

REPORT OF THE TRUSTEES AND FINANCIAL STATEMENTS FOR THE YEAR ENDED 30th SEPTEMBER 2012

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AMREF (UK) **LEGAL INFORMATION**

Patron

HRH The Prince of Wales

President

The Duke of Richmond & Gordon

Board of Directors

Mr Gautam Dalal (Chairman)

(and Trustees)

Mr Paul Davey

Mr Matthew Edwards (resigned 2 February 2012)

Mr Liam Fisher-Jones

Mr Ian Gill

Mr Mark Goldring

Mr James Murray Grant (Honorary Treasurer)

Ms Sally James

Dr Josephine Ruwende (appointed 3 May 2012) Ms Katy Steward (appointed 1 October 2012) Ms Samara Hammond (resigned 8 February 2012)

Chief Executive

Ms Samara Hammond (appointed 1st May 2012)

Company Secretary

Mr Ian Gill

Charity Number

261488

Company Number

00982544

Registered Office

Lower Ground Floor

15-18 White Lion Street

N1 9PD

Bankers

C Hoare & Co 37 Fleet Street London EC4P 4DQ

Barclays Bank

7th Floor, United Kingdom House

180 Oxford Street London W1D 1EA

Investment Adviser

CCLA

80 Cheapside London EC2V 6DZ

Auditors

Kingston Smith LLP **Chartered Accountants** Devonshire House 60 Goswell Road London EC1M 7AD

1. AMREF

AMREF is one of Africa's leading health organisations, saving and transforming people's lives in the continent's poorest and most marginalised communities. AMREF helps to create vibrant networks of informed and empowered communities and healthcare providers, working together in strong health systems. It believes the solutions to Africa's problems lie within.

The role of AMREF UK, as a pro-active member of the AMREF global family, is to provide as much funding, technical support and other resources to support the work of the global organisation. Our work in AMREF UK supports the poorest and most vulnerable communities throughout sub-Saharan Africa with offices in Ethiopia, Kenya, Tanzania, Southern Sudan, Uganda, South Africa and Senegal to strengthen health systems and ensure those most in need are better able to access affordable and appropriate health care. Our primary goal is building capacity for healthier communities and stronger, more responsive health systems, and, as our world renowned "Flying Doctors" programme embodies, we believe that every life is to be valued.

AMREF is African owned and lead, and headquartered in Nairobi, Kenya. AMREF is an Africa-centric organisation run by a multi-cultural and diverse group of people for Africans. AMREF's shared vision is of lasting health change in Africa: communities with the knowledge, skills and means to maintain their good health and break the cycle of poor health and poverty. Generally, we focus on long-term change as opposed to short-term, emergency solutions. We believe in the inherent power that lies within African communities, and in particular the power for lasting transformation of the continent's health. We celebrate and respect the communities that we work with. Our role is to catalyse the hidden but real energies within those communities, to help them find innovative solutions to their challenges, and empower them to engage with existing infrastructure to maximise both the effectiveness of the solution, but also the sustainability.

AMREF's credibility derives from its history, heritage and track record – over 50 years of working with the most vulnerable communities in Africa. AMREF UK contributes to this mission, through engaging the support of donors, funders, staff and volunteers, and through its technical knowledge and experience gained over many decades.

Otherwise expressed: AMREF UK can be thought of as a grant making charity to AMREF, the operational arm.

2. STRUCTURE, GOVERNANCE AND MANAGEMENT

2.1 Constitution and governing document

AMREF UK is a company registered in England, Company Number 00982544, whose members' liability is limited by guarantee. The objects of the company and the powers of the Board of Directors are set out in the Memorandum and Articles of Association, last amended 24 March 2007, as are the regulations concerning the appointment of new Director.

AMREF UK is also a charity registered with the Charity Commission in England and Wales, Charity Number 261488. The primary objectives of the charity are the alleviation of poverty, the advancement of health and the saving of lives.

The information shown on page 1 forms a part of this report.

2.2 Governance

In 2006, the Board adopted a Good Governance Code, as recommended by the Charities Commission. This code clarifies the role of AMREF UK's Board and its Directors, and put in place robust procedures for Board review and renewal, delegated responsibility, compliance and risk management.

A steady renewal of Directors is provided by maximum terms of office (nine years). Succession planning arrangements ensure timely replacement of Directors resigning or reaching the end of their terms of office. New Directors are recruited through a transparent and open selection and interview process based on the skill and knowledge requirements of the Board. New Directors receive a formal induction to the organisation. The Board and Directors/Trustees have collective and individual objectives that are reviewed annually, and they are supported to this end through ongoing training as required.

There are four sub-committees of the Board: Governance, Finance & Audit, Fundraising, and Programmes, all of which meet quarterly to provide support in key areas as well as strategic direction.

2.3 Risk management statement

A robust risk management process by quarterly review, involving AMREF UK staff and directors, ensures the monitoring of all risks, and identifies those material risks worthy of closer scrutiny. The Board delegates specific responsibility for risk management and mitigation to executive staff. Three major risks identified and managed in 2012 were:

a) Maximising government funding:

In the past AMREF has been extremely successful in securing funding from both the EC and DFID, and this has contributed to a large percentage of the UK programme portfolio and income. With the changes in EC budget and DFID grant making schemes (closure of the Civil Society Challenge Fund and launch of Global Poverty Impact Fund) AMREF needs to continue to maximise these opportunities as well as continue to diversify the restricted programme portfolio through new Trusts, Foundation and Corporate support,

- b) Difficulties in securing unrestricted funding: The global recession has added to the levels of competition for securing unrestricted income. Increasing our levels of unrestricted income is a major organisational priority. Strengthening and supporting the fundraising team and its ability to deliver, as well as planning for future investment in individual giving are key plans of our strategy for mitigating the risk of lack of growth in this area.
- c) Staff turnover: The organisation has experienced a high staff turnover during the last few yeara, the consequences of which include a potential loss of institutional memory and in some cases possible damage to key external relationships. To mitigate this risk a new substantive CEO was appointed with the task of developing an HR strategy which focuses on supporting and recognising staff and their achievements. This should allow the organisation to create a more stable environment, reducing staff turnover and increasing productivity and wellbeing.

¹ Throughout this report, for consistency, the 12 months ended 30 September 2011 and 2012 will be described as "2011" and "2012" respectively.

3. STATEMENT OF PUBLIC BENEFIT

We have referred to the Charity Commission's general guidance on Public Benefit when reviewing our aims and objectives and in planning our future activities. In particular, the Trustees have considered how the planned activities of the charity will contribute to achieving the aims and objectives they have set.

The criteria for public benefit, as defined by the Charity Commission guidance include (i) the prevention or relief of poverty; and (ii) the advancement of health or the saving of lives.

AMREF UK's purpose is to increase the impact of AMREF in Africa. This is achieved by providing funding and technical support, by influencing policy and practice, and by raising awareness of African health issues in the UK and relevant global forums.

The Funding raised is used to develop model innovative programmes that strengthen African health systems, that can be replicated and scaled e.g.: elearning for nurses, the evidence generated is then used to influence policy and practice; increasing partnerships with the corporate sector and other donors to secure greater financial and technical support to strengthen health systems; and raising the profile of African health issues with the UK press and general public for the purposes of public benefit.

AMREF works in some of the poorest and most remote parts of Africa with particular focus on working with vulnerable, impoverished and marginalised communities, including women and children, to improve their health and wellbeing.

In the view of the Trustees, it is clear that we meet the criteria of public benefit, as defined by the Charity Commission.

4. STRATEGIC AIMS AND OBJECTIVES TO MEET OUR OBJECTS

AMREF'S ongoing purpose is to strengthen health systems across Africa. Within this business plan, AMREF focuses on transforming communities by improving the health of women and children based on three health systems building blocks:

- Human Resources for Health
- · Community Systems Strengthening; and
- Health Management Information Systems, with a strong focus on evidence-based advocacy, operational research and policy change

We focus on key thematic approaches:

- We partner with communities for better health;
- We build capacity to strengthen communities and health system responsiveness; and
- We undertake health systems research to influence policy and practice.

AMREF believes that health is a basic human right and we operate our programmes with a rights-based approach. AMREF identifies priorities and allocates resources on a pro-poor basis, giving priority to people and communities we believe to be the most vulnerable. No person is excluded, either internally or in our programmes and interventions, on grounds of gender, sexuality, religion, race or culture. We believe that the power for lasting transformation of Africa's health lies within its communities.

AMREF sets high professional, ethical and medical standards and we monitor these closely within our projects, among ourselves and among those whom we partner. AMREF believes in strategic partnerships as a means to conduct successful and sustainable interventions and develops partnerships with like-minded organisations that share our core values and strategic focus.

4.1 AMREF UK's objectives

AMREF UK's objectives are to support the wider AMREF family to deliver the overall strategic plan. AMREF globally has invested significant time and resource in sharpening the focus, so the goals of the AMREF UK operation come from that context, as follows:

- a) To increase funding to AMREF's programmes: Ultimately we need to maximize our financial contribution to Africa, as well as cover our AMREF UK operational costs, and we do this by increasing programme income from government and corporate donors, and by increasing unrestricted giving from individuals, corporate donors, trusts and foundations.
- b) To provide high quality technical support: Support from AMREF UK is vital to enable AMREF to strengthen Africa's health projects. We do this by providing both technical assistance at HQ, country office and programme levels of strategic support. We work consistently on improving the quality of our donor relationships, for example by improving the quality of donor funding reports.
- c) Advocacy: We seek to influence UK decision-makers' and donors' policies and practice, and to close the gap between Africa's health systems and poor communities. We do this by supporting the development of AMREF's research strategy and ensuring that all UK-funded programmes contribute to research; and by strong advocacy for building the numbers and capacity of health workers and community health workers.
- d) Increasing awareness of African health issues: We seek to raise the profile of AMREF in the UK in so far as this increases awareness of African health issues in order to bring about attitudinal and policy change. For example, we aim to secure appropriate press coverage, including our partnership with the Guardian, and to work closely with our celebrity ambassadors.
- e) Good Governance: Underpinning all we do, we ensure good governance, accountability, efficiency and effectiveness by continually strengthening our financial systems, audit and budgeting processes, implementing an effective knowledge management system, and ensuring that all programmes have formal contracts and memoranda of understanding.
- f) AMREF family: We need to strengthen strategic relationships with all AMREF offices in Africa by developing more effective working relationships with each and with our Northern Office partners, and by increasing accountability and transparency between AMREF UK and AMREF members in Africa and beyond. AMREF UK will proactively support the wider One-AMREF goals.

5. ACHIEVEMENTS AND PERFORMANCE

In 2012, AMREF continued to bring good-quality, affordable health care closer to those who need it most, providing clean water, health education, and training to communities in six African countries: Ethiopia, Uganda, Kenya, Tanzania, South Africa, and Southern Sudan, as well as to health workers from across the continent. Core achievements against our 2012 objectives were as follows:

5.1 The delivery of (in the region of) £4.4m million of grant income to support the programme in Africa whilst ensuring effective and efficient grant management and high quality donor reporting.

In 2012 AMREF UK supported over eighteen programmes in six countries across Africa as follows. Several programmes are supported through multiple donors. Through the GSK 20% initiative in 2012 AMREF set up 12 new projects across East and Southern Africa to support the overall increase of front line health workers.

Table: AMREF UK countries and programmes of support

Country	Number of active programmes at the end of 2012	Main Supporters
Kenya	2	European Union and Comic Relief
Tanzania	4	GSK, DfID, Jersey Overseas Aid, Ferguson Trust and
		Nominet
Uganda	2	AstraZeneca;
Ethiopia	7	EC, DflD, Medicor, Euromoney, Opal Foundation, and Jersey
		Overseas Aid, ViiV Healthcare
Regional	3	EC working in Tanzania, South Sudan and Kenya, GSK 20% initiative working in East and Southern Africa, and the ACU commonwealth scheme

In 2012, AMREF UK raised £3,991k (2011, £2,923k) from secured programmes. Although the funding target of £4.4million was not completely achieved this still represents a 37% growth in grant income and was the result of the submission of quality and timely reporting and the continuation of building strong donor relations with current and new donors. In 2012 AMREF secured and started implementation of two new grants from ViiV Healthcare and Comic Relief.

5.1.1Institutional donors

AMREF continues to maximise opportunities from institutional **donors** with institutional income increasing from £981k in 2011 to £1,242k in 2012. In 2012 we supported seven institutional programmes, four through the European Commission and three through the Department for International Development (DfID) in five countries.

5.1.2 Corporate Donors

AMREF UK's **corporate support** continues both in terms of financial and pro bono work. Overall corporate contributions saw a substantial increase during the year and rose to £2,048K.

Key successes included the full start up of our partnership with GlaxoSmithKline's (GSK's) initiative to reinvest 20% of its profits from its work in developing countries. The focus of this programme is to increase the number and capacity of front line health workers across Africa and Asia. AMREF UK is responsible for East and Southern Africa. In 2012, AMREF started projects in 12 countries across East and Southern Africa – Ethiopia, Tanzania. Uganda, Burundi, Djibouti, Rwanda, Lesotho, Angola, Mozambique. Madagascar, Zambia. In 2012, South Sudan was included under AMREF's portfolio to support the training of community midwives. MREF continues to build on relationships with existing corporate partnerships. In 2012 this included securing a new two year Trachoma project in Ethiopia with Euromoney and partnering with ORBIS. Implementation will start in 2013. AMREF UK started a new 3 year project with ViiV Healthcare Positive Action for Children Fund in Ethiopia to support the prevention of mother to child transmission of HIV/AIDs.

Our partnership with AstraZeneca on the 5-year integrated MAT (Malaria, HIV/AIDS and TB) project in Uganda was nominated for two awards — the Business Charity Awards in London and the Global Business Coalition on Health awards in New York. It went on to win a GBC Health award for AstraZeneca in the Community Investment category.

GSK's pro bono support has also continued to grow through their PULSE volunteer initiative. This enables placements with charities in order to make a sustainable difference for communities. In 2012, GSK donated staff time to AMREF from three volunteers. One of these donated directly to AMREF UK with time conservatively valued at £21k, to support our IT and knowledge management.

5.1.3 Trusts & Foundations

We raised a total of £496k (2011, £704k) from Trusts and Foundations this year for specific charitable activities. This decrease is the result of several key Trusts and Foundation supported programmes coming to a close in 2012. In spite of this, AMREF focused on strengthening relationships with new and existing partnerships and building up the pipeline of programmes for future years (see objective 2). In 2012, this included securing a £2m grant from Comic Relief for a maternal and child health project in Kenya, which started in May 2012.

5.2 A well stocked pipeline, to a value of £4-5m, of large, multi year high quality proposals that are fully aligned to the AMREF business plan to ensure growth in future delivery;

A key focus for AMREF in 2012 was to build a pipeline of large multi- year proposals to submit to a range of donors. This was a key achievement for 2012 with AMREF UK submitting 15 new proposals totalling £5,757k. AMREF UK saw a 87% success rate with these proposals which means that AMREF UK has secured funding of £5,021k over the next few years. This is a fantastic achievement for AMREF UK with new donors including Big Lottery Fund, Comic Relief, DFID, European Commission, Euromoney, and the Pharo Foundation .

5.3. An improvement in the underlying financial stability of AMREF UK through investment in achieving steady growth in unrestricted income and 5.7: Investing in donor recruitment activities to increase unrestricted income:

In 2012, unrestricted income grew by over 32% to £1,028k. Part of this growth arose from an increase in major donor income which resulted from an improved focus and stewardship in this area. We have continued to build more comprehensive relationships with our donors across fundraising functions through a series of cultivation events maximising the visits from the team in Africa which have proved a successful model for engagement. These improved relationships have allowed for an increase in repeat gifts.

In 2012 AMREF also developed and implemented a new legacy strategy which included communications with our current donors and advertising in key solicitors journals. This resulted in two large legacies being received in 2012 along with notifications of other future legacies.

The team was restructured to free up unrestricted monies which could be used to test new ways to recruit regular givers with focused success criteria and reporting on a payment by results basis to minimise risk. Having tested new ways of recruiting donors the focus of the team was changed to a more marketing led approach to ensure we targeted best fit audiences in order to recruit new supporters, for example, health professionals and the African diaspora. Progress has been somewhat hindered by higher than normal staff turnover in key posts and prolonged recruitment due to low brand awareness and difficult market place.

5.4. Stronger brand recognition of AMREF in the UK though the delivery of a robust marketing and communication strategy;

A key focus for AMREF in 2012 was to launch a new website which showcased AMREF's work and positioned us to the general public as a charity people could and should want to support. This was supported by an increase in social media activity on Twitter, Facebook and Pinterest in order to drive people to the website and discuss issues high on AMREF's agenda. During 2012 we increased our followers on Twitter by approximately 70%.

During the Olympics AMREF had a presence at 'Africa Village' which enabled us to talk to over 1,500 individuals from across the UK, in fact worldwide. Not only did this help us achieve increased brand recognition but we also collected contact details for new potential AMREF supporters.

5.5. A tangible improvement in our coordination and cooperation with other AMREF offices and proactive support to ONE AMREF

As the new 'One AMREF' global strategy begins to embed, systems to improve coordination and integration begin the countries and the disciplines come on line. Several Multilateral international meetings now take place both at an executive level, but also at a discipline specific director level-allowing for learning, best practice and shared goals to be more easily achieved. The launch of AMREF's first ever international campaign 'Stand up for African Mothers', is evidence of this developing coordination.

5.6. Continuous improvement in the performance of the UK team/ office.

In challenging financial times the UK team has successfully grown both restricted and unrestricted giving, increasing the support that the UK is able to give to Africa. Developing staff, and supporting the development of a dynamic team is a journey and with a small young team remains a continuous process.

6. FINANCIAL REVIEW

Total income for the year 2012 was £4,884k. This represents a 22% increase on total income for the previous year (£4,005k). This growth in income occurred in both the unrestricted and restricted income streams. Unrestricted income increased by 32% to £1,028k and was a result of a growth in major donor and legacy income. However, the administrative retention on restricted grants, which is treated as unrestricted income, fell significantly (33%) this year to £136k due to the timing of transfers of grants to Africa (which triggers the retention) and due to the increasing difficulty in obtaining agreement from donors to an administrative contribution to AMREF UK's overheads. Restricted income rose by 20% mainly as a result of the increase in grant income from companies and particularly from Glaxo SmithKline who are supporting a wide range of AMREF programmes. They also provided AMREF UK with a volunteer for part of the year which has been treated as a gift in kind. We would like to thank all our supporters for their generosity during the year.

Overall resources expended decreased by 12% during the year, with an increase in unrestricted spend more than offset by a reduction in restricted expenditure. Unrestricted fundraising expenditure grew by 20% as a consequence of the fundraising team restructuring and of the increase in events and mail outs that took place during the year. Restricted costs at £3,038k were 17% lower than the previous year.

There was a surplus of net incoming unrestricted resources for the year due to the increase in unrestricted income and so the unrestricted funds balance increased by £106k to £511k. The restricted fund balance also increased to £1,427k although this swiftly reduced by £700k after the year end as a result of a delayed funds transfer. There were two deficit project balances at the year ended 30th September 2012. There is a deficit balance of £6,379 relating to the South Omo Reproductive Health project in Ethiopia. The project is funded by DFID whose payment scheme was changed during the year from a payments in advance scheme to an arrears scheme. The deficit was cleared in October when the next tranche was received from DFID. Another deficit balance of £4,825 existed on the Afar Pastoralist Health project in Ethiopia. This is an on-going project and we are actively seeking the next tranche of funding from the European Union. It is not expected that this deficit will need to be funded from general reserves (unrestricted funds).

The cash held by the organisation at the end of September 2012 (£1,900k) increased significantly from the balance held at 30th September 2011 of £958k. This reflects the increase in both unrestricted and restricted reserves.

6.1. RESERVES POLICY

To safeguard the core activities in periods of fluctuating income, the Trustees have determined to establish unrestricted net free reserves to cover six months operational costs ideally amounting to around £400-£500k.

The unrestricted reserves held at 30 September 2012 were £511k (2011, £406k). These unrestricted reserves include a designated fund of £163,843 which has earmarked funds to support a specific project in the following year. Net free reserves were therefore £319k at the year end (2011, £389k). This is below the ideal level determined by the trustees but is still deemed to be acceptable by them as it represents approximately four months of operational expenditure.

In addition, AMREF UK continues to monitor closely the match-funding liabilities on its future grants. The policy is to engage with implementing and funding partners to ensure that matched funding liabilities are covered.

6.2. INVESTMENT POLICY

All funds held by AMREF UK for future use in furtherance of its objectives are held in deposit accounts available on demand with the United Kingdom-based banks. The Memorandum and Articles of Association place no specific restrictions on the investment powers of the Board of Directors.

7. FUTURE PLANS

AMREF UK has been in existence for almost 50 years and up until 10 years ago its annual income was less than £1m per year. A strategy focusing on programmatic funding saw its income rise rapidly over a five year period to between £4-£5 million where it has remained for the last four years. This has coincided with a succession of interim leadership for the organization. With the appointment of a substantive CEO, there will be a renewed focus on quality and impact of the work done in Africa through facilitated support from the programmes team in the UK. The impact and outputs driven through a higher quality programmatic process will flow through to the fundraising ask, and the case for support.

The first year will see systems and processes reviewed, revived and strengthened in fundraising, programmes and finance and administration and there will be a focus on supporting the organisation to develop a strong platform from which to launch. The second to fifth year will see a steady growth in programmatic funding, with the high impact and outputs being pulled through to the fundraising team to further support the organisation. The overall aim is to double our income within 5 years, by 2017. This will be further supported by a more engaged approach towards supporting direct funding to Africa, and developing a framework for recognition of the UK contribution to indirect funding.

AMREF UK, which sits in the North, supports the "One AMREF" strategy launched in September 2012, through fundraising, profile raising and advocacy. AMREF UK's vision is to engage, inspire and influence people to invest in lasting positive health change for the people living in Africa by making AMREF the African health charity of choice. AMREF UK aims to double its income through fundraising in order to contribute to AMREF's work in Africa. This will be achieved through focusing on four approaches:

- 1) Business strengthening through the development and maximization of the infrastructure in the UK to enable and empower the UK team to deliver;
- 2) New business development: develop new networks and partnerships and develop new 'products' which clearly show what AMREF does in Africa, and what the impact is on the health of the population;
- 3) Excellence in donor/partner relations to ensure all donors, regardless of type, are aligned to AMREF's vision and mission;
- 4) Develop a programme portfolio by working with our in country colleagues- supporting the development of a strategic 'basket' of high value, high quality, long term programs of work-which we will then seek funding for both in the UK, and other northern offices where appropriate. Through this we will maximize our contribution and commitment to the "One AMREF" Vision.

AMREF UK's business plan priorities for 2012/13 have been designed to support the delivery of the organisational business plan priorities. We will work to achieve the following objectives:

- 1) Raise unrestricted income to cover UK running costs and to enable the development of new business foundations for growth over the next few years.
- 2) Develop a more pro-active approach to facilitate and support AMREF Africa to identify and develop high quality projects with robust outcome and income measures to ensure a solid pipeline of programme income for the future.
- 3) Secure £4.2 million of restricted income through improving grant, donor and partner management. This will include ensuring that donor requirements are met and high standard reports are submitted but also by improving the processes around the grant management cycle specifically in respect of the start up process and the exit strategy.
- 4) Capture, reflect and share positive outcomes from Africa by ensuring that all programmes have clear output and impact measures and that these can be disseminated in an effective and timely way, using a variety of communications channels, to our key stakeholders.
- 5) Support and be involved in the development of "One AMREF" through closer collaboration with both the other Northern AMREF offices and the programme management team in AMREF HQ in Nairobi. This includes the development of a consultancy framework to support the Southern Offices to access African funding directly.
- 6) To strengthen AMREF UK's organisational efficiency and effectiveness by improving our ICT infrastructure, moving offices and formalising our internal governance processes.

In all our work we orientate around our ultimate goal and purpose – to deliver to a continent where no one is deprived of access to basic healthcare on the basis of poverty, injustice or any other reason.

8. STATEMENT OF TRUSTEES' RESPONSIBILITY

The trustees (who are also directors of AMREF UK for the purposes of company law) are responsible for preparing the Trustee Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year which gave a true and fair view of the state of affairs of the charitable company and of the income and expenditure of the charitable company for that period. In preparing those financial statements, the Trustees are required to:

- Select suitable accounting policies and then apply them consistently;
- · Observe the methods and principles in the Charities SORP;
- Make judgements and estimates that are reasonable and prudent;
- State whether applicable UK Accounting Standards have been followed, subject to any
 material departures disclosed and explained in the financial statements;
- Prepare the financial statements on an ongoing concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and to enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Trustees are aware:

- There is no relevant audit information of which the charitable company's auditors are unaware; and
- The Directors have taken all the steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

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

9. AUDITORS

Kingston Smith LLP have indicated their willingness to continue in office and are deemed to be reappointed in accordance with section 487(2) of the Companies Act 2006.

THIS REPORT WAS APPROVED BY THE BOARD OF TRUSTEES ON 31 th May 2013 AND SIGNED ON ITS BEHALF BY:

MR GAUTAM DALAL

CHAIR

COMPANY NUMBER 00982544

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF AMREF (UK)

We have audited the financial statements of AMREF UK for the year ended 30 September 2012 which comprise the Statement of Financial Activities [the Summary Income and Expenditure Account], the Balance Sheet and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and the Financial Reporting Standard for Smaller Entities (Effective April 2008), United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities.

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 Part 16 of the Companies Act 2006. Our audit work has been undertaken for no purpose other than to draw to the attention of the charitable company's members those matters which we are required to include in an auditor's report addressed to them. To the fullest extent permitted by law, we do not accept or assume responsibility to any party other than the charitable company and charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of Trustees and Auditor

As explained more fully in the Trustees' Responsibilities Statement set out on page 9, the trustees' (who are directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the trustees; and the overall presentation of the financial statements. In addition we read all the financial and non-financial information in the Annual Report to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications

Opinion on the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 30 September 2012 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice applicable to Smaller Entities; and
- have been properly prepared in accordance with the requirements of the Companies Act 2006.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- · certain disclosures of trustees' remuneration specified by law are not made; or
- · we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemption in preparing the trustees' report.

Neil Finlayson, Senior Statutory Auditor

for and on behalf of Kingston Smith LLP, Statutory Auditor

Devonshire House 60 Goswell Road London EC1M 7AD

Date: 5/6/2013

AMREF (UK) STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING THE SUMMARY INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 30TH SEPTEMBER 2012

	Note	Unrestricted Fund £	Restricted Fund £	2012 £	2011 £
Incoming Resources					
Incoming resources from generated funds:					
Fundralsing activities	2	91,609	Ð	91,609	87,501
Voluntary Income	2	771,771	0	771,771	965,969
Investment Income - Bank Interest		8,251	0	8,251	8,483
Incoming resources from charitable activities:					
Grants for specific purposes	3	136,102	3,855,125	3,991,227	2,923,581
Gifts In Kind	4	21,135	0	21,135	20,000
Total incoming resources		1,028,868	3,855,125	4,883,993	4,005,534
Resources Expended					
Costs of generating funds:					
Fundraising activities	2	98,535	0	98,535	76,906
Costs of generating voluntary income	2	408,222	0	408,222	347,209
Direct charitable expenditure:					
Grants to Projects	5	371,571	3,038,256	3,409,827	4,046,384
Governance costs	7	43,971	0	43,971	40,888
Total resources expended		922,299	3,038,256	3,960,555	4,511,389
Net incoming Resources before transfers		106,569	816,869	923,438	(505,855)
Transfers between funds	17	(634)	634	0	0
Net Movement in Funds		105,935	817,503	923,438	(505,855)
Balance brought forward at 1st October		405,827	609,637	1,015,462	1,521,317
Balancecarried forward at 30 September	13, 17	511,762	1,427,140	1,938,902	1,015,462

There were no recognised gains or losses in the period other than those shown above.

The notes on the attached pages form a part of these financial statements.

AMREF (UK) BALANCE SHEET AS AT 30TH SEPTEMBER 2012

	Note	2012	2011
		£	£
FIXED ASSETS	10	29,232	16,324
CURRENT ASSETS			
Debtors Cash at bank and in hand	11	66,465 1,900,035 1,966,500	94,608 958,429 1,053,037
CREDITORS Amounts falling due within one year	12	(56,830)	(53,898)
NET CURRENT ASSETS		1,909,670	999,138
Total assets less current liabilities		1,938,902	1,015,462
Net assets		1,938,902	1,015,462
FUNDS			
Unrestricted Fund - General - Designated	13	347,919 163,843	405,827
Restricted Funds	17	1,427,140	609,637
		1,938,902	1,015,462

These accounts are prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small entities and the Financial Reporting Standard for Smaller Entities (effective April 2008).

Approved by the Board of Directors, and authorised for distribution, on: 3131 MAJ 2012

G Dalal, Chair

J. Grant, Honorary Treasurer

The notes on the attached pages form a part of these financial statements.

1. Accounting Policies

Basis of Accounting

These financial statements have been prepared under the historical cost convention and in accordance with the provision of the Companies Act 2006, the revised Statement of Recommended Practice (SORP 2005) "Accounting and Reporting by Charities" and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008).

The following principal accounting policies, which are unchanged from the previous year, have been consistently applied in preparing the financial statements.

Incoming Resources

All income resources are included in the Statement of Financial Activities (SOFA) when the charity is legally entitled to receipt and the amount is quantifiable. Donations received under deeds of covenant are shown with the relevant income tax recoverable. Income is deferred only where the donor has specified that it may only be used for a future period or has imposed conditions that must be met before the charity has unconditional entitlement to the grant.

Gifts in Kind

It is the charity's policy to value gifts in kind at a valuation that could be obtained if the services were purchased on the open market. This year the gift in kind is a volunteer from GlaxoSmithKline (GSK) and the benefit has been valued using the volunteer's salary provided by GSK apportioned on the basis of their time spent at AMREF.

Resources expended

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate al costs related to the category. Wherever possible costs are directly attributed to these headings. Costs common to more than one area are apportioned on the basis of staff time spent and/or usage on each area.

Grants for specific purposes relate to transfers made to the Nairobì Head Office for the purpose of charitable activities.

The costs of generating funds are those costs of seeking potential funders and applying for funding.

Support costs are those costs incurred in support of the charitable objectives. These have been allocated to the resources expended on a basis that fairly reflects the true use of those resource within the organisation.

Governance costs are those incurred in the governance of the charity and are primarily associated with the constitutional and statutory requirements.

Tangible fixed assets and depreciation

Tangible fixed assets over the value of £500 are capitalised and depreciated at a rate calculated to write off the assets over their remaining useful lives as follows:

Computer equipment
Office furniture/equipment
Website development

33% per annum straight line 33% per annum straight line 33% per annum straight line

Fund Accounting

Unrestricted funds are available for use at the discretion of the Trustees in furtherance of the general objectives of the charity.

Designated funds are unrestricted funds that have been earmarked in respect of commitments that the trustees wish to fulfil in future periods.

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors. The aim and use of each restricted fund is set out in Note 17 to the financial statements.

1 Accounting Policies (Continued)

Pension

The charity operates a defined contribution pension scheme for the benefit of its employees. The net assets of the fund are held separately from those of the charity. Contributions payable are charged to the statement of financial activities in the year in which they are incurred.

2 Generated funds	2012 £	2011 £
Incoming resources from generated funds		
Activities for Generating Funds:		
Christmas card sales	7,329	4,210
Events	84,280	83,291
	91,609	87,501
Voluntary Income		
Individual donors	689,324	584,007
Corporate grants	45,947	338,005
Trusts and Foundations	36,500	43,957
	771,771	965,969
	863,380	1,053,470
Costs of generating funds		
Activities for Generating Funds	98,535	76,906
Voluntary Income	408,222	347,209
	506,757	424,115
	-	
Staff costs (See Note 5)	306,039	258,037
Direct costs (See Note 5)	127,687	96,512
Support and other costs (See Note 5)	73,031	69,566
	506,757	424,115

3a Income from charitable activities

	Unrestricted	Restricted	2012	2011
	£	£	£	£
Governments				
DfID		275,238	275,238	129,564
European Commission		903,876	903,876	127,997
Jersey Overseas Aid Committee		52,115	52,115	130,263
Other governments under £50,000		11,400	11,400	593,439
Total Governments		1,242,629	1,242,629	981,263
Companies				
AstraZeneca		591,336	591,336	358,000
Barclays		-	~	236,607
Diageo		-	-	44,232
Euromoney		103,374	103,374	54,128
GlaxoSmithKline		1,352,255	1,352,255	375,712
Opal Foundation		-	-	40,000
Other companies		1,715	1,715	-
Total Companies		2,048,680	2,048,680	956,004
Trusts and Foundations				
Big Lottery Fund		13,603	13,603	*
Charles Hayward Trust		12,000	12,000	-
Comic Relief		347,684	347,684	-
Ferguson Charitable Trust		•••	-	313,130
FIGO		-	-	69,258
Headley Trust		10,000	10,000	10,000
Medicor Trust		64,157	64,157	60,555
National Health Training Unit		•••	-	60,139
Nominet Trust		24,999	24,999	-
Rowan Charitable Trust		-	-	40,000
Souter Charitable Trust		10,000	10,000	-
Stavros Niarchos Foundation		-	-	80,106
Sylvia Adams Charitable Trust		100	100	25,000
The Even Cornish Foundation		-		13,666
Other Trusts		13,500	13,500	33,091
Total Trusts & Foundations		496,043	496,043	704,945
Individuals		67,773	67,773	76,814
Administrative retention on grants	136,102	0	136,102	204,555
	136,102	3,855,125	3,991,227	2,923,581

3b(i) AMREF UK acknowledges funding from the UK Department of International Development Civil Society Challenge Fund (CSCF) for the South Omo Sexual and Reproductive Health Project, Ethiopia and the Mtwara Youth Project, Tanzania.

Below are the receipts and payments that took place during the year and are included in the financial statements:

	South Omo £	Mtwara £
Balance b/f at 30th September 2011	689	62,015
Funds received during the year	126,818	148,420
Expenditure during the year	133,886	167,161
Balance c/f at 30th September 2012 (see Note 17)	(6,379)	43,274

3b(ii) AMREF UK acknowledges funding from the Big Lottery Fund in respect of its Proposal Development Grant and in respect of its Organisational Support Grant.

Below are the receipts and payments that took place during the year and are included in the financial statements:

	Proposal Development £	Organisational Support £	Total £
Balance b/f at 30th September 2011	0	0	0
Funds received during the year Less: funds returned during the year	9,525 (922)	5,000	14,525 (922)
Total income for the year	8,603	5,000	13,603
Expenditure during the year	8,135	5,634	13,769
Transfer from unrestricted funds	0	634	634
Balance c/f at 30th September 2012			
(see Note 17)	468	0	468
4 Gift in Kind		2012	2011
AMREF UK benefitted from Gifts In Kind as follows:		£	£
GlaxoSmithKline- PULSE Partner		21,135	20,000
		21,135	20,000

5 Resources Expended

		Costs	of			
	Generating Funds	Generating Voluntary Income	Charitable Activities	Governance	2012	2011
	£	£	£	£	£	£
Direct payroll costs	36,813	194,293	221,561	0	452,667	383,596
Indirect payroll costs	11,936	62,997	87,715	10,466	173,114	242,844
Other direct costs	38,153	89,534	3,015,062	0	3,142,749	3,649,184
Other support costs	11,633	61,398	85,489	10,201	168,721	223,580
Governance costs	0	0	0	23,304	23,304	12,183
	98,535	408,222	3,409,827	43,971	3,960,555	4,511,387

6 Support costs allocation (allocated based on staff time)

	Costs of generating Funds	Cost of generating voluntary income	Charitable activities	Governance	2012	2011
	£	£	£	£	£	£
Premises costs	3,220	16,994	23,662	2,823	46,699	43,903
Travel costs Other office	811	4,279	5,958	710	11,758	13,736
and operational costs	7,603	40,126	55,869	6,666	110,264	165,942
	11,634	61,399	85,489	10,201	168,721	223,580

7 Governance costs

	2012	2011
	£	£
Audit fees - current year	10,800	9,030
Audit fees - In respect of prior year and non-audit services	6,058	2,202
Board expenses *	6,446	951
Staff and support costs	20,667	28,705
	43,971	40,888

^{*} Two members of the Board (2011:1) were re-imbursed for expenses in respect of attending AMREF international board meetings where UK strategic matters were discussed. These expenses amounted to £3,941 (2011: £951).

8 Staff numbers and costs

	2012 £	2011 £
The aggregate payroll costs were:		
Wages and Salaries	545,274	554,347
Social Security Costs	53,232	58,862
Employer's Pension costs	17,248	13,569
	615,754	626,779
These aggregate costs were split between the following departments: Fundraising	6	6
Advocacy	0	1
Communications	0	1
Programme Development	6	5
Governance and Administrative Support - incl CEO	4	4
	16	17

There was no employee with remuneration in excess of £60,000 (2011: none). The Trustees have not received any remuneration during the year.

Payroll and other costs for Governance and Administrative Support have been allocated between the charity's activities as detailed in Notes 5 and 6, consistent with the allocation of resources and staff members' time, including the Chief Executive.

9 Net incoming resources

	2012	2011
	£	£
Is stated after charging:		
Auditors renumeration - current year	10,800	9,030
- in respect of prior years and non audit services	6,058	2,202
	0	0
Depreciation of Fixed Assets	10,612	11,240
Lease commitments	53,422	44,189

10 Fixed assets – equipment and computers

			2012 £	2011 £
Cost at 1st October			84,618	64,484
Purchases during the year			23,520	20,134
As at 30th September			108,138	84,618
			20.004	
Depreciation as at 1st October			68,294	57,054
Charge during the year			10,612	11,240
As at 30th September		*****	78,906	68,294
Net book value as at 30th September		<u></u>	29,232	16,324
11 Debtors			2012	2011
			£	£
Other Debtors			2,393	-
Accrued Income			34,528	65,253
Prepayments Amounts due from AMREF Nairobi			24,397 5,147	26,409 2,946
Amounts due nom AMINEL Nanopi		****	66,465	94,608
		_	00,400	0.1,000
12 Creditors				
,_			2012	2011
			£	£
Accruals			15,862	12,120
Social Security and other taxes			16,272	13,835
Pensions contributions			1,984	2,358
Other creditors			22,712	25,584
		···	56,830	53,898
13 Reconciliation of funds				
	Unrestricted Funds	Restricted Funds	2012	2011
	£	£	£	£
Funds as at 1st October	405,827	609,637	1,015,462	1,521,317
Surplus (deficit) for the year	105,935	817,503	923,438	(505,855)
Funds as at 30th September	511,762	1,427,140	1,938,902	1,015,462
Analysis of December				
Analysis of Reserves	വെ വാവ	0	າດ າວາ	16,324
Tangible Fixed Assets Net Current Assets	29,232 482,530		29,232 1,909,670	999,138
Not Outlett Assets	511,762		1,938,902	1,015,462
	311,702	1,741,140	1,000,002	1,010,402

14 Contingent liabilities, Capital and Financial commitments

The Foundation has committed to subscribe to a Flora London Marathon Golden Bond during the next year at £1,800 per annum including VAT (2011: £1,762)

During the year, the Foundation had three operating leases, one in respect of its franking machine and one in respect of its photocopier. The commitment to annual leases unders these operating leases as at 30th September 2012 is as follows:

	2012 £	2012 £	
	Leasehold Property	Equipment	
Within one year	24,257		
Two to five years	**	6,791	

A new ten year lease agreement for the leasehold property started in March 2013 and the commitment is for £64,967 per annum. There is a break clause at the end of five years.

There are no contingent liabilities at the end of September 2012.

15 Liability of Members

At 30 September 2012 the Foundation had 9 members (2011: 8 members). The liability of each member to contribute to the assets of the Association is limited to £10.

16 Related party transactions

The charity transacted with its associated entity, AMREF (Nairobi) and the balance due to AMREF (UK) is shown in Note 12 (2011: debtor of £2,946).

17 Charitable Activities

The income of the charity includes restricted funds. The table overleaf sets out the unexpended balances of donations and grants held for specific projects. Within the table, there are two deficit project balances at the year ended 30th September 2012. There is a deficit of £6,379 relating to the South Omo reproductive Health project and deficit of £4,825 relating the Afar Pastoralist Health project, both in Ethiopia. For the South Omo project the next tranche of funds were received from the donor after the year end and for the Afar project it is still expected that the costs incurred will be covered by the next tranche of funds from the donor as the project is on-going. There is therefore no expectation that a transfer from unrestricted reserves will be required to cover these deficit balances.

17 Charitable activities (continued)

	As at 01/10/2011	Income	Expense	Transfers	As at 30/09/2012
Ethopia		_	_		
Euromoney - Corporate Restricted	65,396	0	0	(65,396)	0
South Omo Floods	1,149	64,157	64,342	(4.00%)	964
Kechene - Old Water Project	1,327	0	0	(1,327)	0
South Omo (Malle & S Arie)	2,868	59,564	59,616		2,816
Afar Pastoralist Health	0	0	4,825		(4,825)
South Omo Sexual and Reproductive Health	689	126,818	133,886	05.000	(6,379)
Euromoney - Kechene Water	0	103,373	164,744	65,396	4,025
Trachoma – Ethiopia	0	10,000	10,000		0
Kechene Water & Sanitation	40,000	70.570	40,000		0
ViV Mother and Child Transmission HIV/AIDS	0	79,570	78,087		1,483
Kechene - new water project	0	0	0	1,327	1,327
AMREF HQ					
Flying Doctors Society	3,061	49,236	40,896		11,401
Nurses E-Learning	300	0	0		300
GSK - Health Infrastructure Partnerships - HIP	8,154	1,176,000	273,279	10,814	921,689
Mobile Health	1,023	1,922	0		2,945
V					
Kenya	400	64 470	64 470		400
Turkana Nomadic Health	422	61,173			422
Kenya Health Systems Strengthening	3,271	0	0		3,271
Kenya Emergency Appeal	145 870		0 156,870	, ,	0 833
CB Initiatives to Improve Maternal Health		156,833			
Drought Response	1,492	17,830			•
Commonwealth Scholarships	3,906 0	11,400 13,603			5,323 468
BLF Development Grant 2013 Fistula Clinical Outreach	0	4,500			400
Comic Relief - MNCH Makueni	0	357,684	,		174,229
Phase Kibera	5,559	357,004			-
Wolfson Bursary	2,500	0	=		0
Mexico IAC	2,348	0	,		2,348
WEXIOO II TO	2,0-10	v		•	2,040
Sudan National Health Training Institute, Mardi	0	3,500	C)	3,500
-		,			•
Tanzania	0	400	400		•
VVF, Tanzania	0	100			0
Mtwara Malaria	4,758	0			4,758
Reducing Morbidity & Mortality from Malaria	3,915				4,825
Mtwara Youth Project Tanzania	62,015				43,274
Ferguson - E-learning Tanzania	302,663 0				158,204 14,214
Regional Maternal Child Health Project	U	627,307	013,080)	14,214
Uganda					
Katine project	15,364	C	4,207	7	11,157
Soroti Malaria & HIV	12,653	C) ()	12,653
Integrated Model Malaria, HIV/AIDs, TB	46,167				24,916
Maternal Health Extension Phase Out	0	191,337	183,672	2	7,665
AMREF UK					
GSK 20% Reinvestment Project	5,255	C) () (5,255) 0
General - Restricted	12,367) (0,200	12,367
·					
	609,637	3,855,125	3,038,250	63	4 1,427,140