to preserve beta islet cells

A JDRF-funded clinical trial demonstrated that an existing cancer therapy called rituximab can protect beta cells in people newly diagnosed with type 1 diabetes. By specifically targeting and reducing certain immune cells the trial showed that patients using the therapy had significantly slower disease progression, better glucose control, and lower insulin requirements. Further trials are now planned to look at ways of prolonging the action of the treatment to ensure the autoimmune process that causes type 1 diabetes is safely prevented in the long term.

New nanovaccine safely prevents beta cell attack

Canadian researchers developed a unique vaccine to prevent the autoimmune attack on beta cells. Called a nanovaccine because it was created using millions of tiny spheres coated with a special protein, it triggered the production of 'good' immune cells and reduced the numbers of 'bad' immune cells. After testing, researchers found that the nanovaccine prevented diabetes in a pre-diabetic mouse model and restored normal blood glucose levels in diabetic mice.

Gut bacteria is important in type 1 diabetes

It has long been suspected that bacteria, viruses and other micro-organisms play an important role in the development of, or protection against, autoimmune conditions such as type 1 diabetes. An Australian research team has provided further support for this theory by demonstrating that people with certain strains of gut bacteria are less likely to develop autoimmune diseases.

Australian researchers discover molecule involved with beta cell death

A JDRF research team has conclusively identified the role of a molecule suspected of triggering the death of beta cells. Researchers showed that the molecule – called Fas ligand – is present in two different forms. One protects against autoimmunity and the other, in large concentrations, can increase the risk of autoimmune attack.

What does this mean for people with type 1 diabetes?

All of these exciting research breakthroughs have given us a much greater understanding of the process of the development of type 1 diabetes. This understanding is rapidly leading to the development of clinical practices that allow better prediction of people at risk of the condition, the implementation of specialist vaccination or drug regimes to reduce or remove that risk, and the administration of therapies to safely reverse beta cell damage without having unwanted effects on the rest of the immune system.

Research Pathways:

Beta Cell Therapies

Beta Cell Therapies focus on identifying ways to either trigger the body to grow new insulin-producing cells or to directly replace them using cells from outside the body.

Once the autoimmune attack has been turned off, the next step towards a cure for type 1 diabetes is to replace the insulin-producing cells that have been lost – either by making them from the remaining healthy cells in the pancreas (regeneration) or by processing them from different sources in a laboratory and putting them into the body (replacement).

JDRF is funding this entire spectrum of research activities – from identifying the building blocks of pancreas development to creating better surgical techniques for cellular transplantation.

What has been achieved this year?

First islet transplant conducted in South Australia

Margaret Harrigan became the first person to receive an islet transplant at the Queen Elizabeth Hospital in Adelaide. She is now producing her own insulin for the first time in 36 years. This exciting milestone means that all three clinical centres in New South Wales, Victoria, and South Australia involved in the JDRF Islet Transplantation Program (ITP) in Australia now have the expertise and facilities to transplant isolated islets into recipients. Fourteen patients have now benefited from the ITP to date.

Stress hormone linked to beta cell growth

One of the hormones responsible for the body's stress response has been linked to the function and growth of insulin-producing beta cells. When beta cells were exposed to the hormone and to high levels of sugar, they produced and released insulin and began to grow faster.

Beta cells grown from other pancreas cells

JDRF-funded researchers showed that insulin-producing beta cells can be made from other types of pancreas cell by switching on a specific gene called PAX4. Tested on a special strain of mice that are born without beta cells, researchers simply turned on the gene and found the mice were able to produce insulin.

Pancreas cells can spontaneously re-program themselves

Under healthy conditions beta cells can regenerate slowly, but in the case of type 1 diabetes the cells are destroyed faster than they can re-grow. JDRF researchers from Switzerland have now shown that another group of pancreas cells – alpha cells – can spontaneously re-program themselves to take over the role of glucose-responsive insulin production and thereby maintain normal blood glucose levels.

Animal to human transplant techniques now allowed in Australia

In 2009 the Australian National Health and Medical Research Council lifted a five-year ban on the clinical use of xenotransplantation, a medical process involving the transplantation of living cells between species, such as the transplantation of animal tissue into humans to treat disease. JDRF funds a number of projects looking at the possibility of using transplanted pig islet cells to replace the human cells lost during the disease process. With strict guidelines in place, xenotransplantation techniques have the potential to save the lives of thousands of people every year.

What does this mean for people with type 1 diabetes?

The exciting achievements of the past year mean that, for the first time, researchers have conclusively shown it is possible to re-grow functional insulin-producing cells via a number of different pathways. While research is still in early stages, we now know that concentrating on understanding beta cell biology and the growth of beta cells – what is involved, in what proportions and at which times – JDRF researchers will soon be able to move into the practical development of new therapies and clinical protocols to re-establish the self-production of insulin in people with type 1 diabetes.

Research Pathways:

Glucose Control

Research into Glucose Control aims to dramatically improve the short and long term control of blood sugars while avoiding dangerous highs and lows.

Good blood glucose control is important to improving the chances of ongoing good health. The Glucose Control pathway aims to develop approaches for restoring optimal blood glucose control for people at all stages of type 1 diabetes. This includes the development of an artificial pancreas – a closed loop system that continually monitors blood glucose levels and automatically responds with an appropriate dose of insulin – as well as improvements in insulin delivery, glucose monitoring and day-to-day diabetes management regimens.

What has been achieved this year?

Delivering an artificial pancreas in partnership

In early 2010 JDRF announced an innovative partnership with Animas Corporation (a Johnson & Johnson company) and DexCom Inc to facilitate the commercial availability of a first generation artificial pancreas. An industry partnership was also formed with the global medical technology company Becton, Dickinson and Company to develop new products for use in insulin pumps in the short term, and an artificial pancreas in the longer term. The ultimate goal of JDRF is to have multiple versions of an artificial pancreas available and, as such, we will continue to explore other non-exclusive partnerships with other industry leaders.

First generation artificial pancreas a success

A UK-based study of children and teenagers with type 1 diabetes showed that using a first-generation artificial pancreas system overnight lowered the risk of low blood sugar emergencies while sleeping and at the same time improved diabetes control. Another research team in the US showed that adding glucagon as well as insulin to the first generation system resulted in near normal blood glucose levels in the adults participating in the 24 hour study.

Dose Adjustment for Normal Eating (DAFNE) increases quality of life

The Dose Adjustment for Normal Eating (DAFNE) diabetes management program involves training people with type 1 diabetes to use insulin flexibly to achieve both optimal glucose management and dietary freedom. Recent studies from the UK have shown that patients using this diabetes management protocol reported improved blood glucose levels and a significantly higher quality of life when provided with the appropriate health care guidance and support.

Impaired awareness of hypoglycemia more common than previously thought

Australian research has shown that almost a third of children with type 1 diabetes presenting to a Perth diabetes clinic had impaired awareness of low blood sugar episodes, resulting in more frequent and more severe bouts of hypoglycemia. This research highlighted that screening for impaired awareness should be an important component of routine diabetes care and can possibly identify patients at increased risk of a severe hypoglycemic event.

What does this mean for people with type 1 diabetes?

Despite increased knowledge and advanced technology, maintaining tight glucose control is still a challenge for many people with type 1 diabetes. The achievements reported above are a giant step towards the development of a fully automated diabetes management system, but are also an indicator of the continual improvements being made to day to day management. By enabling people with type 1 diabetes to achieve tight blood glucose control, and therefore maintaining or improving overall health and quality of life, those with established type 1 diabetes will have best possible chance to benefit from biological 'cures' as they are discovered in the immune and beta cell therapy areas.

Research Pathways:

Complications Therapies

Complications Therapies aim to free people from diabetes-related complications affecting the eyes, nerves, kidneys and blood vessels, which are devastating to health and wellbeing and create an enormous personal and economic burden.

The past two years have seen dramatic changes in scientific thinking about how the complications of diabetes occur and JDRF researchers have pioneered much of this exciting new research. The advances generated by JDRF research in this area – in particular new technology, earlier diagnosis and improved treatment – have already had a significant effect on the overall health of people with type 1 diabetes. This fact was highlighted by data from the Diabetes Control and Complications Trial showing that health complications are decreasing in people who intensively manage their condition. With the incidence of type 1 diabetes increasing, particularly in children, more work is urgently needed.

What has been achieved this year?

Understanding the genetics of diabetic kidney disease

JDRF-funded scientists have identified a gene that puts people with type 1 diabetes at greater risk of diabetic nephropathy, a severe and devastating form of diabetic kidney disease. Called ELM01, the gene produces important cell function proteins in key kidney cells and, when over-active, appears to result in increased risk of kidney damage. The research was an analysis of data collected as part of the international JDRF-funded GoKinD (Genetics of Kidneys in Diabetes) study.

New treatment for diabetic macular edema

Diabetic macular edema is a common health complication of type 1 diabetes and involves swelling in the centre of the retina resulting in the loss of detailed vision. Results from a recent JDRF-sponsored trial have shown that the addition of ranibizumab therapy to existing laser therapy resulted in a significant vision improvement that allowed trial participants to safely resume activities such as reading and driving.

Australian LANDMark trial identifies early markers of neuropathy

Neuropathy, or nerve damage, is typically measured by taking skin biopsies from the foot and running a series of specialised tests that can take up to a week to complete. In many cases, this debilitating condition is not identified until serious irreparable damage has already been done. Using non-invasive eye tests, the Australian Longitudinal Assessment of Novel Ophthalmic Diabetic Markers (LANDMark Study) have shown that it is possible to quickly and accurately diagnose and assess the severity of diabetic nerve damage elsewhere in the body.

Understanding the role of lipids

While we know that an abnormal lipid profile such as high LDL cholesterol levels increases the risk of cardiovascular disease, research has suggested that abnormal lipid levels may also play a role in the development and progression of diabetes complications. A recent JDRF-funded study showed that a significant number of young people with the early stages of kidney disease also had lipid abnormalities, providing further support for regular and ongoing lipid management and monitoring for all ages.

What does this mean for people with type 1 diabetes?

The ultimate aim of all JDRF complications research is to discover and develop treatments and new diagnostic tools to stop, slow, or reverse the progression of these complications and enable people with diabetes to live longer, healthier lives. Armed with new knowledge, health professionals will soon be able to assess complications risk and pinpoint the best therapeutic and management strategies for the individual, rather than relying on generic management advice.



First islet transplant in South Australia

About ten years ago my condition deteriorated and I could no longer feel an oncoming hypo. I had to rely on constantly testing my blood to gauge if I was having a hypo or not. I lived and worked as a teacher with constant fear. Every minute of the day was dedicated to the thought, "Am I alright?"

The transplant has given me peace of mind and the ability to live life with confidence and without fear of major hypos. Hypo awareness has returned, allowing me to treat a hypo before it occurs.

My islet transplant has been completely life changing for both myself and my family. No longer do I fear leaving the house or driving on the road. I know I can safely look after my grandchildren and do all the normal things grandparents enjoy.

I can confidently teach my class without the thought of a hypo looming over my shoulder. It is the most remarkable and incredible experience to feel really well and wanting to face life's challenges head on.

After receiving the first islet transplant ever conducted in South Australia, Margaret is now producing her own insulin for the first time since being diagnosed with type 1 diabetes at five years of age, 36 years ago.

Margaret's transplant was conducted as part of the JDRF Islet Transplantation Program in Australia, which was established in 2006 as a collaboration between JDRF and the Australian Department of Health and Ageing. It is the first partnership of its kind in Australia.

Australian researchers are pioneers in the field of islet transplantation, spearheading the international effort to move islet transplantation from an experimental procedure to a more widely available clinical option for people with type 1 diabetes.

To date, 14 Australians have benefited from this procedure with many more on waiting lists. To enhance the success of the process, a number of laboratory based projects have also been funded to encourage innovative approaches to the remaining challenges including immune rejection, tolerance and islet cell availability.

Leading research, leading researchers

Australian researchers are key figures in the global effort to find a cure for type 1 diabetes and its complications.

Australia is ranked in the top ten countries in terms of scientific output and impact in this field.

This leadership is reflected by the large allocation of international JDRF funds directed towards Australia, especially across the areas of immune therapies, complication therapies and the replacement of beta cells.

It is great to hear positive news about diabetes research. As a type 1 diabetic for the last 28 years, I have seen a lot of progress in the management of this condition, however there is a dawning of a new era in diabetes management. Thanks JDRF!

Martina, online comment

Immune Therapies

NSW

Prevention of type 1 diabetes by activated protein C

Dr Christopher Jackson,
University of Sydney

QLD

Induction of tolerance in memory diabetogenic T cells

Dr Raymond Steptoe,
The University of Queensland

RelB response as a biomarker of diabetes susceptibility

Prof Ranjeny Thomas,
The University of Queensland

3D Structural Characterization of Human Islet Dysfunction/ Destruction

Dr Brad Marsh,
The University of Queensland

VIC

The microRNA transcriptome of thymic antigen presenting cells

Dr Mark Chong,
Walter Eliza Hall Institute of Medical Research

RAGE as a link between environmental and genetic susceptibility to type 1 diabetes

Dr Josephine Fobes,
Baker IDI Heart and Diabetes Institute

The role of proinsulin specific T cells after the onset of autoimmunity

Dr Balasubramanian Krishnamurthy,
St Vincent's Institute of Medical Research

A preclinical model for human insulin specific CD4+ T-cell responses

Dr Stuart Mannering,
St Vincent's Institute of Medical Research

How does bacterial infection affect susceptibility to type 1 diabetes?

Dr Tom Brodnicki,
St Vincent's Institute of Medical Research

Designing more effective treatment strategies for diabetic kidney disease

Dr Josephine Fobes,
Baker IDI Heart and Diabetes Institute

T-cell specificity and function in type 1 diabetes pathogenesis and prevention

Prof Leonard Harrison,
Walter Eliza Hall Institute of Medical Research

Human T cell responses to proinsulin: specificity and function

Dr Stuart Mannering,
St Vincent's Institute of Medical Research

Dendritic cell phenotype and function in people at risk for type 1 diabetes

Prof Ken Shortman,
Walter Eliza Hall Institute of Medical Research

The role of the human insulin promoter in regulating beta cell autoimmunity

A/Prof Robyn Slattery,
Monash University, VIC

Beta Cell Therapies

NSW

Treg expansion for islet allotransplantation

Dr Jonathan Sprent,
Garvan Institute of Medical Research

Blockade of IL-21/IL-21R interactions in islet transplantation

Dr Cecile King,
Garvan Institute of Medical Research

Glucose Control

WA

Determinants of hypoglycemia risk during and after physical exercise

Prof Tim Jones,
University of Western Australia

Complications Therapies

VIC

Synergistic methods for mitochondrial rescue in diabetic nephropathy

Dr Josephine Fobes,
Baker IDI Heart and Diabetes Institute

ACE2 in the vascular complications of type 1 diabetes

Dr Chris Tikellis,
Baker IDI Heart and Diabetes Institute

Targeting CDA1 to treat diabetic renal fibrosis

Prof Mark Cooper,
Baker IDI Heart and Diabetes Institute

FinnDiane Epigenome of Type 1 Diabetes (Epitype1) Studies

A/Prof Assam El-Osta,
Baker IDI Heart and Diabetes Institute

Suppression and reversal of diabetic complications mediated by hyperglycemia using epigenetic inhibitors

A/Prof Assam El-Osta,
Baker IDI Heart and Diabetes Institute

The contribution of the (pro)renin receptor to diabetic retinopathy

Dr Antonia Miller,
Monash University

Set 7: a novel target for diabetic vascular complications

Prof Mark Cooper,
Baker IDI Heart and Diabetes Institute

Role of epigenetic persistence in diabetic vascular complications

A/Prof Assam El-Osta,
Baker IDI Heart and Diabetes Institute

Vascular NADPH in diabetic atherosclerosis

Dr Terri Allen,
Baker IDI Heart and Diabetes Institute

Modulation of TGF-beta signalling by CDA1 in vasculature

Dr Zhonglin Chai,
Baker IDI Heart and Diabetes Institute

Novel regulators of the renin angiotensin system in the diabetic kidney

Prof Mark Cooper,
Baker IDI Heart and Diabetes Institute

Role of alagebruim in diabetic nephropathy

Prof Mark Cooper,
Baker IDI Heart and Diabetes Institute

Novel approach to inhibit RAGE and protect from diabetic nephropathy

Dr Harshal Nandurkar,
St Vincent's Hospital

JNK signalling: a potential target for treating diabetic nephropathy

Dr Gregory Tesch,
Prince Henry Institute of Medical Research

QLD

A longitudinal study of ophthalmic markers of neuropathy in Type 1 diabetes

Prof Nathan Efron,
Queensland University of Technology

The Australian Islet Transplantation Program

NSW

Clinical Program funding: The Tom Mandel Australian Islet Transplant Program – “The development of a national centre for clinical islet transplantation”

Prof Philip O’Connell,
Westmead Hospital

Generating Islet Graft Tolerance by Targeting Apoptosis and NF-kappaB Activation

Dr Shane Grey,
Garvan Institute of Medical Research

Induction of tolerance to islet allografts by anti-CD3 and CD4+CD25+ cells

Prof Bruce Hall,
University of New South Wales

Increasing HIF1a improves Islet Transplant Outcome

Dr Jenny Gunton,
Garvan Institute of Medical Research

Parasite immunomodulatory molecules prevent rejection of islet transplants

Dr Bronwyn O’Brien,
University of Technology, Sydney

Cytokine-induced ER stress leads to beta-cell dedifferentiation

Dr David (Ross) Laybutt,
Garvan Institute of Medical Research

VIC

Clinical Program funding: The Tom Mandel Australian Islet Transplant Program

Prof Tom Kay,
St Vincent’s Institute of Medical Research

Targeting dendritic cells for local immunosuppression and tolerance

A/Prof Andrew Lew,
Walter Eliza Hall Institute of Medical Research

CD39 Expression prevents auto-immune destruction of beta cells

Dr Karen Dwyer,
The University of Melbourne

Selective suicide of cross-presenting dendritic cells to stop rejection

A/Prof Andrew Lew,
Walter Eliza Hall Institute of Medical Research

Protecting islets from allo- and autoimmune CTLs by overexpressing SOCS1

Dr Kate Graham,
St Vincent’s Institute of Medical Research

Adult human pancreas stem progenitor cells

Prof Leonard Harrison,
Walter Eliza Hall Institute of Medical Research

Human T-cell responses to islet- and allo-antigens after islet transplant

Dr Stuart Mannering,
St Vincent’s Institute of Medical Research

Inhibition of the perforin/granzyme pathway in islet allograft rejection

Dr Zia Mollah,
St Vincent’s Institute of Medical Research

SA

Clinical Program funding: The South Australian & Northern Territory Islet Program

A/Prof Graeme Russ,
The Queen Elizabeth Hospital

Use of ES cells to advance xeno-islet transplantation

A/Prof Mark Nottle,
University of Adelaide

ACT

Antibody enhanced antigen presentation for CD4 cell tolerance of islets

Prof Christopher Goodnow,
Australian National University

WA

Genes that regulate tolerance and beta cell survival in type 1 diabetes

Dr Gerard Hoyne,
The University of Notre Dame

Investigating mechanisms of beta-cell differentiation from islet progenitor

A/Prof Fang-Xu Jiang,
University of Western Australia

NHMRC Grants

NSW

Beta cell mass and function in type 1 diabetes and islet transplantation

Dr Shane Grey,
Garvan Institute of Medical Research

VIC

Cell death pathways and type 1 diabetes

Prof Joseph Trapani,
University of Melbourne

Which transgenic pig will be used for islet transplantation in humans?

Prof Anthony d’Apice,
St Vincent’s Health

Derivation of pancreatic beta cells from embryonic stem cells

Prof Ed Stanley,
Monash University

ACT

Role of heparan sulfate, heparanase and inhibitors in the development and prevention of t1d

Prof Christopher Parish,
Australian National University

Diabetes Vaccine Development Centre

NSW

Use of BAFF blockers to prevent type 1 diabetes in man

Dr Shane Grey,
Garvan Institute of Medical Research

VIC

Type 1 diabetes prevention study (INIT II)

Prof Leonard Harrison,
Walter Eliza Hall Institute of Medical Research

Type 1 Diabetes TrialNet

VIC

Prof Leonard Harrison,
Walter Eliza Hall Institute of Medical Research

Community in focus

JDRF and the type 1 diabetes community

A cure for type 1 diabetes. It is a visionary idea that has motivated scores of passionate people over four decades. The inspiration continues to this day.

JDRF embraces responsibility for connecting the type 1 diabetes community with each other, while also being the source for up-to-date research news.

We deliver and support a variety of services to help the type 1 diabetes community access information and technology that can help to achieve a healthier life.

My son was 22 months old when he was diagnosed, which was nearly 3 years ago. He has now had two hypos so severe that he was unable to see. It is so hard to stay strong for him sometimes, like when he is crying and begging not to have his needles, or when I have to wake him up in the middle of the night to force him to eat because of a hypo, when all he wants to do is go back to sleep.

Please, let's find a cure for type 1 diabetes.

Lynelle, VIC

Reaching out to 1000 newly diagnosed children

KIDSAC (Kids who are Insulin Dependent Searching for A Cure) is much more than a free backpack.

KIDSAC offers support and information for newly diagnosed children and their families in the devastating early days after diagnosis. Containing a special teddy bear who has type 1 diabetes, a storybook, a blood glucose monitor, ketone testing strips, and an information kit for parents, KIDSAC is given out free of charge by JDRF through health professionals across Australia.

Reaching out to 1000 newly diagnosed adults

The t1d kit is a free support pack to meet the distinct needs of adults newly diagnosed with type 1 diabetes. It includes a copy of Straight to the Point, an information book produced by JDRF specifically for adults with type 1 diabetes. It also includes a carbohydrate counter, a blood glucose meter, ketone strips and finger wipes.

Thank you to sanofi-aventis and Roche Accu-Chek for supporting the KIDSAC and t1d programs.

Over 300 adults got Straight to the Point

With advice on almost every aspect of adult life with type 1 diabetes, from travelling with insulin to playing sport to eating (and drinking!) out, Straight to the Point was written by diabetes professionals and members of the type 1 diabetes community. There are over 100,000 adults with type 1 diabetes in Australia, and this book has something in it for every one of them.

Straight to the Point is available with the t1d kit, on its own from Diabetes Educators, or direct from www.jdrf.org.au.

Until you have a loved one diagnosed you can't really have any idea about type 1 diabetes. Let's find a cure for our children to let them once again enjoy their childhood.

Natalie, NSW



Families helping families

By training and connecting volunteers who have personal experience of life with type 1 diabetes, JDRF helps the type 1 diabetes community provide support to each other at a critical time.

The JDRF Peer Support Program is a localised support network that offers help to adjust to a life with type 1 diabetes.

This year, over 70 devoted volunteers provided a helping hand to almost 800 newly diagnosed adults and families, helping also reduce feelings of isolation.

To volunteer with the Peer Support Program, please get in touch with JDRF on **1300 363 126**.

Thank you to all those who have shared their knowledge and compassion through JDRF's support programs.

Sharing the hope for a cure

JDRF Advocates and Youth Ambassadors are members of the type 1 diabetes community who speak from the heart to raise awareness about the disease.

They reach out to corporate partners, policy makers, the media, fundraising organisations, schools and workplaces to increase awareness and support.

There are now around 650 JDRF Youth Ambassadors and Advocates across Australia. Thank you for your time, enthusiasm, and courage.

Increasing access to technology

Improving access to the latest technologies and treatments is an important goal for JDRF.

This year the JDRF Insulin Pump Program helped 36 Australian children to experience insulin pump technology, which can relieve the daily burden of type 1 diabetes management and improve blood glucose control.

JDRF is proud to administer this program to deliver means-tested government subsidies to children of up to 80% of the cost of an insulin pump.

Find out more about the Insulin Pump Program or check your eligibility for the subsidy at www.jdrf.org.au/insulinpumps

JDRF Freedom Grants

JDRF helps to provide a small number of fully funded insulin pumps to children with the greatest need for assistance, with funding generously provided by The Bestest Foundation and Variety WA.

This year, 16 pumps were distributed to children aged between 3 and 18 across Australia. Applications are open for the month of February and must be made through your healthcare professional. Find out more on the JDRF website.

Path to a Cure

JDRF's new monthly email newsletter and interactive online blog, Path to a Cure, now has 25,000 subscribers.

Path to a Cure delivers the latest research news, as well as sharing stories about the many ways that the type 1 diabetes connects with government, business and each other.

Members of the type 1 diabetes community exchange personal perspectives through the JDRF blog, Facebook, Twitter and Linked In.

Health professionals

Health care professionals, including diabetes educators, endocrinologists, GPs and dieticians, stay connected with the type 1 diabetes community through JDRF. Free professional membership is available.

Health professionals and researchers who seek to grow their type 1 diabetes expertise by traveling overseas to attend scientific symposiums and seminars are supported by JDRF with generous help from the Macquarie Group Foundation. This year, JDRF awarded 22 grants for travel to research institutions or conferences outside Australia.

*You are all very courageous
and I hope together we can
work as a community to
better combat this disease.*

Melanie, online comment



A new life for Nathanael

In 2008 we became aware that something wasn't quite right with our little boy Nathanael. Luckily we saw our doctor before any major damage was done.

What came next was a very emotional and difficult journey of readjustment and education for not only our son, but also our family, relatives and friends.

Having type 1 diabetes and a phobia of needles is a disastrous combination. At only 7 years old, Nathanael would move around when we were injecting him. This caused terrible bruising and also created the serious risk of the needle breaking under his skin.

It became clear that an insulin pump was a better option for our son but it seemed out of reach. Unfortunately our situation means that private health insurance is a luxury that is not possible.

It is so important that funding is available for families like us to provide the best possible care for our children.

Please hear our heart; we are grateful for this assistance.

Nathanael received a new insulin pump in April 2010 via the JDRF Insulin Pump Program, with a subsidy provided by the Australian government. Nathanael's levels are currently stabilised and he is a fit and active 8 year old boy.

Government in focus

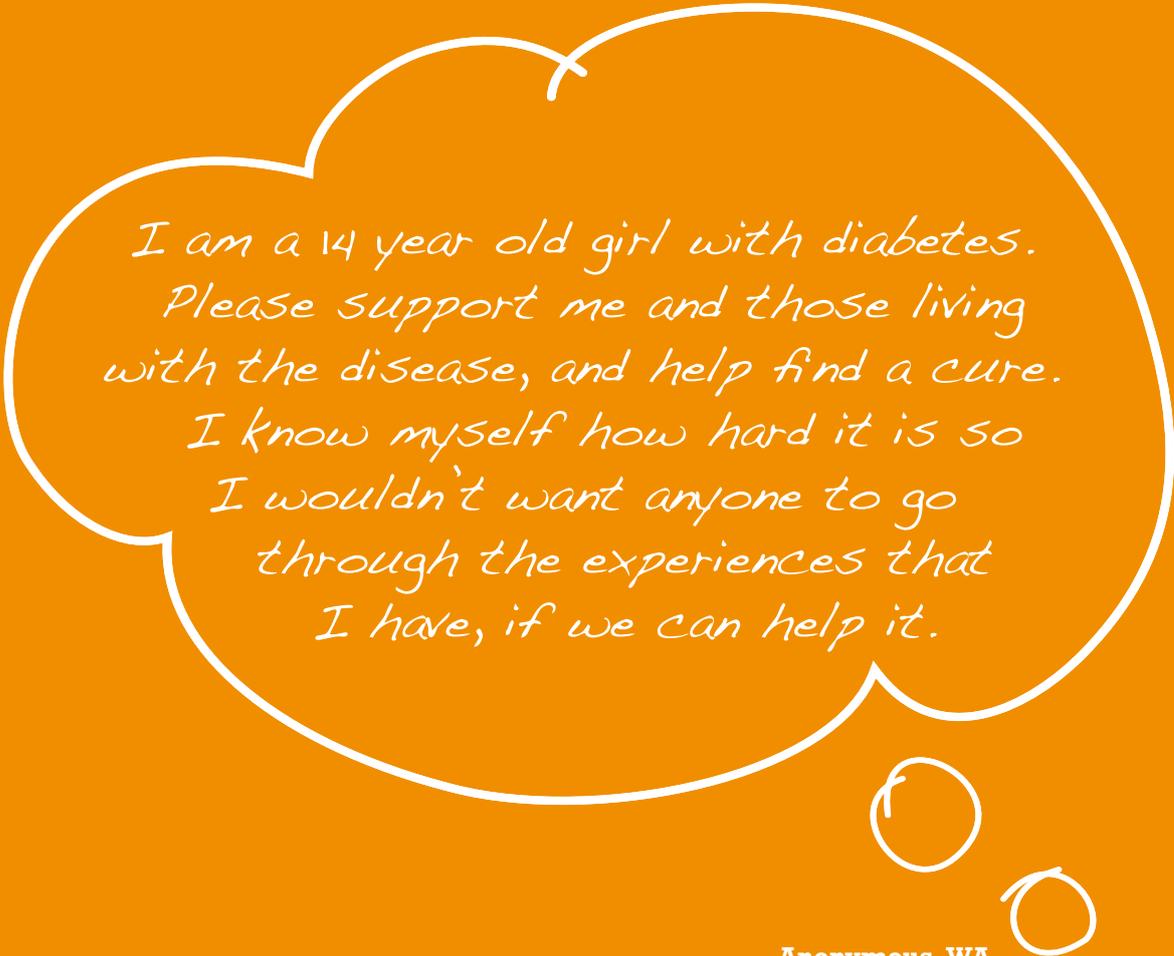
JDRF – a partner with governments across Australia

JDRF has opened up thousands of conversations between the type 1 diabetes community and decision makers at every level of government across Australia, with remarkable results.

By speaking from the heart, passionate advocates are helping decision makers to better understand the hopes and fears of people affected by type 1 diabetes.

Thousands of emails, letters, meetings and events took place this year.

The goal is to increase government awareness of type 1 diabetes and to generate additional support for medical research to find a cure for this disease.



*I am a 14 year old girl with diabetes.
Please support me and those living
with the disease, and help find a cure.
I know myself how hard it is so
I wouldn't want anyone to go
through the experiences that
I have, if we can help it.*

Anonymous, WA

Conversations with government

JDRF works in partnership with governments to help deliver shared goals, including improvements in the health and wellbeing of people with type 1 diabetes that will lead to a healthier population and support for research projects that will help local industry to develop and thrive.

JDRF has invited the type 1 diabetes community to participate in an ongoing conversation with government, and almost 500 people affected by type 1 diabetes, both patients and families, have now signed up to be JDRF Advocates.

This year, thousands of kids and adults with type 1 diabetes from around Australia, alongside their families and friends, worked together to help federal politicians understand the importance of a \$35m government commitment for the Clinical Trial Network (CTN).

The CTN is an important initiative to improve access to new therapies and technologies for Australians with type 1 diabetes.

As part of the conversation with politicians, more than 8,000 emails were sent to the Prime Minister and the Minister for Health asking for their support for a CTN, and nearly 100 newspaper and radio stories about the CTN appeared in media around Australia.

Almost 500 people affected by type 1 diabetes, both patients and families, have now signed up to be JDRF Advocates.

Promise to Remember Me

Promise to Remember Me brings together individuals and families living with type 1 diabetes with their government representatives. Through letters and meetings, JDRF Advocates ask their local members to remember them when making decisions that are relevant to type 1 diabetes.

Hundreds of advocates and politicians were involved in two Promise to Remember Me campaigns this year, in Victoria and at the Federal level, raising awareness of type 1 diabetes and the importance of continued government support of medical research.

Thank you to Medtronic for their generous support of this campaign.

Kids in the House

Kids in the House takes type 1 diabetes to the heart of Governments in Australia. The type 1 diabetes community takes the opportunity provided by JDRF to visit Parliament Houses – state and federal – and help politicians to understand why a cure for type 1 diabetes is important.

Kids in the House Victoria

Kids in the House Victoria took place in July with 42 families from across the state visiting Parliament House in Melbourne, while many more were involved in meeting with their local MP's. The steps of Parliament House was the scene of JDRF's first ever World's Biggest Fingerprick, where politicians and supporters simultaneously pricked their fingers with the type 1 diabetes community in a gesture of solidarity.

Key politicians who joined Kids in the House Victoria included the Minister for Health, Minister for Innovation and the Parliamentary Secretary for Human Services.

Thank you to Medtronic and sanofi-aventis for their generous support of this event.



Federal Kids in the House 2010

By bringing together hundreds of advocates, researchers, sponsors and supporters, JDRF builds personal relationships with Australian parliamentarians from around the country.

110 Youth Ambassadors from every state and territory in Australia traveled to Canberra to share their hope for a cure for type 1 diabetes.

Hundreds of conversations were held with politicians about the need for access to the latest treatments and technologies, the desperate desire amongst the diabetes community to bring research breakthroughs to where they are needed most, people living with type 1 diabetes.

Key politicians who joined Federal Kids in the House included the Prime Minister and Deputy Prime Minister, the Leader and Deputy Leader of the Opposition, 11 Ministers, 10 Parliamentary Secretaries, 14 Shadow Ministers and five Shadow Parliamentary Secretaries. The meetings personally engaged two-thirds of all Federal MPs.

100 MPs and Senators attended a JDRF lunch in the Great Hall, where a World's Biggest Fingerprick again helped politicians to understand clearly just one of the daily challenges of life with type 1 diabetes.

Through the efforts of Kids in the House families and a leadership donation of \$500,000 by JDRF President Sue Alberti AO, JDRF secured a \$5m grant for a Clinical Trial Network from the Federal Government. This shows that when the type 1 community joins together, politicians listen. However, this amount will not guarantee certainty of funding for multi-year clinical trials, so efforts will continue to generate a further \$35m of funding as was originally sought.

Thank you to Medtronic, Abbott Diabetes Care, Roche Accu-Chek, Susan Alberti AO, Rosie and Peter Appleton, Heather and Shane Alexander, and John and Rosanna Hindmarsh for their support of this important event.

Kids in the House families and a leadership donation of \$500,000 by Susan Alberti AO helped JDRF to secure Federal Government funding of \$5 million for a Clinical Trial Network.



Erin's story

Erin shared this story with 100 Federal MPs and Senators at Kids in the House:

It was 28 years ago at the age of 7 that my brother David was diagnosed with type 1 diabetes, and nearly 5 years ago that my daughter Caty received the same life altering diagnosis.

During this time I have seen many advancements in the treatment of this disease. David used to have a blood glucose monitor that was the size of a brick, Caty's is lightweight and no bigger than your iPod. Caty uses an insulin pump, a device that gives her the freedom and flexibility to eat like a normal child, whereas David's diet was much more restricted and regimented.

In my transition from a sister of a person with type 1 diabetes to the mother of someone with the same disease, I realise some things haven't changed that much at all.

I get up every night at 2 am to check Caty's blood glucose level. And even though my mum doesn't need to do this any more, she says she still wakes up automatically at this time most nights.

I lost my brother David 8 years ago when he was just 27. As a young man living alone he suffered a severe hypo on his return from work one day. Before he was able to treat himself with the life-saving handful of lollies, he lost control of his body in a series of spasms that left him thrashing on the floor, frothing and vomiting before he fell into unconsciousness.

A day later my other brother Adam had the shocking task of breaking down David's door to discover that our family's greatest fear had come true.

I am desperately seeking a different ending to Caty's story. I know there is a cure for type 1 diabetes. Please journey with us to find it.

Development in focus

Research and community comes together in Fundraising

There is always an opportunity to have fun while fundraising for JDRF but the focus is serious and the ultimate aim is clear – raising as much as possible to invest in Australian type 1 diabetes research.

It is always a real eye-opener for us to know that thousands of people have joined the Walk to Cure Diabetes to support kids like my daughter Livinia. The atmosphere is simply amazing. Everyone who joins the Walk to Cure Diabetes is there for the same reason, so they are incredibly welcoming.

Joanne, VIC

Walk to Cure Diabetes

Every year, up to 40,000 kids, mums, dads, workmates and friends take the opportunity to share their hope for a cure at JDRF's Walk to Cure Diabetes, one of Australia's largest fundraising events.

With \$1.9 million raised this year and more than \$20 million since the Walk to Cure Diabetes was established in 1994, this event continues to have a substantial impact on Australian type 1 diabetes research, while providing the type 1 diabetes community with a valuable opportunity to come together.

Thank you to JDRF's National Walk Leaders – Boral, Westpac Group, Australia Post and Ford Motor Company.

Ride to Cure Diabetes

A unique team environment prompts many of the hundreds of participants in the Ride to Cure Diabetes to come back year on year to challenge themselves and challenge type 1 diabetes. This year over \$1 million was raised.

JDRF was proud to award the Spirit Award to Sarah Fisher, and the Highest Corporate Team Fundraising Award to Boral, who raised over \$420,000 through their team fundraising.

Thank you to Motorola, Bernie Jones Cycles, event patron Stephen Hodge, Rotary and Kiwanis Clubs of the Barossa Valley and St John's Ambulance for their assistance and support.

Jelly Babies

A large and dedicated band of JDRF volunteers partnered with national supporters Woolworths, Safeway and Amcal pharmacies, to raise a phenomenal \$1 million in merchandise sales this year. JDRF's cheery Jelly Baby symbol helped to raise awareness of a serious message; people with type 1 diabetes are not always able to control their blood glucose, and many suffer life-threatening hypos as a result.

Thank you to national partners Woolworths and Safeway supermarkets and Amcal pharmacies and the hundreds of volunteers across Australia who helped make Jelly Baby month a success.

Special Events

JDRF held a number of glamorous Gala Balls around the country this year, and together with other special events including golf days, over \$1 million for type 1 diabetes research was raised.

Thank you to JDRF President Sue Alberti AO, Frank and Sophia Jackson, and the Macquarie Group for their personal efforts and support of Gala Balls around the country.

Committee members and volunteers are vital to the success of these events. Thank you to those who assisted for your important contribution.

Spin to Cure Diabetes

JDRF's newest national event, the Spin to Cure Diabetes, was held in Sydney, Brisbane, Melbourne, Adelaide and Perth. Hundreds of participants from corporate partners around the country raced on stationary bikes and raised over \$250,000.

Thank you to Goodlife Health Clubs for their provision of spin bikes and support across the country.

Partners

JDRF shares the hope for a cure for type 1 diabetes with some of Australia's most successful companies, who offer expertise and financial support as well as joining the type 1 diabetes community at fundraising events.

The 2010 Freedom Award, which recognises the greatest annual contribution to fundraising programs from a corporate supporter, was jointly awarded to both Macquarie Group and Boral.

Boral

With a partnership that spans more than a decade, Boral has participated in nearly every JDRF fundraising activity to raise an extraordinary figure that exceeds \$2.5 million for type 1 diabetes research over this time. In many cases this fundraising involves family members, customers and suppliers.

City Beach

For the last five years, one of Australia's largest surfing chains City Beach has supported JDRF by selling exclusive fundraising wristbands, and the contribution to Australian research in that period has now exceeded \$800,000.

Thank you City Beach and Carmelo and Joanne Ierna for your support.

IBM Global Services

Since 2002, JDRF's valued partnership with IBM Global Services has provided exceptional technology support on a pro-bono basis, helping our organisation to focus resources in finding a cure for type 1 diabetes.

Macquarie Group and Macquarie Group Foundation

The Type 1 Diabetes Research Agenda is one of the important outcomes of the Diabetes Research Innovation Partnership formed by JDRF and the Macquarie Group Foundation in 2008. The partnership of \$2.2 million over 4 years seeks to increase the volume and impact of type 1 diabetes research in Australia.

In addition Macquarie Group staff are committed participants in fundraising events, and total contributions from Macquarie Group team and matching donations have now exceeded \$1.8 million since 2002. Offices in the US, UK and Canada are also becoming involved with local JDRF events.

Westpac Group

Westpac Group's support for JDRF involves relationships at all levels of the business, from branch managers forming local teams for the Walk to Cure Diabetes around Australia, to JDRF's founding participation in the Organisational Mentoring Program run by Westpac's Group Sustainability and Community Involvement Team.

This diverse support helps JDRF to deliver on the mission to find a cure for type 1 diabetes while also building capacity for JDRF's next generation of research investment.

Woolworths

Each year, Woolworths and Safeway customers across Australia join in the mission to find a cure for type 1 diabetes by supporting Jelly Baby Month. Sales of Jelly Baby Month merchandise have nearly doubled since the inception of this partnership in 2003.

The impact is considerable: Jelly Baby Month raised more than \$1 million to support medical research, and more than half of this came from the partnership with Woolworths and Safeway.



Nikki's Story

Nicki McIntyre is an inspiring woman, so much more than just a powerhouse Jelly Baby volunteer who reached nearly \$4,000 in merchandise sales this year.

I've got a great bunch of friends who help me with Jelly Babies every year. I organize all my friends and then I order the stock. Everyone pitches in.

We have stalls at the shopping centre, sell door to door, at local netball games and soccer games. We see a lot of people we know and everyone has something nice to say about Jelly Babies.

Our town is community-minded but it helps that it's such a good cause. Sometimes people ask me about diabetes and lollies; shouldn't we be selling sugar-free? It's a good opportunity to explain about type 1 diabetes. If you go low, you need sugar, it's as simple as that.

Sometimes we set up a stall outside Woolworths, they're very good with Jelly Babies. People sometimes say to me, 'Sorry I've got no cash, I'll get my Jelly Baby gear in the supermarket'.

That's okay with me. I know we're all working towards the same thing, to find a cure for type 1 diabetes.

A resident of Griffith in regional NSW, Nicki is also the mother of three children. Her 20 year old daughter has type 1 diabetes, as well as coeliac disease, rheumatoid arthritis and a brain injury from a car accident. She lives at home and Nicki loves to have her around.

Photograph from left to right:
Nicki, McAdie, Barry, Shaun
and Andrew in front

Giving with a shared vision

The JDRF community shares a single vision: a future free of type 1 diabetes. The people on these pages make a critical investment toward that future through personal contributions, family foundations or group fundraising.

Thank you for helping JDRF to find a cure for type 1 diabetes.

Research Investors

This special group of people has contributed an annual donation of \$10,000 or more to JDRF Australia. Thank you for your kind support.

Susan Alberti AO HonLLD
Rosie and Peter Appleton
Wendy and Peter Bot
Kathy and Malcolm Clift
Wendy and Ian Coghill
Joanne Crosby & Carey Lyon
Rosemary and Steve Higgs
Rosanna and John Hindmarsh
Annette Londregan
Natasha and Laurence Mandie
Maple-Brown Family
Charitable Foundation
Irene and Lloyd McGuire
Marianne and Peter Nestor
Ralph Norris
Pace Foundation
Celia Waters & David Harvey
Mandy and Ted Yencken
Anonymous (3)

**The JDRF
community shares
a single vision:
a future free of
type 1 diabetes.**

Million Dollar Club

The Million Dollar Club brings together 1,000 like-minded individuals to donate \$1,000 or more each year to JDRF. Together, these dedicated supporters will make a significant impact on the Australian diabetes research landscape by investing \$1 million annually.

Gwennyth and Ron Baker
Robert Barry
Jan Barr
Karen Beck
Vanessa and Tim Bednall
Gavin Bird
Gavin Bray
Jane and Richard Bryden
G Bullen
Martin F Burman
Carrie and Stuart Burhop Keller
Leanne and Phil Chronican
Catherine Chappelle
Grant Chappelle
Wendy and Ian Coghill
Kevin Date
Edward Davis
Betty Dean
Kirsty Douglas
Bruce Duncan
Elke Emerald
Mike Ferraro
David Foster
Robin Graham
Lenore Gresham
Ian Hall
Richard Halliday
David Hardy
Lady Joan and Sir James Hardy
Barry Hill
Rosemary Houseman
Stephen Hoy
Boehringer Ingelheim

Joan and David Keane
Gabrielle Krohn
Sue Kurt
Mario Larocca
Geok Siong Lee
Robert Lloyd
John Loebenstein
Philip Marshall
Leonie and Simon Marks
Kevin McBain
Patricia and Dennis McDermott
Lynda and Peter McIntosh
Marianne and Peter Nestor
Belinda and Richard Noonan
Michael Oosterhof
Lesley and Philip Power
Elizabeth and Tony Rayward
Bernard Ripoll MP
Sheryle and Ian Rogers
Desleigh and Ian Rose
Denise and Tony Smith
Mona Stanley
Mary and Peter Straton
Barbara and Bill Stuart
Jayne and Andrew Tindall
John Torrens
Dr and Mrs John Trollor
Katrina Tull
Heather and Bill Webster
Elspeth and Stephen Westwood
Andrew Wilson
Peter Wright
Anonymous (7)

Danielle Alberti Legacy Society

The Danielle Alberti Legacy Society recognises supporters who have included a gift to JDRF in their Will.

These gifts leave a lasting legacy of investment in type 1 diabetes research in Australia.

Susan Alberti AO HonLLD
Edward Ashton
Kallie Blauhorn
William Bonney
Barbara Brown
Carrie Burhop Keller
Kirrily Chambers
Elaine Chapman
Philip and Leanne Chronican
Wendy and Ian Coghill
Rebecca Davies
Janice Green
Zuhai Kuvan-Mills
Sarah Marshall
Kristen Mason
Paula McDonald
Rory Moore
Gregory Northey
Gina Pash
Rod Pearse
Stan Platis
Elizabeth Rayward
Meaghan Read
Harold Smith
Aileen Smith
Bruce Thomson
Mike Wilson
Anonymous (5)



Rosie's story

Rosie and Peter Appleton's family have been important members of the JDRF community for nearly 15 years.

Our involvement with JDRF began with an all-too-common scenario, when our 7 year old son James was diagnosed type 1 diabetes. It changes everything.

Rosie's original contribution to JDRF involved stuffing envelopes. Over the years it has grown and taken many forms, including one that has appeared on tens of thousands of lapels across the nation.

Helping to design the cheerful little Jelly Baby badge was a very fitting task for someone like Rosie, whose positive nature has benefited JDRF employees and fellow volunteers alike.

I couldn't have done all I have without the help of (my husband) Peter. He's done so much to allow me to be the volunteer that I have been over the years.

I'm never going to be a scientist, so I decided years ago that the best way to help find a cure for type 1 diabetes was to raise money to enable other people to do that important work.

It is incredibly rewarding to know that all these research programs exist because of families like mine that support JDRF in lots of little ways.

The goal of all this effort is a cure - 'of course!'

Volunteers Sharing the Hope for a Cure

JDRF was established by volunteers, a group of parents who could not accept that there was no cure for type 1 diabetes.

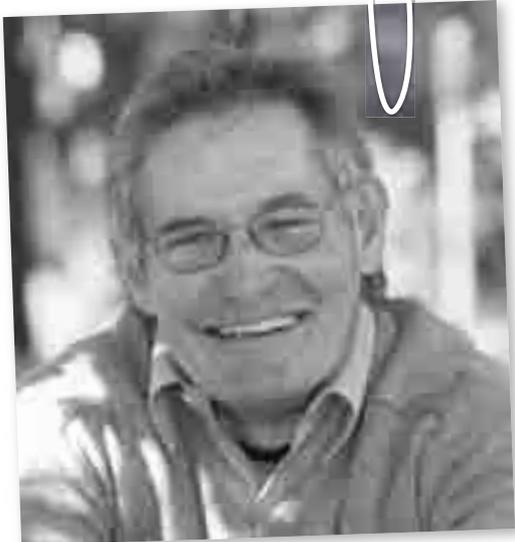
Today a talented, diverse and dedicated group of people partner with JDRF in every aspect of our business, from fundraising to governance to talking with government.

Thank you for making so many things possible.

The JDRF Volunteer Recognition Program recognises the exceptional contributions of volunteers and Youth Ambassadors (YAs).

Recipients	Award	State
Rod Pearse	National Volunteer of the Year	National
Billie Angelone	National YA of the Year	National
Matthew Garberg	YA of the Year	NSW
Natalie Avasalu	Outstanding Contribution	NSW
Julie Herival	Outstanding Impact	NSW
Billie Angelone	YA of the Year	VIC
Petra Frank	Outstanding Contribution	VIC
James King	Outstanding Impact	VIC
Brendan Dillon	Outstanding Impact	VIC
Georgia Hall	YA of the Year	SA
Julie Lycett	Outstanding Contribution	SA
Karen Smith	Outstanding Impact	SA
Kristen Redy-Crofts	YA of the Year	WA
Rina Lewis	Outstanding Contribution	WA
Cathryn Urquhart	Outstanding Impact	WA
Erin Gold	YA of the Year	QLD
Desleigh Rose	Outstanding Contribution	QLD
Carl Buckland	Outstanding Impact	QLD
Cheryl Cartwright	Outstanding Impact	ACT
Andrea Kopatsy	Outstanding Contribution	ACT
Courtney Pitson	YA of the Year	ACT

Today a talented, diverse and dedicated group of people partner with JDRF in every aspect of our business, from fundraising to governance to talking with government.



In Memoriam

Bruce Thomson was born in 1944 and was 11 years old when he was diagnosed with type 1 diabetes. In early years he used a urine test to check his blood sugar and injected insulin using glass syringes with needles that he sharpened himself.

Over the course of his life Bruce dedicated many hours to volunteering for charities including JDRF, Diabetes Australia and the Hepatitis C Council of NSW. He was a beloved frequent visitor to JDRF's Sydney office, a valued supporter and longstanding volunteer at the Walk to Cure Diabetes.

Bruce received a Kellion Award in 2006, which is presented by Diabetes Australia to acknowledge those that have lived with diabetes for 50 years. JDRF was honoured to host the presentation of the award.

In recent years Bruce's need for dialysis made volunteering difficult, but he continued to visit when he could. He remained close to many members of the JDRF team, who described him as a true gentleman, a person who gave to others more than he ever expected in return.

It is with deep sadness that JDRF marks the passing of Bruce Thomson this year.

Bruce once said of volunteering;

*I feel I'm doing something worthwhile.
I have younger friends with type 1 diabetes
and it would make me very happy to see
them benefiting from a cure.*

Advisory Panels

JDRF's advisory panels are unique in their structure, incorporating leading scientific input and a focus on the human relevance of research.

Professional Advisory Panel

JDRF's Professional Advisory Panel is composed of leading scientists from around Australia. Panel members help ensure that JDRF's investment in research is directed towards high quality projects with the greatest scientific potential.

Chair

Prof. Philip O'Connell	Westmead Millennium Institute
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Members

Assoc. Prof. Trevor Biden	Garvan Institute of Medical Research
Dr. Tom Brodnicki	St Vincent's Institute of Medical Research
Dr. Stuart Mannering	St Vincent's Institute of Medical Research
Prof. Bernie Tuch	Prince of Wales Hospital
Prof. Timothy Jones	Princess Margaret Hospital for Children

Lay Review Panel

JDRF's Lay Review Panel is composed of people who have a personal connection to type 1 diabetes. Panel members help ensure that JDRF's investment in research is directed towards projects with the greatest potential to transform the lives of those with type 1 diabetes.

Chair

Rachel Reyna	Has type 1 diabetes
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Members

Michelle Baker	Parent of a daughter with type 1 diabetes
Rebecca Davies	Parent of a daughter with type 1 diabetes
Marilyn Harrington	Parent of a son with type 1 diabetes
Stephen Higgs	Parent of a son with type 1 diabetes
Dianne Kerr	Parent of a daughter with type 1 diabetes
Dr Jan Walker	Parent of a daughter with type 1 diabetes
Rhonda Harrup	Parent of a daughter with type 1 diabetes
Christine Garberg	Parent of a son with type 1 diabetes
Natasha Mandie	Has type 1 diabetes
Tony Blanch	Has type 1 diabetes
Ed Davis	Parent of a son with type 1 diabetes
Dr Gerard Cudmore	Relative with type 1 diabetes

Allied Health and Nursing Professional Advisory Panel

Allied health professionals are part of the diabetes management team and include nurses, dietitians, psychologists, social workers, and podiatrists.

Chair

Dr. Jane Overland	Royal Prince Alfred Hospital
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Members

Ms Deb Foote	Royal Prince Alfred Hospital
Ms Erica Wright	Diabetes Service ACT Community Centre

Advisory Board

JDRF would like to thank the members of the JDRF Advisory Board for their support and involvement throughout the year. The Advisory Board meets to provide JDRF with guidance and advice from Australia's most knowledgeable business people:

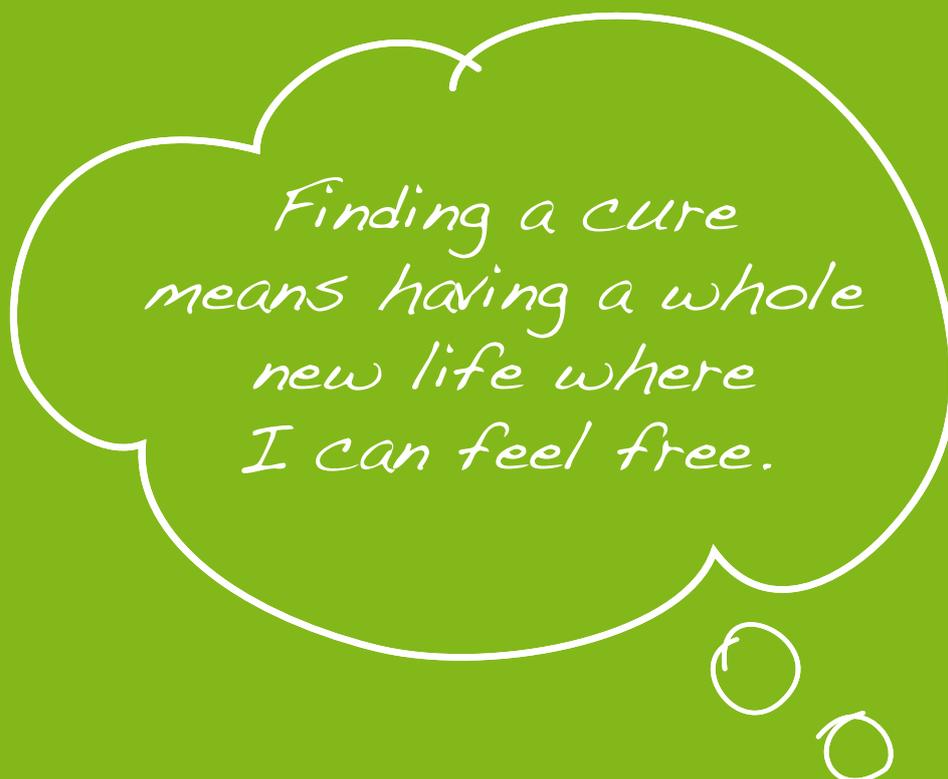
Jane Allen	Managing Partner, Egon Zehnder International
Rob Antulov*	Director, Performance Imperatives Pty Ltd
Chris Corrigan	Director, Consolidated Media Holdings Limited
Rebecca Davies*	Former Partner and Board member, Freehills
Rick Dennis	Managing Partner, Oceania Operations & Finance, Ernst&Young
John Doumani	Managing Director, Fonterra
Richard Goyder	CEO and Managing Director, Wesfarmers
Matthew Grounds	CEO, UBS
Steve Higgs*	Chairman, JDRF
Ralph Norris	CEO and Managing Director, Commonwealth Bank of Australia
Rod Pearse	Former CEO and Managing Director, Boral
Peter Mason AM	Chairman, AMP
Helen McCombie*	Director, Citadel PR
Howard McDonald	Chairman, Myer
Chris Mort	Chairman and CEO, McCann Worldwide
Andy Penn	Group Chief Executive, AXA Asia Pacific Holdings
Bill Wavish	Former Executive Chairman, Myer
Peter Wilson*	Managing Director, Spotless Group
Mike Wilson	CEO, JDRF

** Also a director of JDRF*

Juvenile Diabetes Research Foundation International

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Financial Report – 30 June 2010



Jessica, VIC

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Corporate Governance

The Juvenile Diabetes Research Foundation and its Board are committed to achieving and demonstrating the highest standards of corporate governance, with a framework based on best practice recommendations released by the Australian Security Exchange Corporate Governance Council. A full description of JDRF corporate governance practices is available on the JDRF website. All these practices, unless otherwise stated, were in place for the entire reporting period.

Financial Management

JDRF is a registered charitable organisation. Its principal activities are to raise funds to support research to find a cure for and prevent type 1 diabetes, to raise awareness of the seriousness of diabetes and to offer practical support to people with diabetes and their families. To this end, JDRF's financial activities are geared towards achieving this goal with minimal expenditure on company administration and minimal financial risk.

A Finance and Audit Committee is regularly convened to provide oversight and advice on the financial and compliance activities of the organisation. It is responsible for working with the CEO and the COO on developing and tracking budgets, monitoring forecasts, and reviewing management accounts and statutory accounts. Comprising the following Board and independent members, the committee includes appropriate financial expertise and understanding of the sector.

- Chair – Trevor Allen (Treasurer and Director of JDRF)
- Stephen Higgs (Chair of JDRF)
- Peter Wilson (Vice-Chair of JDRF)
- Allison McMartin (ANZ Institutional Banking)
- Boris Musa (Macquarie Group)

JDRF voluntarily appoints external auditors who clearly demonstrate quality and independence with performance reviewed annually. PricewaterhouseCoopers was appointed as the external auditor in 2002. The external auditor attends the Annual General Meeting and is available to answer member questions.

Risk assessment and management

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

Environment, health and safety

JDRF recognises the importance of environmental and occupational health and safety (OH&S) issues and is committed to the highest levels of performance. Areas of OH&S risk are reviewed and addressed by a Risk Management Committee with input from across the organisation. JDRF has undertaken an environmental audit to determine ways to minimise its impact on the environment including recycling and energy conservation programs.

Code of Conduct

JDRF has a formal a Statement of Values and Code of Conduct which has been fully endorsed by the Board and applies to all directors, employees, volunteers and event participants. It reflects the highest standards of behaviour and professionalism and the practices necessary to maintain confidence in the organisation's integrity. A copy of the Code of Conduct is available on the JDRF website.

Board of Directors

The JDRF Australia Board of Directors operates in accordance with the broad principles set out in its constitution as adopted by the company on 8 April 2000. Details of the officers and members of the Board, their experience, expertise, qualifications and term of office are presented below.

Directors' and Secretary's Qualifications and Special Responsibilities

Experience

President of the Board & International Patron

Dr Susan Alberti, AO HonLLD
 Member, JDRFI Board of Chancellors
 Member, Major Donor Committee JDRF International
 Retired Member, Board of Directors JDRFI
 Retired Chair, JDRFI International Development Committee
Board member since 1988

Managing Director, Dansu Group & associated companies
 Founding member, National Association of Women in Construction in Australia.
 Associate fellow, CEO Institute.
 Chair, St. Vincent's Institute Foundation.
 Chair, Susan Alberti Charitable Foundation.
 Patron and Director, Western Bulldogs Football Club
 Director, Gold Age Pty Ltd
 Director, St Vincent's Institute.
 Director, Victorian University Foundation Board
 Co-Chair, Western Bulldogs Forever Foundation.
 Director, Click Foundation (Epilepsy)
 Member, Australia Day Committee (Victoria).

Chairman

Stephen Higgs, BEc
 Member, Finance & Audit Committee
 Member, JDRFI Lay Review Panel
 Member, NSW Corporate Committee
 Member, JDRF Advisory Board
Board member since 1993

Director, Primary Health Care Ltd.
 Director, Peet and Company Ltd.
 Chairman, Glycemic Index Ltd.
 Past Chairman, Orlando Wines.
 Past Director, Austoft Pty, Jasco Pty Ltd, NPL Ltd, Leigh Mardon Pty Ltd, Rural Press Ltd and UBS Warburg, IPAC Securities Ltd. and So Natural Foods Ltd.
 Father of a son with type 1 diabetes.

Vice-Chair

Rebecca Davies, LLB (Hons) BEc FAICD
 Member, JDRF International Board
 Member, Islet Transplant Program Executive Board
 Adjunct Member, JDRFI Lay Review Panel
 Member, Immune Therapies RPAC
 Member, JDRF (Australia) Lay review panel.
 Editor, Update Magazine.
 Member, JDRF Advisory Board
Board member since 1997

Solicitor and Company Director.
 Former Partner and Board Member, Freehills
 Former Chair, MLC Nominees
 Trustee, NAB/MLC public offer superannuation funds
 Member, Private Health Insurance Administration Council
 Director, LCM Health Care Limited and subsidiaries
 Chair, Gondwana Choirs
 Mother of a daughter with type 1 diabetes.

Vice-Chair

Peter Wilson, Dip. Chem. BEc
 Member, Finance & Audit Committee
 Member, JDRFI Finance Committee
 Member, International Development Committee
 Member, Victorian Corporate Committee
 Member, JDRF Advisory Board
 Member, JDRFI Board of Chancellors
 Retired member, JDRFI Board of Directors
Board member since 2004

Business Consultant
 Former Managing Director and CEO, Spotless Group Limited
 Former Director, Taylors Group Limited
 Father of a daughter with type 1 diabetes.

Treasurer

Trevor Allen, BCom (Hons), CA, FF, MAICD
 Chair, Finance & Audit Committee
Board member since 2008

Partner, KPMG
 Executive Director, KPMG
 Member, Corporate Finance Advisory Group
 Past director, UBS Warburg
 Sister has type 1 diabetes.

Directors' and Secretary's Qualifications and Special Responsibilities

Experience

<p>Company Secretary (not a Director of JDRF) William Bonney, MMgt, FAICD <i>Secretary since 2009</i></p>	<p>Chief Operations Officer, JDRF Australia Fellow of the Australian Institute of Company Directors Director and Company Secretary, Glycemic Index Limited. Director, Stanford Australia Foundation. Past Company Secretary, Centrogen Holdings Ltd. Past Director & Company Secretary, Woomera Systems P/L. Has type 1 diabetes.</p>
<p>Robert Antulov, BE MBA MIEAust, MAICD Member, JDRF Advisory Board <i>Board member since 2005</i></p>	<p>Director, Performance Imperatives Pty Ltd Director, Sydney Film Festival Former Director of Strategy, Fairfax Media Ltd. Father of a son with type 1 diabetes.</p>
<p>Greg Garvan, B IT <i>(Resigned 26 November, 2009)</i></p>	<p>Project Management professional, currently consulting to ING Australia Father of daughter with type 1 diabetes.</p>
<p>Frank Jackson Life-member of JDRF Founding Chapter President, JDRF – WA Founding committee member, Walk to Cure Diabetes – WA <i>Board member since 2001</i></p>	<p>Managing Director, Frank Jackson Holdings Pty Ltd Chairman, The Jackson Family Foundation. Former Director, Broadwater Resort Management Former Council Member, Broadwater Grand Mercure Busselton. Former Managing Director, Broadwater Beach Bar and Restaurant, Busselton Father of a daughter with type 1 diabetes.</p>
<p>Ross Kennan, FIEA, CP Eng, FAICD, C.Chem, MRACI <i>Board member since 2004</i></p>	<p>Former Global SBU Vice-President, Honeywell Inc. Chairman, Neptune Marine Services Ltd Director, Dadanco P/L and Dadanco Inc. (USA).</p>
<p>Natasha Mandie, B Comm (Hons), LLB (Hons), GAICD Member, JDRF Advisory Board <i>Board member since 2009</i></p>	<p>Director, Credit Suisse, Corporate Advisory Solutions. Director, Hindal Group companies Former Managing Director, Hindal Ventures Pty Ltd. Has type 1 diabetes.</p>
<p>Kristen Mason, MBA Chair, NSW Ball Committee <i>Board member since 2005</i></p>	<p>Manager, Travel Partner Networks, JAPA, American Express. Mother of daughter with type 1 diabetes.</p>
<p>Helen McCombie Member, NSW Corporate Committee Member, JDRF Advisory Board <i>Board member since 2004</i></p>	<p>Partner, Citadel PR Former Reporter, Business Sunday.</p>
<p>Timothy Morphy, BA, LLB, MBA <i>Board member since 2005</i></p>	<p>Managing Director, Healthways Australia Pty Ltd Former General Manager Marketing, I-Med Network Former National Head of Marketing, Medibank Private Limited.</p>
<p>Matthew Rady, ACA FFin <i>(Resigned 26 November, 2009)</i></p>	<p>Executive Director, Macquarie Group Former Director, Macquarie Pastoral Management Ltd Former Director, Macquarie Private Portfolio Management Ltd Former Director, Omega Global Investors Pty Ltd.</p>
<p>Michael White, BA, MBA (Appointed 10 June, 2010) Member, JDRFI Board of Directors Member, JDRFI Information Technology Committee Member, JDRFI Adjunct Lay Review Committee Member, JDRFI Research Working Groups Former Member, JDRFI Executive Committee Former Chair, Research JDRFI Former Chair, Research Development Committee JDRFI Past President, Desert Southwest Chapter JDRFI <i>Board member since 2010</i></p>	<p>President and Owner of RBW Companies, Inc. (USA) Father of a son with type 1 diabetes Husband of a wife with type 1 diabetes.</p>

JDRF Australia

JDRF Board of Directors is responsible to the members of JDRF for the performance of the company and seeks to balance objectives in the best interests of the company as a whole.

Day to day management of the company's affairs and the implementation of the corporate strategy and policy initiatives are formally delegated by the Board to the Chief Executive Officer and JDRF Leadership Team.

Leadership Team	Chief Executive Officer	Mike Wilson, BSc, BEc (Hons)
	Chief Operations Officer	William Bonney, MMgt, FAICD
	Head of Development	James Clampett, BEc
	Head of Marketing	Mike Greasley (until Apr 10) Carl Ireland, BBus (Mktg), Grad. Dip. (Mktg) (commenced July 2010)
	Head of Government & Community Relations	Margaret Ryan, BEc (Hons), DipEd, DipMultEd (until September 2010)
	Head of Research Development	Dorota Pawlak, MSc, PhD



Photographs:
Mike Wilson,
William Bonney,
James Clampett,
Carl Ireland,
Dorota Pawlak

JDRF financial reports

The following financial reports present a true and fair view, in all material respects, of the financial condition and operational results of the company and are in accordance with relevant accounting standards.

Statement of Comprehensive Income for the year ended 30 June 2010

	Year to 30 June 2010 \$	Year to 30 June 2009 \$
Revenue from continuing operations – fundraising & other income	8,734,984	9,136,534
Revenue from continuing operations – government grants	4,639,868	9,680,162
Total revenue from continuing operations	13,374,852	18,816,696
Revenue from shares	7,774	10,231
Employee benefits expenses	(2,282,345)	(2,120,486)
Fundraising campaign expenses	(724,210)	(731,453)
Communications & technology expenses*	(126,791)	(116,351)
Advertising, promotion and printing expenses	(143,992)	(160,193)
Other expenses	(1,176,857)	(1,231,684)
Surplus from continuing operations	8,928,431	14,466,760
Research grants and travel awards	(8,367,742)	(13,008,161)
Education and support	(569,651)	(348,184)
Surplus / (deficit) before tax	(8,962)	1,110,415
Income tax expense	–	–
Surplus / (deficit) from continuing operations	(8,962)	1,110,415
Other comprehensive income		
Other comprehensive income / (expense) for the period, net of tax	–	–
Total comprehensive income / (expense) for period	(8,962)	1,110,415

*2010 – \$24,500 in-kind technology support (2009 – \$34,500)

Statement of Financial Position as at 30 June 2010

Assets	As at 30 June 2010 \$	As at 30 June 2009 \$
Current assets		
Cash and cash equivalents	11,641,078	12,666,784
Share portfolio*	-	297,533
Trade and other receivables	693,870	610,536
Inventories	109,725	102,345
Total current assets	12,444,673	13,677,198
Non-current assets		
Plant and equipment	35,369	70,212
Intangibles	27,727	48,888
Total non-current assets	63,096	119,100
Total assets	12,507,769	13,796,298
Liabilities		
Current liabilities		
Trade and other payables	6,851,330	1,757,073
Research grants payable	1,325,869	7,711,737
Provision for Long Service Leave	18,393	
Total current liabilities	8,195,592	9,468,810
Non-current liabilities		
Provision for Long Service Leave	52,700	59,049
Total non-current liabilities	52,700	59,049
Total liabilities	8,248,292	9,527,859
Net assets	4,259,477	4,268,439
Equity		
Retained surplus	4,259,477	4,268,439
Total equity	4,259,477	4,268,439

* A portfolio of shares was left to the company in a bequest and liquidated in July 2009.

Statement of Changes in Equity

	Year to 30 June 2010 \$	Year to 30 June 2009 \$
Total equity at the beginning of the financial year	4,268,439	3,158,024
Net surplus/(deficit) attributable to members of the company	(8,962)	1,110,415
Total equity at the end of the financial year	4,259,477	4,268,439

Statement of Cash Flows

	Year to 30 June 2010 \$	Year to 30 June 2009 \$
Cash flows from operating activities		
Fundraising income	8,515,534	8,902,160
Government grants	9,981,000	9,680,162
Interest received	176,044	234,374
Payments for operating activities	(4,108,887)	(3,506,401)
Grants and travel awards paid	(15,544,736)	(13,653,104)
Net cash inflow from operating activities	(978,045)	1,657,191
Cash flows from investing activities		
Payments for plant, equipment & software	(47,661)	(19,786)
Net cash (outflow) from investing activities	(47,661)	(19,786)
Net increase in cash and cash equivalents	(1,025,706)	1,637,405
Cash and cash equivalents at the beginning of the financial year	12,666,784	11,029,379
Cash and cash equivalents at the end of the financial year	11,641,078	12,666,784

Directory of JDRF offices

New South Wales

Level 4, 80 Chandos Street
St Leonards NSW 2065
Tel: 02 9966 0400
Fax: 02 9966 0172
nsw@jdrf.org.au

Queensland

Level 5, Wickham House
155-157 Wickham Terrace
Spring Hill QLD 4000
Tel: 07 3831 0544
Fax: 07 3236 9634
qld@jdrf.org.au

Victoria

Suite 1, Level 1,
222 Kings Way
South Melbourne VIC 3205
Tel: 03 9696 3866
Fax: 03 9696 7659
vic@jdrf.org.au

Australian Capital Territory

16 Thesiger Court
Deakin ACT 2600
Tel: 02 6249 8555
Fax: 02 6162 0390
act@jdrf.org.au

South Australia

458 Fullarton Road
Myrtle Bank SA 5064
Tel: 08 8338 3677
Fax: 08 8338 6017
sa@jdrf.org.au

Western Australia

Unit 3, 181 Main Street
Osborne Park WA 6017
Tel: 08 9207 1278
Fax: 08 9207 1298
wa@jdrf.org.au

www.jdrf.org.au

ABN 40 002 286 553



*Research provides hope
and each year, JDRF gets closer
to bringing that hope to life
and finding a cure for
type 1 diabetes.*