



National Foundation for Medical Research and Innovation



2017

ANNUAL REPORT

About Us

Founded in 1977, the National Foundation for Medical Research and Innovation (NFMRI) is a not-for-profit organisation that is entirely independent. It is not affiliated with any university, hospital, government or state body. The Foundation provides financial and in-kind skill-based support to research projects whilst conserving and building its capital base.

The Foundation is classified as a health promotion charity and is endorsed as a Tax Concession Charity (TCC) with Deductible Gift Recipient Item 1(DGR 1) status.

Our Mission

“To advance innovations in medical research related to the nature, prevention, diagnosis, treatment and incidence of disease and other health problems that have a significant impact on the health of humans”

Our Vision

NFMRI believes that more than ‘mere’ funding is needed to advance discoveries and innovations. Our culture is one where we look to make a social investment in medical research. By partnering with researchers to provide support and knowledge, and facilitating connections with industry, we aim to maximise the social returns from our grants. The Foundation is looking to become a partner of choice with both researchers and funders of research, and a national ambassador for medical research innovation.

Our vision is to be recognised as the leading Foundation, efficiently and effectively supporting biomedical research, advancing innovations and creating impact.

Our Approach

NFMRI takes a uniquely proactive approach by partnering with grant recipients to provide support along the innovation pathway. It is a prerequisite that we only fund research of the highest quality. When reviewing applications and research projects, NFMRI looks for more than good science. We also assess the ability and willingness of the researcher and the institution to collaborate, plan and manage research along the innovation pathway. Most importantly, we analyse the potential commercial and social success of the innovation.

NFMRI also considers the need and size of any potential impact, the potential for the research and innovation to make a significant difference and whether the opportunity may become attractive to a potential partner who can make a product accessible to the community. To do this, we harness skill sets from a variety of scientific, clinical, business development, commercial, industry and financial sources.

The Foundation is looking to increase its impact by partnering with other trusts and foundations, Private and Public Ancillary Funds (PAFs and PuAFs) and corporate donors. We are always grateful for the donations and bequests that we receive.

nfmri.org.au

Message from our Chairman



It was in 2014 when our Board made a strategic decision to allocate the Foundation's support towards better addressing an unmet sector need: support for collaboration and the advancement of innovations. We understood that other groups such as the NHMRC, ARC and large research Foundations were providing large investments in the sector, but as research advanced many innovations faced an impending 'valley of death' where traditional funding and support was insufficient or not available to help these innovations translate towards the delivery of community benefits. To capitalise on these major investments, NFMRI's support would help advance and accelerate translational research so they could reach the ultimate recipients who need them most.

To implement the strategy, NFMRI focused on a vision of being recognised as a leader in the area of supporting the translation of research across the 'valley of death', irrespective of disease or innovation. In recent years we have built scalable systems, and a unique capability and capacity that has resulted in a growing number of case studies demonstrating impact and supporting NFMRI's approach. Over the course of the years, we had come across many inspiring charities, donors and groups who were exceptional at galvanising community support, fundraising and had a common interest of helping the benefits from research reach those in need. Our strategy focuses on good giving and is being scaled by building funding partnerships with other leading donors, charities and organisations who are aligned with our mission and strategy. This way, we are combining our skills and expertise to be more effective in our giving and together achieving greater change and impact.

This unusual pathway is already proving highly successful, with a number of existing robust partnerships and other exciting ones in the pipeline. In particular, I wish to acknowledge and thank the NSW Department of Primary Industries, with whom we've had a growing partnership and The Mason Foundation, NSW Community Fund and the Nicholas & Phyllis Pinter Trust (managed by Equity Trustees) for working with us to support research into Alzheimer's disease and cancer.

It's pleasing to report that since the Foundation's establishment in 1977, nearly \$16 million in grants has been distributed to support innovative research projects covering various diseases and conditions throughout the country. This funding, and our work, has been made possible thanks to our generous benefactors, supporters and partners, including individuals and organisations who generously contribute their time and expertise. We are grateful for our stakeholders' support and are confident both our donors and partners will be pleased with the high-quality research projects their gifts and assistance have enabled.

This year marked the Foundation's 40th Anniversary and to help celebrate this milestone, a celebratory dinner was held in conjunction with our annual conference at the Australian National Maritime Museum in Sydney. Showcasing our history, our past and current achievements as well as our future ambitions, the dinner attracted a large audience consisting of key stakeholders which included donors, partners, collaborators, current and past grant recipients, as well as many other individuals who have contributed in some way to the achievements of our Foundation. We are particularly grateful for Mr Mark Carnegie's support in delivering an opening address and for Dr Dave Kennedy, who was a fantastic master of ceremonies.

Continuing on from the important conversation at our second conference in Queensland in 2016, the Foundation held its third conference in Sydney in November 2017. Thanks to generous support from the NSW Department of Primary Industries and numerous speakers who generously gave their time and shared their insights, the third conference was another great success. With a focus on enabling smaller players to have greater impact and better engage with the larger players, the program

particularly examined the role each of us plays in improving Australia's capacity and capability of delivering results and improving its ability to catalyse success. Thank you to the delegates (many of whom were from interstate) for travelling and joining us in Sydney. Going forward, the conference will be held every two years. Planning is underway for the fourth conference in Melbourne in 2019.

Our corpus continues to grow steadily thanks to sound management from our team, as well as guidance from BT Financial and in particular, Mr Scott Glover. We also wish to thank Mr Andrew Hoffman and Mr Mark Boyle for their terrific work with this year's annual audit of our Foundation.

I would especially like to acknowledge our team's efforts and achievements over the past year. Dr Noel Chambers and Mrs Nancy Ranner continue to excel with the delivery of the Foundation's strategy. We also thank and farewell Mrs Vanessa Chase and Mrs Heather Hopkins who provided financial and administrative support to the Foundation during 2017. We would also like to welcome Ms Tara Clouten who joined the team during 2017 to provide ongoing support and administration of the Foundation's financial activities.

Likewise, I wish to thank my colleagues and fellow Directors for the dedication and passion they have brought to the organisation. Their leadership, vision and guidance have been, and will continue to be, instrumental to the work and successes of our Foundation. During the year, we farewelled Dr John Graham OAM, Dr Vivienne Cowlshaw-Shortell and Ms Jane Schwager AO all of whom had been directors of the Foundation for many years and provided outstanding contribution and support. All three have retired as active Directors and are now recognised Emeritus Trustees of the Foundation. We also had the pleasure of welcoming to our Board Dr Rob Sauer and Professor Ian Smith. Both individuals have an exceptional acumen, expertise and track record in their fields and will bring new and relevant skill sets to the Foundation.

Our Board is appreciative of the continued support and advice from our expert Research Advisory Committee (RAC). After numerous years of dedication and support, Dr John Dixon Hughes OAM resigned as Chairman of the RAC in March 2018. Dr Dixon Hughes will remain a member of the RAC and Board. We were pleased to appoint Prof Ian Smith as incoming Chair of the RAC from March 2018. We also welcomed Dr Andrew Cottrill to our RAC in late 2017 and farewelled Prof Stan McCarthy AO in March 2018.

Furthermore, we are grateful to have received advice from Dr Dave Kennedy, Mr Chris Wootton, Dr Branwen Morgan and Ms Natalie Moss over the course of 2017. Their support with our Fundraising and Engagement Support Committee helped with the delivery of our 40th anniversary dinner celebration.

I hope you enjoy reading about our recent impact and I look forward to sharing with you some of our exciting partnership announcements in 2018.

A handwritten signature in dark ink, appearing to read 'John Harkness', with a long, sweeping horizontal line extending to the right.

John Harkness
Chairman

Message from our CEO



Over the course of 2017, it's been exciting to see the increasing number of case studies emerging from research projects supported by NFMRI. These examples include; a \$7million investment by the MCRF into A/Prof Flynn's fibrosis research, the development of a collaboration with industry and commencement of clinical trials for Prof Michael Good AO's Streptococcus A vaccine and A/Prof Lenka Munoz's brain cancer innovation being licenced to an industry partner. A growing list of case studies can be found on our website highlighting impact and how our support is making a difference.

The breadth and depth of our strategy enables us to partner with likeminded foundations, donors, organisations and others to provide joint support across a multitude of technologies (vaccines, devices, therapeutics, tools, drugs etc) and diseases and conditions.

With demonstrable success, our funding partnership model is also growing. Together with the NSW Department of Primary Industries we have supported Prof Stephen Haswell's research into the development of a lab-on-a-chip device for infectious diseases and a Zika virus vaccine project led by Prof Eric Gowans. We are also supporting a lung cancer project led by Dr Joanna Woodcock thanks to generous support from the NSW Community Foundation and the Nicholas and Phyllis Pinter Trust, both managed by Equity Trustees. Later in 2018, we will be announcing some innovative new projects in Alzheimer's disease funded via our partnership with The Mason Foundation, which is also managed by Equity Trustees.

Importantly, NFMRI continues to deliver workshops and presentations at universities, medical research institutes, sector events and conferences to help grow awareness, inform researchers and assist them to submit high quality, strategically-aligned proposals. Our annual grant round led to the identification of a significant number of high quality biomedical research projects and the announcement of five new research grants commencing in 2018. NFMRI also presented the inaugural Dr John Raftos AM Medal, which was awarded to A/Prof Wendy Cooper for her achievements in personalised medicine in lung cancer at our Foundation's 40th Anniversary Dinner.

With an increasing number of partnerships, we have continued in developing our bespoke technological platforms and systems to enable us to further increase operational efficiencies and capabilities. Our automated platforms for grant submissions and databases enable us to increase our impact whilst maintaining existing resources.

I would like to thank our Research Advisory Committee (RAC) who contribute an enormous amount of time in reviewing expressions of interest, applications, reports and acquittals throughout the year. The composition of our RAC is unique as it includes clinicians, academics, translation and commercial science experts. Each member has a different background and set of skills that helps provide a multi-lens approach in our reviews. I also wish to thank our mentors and supporters, whose pro-bono support in IP, research translation, marketing, commercialisation, media and access to networks helps to ensure researchers and their innovations have the maximum ability of achieving the desired outcomes.

Being disease agnostic and impact-driven makes NFMRI an ideal partner of choice. We are actively looking to assist and partner with reputable charities, organisations and individuals with a desire to improve health outcomes of the community through biomedical innovations. The nature of our Foundation means we are able to work within the boundaries established by our partners, be they jurisdiction, technology or disease-focused. Every single dollar put on the table by our partners is directed towards the strategically-focussed medical research projects.

Whether you are an organisation or individual interested in a partnership or if you simply want to learn more about our Foundation and explore how we may be able to help you, I look forward to hearing from you.

A handwritten signature in blue ink, appearing to read 'Noel Chambers', with a stylized flourish at the end.

Dr Noel Chambers,
Chief Executive Officer

Our Legacy

The Foundation was established in 1977 on the initiative of the late Dr Frank Ritchie who had a number of patients wishing to donate to medical research and for the capital to be preserved intact. Fundraising activities were conducted under the auspices of the initial Chairman of the Board of the Foundation, Sir Peter Abeles, and Lady Sonia McMahon.

A patient of Dr Frank Ritchie bequeathed a substantial sum, the Stern Estate, to be divided equally between Sydney Hospital and the Foundation. The Foundation was to maintain the capital and use income to fund and facilitate ongoing medical research in perpetuity. Over the years, by way of further bequests and donations, the Foundation has built up significant capital reserves to provide income to facilitate continuing important medical research. The funds of the Foundation and the management of those funds have always been totally independent of the hospital, as has been its management structure.

In January 2014, following an extensive review of the sector, the Foundation updated its mission and changed its name from the Sydney Foundation for Medical Research to the National Foundation for Medical Research and Innovation.

Emeritus Trustees

We would like to thank Mr Peter Bowen, Dr Vivienne Cowlshaw-Shortell, Ms Jane Schwager AO and Dr John Graham OAM for their continued support and assistance to the Foundation as Emeritus Trustees.

Past Trustees and Major Benefactors

Our Foundation owes its legacy to the following Trustees who have served as part of its Board and to those who contributed to the Foundation so generously. Without their vision, foresight and commitment to the Foundation, it would not be where it is today.

1979-1982	Sir Peter Abeles (Founding Chairman)	1984-1990	Sir Gordon Jackson
1979-1983	Mr ED Cameron	1984-1991	Mr TL Lewis
1979-1983	Mr JP Ducker AO	1984-1987	Mr JW MacBean
1979-1983	Mr MJ Inglis	1984-1985	Sir William W Pettingell
1979-1982	Lady Sonia McMahon	1987-2003	Mrs SE Ball
1979-1990	Mr TE May (Former Chairman)	1987-1999	Mr RH Minter (Chairman)
1977-1982	Dr FL Ritchie C.B.E.	1987-2017	Dr V Cowlshaw Shortell
1977-1995	Mr BF Rose	1995-2011	Mr PM Bowen
1979-1982	Dr HH Spiegel	2000-2003	Prof AJ Young AO
1979-1982	Sir Ian Turbott C.M.G, C.V.O	2002-2017	Dr J Graham OAM
1982-2007	Dr J Raftos AM	2006-2017	Ms J Schwager AO

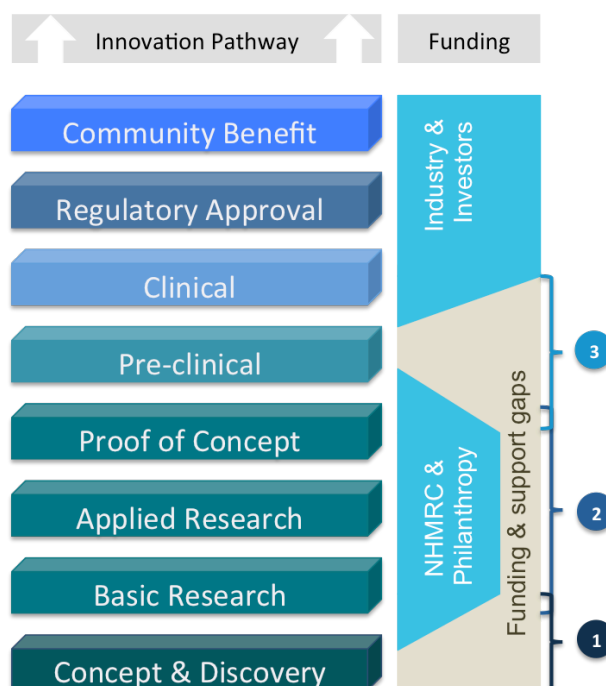
The Stern Estate
Josephine White and Hiltbrunner Fund
Estate Late Celia Margaret Paine
Estate Late Daqmar Wilhemine Halas
Estate Late Blanche Elizabeth Turnet
Estate Late Mary Althouse
The Mason Foundation (managed by Equity Trustees)
NSW Community Foundation – Nicholas and Phyllis
Pinter Trust (managed by Equity Trustees)

Cynthia & Patricia Gaden Fund
Tempe Mann Fund
Estate Late Bill & Shirley Westbrook
Estate Late Gloria Ida Prejeant
Estate Late Beatrice Gordon Joske
Estate Late James Hoadley
NSW Community Foundation

Our Strategy

Historically, funding of medical research in Australia has been determined by outputs – research papers and citations validated by scientific peer review. Whilst these factors are important, the advancement of innovation, the formation of collaborations and the ability to deliver impact are the outcomes NFMRI's funding delivers.

To maximise impact NFMRI focuses on advancing innovation. By looking outwards and supporting the gaps along the innovation pathway and applying resources, networks and knowledge NFMRI helps philanthropy make a difference. NFMRI supports medical research in three key gap areas we call social investment portfolios.



1

Original Australian innovation and discovery. Frontier research not competitive for NHMRC grants.

Supporting the validation of new concepts, discoveries and intellectual property creates the foundation for innovations and community benefits of tomorrow. Young researchers, early discoveries and new paradigms need support to become competitive and stand on their own two feet.

2

Support for strategic collaborative research activities focussed on advancing research and validating directions.

Providing access to the additional research skills not obtainable through currently available funding mechanisms.

Support for strategic collaborative research activities focussed on advancing innovations and validating directions is needed. NFMRI is uniquely positioned to add value to the advancement of research and innovations in preparation for potential collaborations.

By partnering with researchers, NFMRI supports collaborative research activities undertaken by other research groups that expedite the advancement of the innovation and are important for attracting potential industry partners and investors.

3

Bridging the ‘valley of death’. Supporting research required to facilitate collaborator uptake and investment

Often referred to as the ‘valley of death’, this is the area where strategic research studies are required to attract potential investors and industry collaborators.

Traditional funding mechanisms do not support or motivate researchers to contract research activities necessary to answer some research questions necessary to form these collaborations.

These research questions are often not attractive to publications as they are “less newsworthy” and not research undertaken by the chief investigator and their team.

By supporting small, incremental studies NFMRI can manage risk and make innovations more attractive to potential commercial partners and investors.

Portfolio Summary

Research Impact & Investment (Grant) Portfolios			Research Support
Portfolio 1 Original innovation & discovery	Portfolio 2 Collaborative innovation & advancement	Portfolio 3 Innovation uptake & transformation	Value-adding support
Grants are available for projects and studies that would otherwise not be undertaken.			Faster innovation
Research Focus	<ul style="list-style-type: none">• Original and novel research investigating early innovative concepts and pathways.• “Blue sky”• In need of data to attract future competitive grants.	<ul style="list-style-type: none">• Advancement and testing of innovations.• Research conducted by collaborators.• “Key knowledge”, “Key directions” and “Killer experiments”	<ul style="list-style-type: none">• Prerequisite studies to attract potential collaborators and investors.• De-risk innovations• Advance through the “Valley of Death”• Commercialisation
Measures & impact	<ul style="list-style-type: none">• Ground breaking research & knowledge.• Build capability and capacity• Leverage funding• Employment• Invention disclosures• Intellectual Property• Impact on ERA	<ul style="list-style-type: none">• Advancing innovation• Intellectual property• Leveraged funding• Collaborations• Stop/go and direction setting• Developing proof of concept• Invention disclosure• Linkage grants	<ul style="list-style-type: none">• Provide access to pro bono services, tools, networks and education.• Provide access to external capability and capacity• Access and skills provided will vary from project to project
Project	< \$265,000 Up to 3 years	< \$145,000 1–2 years	< \$185,000 1–2 years Pro Bono

Grant amounts and durations are a guide only.

Our Supporters

We wish to acknowledge and thank the following organisations and individuals who have supported the Foundation during 2017. Their assistance has greatly contributed to the Foundation's growth and success:

McGrathNicol

Over many years, McGrathNicol has generously provided support to the Foundation. NFMRI is very grateful to McGrathNicol for kindly providing administrative support and use of office facilities.

BT Financial Group

BT Financial Group has been supporting the Foundation for a number of years, providing strategic guidance to the organisation. Their knowledge and direction have been imperative to the ongoing work and successes of the Foundation.

NSW Department of Primary Industries

The NSW Department of Primary Industries has been a strong supporter of the Foundation since 2014. Since then, we have held joint grant rounds together, they have sponsored our conference and kindly hosted a number of our events, including our annual awards night.

Holman Webb

Holman Webb kindly provided pro bono legal and secretarial advice to the Foundation, as well as complimentary venue access.

IP Australia

IP Australia kindly provided pro bono patent analytics research to some of our grantees.

Gray Design

Gray Design has provided significantly discounted design services, and in particular towards the redevelopment of our website and blog.

Special acknowledgements

We also wish to thank the following organisations who promoted and assisted our Foundation and grantees during 2017:

- AAMRI
- AusBiotech
- Bio Melbourne Network
- Biotech Daily
- Channel 7 and in particular Helen Wellings
- Generosity Magazine
- IP Australia
- Knowledge Commercialisation Australasia
- Life Sciences Queensland
- Michael Johnson and Associates
- Philanthropy Australia

2017 Medical Research Innovation Conference and NFMRI's 40th Anniversary Dinner

The National Foundation for Medical Research and Innovation's third conference *'Philanthropy: Creating Impact and Dancing with Elephants'* was held on the 21-22 November 2017 and was attended by a national audience over both days. The third conference honed in on how small players, such as charities and researchers, could achieve impact by working with the sector's bigger players.

We wish to thank all attendees, speakers and each and every individual who contributed to the event's success. In particular, we are grateful for the support received from the NSW Department of Primary Industries and Holman Webb Lawyers.



On the evening of the 22nd November 2017, NFMRI also celebrated its 40th anniversary and announced more than \$1.7 million to fund Australian medical research innovations.

At a dinner held at the Australian National Maritime Museum in Sydney, with special guest speaker Mark Carnegie and master of ceremony Dr Dave Kennedy, NFMRI recognised important partnerships helping to advance Australian medical discoveries by announcing new grants and the inaugural recipient of the Dr John Raftos AM Medal.

A/Prof Wendy Cooper was presented the Dr John Raftos AM Medal by Dr John Raftos (son) for her achievements within lung cancer diagnosis and its application in drug profiling to provide better treatment options. A/Prof Cooper's research has resulted in existing cancer drugs being targeted towards specific tumours and helping existing drugs being added to the Pharmaceutical Benefits Scheme (PBS)



New projects announced included:

- A/Prof Janet Davies, Queensland University of Technology, asthma and allergy diagnostic
- Prof Michael Good AO, Griffith University, malaria vaccine
- Prof Phillip Sutton, Murdoch Childrens Research Institute, gastric cancer vaccine
- Dr Joanna Woodcock, University of South Australia, lung cancer therapy (funded in partnership with the NSW Community Foundation and Phyllis Pinter Trust, both managed by Equity Trustees)

Mr John Harkness, Chairman of the NFMRI, said that “currently funded projects were already translating to early social and commercial successes and these new projects would help address significant community burdens”. Mr Harkness recognised donors and the contributions of the many Board and Research Advisory Committee (RAC) members that have contributed to NFMRI's success over the past 40 years. In particular, he thanked Dr John Dixon Hughes OAM for his role as Director since the inception of the Foundation and his role as Chair of the RAC over a number of years.

NFMRI CEO, Dr Noel Chambers, thanked NFMRI's funding partners, which included the NSW Department of Primary Industries and Equity Trustees saying that “support from the NSW Government towards emerging infectious diseases and from The Mason Foundation, NSW Community Foundation and the Nicholas and Phyllis Pinter Trust (all managed by Equity Trustees) providing over \$600,000 per annum for future Alzheimer's disease and cancer research would help advance research and innovations towards potential future treatments and options for those in need.”

Our Governance

The National Foundation for Medical Research and Innovation (ABN: 85 001 422 895) is endorsed as a Tax Concession Charity and Deductible Gift Recipient (Item 1). The Foundation is also recognised as a Health Promotion Charity and has fundraising licences in all Australian states.

The Directors of the Foundation and management are committed to achieving and demonstrating the highest standards of corporate governance. The Directors of the Foundation continually seek to adopt best practice policies and procedures.

In accordance with the Foundation's strong focus on sound governance, the Board has adopted a Governance Charter that supplements its Constitution and details the policies, processes and expectations for the Directors, Research Advisory Committee (RAC), staff and contractors of the Foundation. It outlines a code of conduct, which all members are required to agree to, as well as conflicts of interest disclosures and management procedures.

The annual review of the Foundation's governance frameworks considers best practice guides, including those published by the Australian Securities Exchange and Standards Australia.

The Foundation has continuous improvement processes and adopts a governance review schedule, which includes the review of its skills-based Board, RAC and Staff.

Our Board's Responsibilities

One of the primary responsibilities of the Board is to be the custodian of the purpose of the Foundation as set out in the mission statement within the Foundation's Constitution.

Our Mission

"To advance innovations in medical research related to the nature, prevention, diagnosis, treatment and incidence of disease and other health problems that have a significant impact on the health of humans"

Specific responsibilities include:

- Continually develop and drive the vision of the Foundation;
- Identify any critical gaps in medical research funding in the community;
- Achieve a greater profile within the research community;
- Grant funding to applicants whose research supports the mission of the Foundation;
- Provide guidance to the Research Advisory Committee in respect of the type of research project that the Foundation may fund;
- Attract funding through donations, bequests and any other suitable avenues; and
- Grow and monitor the financial capital base of the Foundation.

Our Management's Responsibilities

The Board has formally delegated day-to-day management of the company's operations and the implementation of the Foundation's strategy and policy initiatives to the Chief Executive Officer and senior executives.

NFMRI assists fibrosis research across the ‘valley of death’

A/Prof Bernard Flynn was supported by the NFMRI in 2016-2017 to assist in the optimisation and evaluation of a new class of drug molecules that influence lipid (fat) metabolism. Certain fats are known to contribute to disease more than others, promoting diseases such as type-2 diabetes, fatty-liver disease, heart disease, chronic kidney disease and cancer.

The research undertaken by A/Prof Flynn’s group has resulted in the identification of a key enzyme in lipid metabolism that produces lipid metabolites (toxic fats) that are important in promoting the onset and progression of these diseases. They have also developed drug molecules to intercept this enzyme and reduce the production of toxic fats and promote the formation of good fats, that is, fats that actually reverse the disease process!



A/Prof Bernard Flynn

The NFMRI funding was awarded to the A/Prof Flynn’s research group to help fund access to contract research organisations and other collaborators necessary in providing critical data to help A/Prof Flynn’s group optimise their drug molecules, so as to afford a safe and effective drug molecule that can be administered orally.

The work funded by the NFMRI has been successful and A/Prof Flynn’s group now has a set of drug molecules that are effective in blocking this enzyme via oral administration. These drug molecules are currently undergoing further optimisation and preclinical development in the expectation of nominating the best performing drug molecule to progress to the clinic.

This research attracted considerable interest from potential commercial partners throughout 2016 – 2017. We are pleased to advise that A/Professor Bernard Flynn and his collaborators have since been successful with the establishment of a spin-off company to further develop fibrosis therapeutics that have potential to treat many diseases.

Australian biotech company launched with AU\$7m investment to develop therapies for treating obesity and liver disease

Cincera Therapeutics Pty Ltd (“Cincera”) was launched in February 2018 with an AU\$7 million venture capital commitment from the Medical Research Commercialisation Fund (MRCF).

The Company has been founded to develop new therapies to target conditions relating to an unhealthy Western diet, including serious and highly prevalent diseases associated with obesity. The company will initially focus on treatments for the emerging epidemic of a liver disease termed ‘NASH’ (non-alcoholic steatohepatitis).

Obesity and Western diets, high in saturated fats and processed carbohydrates, can alter the abundance (in both quantity and quality) of fats in the body. The subsequent accumulation of excessive and ‘toxic’ fats in the peripheral organs of the body can induce inflammation and tissue fibrosis (scarring), which can ultimately compromise function and lead to organ failure. Cincera aims to treat diseases like NASH by reducing the excessive abundance of specific ‘toxic’ fats in the body.

The Company is harnessing high-potential research from the Centre for Cancer Biology, an alliance between the University of South Australia and SA Pathology in Adelaide, and Monash University’s Institute of Pharmaceutical Sciences (MIPS) in Melbourne. The founding scientists of Cincera are Associate Professor Bernard Flynn from MIPS and Professor Stuart Pitson from the CCB who have been developing novel therapies that modulate an important target involved in a number of diseases.

The MRCF investment will be used by Cincera to show efficacy in disease models and support the ongoing optimisation of compounds to select drug candidates that will be suitable for clinical trials in three to four years.

Our Funding



Figure 1(L-R) Dr Noel Chambers, Dr John Dixon Hughes OAM, A/Prof Wendy Cooper, Dr John Raftos and Mr John Harkess

Five new grants (total of \$549,955) commencing in 2018 were announced in November 2017:

New 2018 Grants

A/Prof Janet Davies	Queensland University of Technology	\$99,953 (2018-2019)
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Point of care diagnosis for hay fever and asthma; development and validation of rapid subtropical specific IgE tests

This project will use allergen molecules of subtropical grass pollen for more specific tests and treatments to assist people allergic to grasses in subtropical regions. Approximately 15% of the Australian population suffers from allergic diseases and the devastating effect of such allergies was felt in the recent thunderstorm asthma event in Melbourne where over 12,000 people were affected and 9 reportedly died. After identifying and characterising all the key allergens of two major subtropical grass pollens and making headway in subtropical grass pollens research, A/Prof Davies will partner with Abionic SA, a Swiss company that has developed an instrument that quickly measures levels of sensitivity to allergens in doctors' rooms, to investigate whether recombinant version of their pollen allergens are effective as a more specific and rapid point of care diagnostic test for grass pollen allergy in warmer regions of the world.

NFMRI funding will help support optimal generation and purification of two quality assessed recombinant allergen components, as well as trialling these component on a new point of care diagnostic platform. The pre-commercial research will advance the innovations quickly for commercial uptake.

A/Prof Philip Sutton

Murdoch Children's Research Institute

\$150,000 (2018)

Vaccinating against *Helicobacter pylori*-induced gastric cancer

A/Prof Sutton has invented a vaccine that can prevent gastritis in mice. His vaccine targets the enzyme produced by *H.pylori*, which opens up gaps in the normally tight, impermeable barrier of the stomach lining. A/Prof Sutton believes that by preventing disruption of this barrier, either before or after *H.pylori* infection, that they may completely prevent the development of gastritis. A/Prof Sutton wishes to test this vaccine in clinical trials, but to do so he needs to optimise the manufacturing process of the vaccine antigen in order to be able to produce the antigen in sufficient quantity and quality for taking into clinical trials.



Prof Sutton (middle) with his team at the MCRI

NFMRI funding will help support optimisation of the manufacturing process for the

vaccine antigen. A/Prof Sutton will utilise an experienced Australian company that produces recombinant vaccine antigens used in clinical trials to carry out this work.

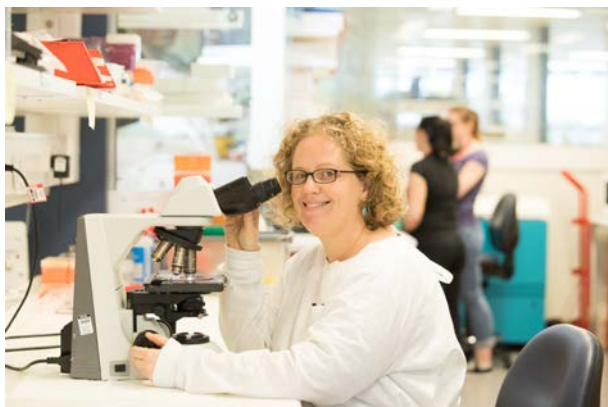
Prof Michael Good AO

Griffith University

\$200,000 (2018)

Manufacture and evaluation of a chemically attenuated *Plasmodium falciparum* whole parasite blood-stage malaria vaccine

Prof Good's team has developed and patented a novel approach to a malaria vaccine that in their published pre-clinical studies has shown long-lasting protection against different strains and species of the malaria parasite. This approach is based on the use of the entire parasite which is



Dr Danielle Staniscic helping with the project

made non-infectious by treatment with a chemical agent. For the human malaria parasite (*Plasmodium falciparum*) vaccine, manufacture involves in vitro culture of the malaria parasite followed by chemical treatment. This has since been administered as a single dose to eight volunteers who all developed strong cellular immune responses.

Since the vaccine has been shown to be safe and well-tolerated, Prof Good's team will now undertake a Phase Ib trial, which will involve 36 volunteers to test the efficacy of the vaccine.

NFMRI funding will help support the vaccine

manufacture for this trial. The associated clinical trial and activities are already funded via other sources, including Rotary.

Preclinical evaluation of 14-3-3 protein inhibitors for lung cancer therapy

The cellular protein, 14-3-3, is abundant in many cancers, including lung cancer, and the increased amount of 14-3-3 protein above normal levels strongly equates to the severity of the cancer and poor patient survival. Importantly, in experimental systems, reduction in levels of 14-3-3 protein in lung cancer cells has been shown to block cancer cell growth and cause cell death. Therefore, 14-3-3 protein represents a promising 'molecular target' for the development of new anti-cancer treatment for lung cancer. Several other laboratories in the world have attempted to generate drugs



Dr Joanna Woodcock

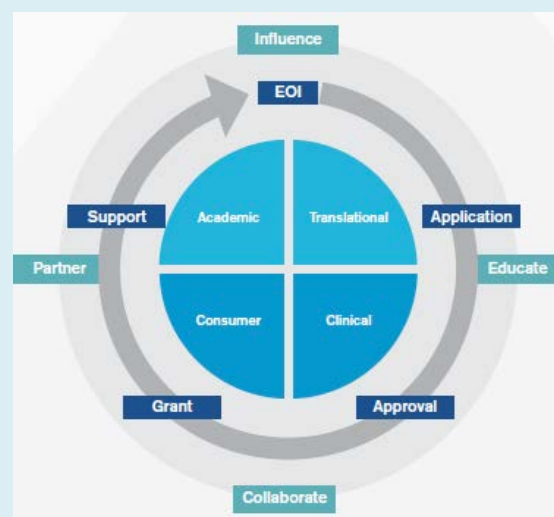
to interfere with 14-3-3, but without much success. Through Dr Woodcock's research, they have found a novel way to inactivate 14-3-3 protein which already shows greater promise. Based on their knowledge of 14-3-3 protein structure and function, they have identified chemical compounds that selectively inactivate 14-3-3 and have shown that these compounds kill lung cancer cells and reduce lung cancer tumour growth in an animal model. They are currently evaluating these compounds in more relevant models of human lung cancer to assess the potential of our 14-3-3-targeting compounds as anti-cancer drugs for lung cancer.

This grant is jointly funded by the NFMRI and NSW Community Foundation (Nicholas and Phyllis Pinter Trust (managed by Equity Trustees)). Joint funding will help support the assessment of pharmacokinetic properties of the drug compounds by scientists at the Centre for Drug Candidate Optimisation (CDCO) and analysis of those compounds' properties using reverse phase protein arrays (RPPA). These studies will enable Dr Woodcock to fully assess the drug-like properties of those compounds and their potential efficacy for lung cancer.

NFMRI takes a uniquely proactive approach by partnering with our grant recipients to provide support along the innovation pathway.

It is a prerequisite that we only fund research of the highest quality. When reviewing applications and research projects NFMRI looks for more than good science. We also assess the ability and willingness of the researcher and the institution to collaborate, plan and manage research along the innovation pathway. NFMRI also considers the need and size of any potential impact, the potential for the research and innovation to make a significant difference and whether the opportunity may become attractive to a potential partner who can make a product accessible to the community.

To do this we harness skill sets from a variety of scientific, business development, commercial, industry and financial sources. Working with our researchers and their institutions, the NFMRI utilises the skills of our staff, Research Advisory Committee, Board and our networks to assist with communication strategies, understanding industry's expectations, and the establishment of networks and collaborations.



Inaugural Dr John Raftos AM Medal Recipient

The NFMRI offers the Dr John Raftos AM Award for Advancing Innovation every two years to an existing NFMRI grant recipient for an outstanding contribution towards the development and advancement of a biomedical innovation related to the nature, prevention, diagnosis, treatment and incidence of disease and other health problems that have a significant impact on the health of humans. The medal is awarded with a prize of \$50,000, in the form of a grant to support the research activities of the recipient.

This year, the Research Advisory Committee and Board decided to present the award to A/Prof Wendy Cooper from the Royal Prince Alfred Hospital.

A/Prof Wendy Cooper	Royal Prince Alfred Hospital	\$50,000 (2018)
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A/Prof Wendy Cooper was awarded the inaugural Dr John Raftos AM Medal for research that helped lead to the approval of new therapies and concurrent diagnostics by the Medical Services Advisory Committee and the Pharmaceutical Benefits Advisory Committee (PBAC). Her data has been used by Pfizer and other pharmaceutical companies for this purpose.

A/Prof Cooper is a specialist in tissue pathology and diagnostic oncology at the Royal Prince Alfred Hospital in Sydney. With a special interest in lung cancer and lymphomas, A/Prof Cooper received two grants totalling \$220,000 between 2012-2015. This research focussed on lung cancer and identifying biomarkers that could predict responses to particular treatments – i.e. personalised medicine. This is important as some lung cancer patients with specific changes in the genes of the cancer cells could be targeted with new smart drugs that were more effective and had less side effects than traditional chemotherapy. NFMRI funding has specifically enabled A/Prof Cooper to collaborate with bioinformatics experts and since then her team studied a group a lung cancer cases that could be targeted by the new drugs.



A/Prof Wendy Cooper receives inaugural Dr John Raftos AM Medal at NFMRI's 40th Anniversary Dinner

2017 Grants

Following recommendations of our Research Advisory Committee, the Board approved \$742,822 in grant payments during the 2017 calendar year:

Researcher	Institute	Focus Area	Total 2017	Total funding commitment
Prof Stephen Haswell	Deakin University	Infectious diseases	\$38,500	\$372,000
Prof Michael Good AO	Griffith University	Rheumatic heart disease	\$61,100	\$251,000
A/Prof Michelle Hill	QIMR Berghofer	Cancer	\$84,602	\$169,204
Dr Nicholas Opie	University of Melbourne	Neurodegeneration	\$290,000	\$390,000
Prof Des Richardson	University of Sydney	Cancer	\$24,000	\$105,500
A/Prof Michelle McIntosh	Monash University	Maternal health	\$50,000	\$50,000
Prof Mark Kendall*	Australian National University	Vaccine delivery	\$50,000	\$50,000
Prof Eric Gowans	University of Adelaide	Zika virus	\$144,620	\$293,880
			\$742,822	\$1,681,584
*Due to change of institution from the University of Queensland to the Australian National University, Prof Kendall's grant will be paid in 2018				

Prof Stephen Haswell **Deakin University** **\$372,000 from 2015 to 2017**

Advanced zoonotic disease detection through lab on a chip technology

Prof Haswell's project to design, manufacture and commercialise a cost effective "lab-on-a-chip" device that can rapidly identify infections and the causative virus received joint support from the National Foundation for Medical Research and Innovation and the NSW Department of Primary Industries.

The test, which will cost around \$20, will take less than an hour to generate results and will be able to be linked wirelessly to a database to produce a range of control and treatment options, including vaccine-specific selections where appropriate.

Prof Michael Good AO **Griffith University** **\$251,000 from 2015 to 2018**

Producing and testing a GMP grade peptide conjugate vaccine to prevent infections with Group A Streptococcus

A proposal to manufacture and test a vaccine to prevent infections with Group A Streptococcus (GAS), which may potentially decrease the global burden of rheumatic heart disease, many forms of chronic renal disease and other streptococcal pathology commenced in 2015. The prevalence of severe GAS disease is estimated to be greater than 18 million cases globally, with 1.7 million new cases each year.



Prof Michael Good AO

A/Prof Michelle Hill

QIMR Berghofer

\$169,204 from 2017 to 2018

Blood glycoprotein panel for early detection of oesophageal cancer

A/Prof Hill's research aims to transform the detection and management of oesophageal adenocarcinoma (OAC) by developing a blood test. OAC is increasingly common due to growth of the major risk factors: chronic reflux and obesity. Although effective treatments are available for early OAC, outcomes remain poor because most cases are diagnosed at advanced stages due to the lack of practical and effective screening tools. A/Prof Hill has identified and patented a panel of readily translatable glycoprotein biomarkers, which can differentiate OAC from benign conditions and healthy controls. Her research program is in the process of evaluating these markers in large patient samples, as a step toward development of a diagnostic test that can be introduced into clinical practice.

NFMRRI support is helping develop one embodiment of the innovation, the clinical immunoassay. Working with industry partner Precision Antibody, the team aims to generate monoclonal antibodies that recognise the three best biomarkers for use to generate immuno-assays. Successful completion will enable the development of a practical diagnostic test based on their biomarkers.

Dr Nicholas Opie

The University of Melbourne

\$390,000 from 2017 to 2018

Safety validation of the stentrode: a biomedical device for paralysis that converts thoughts into computer commands

Dr Opie has developed a minimally invasive brain machine interface that has the potential to return mobility and independence to people with paralysis. His technology can record brain signals and convert them into useful to control computers, and/or prosthetic limbs. machines is hampered by procedures, which require to immune reactions that within months. Dr Opie and enormous progress since funding grant from the Research Projects Agency an implantable stent-record neural information from within a blood vessel, mitigating risks associated with open brain surgery.



Stentrode

commands that can be used wheelchairs, exoskeletons Translation of existing brain invasive surgical access to the brain and lead are causing device failure his team have already done receiving a \$1.3m seed Defence Advanced – having already developed electrode array that can

NFMRRI support is helping with clinical translation of this research via the conduction of a world-first human trial in 2018. To meet this milestone, the team must first manufacture the technology in an FDA approved and ISO-certified facility and conduct the necessary preclinical experiments to demonstrate reliability, efficacy and safety.

Prof Des Richardson

The University of Sydney

\$105,500 from 2017-2018

Commercial translation of innovative null hepcidin analogues that prevent the anaemia of chronic disease

The anaemia of chronic disease (ACD) is a severe cause of morbidity and mortality in many millions of patients with cancer or inflammatory diseases and is due to excessive levels of the hormone

hepcidin. These diseases induce excessive levels of hepcidin, which in turn promotes iron storage, thus preventing its release into the blood leading to severe and debilitating anaemia.

Prof Richardson has discovered that hepcidin is bound in the blood by a specific protein and has since developed an analogue that leads to urinary excretions of excessive hepcidin. NFMRI support is enabling commercialisation of this optimal analogue.

A/Prof Michelle McIntosh

Monash University

\$50,000 in 2018

2017 Dr John Dixon Hughes Medal for Medical Research Innovation

Every year over 300,000 women die due to pregnancy-related causes. These deaths occur overwhelmingly in low and middle-income countries (LMICs) with the leading cause being postpartum haemorrhage (PPH), or excessive bleeding after birth. Oxytocin is the gold standard therapy for the prevention and treatment for PPH, but currently exists only as an injection product that requires refrigerated supply and storage to maintain quality and skilled healthcare workers for safe administration. In resource-poor settings, where cold chain infrastructure is lacking or unreliable and the availability of skilled birth attendants limited, many women do not have access to this essential life-saving medicine.

Monash University, in partnership with GlaxoSmithKline (GSK), is developing a heat stable, affordable and simple to use inhaled form of oxytocin for the prevention of PPH in low income countries. This innovative solution removes the need for refrigerated storage and, without the requirement for injection, presents the possibility of expanding oxytocin administration to a wider range of healthcare workers, thereby overcoming major barriers to oxytocin access for large numbers of women. A/Prof McIntosh utilised the Medal's grant to help further with the development of her innovation.

Prof Eric Gowans

The University of Adelaide

\$293,880 from 2016 to 2018

A DNA vaccine for Zika virus

The Gowans laboratory has developed a novel DNA vaccine that is more effective than canonical DNA vaccines and elicits robust immune responses in small (mice) and large (pigs) animals. A vaccine for the Zika virus is urgently required because there is no therapy, and the link with microcephaly in children born to mothers who were infected during pregnancy demands that women of child-bearing potential be immunised. As canonical vaccines (eg. live attenuated vaccines) require a considerable period of development, a DNA vaccine that can be generated in a matter of weeks represents an attractive alternative.

Prof. Gowans' team are examining the efficacy of novel DNA vaccines designed to elicit cell-mediated immunity to the Zika virus non-structural proteins or Zika neutralizing antibody in mice. A major component of the project is to examine the immune responses in mice and pigs, and the protective efficacy of the vaccines in mice, with a view to identifying the most appropriate strategy to further develop for follow up studies in human clinical trials.

This project is supported thanks to generous support from the NSW Department of Primary Industries.



Prof Eric Gowans

Project Updates

Prof Mark Smythe, The University of Queensland

Field: Asthma and allergies

Innovation: Drug

“Our research team was awarded an NFMRI grant to assist in selecting a drug candidate for the treatment of allergic asthma. We have developed a series of compounds as potent and selective antagonists of hematopoietic prostaglandin D2 synthase (HPGD2S) that are metabolically stable, orally bioavailable and efficacious in animal models. Through the NFMRI grant, we have been able to access collaborators and key experiments to test these compounds on human bronchial epithelial (hBEC) cells from healthy and asthmatic patients. This promising, preliminary efficacy shows first in human cell activity and has aided in the selection of our best candidate to ultimately take to the clinic. Work is now currently under consideration with our collaborators for a larger sample size study with more patients.



Prof Mark Smythe

Overall, this NFMRI funded study has been important in guiding the selection of a preferred candidate for ultimately Investigational New Drug (IND) enabling studies for allergic asthma. This project has also attracted interest from multiple investment companies and we have provided non-confidential presentations with future discussions scheduled.”

A/Prof Michelle McIntosh, Monash University

Field: Maternal health

Innovation: Drug

Every year over 300,000 women die during pregnancy and childbirth with the leading cause being postpartum haemorrhage (PPH), a condition of excessive blood loss after childbirth. The condition can be effectively prevented or treated with an injection of oxytocin. However, access to this drug in the poorest regions of the world is limited due to the need for refrigerated supply and storage, and trained medical personal for administration. To overcome these barriers Monash University has developed an affordable, simple to use dry powder oxytocin inhaler that requires no refrigeration. This innovation has been independently identified as one of the 30 most important innovations in global health (www.ic2030.org) and is currently being co-developed by Monash and the international pharmaceutical company GlaxoSmithKline (GSK).



A prototype inhaler

Initial clinical trials have shown positive results and the product is progressing through a streamlined development pathway to expedite access to this important technology by women in greatest need. A commercial scale manufacturing process is being developed to provide an affordable product that can deliver sustainable benefits in resource constrained environments. In addition, a comprehensive program of engagement with key stakeholders in low and middle-income countries that bear the greatest burden of maternal mortality, including policy makers, clinicians and regulators, is ongoing. This will ensure that access and uptake to the product can be maximised once available.



New chemotherapy for brain cancers

A/Prof Lenka Munoz, The University of Sydney and Charles Perkins Centre

Field: Brain cancer

Innovation: Therapeutic

A/Prof Lenka Munoz received funding from NFMRI from 2013 to 2016. A/Prof Munoz research focused on brain cancer and identifying inflammatory mechanisms underlying invasive spread of brain cancer cells into healthy brain tissues. Through this project, A/Prof Munoz discovered a new drug lead suitable for development of brain cancer chemotherapy.

The NFMRI-funded project focused on inflammation driven by excessive activity of the MK2 kinase. Using various MK2 inhibitors

A/Prof Munoz delineated a new MK2 signaling pathway underlying glioblastoma inflammation, which was published in the prestigious *Oncogene* journal.

Interestingly, during this project A/Prof Munoz observed that one of the MK2 inhibitors, known as CMPD1, effectively killed brain cancer cells, without causing toxicity to healthy cells. Following on from this exciting discovery which was supported by NFMRI, she delineated the mechanism of action of this cytotoxic inhibitor and discovered that CMPD1 inhibitor primarily targets microtubules in the cells and thus, is a *bona-fide* microtubule-targeting agent.

Drugs that interrupt the formation of microtubules, known as microtubule-targeting agents, are highly effective anti-cancer therapies because they target the machinery that enables cancer cells to divide. However, the most successful chemotherapy drugs currently available on the market, including microtubule-targeting agents like paclitaxel and vinblastine, are ineffective in treating brain cancers because they are unable to cross the blood-brain barrier, a layer of cells that protects the brain.

Importantly, CMPD1 is a small molecule able to cross the blood-brain barrier. The new pharmacophore for brain-permeable microtubule-targeting agents have generated a new intellectual property. Given that there are no effective anti-cancer drugs able to reach tumours in the brain, this IP generated immense interest in the pharmaceutical industry. In late 2016, A/Prof Munoz finalised a licensing agreement with Lin BioScience, a drug development company specializing in innovative therapies for oncology with headquarters in Australia, Taiwan and San Diego. In addition to a licensing agreement, A/Prof Munoz established a research collaboration with Lin BioScience who has provided \$1.2M research funding to progress the development of clinical candidates from the lead molecule. The work of A/Prof Munoz has resulted in two new patent applications filed in early 2018.

In addition to commercial achievements, A/Prof Munoz's research funded by NFMRI has made a great impact on basic science of kinase inhibitors. Kinase inhibitors are the most investigated class of anti-cancer drugs. However, scientists are rarely aware that many kinase inhibitors inhibit non-kinase proteins, which leads to wasted drug development efforts. Her discovery of non-kinase targets for kinase inhibitors led to commentaries and presentations, including an invited lecture at the 51st International Conference on Medicinal Chemistry in France (450 attendees) and an invited article in *Nature Reviews Drug Discovery*, the most prestigious journal in the field of drug development across academia and industry.

Our people

A dedicated Board, Research Advisory Committee (RAC) and management lead our Foundation.

Trustees

Trustees, qualifications and special responsibilities	Experience
Chairman Mr John Harkness	1984 - <ul style="list-style-type: none">• Partner of KPMG for 24 years and National Executive Chairman for five years.• Chairman, Charter Hall Retail REIT• Former Chairman, Reliance Rail• Former Director, Goodman Group• Fellow of the Institute of Chartered Accountants in Australia and the Australian Institute of Company Directors.
Dr John Dixon Hughes OAM Chairman, Research Advisory Committee	1977 - <ul style="list-style-type: none">• Consultant General Surgeon• Research Advisory Committee since 1977 and Chairman since 2000• Fellow, Royal College of Surgeons (Eng)• Fellow, Royal Australasian College of Surgeons• Fellow, Australian Medical Association• Foundation member of the Australian Association of Surgeons, formerly serving as Chairman of the NSW State Committee and President of the Association Formerly; <ul style="list-style-type: none">• Board Member, Senior Vice President, Chairman Medical Staff Council, Chairman of Surgical Research Committee and Chairman of Ethics Committee at Sydney Hospital.• Chairman of Infection Control Advisory Group NSW Health• Convener (Chairman) Negotiating Committee to negotiate with the NSW Government, on behalf of the medical profession during the “Doctor’s Dispute” in 1984.• Medical Services Committee NSW Administrator (1984 – 1996) & Chairman (1996 – 2016).
Dr Vivienne Cowlshaw-Shortell (resigned August 2017)	1987 - 2017 <ul style="list-style-type: none">• General Dental and Special Oral Services• Fellow, Royal Australasian College of Dental Surgeons• Member, Australian Dental Association• Member, Australian Federation of Graduate Women Inc.

Dr Kevin Hellestrand	2001 -	<ul style="list-style-type: none"> • Cardiologist and Cardiac Electrophysiologist for 35 years. • Co-author of more than 50 journal articles, reviews and book chapters. • Fellow of the Royal Australasian College of Physicians, American College of Cardiology, Cardiac Society of Australia and New Zealand, Heart Rhythm Society, European Society of Cardiology. • Member of the North Shore Heart Research Foundation
Mr Anthony McGrath <i>Honorary Secretary and Director</i>	1997 -	<ul style="list-style-type: none"> • Co-Chairman of McGrathNicol • Director, QBE Insurance (Australia) Ltd • National Rugby League Commissioner • Member, Institute of Chartered Accountants in Australia. • Member, Insolvency Practitioners Association of Australia.
Dr John Graham OAM <i>Resigned in October 2017</i>	2002 - 2017	<ul style="list-style-type: none"> • Emeritus Honorary Consultant Physician at Sydney Hospital • Grazier
A/Prof. Ray Garrick AM	2002-	<ul style="list-style-type: none"> • Neurologist with over 35 years experience • Fellow, Royal Australasian College of Physicians • Member, Australian New Zealand Association of Neurologists • Associate Professor of Medicine at the University of Notre Dame, Sydney Campus • Head of St Vincent's & Mater Hospital Clinical School of University of Notre Dame Medical School (Sydney) • Fellow and Faculty Board Member, Faculty of Pain Medicine ANZCA • Senior investigator at Sydney Hospital/Sydney Eye Hospital for the RENEW clinical trials in optic neuritis
Ms Jane Schwager AO <i>Resigned in December 2017</i>	2005 - 2017	<ul style="list-style-type: none"> • Director, Campbell Page Ltd • Chair, Hunter New England Central Coast Primary Health Network • Member, Defence Honours and Awards Appeals Tribunal • Member, NSW Civil and Administrative Tribunals • Director, Teachers TV • Member, Social Ventures Australia

Mr Keith Drewery	2010 -	<ul style="list-style-type: none"> • Director, Drewery Consulting Pty Ltd • Consultant, KPMG Private Enterprise Division • Trustee, The Balnaves Foundation • Director, Abbott Foundation Pty. Limited • Advisory Board, See Beyond Borders
Dr Ashley Bates	2014-	<ul style="list-style-type: none"> • Director, AusIndustry Entrepreneur's Programme • Principal, Ashley Bates Consulting <p>Formerly:</p> <ul style="list-style-type: none"> • National Executive, Manufacturing Excellence Taskforce Australia • Head of Product Development and Head of R&D Alliances, GlaxoSmithKline
Ms Alison Choy Flannigan <i>Company Secretary</i>	2014-	<ul style="list-style-type: none"> • Company Secretary since 2014 • Partner, Holman Webb Lawyers • Member, NSW Law Society • Member, Australian Institute of Company Directors • Member, Australian Corporate Lawyers Association • Member, AusBiotech
Prof A. Ian Smith	2017-	<ul style="list-style-type: none"> • Vice-Provost (Research & Research Infrastructure), Monash University • Director, Bioplatforms Australia (from 2008) • Director, National Imaging Facility (from 2009) • Director, Victorian BioImaging Collaboration (from 2010) • Director, Victoria Endowment for Science, Knowledge and Innovation (from 2011) • Director, Neuroscience Victoria (from 2012) • Director, Centre for Brain Injury (from 2016) • Director, South East Asia Community Observation (from 2010) • Director, Curtin Health Innovation Research Institute (from 2016) • Director, Population Health Research Network (from 2017) •
Dr Rob Sauer	2017-	<ul style="list-style-type: none"> • Consultant, DibbsBarker • Chairman, Myriax Pty Ltd. • Director, Biopharm Australia Pty Ltd. • Admitted as solicitor of the Supreme Court of New South Wales in 1974 • Certified Practicing Accountant since 1980 <p>Formerly:</p> <ul style="list-style-type: none"> • A Founding Director of ResMed • Partner, DibbsBarker (1978-2008)

- Inaugural Chairman, R&D Tax Concession Committee
- Inaugural Chairman, Tassal Ltd (1984-1990)
- Director, Salmon Enterprise of Tasmania (1984-1988)

Research Advisory Committee

Chairman Dr John Dixon Hughes OAM <i>Retired as RAC Chairman in March 2018</i>	Consultant general surgeon with over 55 years' experience
Prof A. Ian Smith <i>Appointed as RAC Chairman in March 2018</i>	Vice-Provost (Research & Research Infrastructure), Monash University
A/Professor Ray Garrick AM	Associate Professor of Medicine (Neurology) at the University of Notre Dame, Sydney Campus
Em. Professor Douglas E. Joshua AO	Emeritus Professor in Haematology at the University of Sydney and Consultant Haematologist at RPHA.
Professor Mark von Itzstein	Director of the Institute for Glycomics at Griffith University
Professor Stan McCarthy AO <i>Retired in March 2018</i>	Senior Staff Specialist and Consultant Histopathologist at Royal Prince Alfred Hospital in Sydney
Em. Professor John McAvoy	Emeritus Professor of Experimental Ophthalmology at the University of Sydney
Dr Ashley Bates	National Executive, Pharmaceutical and Biotechnology at META, previously Head of R&D Alliances ANZ at GSK
Dr Noel Chambers	CEO with over 25 years' experience in biomedical research, innovation, commercialisation and biotechnology.
Dr Andrew Cottrill	Medical Director, HCF

Management and Administration

Dr Noel Chambers	Chief Executive Officer
Ms Tara Clouten	Accounts Administrator
Mrs Nancy Ranner	Grants, Communications and Engagement Coordinator



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