

AUSTRALIAN  
CANCER  
RESEARCH  
FOUNDATION



[www.acrf.com.au](http://www.acrf.com.au)

ACRF  
**ACCELERATE**

An Impact Philanthropy Initiative

2026



## Giving time and improving quality of life



While I dream of a world without cancer, the more realistic destination is one where all cancers are predicted, diagnosed early, treated in more humane ways and prevented where at all possible.

An ambitious goal, I know. But one I feel secure in backing, because I am privileged to see firsthand Australian cancer research in action. A world class, highly accomplished group of scientists in the laboratory, clinicians in hospitals and multidisciplinary teams between, working together day-to-day to solve the very complex issue of better managing cancers.

As CEO of Australia's cancer research foundation, Australian Cancer Research Foundation, I take pride in leading a team of passionate fundraisers dedicated to maximising dollars available to progress pioneering cancer research, as soon as possible.

We have a laser focus of finding the most promising, bold, brilliant research programs across Australia, for all cancers, seeding and enabling research teams by equipping them with new/improved technologies to pursue, explore and advance their innovative ideas and scientific hypotheses.

I sincerely appreciate our Medical Research Advisory Committee (MRAC) who guide us in selecting programs that will ultimately save lives and improve the quality of life for people being treated for this devastating disease.

A cancer diagnosis depletes the patient, their family and their community. It can be devastating - physically, emotionally, financially.

Australian Cancer Research Foundation (ACRF) provides hope, accelerating discoveries – advancing knowledge, improving clinical tools and better informing decision making for treatment options.

We connect people with a love of humanity with the people who will make it happen. Time makers who need your support now. Creating priceless benefit for you, the people you love and many you will never meet.

**Imagine what your donation to ACRF could do.**

A handwritten signature in black ink, reading "Kerry Strydom".

Kerry Strydom  
CEO



“No parent, no child, no family should go through what we went through. What we are still going through.”

*Raya was diagnosed with leukemia at just four years of age*

Chemotherapy and radiation are very harsh treatments given to young children. They have terrible long-term health effects (heart issues, neurological issues, fertility issues, respiratory issues and more). Children and their families deserve access to kinder treatments that are effective but don't damage their healthy cells or impact their quality of life.



# Australia's cancer research foundation

As a leading independent for-purpose organisation ACRF brings together outstanding expertise from medical research organisations across Australia to deliver visionary programs of research.

Each year, ACRF seeks to understand what researchers need most to achieve continued outcomes for better prevention, earlier detection and more effective treatment for all cancers.

Initially, the requirement was for ACRF to fund buildings to provide researchers the space to work. Fast forward to today, and the vital need is support in acquiring the latest technology, ranging from scientific equipment to virtual infrastructure.

Technology has proven to play a significant role in improving cancer outcomes. The emergence of new technologies provides opportunity to advance cancer research like never before. Past projects funded by ACRF have delivered significant outcomes and real, human impact.

All grant applications undergo a rigorous evaluation and selection process by our highly respected ACRF Medical Research Advisory Committee (MRAC) and esteemed ACRF Board of Trustees. Beyond award, ACRF governance requires grant recipients to report annually on progress and outcomes for seven years.

ACRF's support typically leads to further significant investment by both government and commercial bodies, leading to increased impact of every dollar you donate.

**Projects initiated by ACRF are cutting edge, distinctive, and have the potential for impactful social outcomes.**

# Enabling brilliant research across all cancers

ACRF relies on donations and fundraising from individuals, corporates, and community groups.

Since 1984, ACRF has facilitated the investment of over \$209M in 93 cancer projects Australia-wide, across all cancers.

The Foundation provides privately funded grants of between \$1.5M and \$10M to support vital technology, equipment and infrastructure to accelerate cancer research.

ACRF supporters' year-on-year investment into the cancer research sector equates to up to 30% of non-government funding for cancer research infrastructure in Australia. A focus of which we are extremely proud.

ACRF seed funds remarkable projects and, on being awarded an ACRF grant, recipients are able to secure leveraged funding from other funding agencies.

Reports from 33 ACRF grants (2013 – 2023) with an award total of \$80M evidence self-reported leverage to \$778M, a factor of 9.6 times.

Beyond the primary research objectives this equipment has also been used in the training of numerous doctors and scientists and has supported the desire to retain leading clinicians and researchers in Australia. It has also been effective in attracting international talent.

Importantly, research outcomes of new discoveries and treatments frequently have international applications, contributing to the global acknowledgement of the high quality of Australian cancer research.

With DGR1 status, donations to ACRF are tax deductible.

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“No other organisation in Australia offers the wonderful infrastructure support for cancer research like ACRF. Their funding has, for many research centres in Australia, been so vital to speeding up the discovery process.”

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***Professor Michelle Haber AM,  
ACRF Medical Research Advisory  
Committee Co-Chair***



# Cancer research landscape

## What is cancer

Cancer is described as abnormal cell growth within a person. These cells multiply uncontrollably, invading healthy tissue.

The body has natural systems to prevent the growth of cancerous cells by either repairing the damage to the DNA or forcing the cell to die if the damage is too great. Cancer occurs when these inbuilt defence mechanisms fail. The term 'cancer' describes a group of diseases that share this characteristic. Cancers are usually classified according to the location in the body where the abnormal cell growth began.

## We've come a long way

The "Overview of cancer in Australia, 2025" from the Australian Institute of Health and Welfare (AIHW) shared that close to one million of Australia's population will have been diagnosed with cancer in the last 10 years.

Progress in cancer research has meant that outcomes and survival statistics for those diagnosed with cancer has improved considerably. During 1987-1991, 50% of people survived for at least 5 years after their cancer diagnosis; by 2017-2021 this increased to 72%.

In 2000, there were 36,000 deaths from cancer, and by 2025 the number of deaths from cancer is estimated to have increased by 47% to 53,500 people. Had mortality rates from 2000 not improved and remained constant, there would have been an estimated 71,000 deaths from cancer in 2025.

This enormous improvement in survival rates has unfortunately not been consistent across all cancer types – meaning there is still more to be done in better managing and treating this disease.

## Cancer in Australia – statistics

### The AIHW Cancer in Australia 2025 report presents:

- Around 170,000 new cases of cancer were diagnosed in Australia. That's about 465 people per day.
- The most diagnosed cancers in males are prostate cancer, blood cancers, melanoma of the skin, colorectal cancer and lung cancer.
- The most diagnosed cancers in females are breast cancer, blood cancers, melanoma of the skin, lung and gynaecological cancers.
- Devastatingly, around 146 people die each day from cancer in Australia. Lung cancer is the leading cause of death from cancer, followed by blood cancers, colorectal cancer, prostate cancer, breast cancer, and pancreatic cancer.
- 1,270 children aged 0–19 years will have been newly diagnosed with cancer in Australia (676 boys and 594 girls).
- Although the survival rate has increased thanks to research, of those children who do survive, two-thirds will have significant long-term treatment side effects, including organ dysfunction, neurocognitive deficits, impaired fertility, and secondary malignancies.
- Cancer accounts for around three of every ten deaths in Australia.
- Cancer is becoming more commonly diagnosed in people in their 30s and 40s.

**Cancer still claims 146 lives each day in Australia. Please help turn scientific potential into life-saving reality.**

# ACRF's approach accelerates impact

ACRF is uniquely positioned to access brilliant researchers and facilitate collaboration across Australia. Our focus on equipping researchers with technology and infrastructure is most vital to progress and innovation.

An outstanding independent panel of Australian and international cancer experts make the recommendation for funding of projects to our Board of Trustees. The research supported is cutting edge, distinctive and has the potential for impactful outcomes.

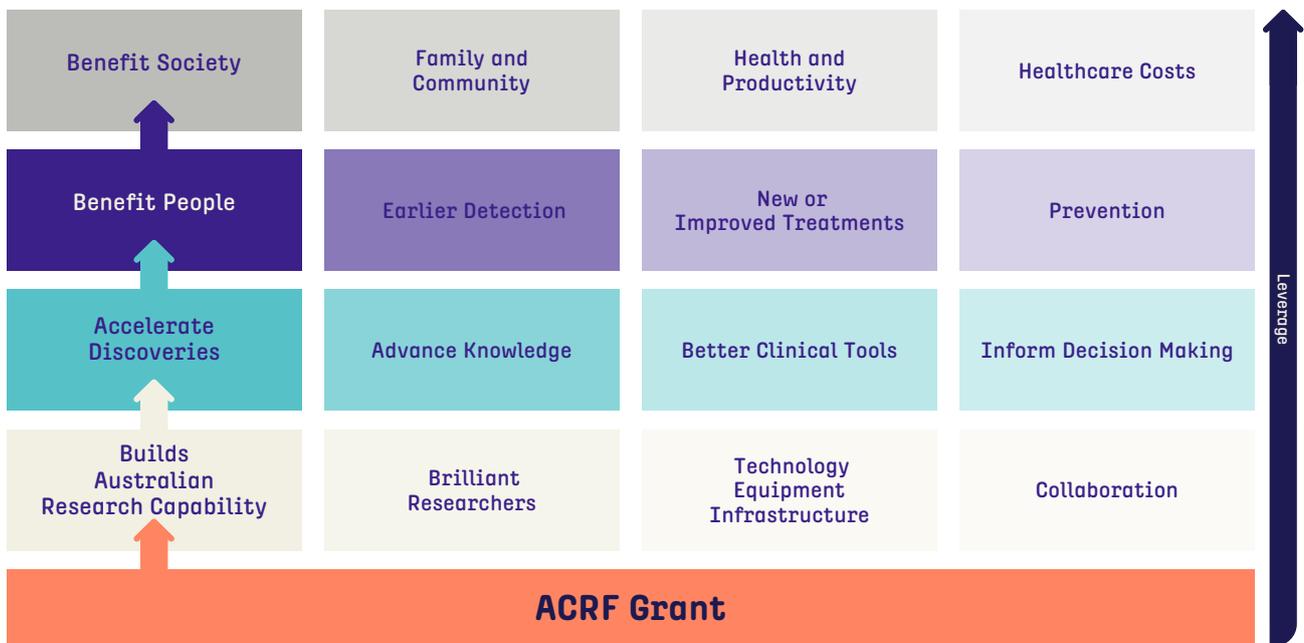
Project outcomes are reported to ACRF for seven years post opening of the facility. These typically include scientific breakthroughs, advanced knowledge, publications, new approaches both in the clinic and the use of information.

The impact for people affected by cancer – through earlier detection, new and improved treatments – is better quality of life through the diagnosis and lives saved. In some cases, research even results in preventing cancer.

Furthermore, research benefits society – including keeping families and communities intact, reducing healthcare costs and keeping people healthy and productive.

Beyond the primary research objectives this equipment has also been used in the training of numerous new doctors and scientists, and has attracted and retained leading talent in Australia and global acknowledgement of the high quality of Australian cancer research.

**Consider the impact your support will have.**



ACRF model for maximising impact and leveraging investment

# The impact of past funding

We are proud to have enabled many outcomes, thanks to our supporters and past ACRF grants

## National network for early detection of melanoma

ACRF granted \$9.9 million to the University of Queensland in 2018 to establish the **ACRF Australian Centre of Excellence in Melanoma (ACEMID)**, a national network for early detection of melanoma. ACEMID uses sophisticated 3D imaging systems to produce whole-body scans that can be monitored over time.

The imaging systems have been deployed in 15 research nodes across three Australian states.

### • NSW

Melanoma Institute Australia, Westmead Hospital, Port Macquarie Community Health Centre, Pinnacle Dermatology (Orange)

### • QLD

Princess Alexandra Hospital, Cairns Hospital, Herston Imaging Research Facility, Sunshine Coast Hospital, Mt Isa Hospital

### • VIC

The Alfred, Skin Health Institute, Bendigo Hospital, Wonthagii Hospital (Bass Coast), Peter MacCallum Cancer Centre

The team have established the world's largest database of melanoma from patient 'avatar' scans, to be used as a comprehensive diagnostic tool for skin specialists. Artificial intelligence is under development to aid clinicians in diagnosis and ongoing monitoring of skin lesions, enabling the earlier detection of melanoma as well as removing unnecessary procedures. This project will inform a national screening program.

As of Jan 2026, 9,071 participants had been enrolled to the study.



High resolution imaging is able to map the entire skin surface in a matter of seconds. This provides doctors with the ability to scan and assess a patient's risk in a comprehensive and highly accurate manner, like never before.

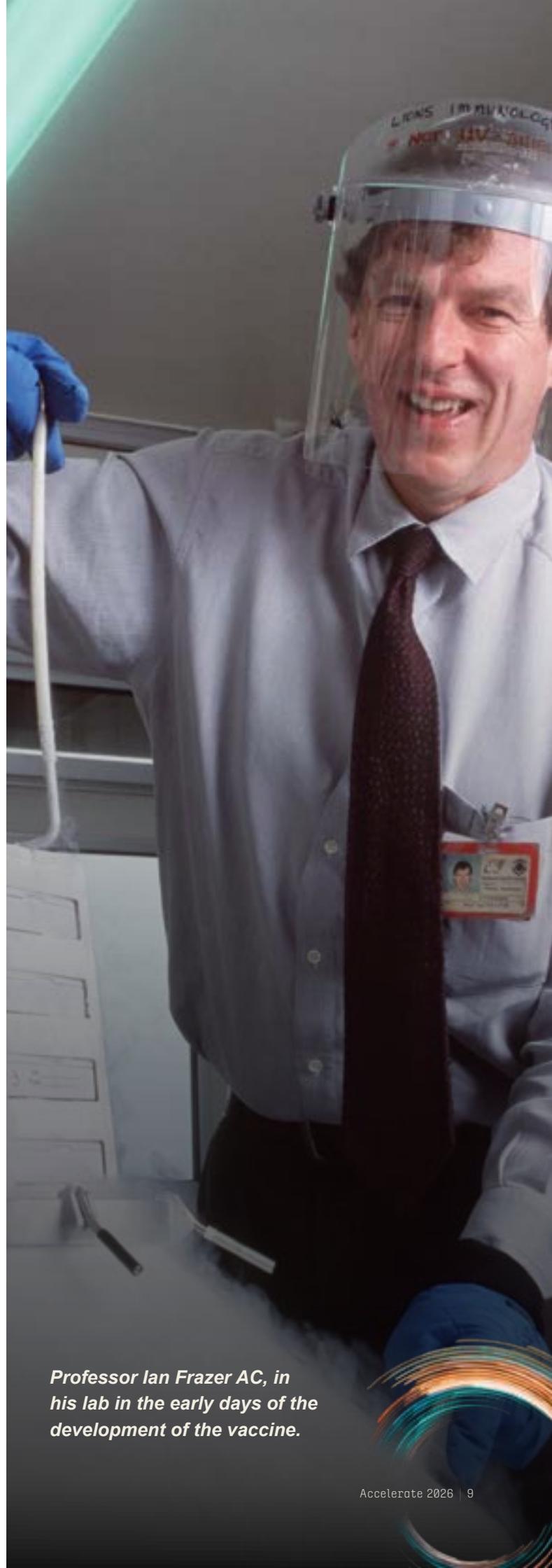
## World's first vaccine to prevent cervical cancer

ACRF is delighted to have backed pioneering research which led to the development of the cervical cancer vaccine. True to our model, ACRF provided seed funding of \$1 million in 1999 to establish the Centre for Immunology and Cancer Research at Diamantina Institute, University of Queensland. The vaccine – named Gardasil – was developed based on the research by Emeritus Professor Ian Frazer AC with his late colleague Dr Jian Zhou.

The breakthrough came when new molecular biology technologies allowed them to grow the virus in the lab. After taking out a patent, commercialisation of the vaccine with Merck through CSL plus clinical trials, it was ready to be rolled out. To date, it has been dispensed over 250 million times and will, one day, mean the disease (that is still prevalent in women) will be virtually non-existent.

At a conservative estimate, the human papillomavirus (HPV) cervical cancer vaccine has prevented the deaths of at least 100,000 women around the world since it was first rolled out in Australia to young girls in 2007. It has saved hundreds of thousands more women from the trauma of chemotherapy and surgery, and the knock-on effects on their work, family lives and the economy.

**The World Health Organisation predicts that a combination of screening, vaccinations (currently at Gardasil 9) and treatment could save 5 million lives by 2050.**



*Professor Ian Frazer AC, in his lab in the early days of the development of the vaccine.*

## Personalised medicine approaches

ACRF's first \$10 Million major grant in 2015 established the **ACRF International Centre for the Proteome of Human Cancer**. This ambitious world-first research program aimed to analyse the human cancer proteome, an area of new discovery at the time. A mass spectrometry laboratory and associated lab facilities was established.

The main objective of ProCan was to provide proteomic analyses of patients' cancers to enhance the ability of cancer clinicians to choose the most effective treatment for each individual patient. This entailed two major research programs. The first, to develop proteomic technology to fit seamlessly into the existing diagnostic workflow. The second, to build a large database of clinical outcomes and cancer proteomic data so that advanced computational methods, including machine learning, can be used to predict the outcome of various treatments for newly diagnosed patients.

Proteomic technology development has been highly successful, with the establishment of an end-to-end proteomic pipeline that starts with a tumour sample and produces proteomic data (quantitative results for every peptide and protein detected) within nine hours. Significantly, ProCan's analytic methodology is "universal": it performs well for cancer samples stored in many ways.

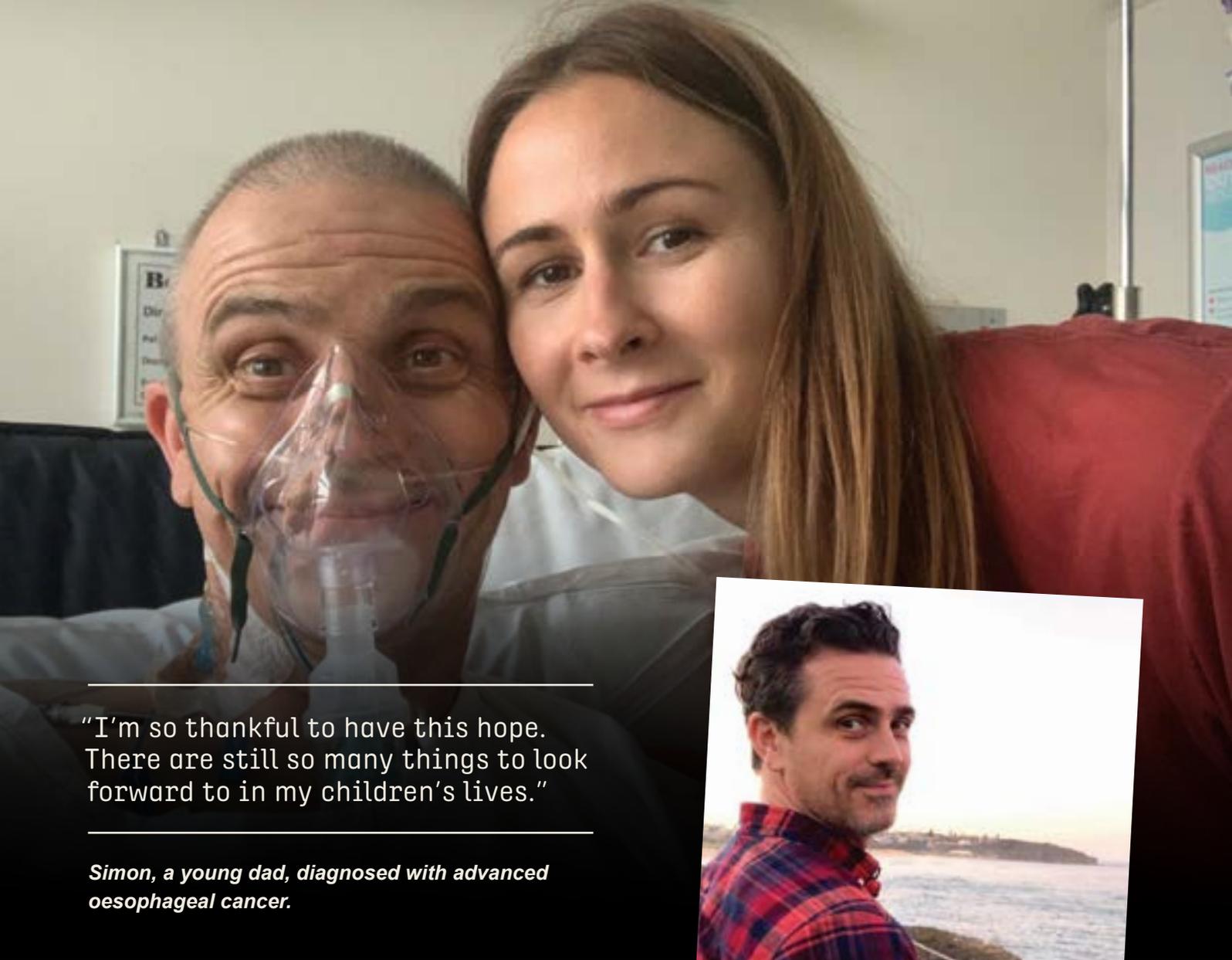


ProCan, with its high-performing, integrated multidisciplinary team, focussed on acquiring and analysing many thousands of cancer samples for which the outcome of treatment is already known. Achieving this has required a "hyper-collaborative" approach, in which the team work with cancer research groups that have world leading expertise in specific cancer types. By the end of the 7-year reporting period, 101 formal collaborative research agreements were in place, 69 within Australia and 32 in other countries, covering a total of 143 projects. Collaborators outside of Australia are in the USA, Canada, the UK, and Japan, and multiple countries in Western Europe, all of which have advanced health systems where the outcomes of treatment are comparable to those in Australia.

**This has enabled the ProCan team to generate the world's largest pan-cancer database of proteomes and associated clinical outcome data, all from a single proteomic platform, representing 109 different cancer subtypes. A major milestone for ProCan was its August 2022 Cancer Cell publication of the proteomic analysis of 949 human cancer cell lines.**

A secure, robust, clinical-grade data management platform was established to enable storage handling, analysis and dissemination of the very large amounts (petabytes) of data generated.

ProCan's ultimate goal is to develop clinically-validated technologies and tools to transform cancer diagnosis and treatment decision-making.



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"I'm so thankful to have this hope. There are still so many things to look forward to in my children's lives."

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*Simon, a young dad, diagnosed with advanced oesophageal cancer.*



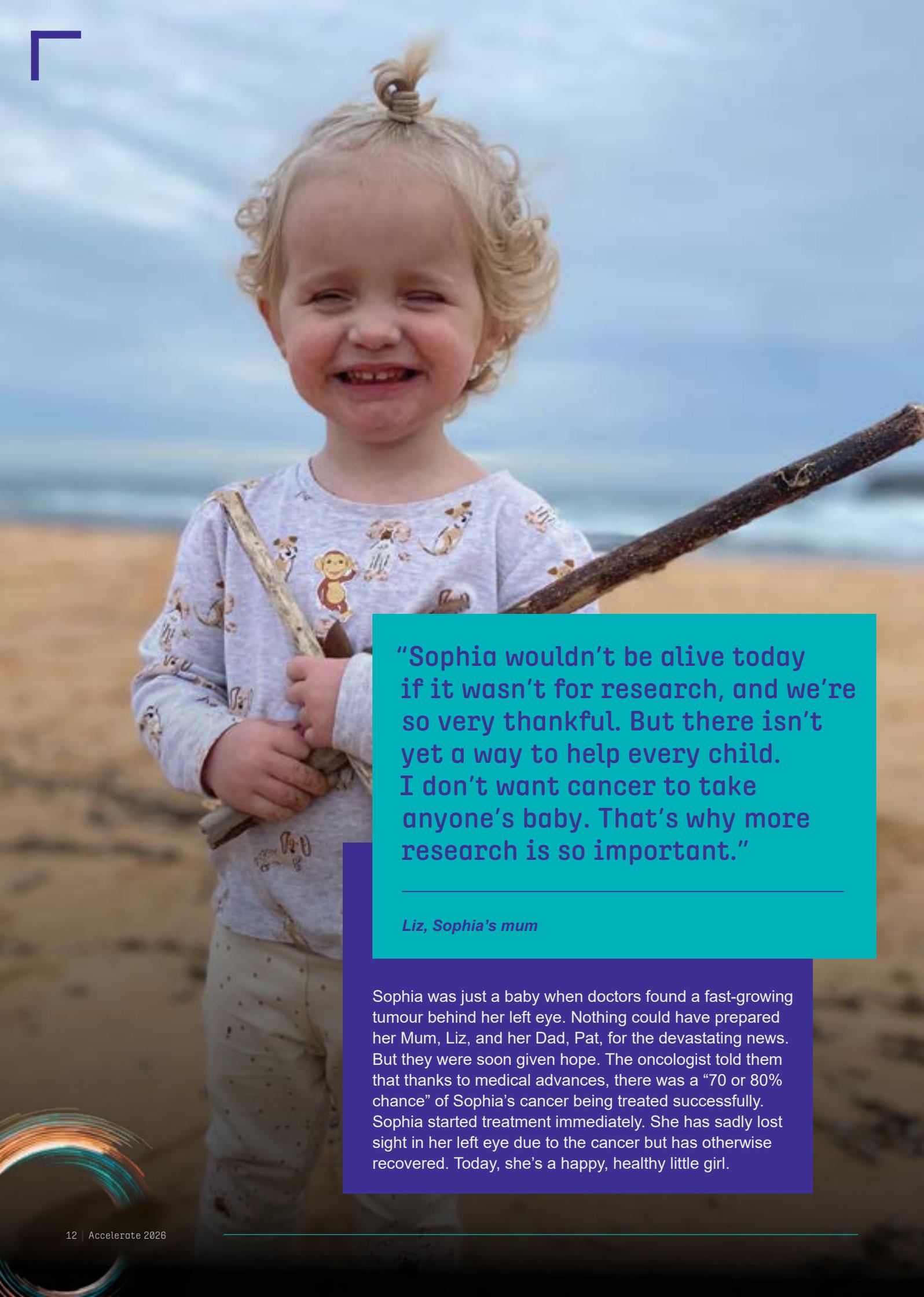
In August 2019, Simon was living a happy life. He had a successful career in advertising, a daughter Holly who was the centre of his world, and he had just found love again with Carli.

Simon went to see his doctor for a suspected stomach ulcer and, after a series of tests, in September 2019 just before Christmas, Simon was diagnosed with late-stage oesophageal cancer. When Simon's Oncologist told him that cancer was a race he likely wouldn't finish, it came as a huge shock.

Miraculously, the doctors found the cancer before it had spread to Simon's other organs. In a trial of endurance, his treatment team hit the cancer with the highest dose of chemo possible to stop the cancer from spreading. Following chemo, Simon underwent surgery to remove the tumour and re-construct his oesophagus. It is thanks to this state-of-the-art treatment, guided by cancer research of the last 10 years, that Simon is still here to spend another Christmas with his family.

**"If I'd been diagnosed in 2006, I'd have had less than a 5% survival rate. Today? I'm standing here. That's the power of science. That's the impact of funding, awareness, and incredible people who dedicate their lives to saving others." - Simon**





“Sophia wouldn’t be alive today if it wasn’t for research, and we’re so very thankful. But there isn’t yet a way to help every child. I don’t want cancer to take anyone’s baby. That’s why more research is so important.”

*Liz, Sophia’s mum*

Sophia was just a baby when doctors found a fast-growing tumour behind her left eye. Nothing could have prepared her Mum, Liz, and her Dad, Pat, for the devastating news. But they were soon given hope. The oncologist told them that thanks to medical advances, there was a “70 or 80% chance” of Sophia’s cancer being treated successfully. Sophia started treatment immediately. She has sadly lost sight in her left eye due to the cancer but has otherwise recovered. Today, she’s a happy, healthy little girl.

# Childhood cancers

ACRF's support of childhood cancers research has provided Children's Cancer Institute with significant support, with each grant building on the work of previous grants:



## **Drug Discovery Program (\$0.5M in 2001)**

Established a state-of-the-art chemistry laboratory purpose-built for the development of new anti-cancer drugs.



## **ACRF Drug Discovery Centre for Childhood Cancer (\$3.1M in 2007)**

An integrated and dedicated Drug Discovery Centre for Childhood Cancer, focusing specifically on defined molecular targets for improved treatment of childhood cancer.



## **ACRF Precision Medicine Centre for Childhood Cancer (\$1.5M in 2014)**

The centre receives and processes hundreds of samples of patients' tumours from partner children's hospitals around Australia, to analyse the samples and test them against libraries of drugs approved for a range of adult and child cancers.

Zero Childhood Cancer National Clinical trial established a world-leading precision medicine program for children with cancer. Bringing together leading clinicians and researchers around Australia and internationally, embracing research-driven clinical care to achieve better outcomes for children with cancer - now, and into the future.

Up until the end of 2024, ZERO had enrolled over 2,300 children through its TARGET pilot study, PRISM (ZERO PReclSion Medicine for Children with Cancer - predecessor national trial) and ZERO2 clinical trials.

ZERO has undergone a significant expansion, leveraging ACRF funding over 85 times.

## **Now, all children diagnosed with cancer in Australia have access to precision medicine.**

Involving all paediatric oncology units across Australia, as well as over 22 national and international research partners, ZERO provides in-depth genomic analysis for each child enrolled, with the aims to improve survival, reduce side effects, and advance science's understanding of childhood cancer for the benefit of all.



## **The ACRF Child Cancer Liquid Biopsy Program (\$3.5M in 2019)**

A more sensitive and far less invasive type of sampling than biopsies has been developed, using a child's blood or lymph fluid. This will improve diagnosis, detect relapse earlier, monitor treatment response and enhance delivery of the right treatment to the right child at the right time.

Using some of the world's most advanced technologies (provided by ACRF) for molecular and cellular profiling of patients with paediatric cancer, researchers are pioneering the application of novel, technologically advanced molecular and cellular profiling approaches to sensitively detect cancer burden in 5 key disease streams: brain cancer, haematological malignancies, sarcoma, neuroblastoma, and other extracranial solid cancers.

**LEARN MORE** about ACRF's history and the remarkable research we are proud to support. **Visit [acrif.com.au](https://acrif.com.au)**

# Trusted Australian cancer charity

## Foundation history

Australian Cancer Research Foundation (ACRF) was founded in 1984 by the late Sir Peter Abeles AC and the late Lady Sonia McMahon. The Foundation's focus was established following a survey of several science and medical professionals asking what they needed most to progress cancer research in Australia.

At the time, the need was for physical buildings to conduct research activities. Joining Sir Peter Abeles AC and Lady Sonia McMahon in establishing ACRF were the late Mr John Boettcher OAM and the late Sir Ian Turbott AO CMG CVO. All were well respected, prominent contributors to the Australian philanthropic community.

Sir Peter Abeles AC also enlisted the assistance of a trusted business associate, Mr Tom Dery AO, a driving force in the Foundation serving as its Chair for more than 25 years. Tom retired in March 2025, and Dr Tim Cooper AM was appointed as Chair.

By 1988, ACRF had raised its first \$1 million and, after careful consideration, awarded its first grant to the St Vincent's Medical Research Institute in Sydney.

Since 1984, ACRF has provided grant funding across Australia: ACT \$4M, NSW \$68.8M, QLD \$50.5M, SA \$13.3M, TAS \$1.2M, VIC \$66M, WA \$5.4M.

A network of bright minds and innovative ideas we are incredibly proud to support.

## ACRF's approach to funding:

Without any direct government funding, ACRF relies solely on donations to support its grant awards. This allows independent selection and the ability to take on measured risk.

With the current economic climate, shifts in government spending and a decline in university budgets for capital, ACRF has become an even more crucial part of Australian cancer research funding. The Foundation provides technology, equipment and infrastructure to enable ground-breaking discoveries that could have significant and long-term impacts on the lives of Australians, and the broader global community.

ACRF has initiated agreements with several other cancer organisations to create combined impact. This collaborative funding is typically applied to personnel and other project elements that do not fall within ACRF's funding focus. Incremental value is gained through increasing efficiency in the cancer research sector in Australia.

To date, bilateral agreements are in place with Cancer Institute NSW, Ovarian Cancer Research Foundation, RULE Prostate Cancer, Snowdome Foundation, the Cancer Research Trust, Australian Gynaecological Cancer Foundation and National Breast Cancer Foundation.



ACRF also engage internationally to ensure we continue to deliver world class cancer research funding.

## ACRF's pivotal role in research funding

ACRF provides grants of between \$1.5M and \$10M for technology, equipment and infrastructure for cancer research. Its goal is to enable, enhance and accelerate cancer research across Australia to the maximum extent possible each year to get closer to a world where every person diagnosed still lives a full, healthy life.

ACRF activities are conducted effectively and efficiently by four groups: members of the Medical Research Advisory Committee (MRAC) and the Board of Trustees who all volunteer their time; our small team of fundraisers, marketing and administrative staff; and professional services support, where some services are provided pro bono.

The Australian Institute of Health and Welfare report "Health expenditure Australia 2023-2024 (updated 29 October 2025) indicates:

- capital as % government expenditure of 3.7%;
- capital as % of non-gov expenditure of 11%; and
- non-government capital as % of total capital expenditure of 56%.

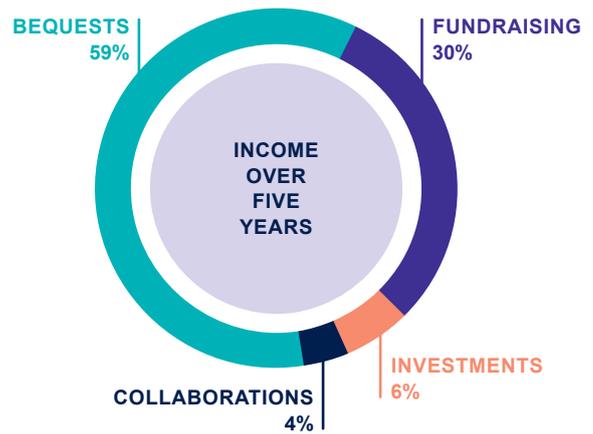
This clearly indicates the importance and reliance of private funding in this area, supporting what we hear from cancer researchers.

The Cancer Australia report titled "Cancer Research in Australia 2016 to 2018" indicates that private funding made up 26% of investment in cancer research projects.

Of this, 31% was provided by ACRF. Whilst Cancer Australia has not produced an updated report, this is anecdotally consistent indicating the importance of ACRF funding in the cancer ecosystem.

Typically, the number of valuable and worthy projects submitted to ACRF for funding outweighs the amount of funding available.

## Key financial metrics



### Cost of funding as a percentage of fundraising income

Over 5 years: 22%

2024 alone: 18%

**ACRF invests in enabling infrastructure. Bringing state-of-the-art equipment and research facilities to Australia, allowing institutes or groups of researchers to effectively get access to game-changing technologies and equipment.**



# ACRF Grant Journey

The rigorous grant selection process begins with grant submissions for potential research projects.

Grant applications are shortlisted by the expert ACRF's Medical Research Advisory Committee (MRAC) through a competitive evaluation and peer review.

## Principles

ACRF grant funding is based on the following principles, designed to manage risk and ensure maximum impact of investment in cancer research:

- To consider all aspects of cancer control - prevention, early detection, treatment and/or management - through research.
- To provide capital investment grants for technology, scientific equipment and new research infrastructure.
- To invest in research by institutes, hospitals and universities with outstanding credentials and/or potential in cancer research, to facilitate new and sustainable programs and to provide platforms that will add to Australia's cancer research capacity.
- To invest in projects that can demonstrate clarity of research vision and planning, strong leadership and experienced management.
- To drive collaboration and efficiencies by encouraging joint applications that pool the efforts of teams and institutions, so research questions can be answered more effectively and efficiently.
- To identify projects that can leverage ACRF grants to secure additional funding to deliver and sustain the project.

## Focus

ACRF funds vital technology, equipment and infrastructure needed to develop better prevention, earlier detection and more effective treatment methods across all cancer types. Funding is available within the following categories:

- Technology / major scientific equipment and laboratory instruments.
- Virtual infrastructure such as cloud-based storage capacity to support research projects.
- Capital works such as new buildings or additions to existing buildings.
- Specialised operating essentials (<25% budget) e.g. reagents (chemicals used in laboratory testing), or specialised software.
- Salaries of technical experts to operate and optimise the use of technologies and equipment (limited to \$100,000 per annum for 3 years).

ACRF commits to achieving the best possible clinical outcomes through high quality basic and translational research. Grant applications in support of this general philosophy are encouraged.

## Evaluation criteria

The ACRF MRAC evaluates each project using these criteria:

- Research excellence - cancer research program proposed is novel and exciting, how it is potentially impactful and how it will add value
- Platform – how use of the technology/equipment applied for will benefit the program
- Vision and planning – necessary skills, expertise in place, track record of the Chief Investigators in cancer research and in applying technology
- Fit with cancer - idea, approach or capacity that is at the forefront of cancer research nationally / internationally
- Collaborative gain – new, existing and emerging collaborations that will benefit the program and galvanise cancer research
- Synergies/Amplified outcomes - how the proposed grant leads to synergy with other programs, or how it may amplify the outcomes of other programs
- Management and governance - institutional commitment in place to ensure success and sustainability
- Budget
- Opportunity to leverage funds - money obtained in the last five years and expected leverage if the grant is awarded
- Proposed plans for the recognition and profiling of ACRF

The ACRF MRAC shortlists applications and performs a detailed and comprehensive interview with the research team. From there, projects are recommended by the MRAC to the ACRF Board of Trustees who determine the funding allocation.

Once confirmed, the grants are officially announced at an annual ceremony before contracts are finalised and projects get underway - this includes:

- Commissioning of equipment
- Official facility opening
- Key results measured and recorded
- Progress reports annually for seven years

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“Being co-chair of the ACRF’s MRAC carries a lot of responsibility. The future of cancer research is incredibly exciting and to play a role in enabling ambitious projects is a great thrill.”

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***Professor Ricky Johnstone***  
***ACRF Medical Research Advisory***  
***Committee Co-Chair***



# Medical Research Advisory Committee

Our remarkable MRAC volunteer their time to ACRF to assess and evaluate grants applications, making recommendations to the Board for the most impressive projects with highest potential.



**Professor Michelle Haber AM, BSc (Psych) (Hons), PhD, Hon DSc (UNSW), FAHMS, FAA**

Co-Chair of the ACRF Medical Research Advisory Committee. Appointed to the MRAC in 2012.  
Co-Group Leader, Experimental Therapeutics and Molecular Oncology, Children's Cancer Institute; Conjoint Professor, Faculty of Medicine, University of NSW.



**Professor Ricky Johnstone, PhD, FAHMS**

Co-chair of the ACRF Medical Research Advisory Committee. Appointed to the MRAC in 2019.  
Executive Director Cancer Research, Peter MacCallum Cancer Centre; Professorial Fellow (Professor), The Sir Peter MacCallum Department of Oncology, University of Melbourne; Associate Director of Laboratory Research, Peter MacCallum Cancer Centre; NHMRC Investigator grant recipient (L3); Director, Barrie Dalglish Centre for Multiple Myeloma and related blood cancers; Strategic Lead for Oncology Research, The University of Melbourne  
Adjunct Professor in Medicine Monash Health, School of Clinical Sciences, Monash Health, Faculty of Medicine Nursing and Health Sciences.



**Associate Professor Pratiti (Mimi) Bandopadhyay, MBBS, PhD**

Appointed to the MRAC in 2025.  
Pediatric neuro-oncologist and scientist within the Dana-Farber/Boston Children's Cancer and Blood Disorders Center, an Associate Professor of Pediatrics at the Harvard Medical School, and an Institute Member of the Broad Institute of MIT and Harvard. Faculty member for the Harvard Medical School PhD Program.



**Professor Michael Brown, MBBS, PhD, FRACP, FRCPA**

Appointed to the MRAC in 2016.  
Director, RAH Cancer Clinical Trials Unit, and Senior Consultant, Department of Medical Oncology, Royal Adelaide Hospital. Head, Translational Oncology Laboratory, Centre for Cancer Biology, SA Pathology, Adelaide. Clinical Professor, School of Medicine, College of Health, Adelaide University.



**Professor Geoff Hill, BHB, MBChB, MD, FRCPA, AAHMS**

Appointed to the MRAC in 2008.  
Senior Vice President, Division Director, Translational Science and Therapeutics. Director of Hematopoietic Stem Cell Transplantation, Leonard and Norma Klorfine Endowed Chair for Clinical Research. Fred Hutchinson Cancer Center; Professor of Medicine, Division of Medical Oncology, University of Washington.



**Professor Peter Leedman AO, MBBS, PhD, FRACP, FAHMS**

Appointed to the MRAC in 2019.  
Chief Executive Officer and Director, Harry Perkins Institute of Medical Research, WA; Professor of Medicine, The University of Western Australia.



**Professor Angel Lopez AO, MBBS, PhD, FRCPA, FAHMS, FAA**

Appointed to the MRAC in 2014.  
Head, Human Immunology, SA Pathology.



**Professor Marina Pajic, MSc (Hons), PhD**

Appointed to the MRAC in 2025.  
Co-Director of the Translational Oncology Program, Garvan Institute of Medical Research; Conjoint Professor, Faculty of Medicine University of New South Wales Sydney; Head of the Personalised Cancer Therapeutics laboratory, Garvan Institute. Snow Medical Research Fellowship and NHMRC Investigator in understanding and targeting therapeutic resistance of pancreas cancer, Garvan Institute.



**Professor Helen Rizos, BSc (Hons1), PhD**

Appointed to the MRAC in 2019.  
Deputy Dean, Research and Innovation.  
Faculty of Medicine, Health and Human Sciences,  
Macquarie University.



**Professor Clare Scott, AM, MB, BSc, PhD University of Melbourne, FRACP, FAA, FAHMS, GAICD**

Appointed to the MRAC in 2019.  
Laboratory Head, Cancer Biology and Stem Cells  
Division, Walter & Eliza Hall Institute of Medical  
Research. Chair, Gynaecological Cancer, Faculty  
of Medicine, University of Melbourne.



**Professor Alexander Swarbrick, BSc (Hons), PhD**

Appointed to the MRAC 2025.  
Laboratory Head and co-Director, Cancer Ecosystems  
Program, Garvan Institute of Medical Research.  
Conjoint Professor, Faculty of Medicine, UNSW.



**Professor Christopher Sweeney, MBBS, DHS, FRACP**

Appointed to the MRAC 2025.  
Director, South Australian Immunogenomics Cancer  
Institute and Professor of Medicine University of  
Adelaide, Australia, Consultant Medical Oncologist  
Royal Adelaide Hospital, Adelaide, Australia.



**Professor Dr Sjoerd Van Der Burg, PhD**

Appointed to the MRAC in 2017.  
Full professor in the immunotherapy of solid tumours  
at the University of Leiden. Head of the laboratory  
and Group Leader Experimental Cancer Immunology  
and Therapy, Department of Medical Oncology,  
Leiden University Medical Center, The Netherlands.  
Senior Investigator at the Oncode Institute, Utrecht,  
the Netherlands.



**Associate Professor Nicole (Nikki) Verrills, BSc (Hons), PhD**

Appointed to the MRAC 2025.  
Professor of Cell Biology and Biochemistry and  
Deputy Head of School, School of Biomedical  
Sciences & Pharmacy, University of Newcastle  
and Hunter Medical Research Institute.



**Professor Karen Vousden, PhD, CBE, FRS, FRSE, FMEDSCI, FAACR**

Appointed to the MRAC in 2025.  
Principal Group Leader, the Francis Crick Institute,  
London.



**Dr Nic Waddell, BSc, PhD**

Appointed to the MRAC in 2022.  
Head of the Medical Genomics group and coordinator  
of the Cancer Program at QIMR Berghofer Medical  
Research Institute in Brisbane, Queensland; Member,  
Executive Committee for Australian Genomic  
Technologies Association; Member, Australian  
Genomics; Research Committee Member, Cure Cancer  
Australia; Member, Queensland Genomics Community  
Advisory Group; Co-founder and Board Member,  
genomiQa; Cancer Institute NSW Research Committee;  
Associate Member, Australian Academy of Health and  
Medical Sciences Mentoring Scheme.



**Emeritus Professor Ian Frazer AC, MBChB (Edin), MD, FRS, FAA**

Appointed to the MRAC in 2005,  
Chairman 2009-2017.  
Honorary member  
Professor, School of Medicine, The University  
of Queensland. Board Chair, TRI Foundation.



# Board of Trustees

Australian Cancer Research Foundation is governed by an honorary Board of Trustees. The Board comprising noteworthy Australians steers the Foundation's strategic direction and governance to ensure all funds raised by our supporters are used in the best possible way.



**Dr Tim Cooper AM MD**  
MSc, MBBS, MD, MBA, MRCPE, FAICD

Chair – Trustee since 13 March 2024

- Executive Director, Coopers Brewery Limited
- Governor, Coopers Brewery Foundation Incorporated
- Deputy Director, Brewers' Association of Australia



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Trustee since 5 June 2024

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Trustee since 23 March 2022

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**Dr Dashiell Gantner BSc, MBBS, PhD, FCICM, FRACP**

Trustee since 10 December 2019

- Staff Specialist in Intensive Care, Medical Organ Donation Specialist, Alfred Health Adjunct Senior Lecturer, Department of Epidemiology and Preventive Medicine, Monash University • Director, Alfred Intensive Care Foundation Ltd • Director, Cassandra Gantner Foundation • Chair, Jianguo, K-OSSS and K-OSSS II Pty Ltd • Director, Nuco, Boqueria, Adela International Pty Ltd • Director, Black Gantner Asset Management LLC



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- National Affairs Columnist, The Australian Financial Review



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- Chair, Canberra Symphony Orchestra • Chair, UNSW Canberra Advisory Council • Chair, Supershock
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- Patron, Bravery Trust • Patron, Bomber Command
- Ambassador, ShelterBox Australia • Patron, ACRF International Centre for Cancer Glycomics



**Mr Peter Jones BSurv, LLB, FCIS, FGIA**

Trustee since 20 June 2005

- AML/CTF Compliance Officer, Hall & Willcox



**Mr Pat McCafferty BBus, MBA (exec), GAICD**

Trustee since 26 November 2024

- Director, TasWater • Deputy Chair WaterAid Australia • Director Thriving Communities Australia
- Managing Director Yarra Valley Water 2014-2025
- Chair, Water services Association of Australia 2016 -2020



**Mrs Cassandra Michie BEc, BComm, LLB, FCA, AICDG**

Trustee since 29 October 2019  
• Director and Chair, Finance and Property Committee for the Wayside Chapel



**Ms Carmel Mulhern BA, LLB, LLM, FCIS**

Trustee since 28 November 2023  
• Chair, Telstra Foundation • Member, Advisory Board, Centre for Artificial Intelligence & Digital Ethics, University of Melbourne



**Mr Adrian Redlich BEc**

Trustee since 13 March 2024  
• Director, Merricks Capital • Chief Investment Officer, Regal Partners Income Strategies • Deputy Chair, Murdoch Children’s Research Institute Investment Committee • Member, Cranbourne Investment Committee



**Mr Mark Tims BComm, CISA, MAICD**

Trustee since 5 June 2024  
• Partner, KPMG

## ACRF Patron



**Her Excellency the Honourable Ms Sam Mostyn AC Governor-General of the Commonwealth of Australia**

Ms Sam Mostyn AC was sworn in as Australia’s 28th Governor-General on 1 July 2024.

A businesswoman and community leader, Ms Mostyn is known for her exceptional service to the Australian community. She has a long history in executive and governance roles across diverse sectors, including business, sport, climate change, the arts, policy and not-for-profit.



# The importance of philanthropy

We have developed ACRF Accelerate with you in mind. We want to put you in the driver's seat of the research you support.

By supporting ACRF Accelerate, you will:

- Have the freedom to choose programs that align to your interests and passions.
- Receive outcome reporting for you to see the impact your support has had.
- Be part of a 40 plus year history of supporting the best and boldest research across Australia.
- Support pioneering ideas asking questions we have never solved and finding options we can only dream of.

Since ACRF was founded in 1984, there have been significant leaps forward in the way we prevent, detect and treat cancers. Unfortunately, cancer is a complex, deceptive and evolving disease group, and to truly tackle it, we need the brightest minds asking the boldest questions. Questions that allow us to see cancer differently, to treat it more effectively, to understand better and ultimately to disable it.

Each year, we leave programs with huge potential unsupported because quite simply, and unfortunately, we are limited by funding. That's why you and the support you can provide is so essential.

Supporting innovation takes courage and risk. This document showcases the rigorous process and professional input applied to each ACRF grant award. We hope this gives you the peace of mind needed to make a contribution to our game changing research.

We look forward to talking further and sharing details of projects requiring your help.



**Join a philanthropic program** that funds trailblazing pioneering cancer research projects



**Hand select and contribute** to world-class project/s that are meaningful to you



**REQUEST more detail** of projects in line with your ambitions



**Follow the progress** at your own pace through updates and reports

Scan to read more



# How to get in touch with ACRF

We look forward to meeting you to discuss your preferred contribution to ACRF Accelerate.

To start this discussion, please contact us via email [philanthropy@acrf.com.au](mailto:philanthropy@acrf.com.au) or give us a call.



**Kerry Strydom**  
CEO

Email: [kstrydom@acrf.com.au](mailto:kstrydom@acrf.com.au)  
Mobile: 0414 266 598

Kerry joined ACRF in 2017, moving from a commercial career spanning global clinical research, FMCG and professional services. A Chartered Accountant (KPMG) with experience across business functions and geographies, Kerry leads the ACRF team with passion, focus and a personal commitment to advance research outcomes for people diagnosed with cancer.



**Victoria Bonsey**  
Philanthropy Manager National Lead

Email: [vbonsey@acrf.com.au](mailto:vbonsey@acrf.com.au)  
Mobile: 0401 510 181

Victoria has been a professional fundraiser for over 25 years in the Australian charity sector. Since 2017, Victoria has been delighted to inform and connect supporters with ACRF, helping them back brilliant cancer research for accelerated outcomes and maximum impact.



**Carly du Toit**  
General Manager  
Fundraising and Marketing

Email: [cdutoit@acrf.com.au](mailto:cdutoit@acrf.com.au)  
Mobile: 0422 044 801

Carly is passionate about the impact of our supporters' generous contributions, raising funds for cancer research and delivering engaging, outcomes-focused donor communications and helping tell the stories of all the people who contribute to the extraordinary world of ACRF.



**Peter Bly**  
Philanthropy Manager

Email: [pbly@acrf.com.au](mailto:pbly@acrf.com.au)  
Mobile: 0415 102 993

Peter has been fundraising for over 15 years, working mainly in the cancer research field. Peter is passionate about connecting donors to the world-class research work that is being carried out in Australia every day.

AUSTRALIAN  
CANCER  
RESEARCH  
FOUNDATION



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