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To the Chair of the Board Health Services Charitable Gifts Board

Opinion

I have audited the financial report of the Health Services Charitable Gifts Board for the financial year ended 30 June 2025.

In my opinion, the accompanying financial report has been prepared in accordance with relevant Treasurer's Instructions issued under the provisions of the *Public Finance and Audit Act 1987*, Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* and Australian Accounting Standards, including:

- giving a true and fair view of the financial position of the Health Services Charitable Gifts Board as at 30 June 2025, its financial performance and its cash flows for the year then ended, and
- complying with Division 60 of the Australian Charities and Not-for-profits Commission Regulation 2022.

The financial report comprises:

- a Statement of Comprehensive Income for the year ended 30 June 2025
- a Statement of Financial Position as at 30 June 2025
- a Statement of Changes in Equity for the year ended 30 June 2025
- a Statement of Cash Flows for the year ended 30 June 2025
- notes, comprising material accounting policy information and other explanatory information
- a Certificate from the Chair and the Executive Officer.

Basis for opinion

I conducted the audit in accordance with the *Public Finance and Audit Act 1987* and Australian Auditing Standards. My responsibilities under those standards are further described in the 'Auditor's responsibilities for the audit of the financial report' section of my report. I am independent of the Health Services Charitable Gifts Board. The *Public Finance and Audit Act 1987* establishes the independence of the Auditor-General. In conducting the audit, the relevant ethical requirements of APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* have been met.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Responsibilities of the Executive Officer and the Commissioners for the financial report

The Executive Officer is responsible for the preparation of the financial report that gives a true and fair view in accordance with relevant Treasurer's Instructions issued under the provisions of the *Public Finance and Audit Act 1987*, the *Australian Charities and Not-for-profits Commission Act 2012* and the Australian Accounting Standards and for such internal control as management determines is necessary to enable the preparation of the financial report that gives a true and fair view and that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the Executive Officer is responsible for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the assessment indicates that it is not appropriate.

The Commissioners of the Health Services Charitable Gifts Board are responsible for overseeing the entity's financial reporting process.

Auditor's responsibilities for the audit of the financial report

As required by section 31(1)(b) of the *Public Finance and Audit Act 1987* and Section 29(2) of the *Health Services Charitable Gifts Act 2011*, I have audited the financial report of the Health Services Charitable Gifts Board for the financial year ended 30 June 2025.

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

As part of an audit in accordance with Australian Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Services Charitable Gifts Board's internal control
- evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Executive Officer
- conclude on the appropriateness of the Executive Officer's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify the opinion. My conclusion is based on the audit evidence obtained up to the date of the auditor's report. However, future events or conditions may cause an entity to cease to continue as a going concern
- evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

My report refers only to the financial report described above and does not provide assurance over the integrity of electronic publication by the entity on any website nor does it provide an opinion on other information which may have been hyperlinked to/from the report.

I communicate with the Executive Officer and the Chair, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during the audit.



Daniel O'Donohue
Deputy Auditor-General

30 October 2025

HEALTH SERVICES CHARITABLE GIFTS BOARD
ABN 49 517 603 275

CERTIFICATION OF THE FINANCIAL STATEMENTS

We certify that the:

- financial statements of the Health Services Charitable Gifts Board ("HSCGB" or "the Board"):
 - are in accordance with the accounts and records of the Board; and
 - comply with relevant Treasurer's instructions; and
 - comply with the relevant accounting standards and Division 60 of the Australian Charities and Not-for-profits Commission Regulation 2022; and
 - present a true and fair view of the financial position of the Health Services Charitable Gifts Board at the end of the financial year and the result of its operations and cash flows for the financial year.
- internal controls employed by the Health Services Charitable Gifts Board for the financial year over its financial reporting and its preparation of financial statements have been effective.
- that there are reasonable grounds to believe that the Board will be able to pay its debts as and when they fall due.

Signed in accordance with a resolution of the Board members.



.....
C Mitchell - Chair
29 / 10 /2025



.....
C Peirce - Executive Officer
29 / 10 /2025

HEALTH SERVICES CHARITABLE GIFTS BOARD

STATEMENT OF COMPREHENSIVE INCOME

for the year ended 30 June 2025

	Note	2025 \$'000	2024 \$'000
Income			
Revenue from gifts to public health entities vesting in the Board	4.1	3,471	6,628
Revenue from charitable foundations and other trusts	4.2	246	329
Investment revenue	4.3	13,221	10,884
Rental revenue	4.4, 8.2	3,218	3,179
Other income		25	23
Total income		<u>20,181</u>	<u>21,043</u>
Expenses			
Employee and Commissioners benefits expense	5.3	373	346
Supplies and services	6.1	268	194
Depreciation	6.2	4	5
Funds distributed to public health entities and prescribed research bodies	6.3	7,587	9,854
Investment property expenses	8.2	20	21
Total expenses		<u>8,252</u>	<u>10,420</u>
Net result		<u>11,929</u>	<u>10,623</u>
Total comprehensive result		<u><u>11,929</u></u>	<u><u>10,623</u></u>

The accompanying notes form part of these financial statements.

HEALTH SERVICES CHARITABLE GIFTS BOARD

STATEMENT OF FINANCIAL POSITION as at 30 June 2025

	Note	2025 \$'000	2024 \$'000
Current assets			
Cash and cash equivalents	7.1	175	1,553
Receivables	7.2	1,972	993
Other financial assets	7.3	1,282	984
Total current assets		<u>3,429</u>	<u>3,530</u>
Non-current assets			
Other financial assets	7.3	154,289	142,656
Equipment	8.1	17	21
Investment properties	8.2	39,067	39,067
Total non-current assets		<u>193,373</u>	<u>181,744</u>
Total assets		<u>196,802</u>	<u>185,274</u>
Current liabilities			
Payables	9.1	1,502	1,640
Employee benefits	5.4	21	21
Other liabilities	9.2	-	268
Total current liabilities		<u>1,523</u>	<u>1,929</u>
Non-current liabilities			
Employee benefits	5.4	53	48
Total non-current liabilities		<u>53</u>	<u>48</u>
Total liabilities		<u>1,576</u>	<u>1,977</u>
Net assets		<u>195,226</u>	<u>183,297</u>
Equity			
Funds held		195,226	183,297
Retained earnings		-	-
Total equity	10.1	<u>195,226</u>	<u>183,297</u>

The accompanying notes form part of these financial statements.

HEALTH SERVICES CHARITABLE GIFTS BOARD

STATEMENT OF CHANGES IN EQUITY for the year ended 30 June 2025

	Note	Funds held \$'000	Retained earnings \$'000	Total equity \$'000
Balance at 30 June 2023		172,674	-	172,674
Net result for 2023-24		-	10,623	10,623
Total comprehensive result for 2023-24		-	10,623	10,623
Allocation to funds held		10,623	(10,623)	-
Total change for the period		10,623	(10,623)	-
Balance at 30 June 2024	10.1	183,297	-	183,297
Net result for 2024-25		-	11,929	11,929
Total comprehensive result for 2024-25		-	11,929	11,929
Allocation to funds held		11,929	(11,929)	-
Total change for the period		11,929	(11,929)	-
Balance at 30 June 2025	10.1	195,226	-	195,226

The accompanying notes form part of these financial statements.

HEALTH SERVICES CHARITABLE GIFTS BOARD

STATEMENT OF CASH FLOWS

for the year ended 30 June 2025

	Note	2025 \$'000	2024 \$'000
Cash flows from operating activities			
Cash inflows			
Rent received		3,312	3,541
Imputation credits received		311	349
Interest received		577	530
Other receipts		93	40
Receipts from charitable foundations and other trusts		246	329
Receipts from gifts to public health entities vesting in the Board		3,454	6,218
Proceeds from disposal of investments from gifts to public health entities		-	382
Cash generated from operations		<u>7,993</u>	<u>11,389</u>
Cash outflows			
Payments for supplies and services and investment property expenses		(295)	(239)
Employee benefits payments		(368)	(342)
Payments to public health entities and prescribed research bodies		(7,284)	(10,040)
Other payments		(62)	(60)
GST paid to the ATO		(362)	(335)
Cash used in operations		<u>(8,371)</u>	<u>(11,016)</u>
Net cash (used in)/provided by operating activities	10.2	<u>(378)</u>	<u>373</u>
Cash flows from investing activities			
Cash inflows			
Proceeds from the sale of financial assets		1,000	5,000
Proceeds from SAHMRI loan repayments		-	750
Cash generated from investing activities		<u>1,000</u>	<u>5,750</u>
Cash outflows			
Purchase of financial assets		(2,000)	(6,000)
Cash used in investing activities		<u>(2,000)</u>	<u>(6,000)</u>
Net cash used in investing activities		<u>(1,000)</u>	<u>(250)</u>
Net (decrease)/increase in cash and cash equivalents		(1,378)	123
Cash and cash equivalents at the beginning of the period		<u>1,553</u>	<u>1,430</u>
Cash and cash equivalents at the end of the period	7.1	<u><u>175</u></u>	<u><u>1,553</u></u>

The accompanying notes form part of these financial statements.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

1 About the Health Service Charitable Gifts Board

The *Health Services Charitable Gifts Act 2011* was proclaimed on 30 June 2011 and commenced on 1 July 2011 (the HSCG Act).

The Board does not control any other entity and has no interests in unconsolidated structured entities. The financial statements and accompanying notes include all the controlled activities of the Board.

The Board is a statutory authority established pursuant to the *Health Services Charitable Gifts Act 2011*. The Board is also registered as a Prescribed Public Authority under *State Procurement Regulations 2020* and the *Superannuation Funds Management Corporation of South Australia Regulation 2025*.

1.1 Basis of preparation

The financial statements are general purpose financial statements prepared in compliance with:

- section 23 of the *Public Finance and Audit Act 1987*;
- Treasurer's Instructions and Accounting Policy Statements issued by the Treasurer under the *Public Finance and Audit Act 1987*;
- the *Australian Charities and Not-for-profit Commission Act 2012*; and
- relevant Australian Accounting Standards.

For the purposes of preparing financial statements the Board is a not-for-profit entity. The financial statements are prepared based on a 12 month reporting period and presented in Australian currency. The historical cost convention is used unless a different measurement basis is specifically disclosed in the note associated with the item measured.

All amounts in the financial statements and accompanying notes have been rounded to the nearest thousand dollars (\$'000), unless otherwise specified.

Income, expenses and assets are recognised net of the amount of GST except:

- when the GST incurred on a purchase of goods or services is not recoverable from the Australian Taxation Office (ATO), in which case the GST is recognised as part of the cost of acquisition of the asset or as part of the expense item applicable; and
- receivables and payables, which are stated with the amount of GST included.

Assets that are to be sold, consumed or realised as part of the normal operating cycle have been classified as current assets. Liabilities that are due to be settled within 12 months after the end of the reporting period or for which the department has no right to defer the settlement for at least 12 months after the end of the reporting period are classified as current liabilities. All other assets and liabilities are classified as non-current.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

Cash flows are included in the Statement of Cash Flows on a gross basis. However, the GST components of cash flows arising from investing and financing activities are recoverable from, or payable to, the ATO are classified as operating cash flows.

The Health Services Charitable Gifts Board is exempt from income tax and has been issued with Deductible Gift Recipient status by the ATO. As a result, a donation received by the Board may be an allowable deduction to the donor.

Notwithstanding the income tax exempt status, the Board is entitled to a refund of excess imputation credits. The Board recognises the entitlement to this refund as revenue at the time of receipt of a franked distribution.

The Board is liable for GST, emergency services levy and local government rates.

2 Objectives of the Health Services Charitable Gifts Board

Pursuant to the HSCG Act, prescribed gifts made to or received by public health entities (as defined in the HSCG Act and Regulations) vest in the Board. A prescribed gift means property given to a public health entity (PHE). The Board holds these gifts, donations and bequests and ensures they are applied in accordance with donors' intentions, such as supporting volunteers, medical research, equipment for wards and patient comfort.

These financial statements have been prepared in accordance with the requirements of the HSCG Act.

2.1 Vesting of Gifts

On the commencement of the HSCG Act all property previously vested in the Commissioners of Charitable Funds formed part of the charitable assets of the Board.

The HSCG Act enables the Board to act as trustee or co-trustee of a trust where the Board is named or otherwise asked to act in those roles.

The Board has been appointed as trustee of the following trusts (refer to notes 2.3 to 2.5):-

- Ray & Shirl Norman Cancer Research Trust (Norman Trust).
- Dorothy E Brown Charitable Trust (Brown Trust).
- P F Beinke Charitable Trust - Royal Adelaide Hospital (The Chapel Fund).
- P F Beinke Charitable Trust - Flinders Medical Centre (Pastoral Care Account).
- P F Beinke Charitable Trust - Daw Park Repatriation Hospital (Pastoral Care Chapel Account).

As the assets of the trusts have not vested in the Board, the operations of each trust are reported separately from those of the Board.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2.2 Investment of Funds

Under the HSCG Act the Board has all the powers of a natural person that are capable of being exercised by a body corporate. It is able to determine appropriate investment strategies to apply.

Pursuant to section 23 of the HSCG Act, the Board meets regularly with the public sector employee who has been nominated by the Minister for Health and Wellbeing.

The Board is registered as a Prescribed Public Authority under *State Procurement Regulations 2020* and the *Superannuation Funds Management Corporation of South Australia Regulation 2025* and primarily invests in a range of managed investment unit trust products offered by Funds SA. Funds SA is a South Australian Government owned corporation investing and managing the monies of prescribed authorities. There has been significant volatility in markets during the period and whilst Funds SA has very clear policies in mitigating risk, the Board's investment returns for the year reflect these global trends.

2.3 Ray & Shirl Norman Cancer Research Trust (Norman Trust)

The Board was appointed as sole trustee of the Norman Trust on 21 September 2011 by way of orders from the Supreme Court of South Australia.

The Board administers the revenues, expenses, assets and liabilities in accordance with the terms of the document establishing the Norman Trust. As these funds do not form part of the charitable asset they are not recognised in the Board's financial statements.

Note 13 includes a summary of the financial results of the Norman Trust for the year.

2.4 Dorothy E Brown Charitable Trust (Brown Trust)

The Board was appointed as trustee of the Brown Trust on 17 December 2014 pursuant to a Deed Poll following Supreme Court action required to clarify the terms of the will of the late Mrs Dorothy E Brown.

The Board administers the revenues, expenses, assets and liabilities in accordance with the terms of the document establishing the Brown Trust. As these funds do not form part of the charitable asset they are not recognised in the Board's financial statements.

Note 14 includes a summary of the financial results of the Brown Trust for the year.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2.5 P F Beinke Charitable Trusts (Beinke Trusts)

Pursuant to the Will of Mr Peter Francis Beinke the residual balance of his estate was to be held in three separate Charitable Trusts, one for each of the Royal Adelaide Hospital, Flinders Medical Centre and Daw Park Repatriation Hospital.

Each Trust was entitled to one third of the balance of his estate for the specific purpose of "providing education and training and associated expenses for Chaplains in their role at each institution".

In accordance with a Deed of Trustee Retirement Appointment & Indemnity dated 1 July 2020 the Board was appointed as trustee to each of these trusts which have been identified as:

- P F Beinke Charitable Trust - Royal Adelaide Hospital (The Chapel Fund)
- P F Beinke Charitable Trust - Flinders Medical Centre (Pastoral Care Account)
- P F Beinke Charitable Trust - Daw Park Repatriation Hospital (Pastoral Care Chapel Account)

The Board administers the revenues, expenses, assets and liabilities in accordance with the terms of the document establishing the Beinke Trusts. As these funds do not form part of the charitable asset they are not recognised in the Board's financial statements.

Notes 15 includes a summary of the financial results of each of the Beinke Trusts for the year.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
3 Significant transactions with government related entities		
The Board invests the majority of its funds through Funds SA. Information about transactions and balances between the Board and Funds SA are set out below.		
Income (expense):		
Gain/(loss) on change in fair value of other financial assets	12,376	9,759
Total income/(expense) from Funds SA	12,376	9,759
Current assets:		
Investments in unlisted unit trusts at fair value	564	539
Non-current assets:		
Investments in unlisted unit trusts at fair value	147,348	134,997
Collectively but not individually significant transactions with government related entities		
Quantitative information about transactions and balances between the Board and other SA Government entities are set out below.		
Income:		
Interest revenue	570	554
Expenses:		
Funds distributed to public health entities and prescribed research bodies	7,587	9,854
Current assets:		
Secured investment at cost	-	445
Secured loan at cost	718	-
	718	445
Non-current assets:		
Secured loan at cost	6,941	7,659
	6,941	7,659
Current liabilities:		
Payables	1,361	1,490

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
4 Income		
4.1 Revenue from gifts to public health entities vesting in the Board		
Revenue from gifts to public health entities vesting in the Board	3,471	6,628
<p>Gifts of cash vesting in the Board are recognised on receipt. Bequests and legacies are also recognised on their receipt from the administrator or executors of an estate.</p> <p>Gifts other than cash vesting in the board are recognised on receipt, with a corresponding asset of the Board being recognised when control of the asset passes. This revenue includes gifts from donations and bequests and is measured at fair value.</p>		
4.2 Revenue from charitable foundations and other trusts		
Revenue from charitable foundations and other trusts	246	329
<p>Where the Board is an income beneficiary of a charitable foundation or trust the income has been recorded separately in the Statement of Comprehensive Income on its receipt. The Board has no ownership interest or control of the assets or management of the respective charitable foundation or trust.</p>		
4.3 Investment (expense) revenue		
Funds SA		
Gain on change in fair value of other financial assets	12,376	9,759
Gain from disposal of other financial assets	-	9
Imputation credits	275	311
Interest & dividend revenue	570	555
Gain from fair value adjustment of investment properties (refer note 8.2)	-	250
	845	1,125
Total investment revenue	13,221	10,884

The Board invests in a number of Funds SA investment funds which are unit trust structures. As at 1 July 2018 Funds SA's unit trusts made an irrevocable election to become Attribution Management Investment Trusts (AMIT) under Division 276 of the ITAA1997. Under tax law, AMITs are not required to make distributions, however unit holders still have clearly defined rights and entitlement. AMITs use the principles of attribution of income rather than the previous 'present entitlement' under the old trust rules. As a result the Board still has an 'attributable amount' to the taxable income of the units it holds within Funds SA's investment options, although no physical distribution is required.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$'000	\$'000

4.3 Investment (expense) revenue (continued)

Interest income includes interest received on bank accounts, interest from investments and other interest received. Interest revenue is recognised on a time proportionate basis that takes into account the effective yield on the financial asset.

The gain on disposal of financial assets arose as a consequence of the disposal of shares in ASX listed companies vesting in the Board from bequests from deceased estates. As the current investment policies of the Board recommend these type of investments are to be held in Funds SA products the shares were sold as soon as possible following vesting.

Due to the nature of the transaction the Board is of the view that the proceeds from the sale of these securities should be disclosed as an operating cash flow rather than an investing cash flow for the purposes of the Statement of Cash Flows.

4.4 Rental revenue

Rental revenue	3,218	3,179
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Rental income arising on investment properties is accounted for on a straight line basis over the term of the lease.

5 Board and employees

5.1 Key management personnel

Key management personnel of the Board include the Minister, the Commissioners, the Executive Officer and the Business Services Supervisor. Total compensation for key management personnel is set out below.

The compensation disclosed in this note excludes salaries and other benefits the Minister receives. The Minister's remuneration and allowances are set by the *Parliamentary Remuneration Act 1990* and the Remuneration Tribunal of SA respectively and are payable from the Consolidated Account under section 6 of the *Parliamentary Remuneration Act 1990*.

Compensation:

Salaries and other short-term employee benefits	266	254
Post-employment benefits	31	28
Total	297	282

Transactions with key management personnel and other related parties

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$'000	\$'000

5.1 Key management personnel (continued)

Related parties of the HSCGB include all key management personnel and their close family members; all public authorities that are controlled and consolidated into the whole of government financial statements and other interests of the Government.

There were no other transactions with key management personnel or their families.

Information about significant transactions and balances between HSCGB and Other SA Government controlled entities are disclosed at note 3.

5.2 Commissioners

The following held the position of Commissioner during the year:

Mr Carmelo Di Lernia (term ended 17 October 2024)

Prof Villis Marshall (term ended 30 June 2025)

Ms Carolyn Mitchell (Chair)

Ms Virginia Deegan (appointed 18 October 2024)

Remuneration of Commissioners

The number of Commissioners whose remuneration received or receivable falls within the following bands :

	No. of people	
\$0	-	-
\$1 - \$19,999	3	3
\$20,000 - \$39,999	1	1
Total number of Commissioners	4	4

The total remuneration received or receivable by those Commissioners was \$67,000 (2024: \$67,000).

Remuneration of members includes all costs paid/payable to board members, such as sitting fees, superannuation contributions and any other salary sacrifice arrangements and are also included in notes 5.1 and 5.3.

5.3 Employee and Commissioners benefits expense

	\$'000	\$'000
Salary and wages	267	251
Superannuation paid	34	28
Annual leave accrual	-	(1)
Long service leave accrual	5	1
Employee benefits expense	306	279
Commissioners' remuneration	60	61
Superannuation paid	7	6
	67	67
Total employee and Commissioners benefits expense	373	346

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$'000	\$'000

5.3 Employee and Commissioners benefits expense (continued)

Employee benefits expense includes all costs related to employment including wage, salaries, non-monetary benefits and leave entitlements. These are recognised when incurred, at nominal value.

Superannuation expenses represent the Board's contributions to superannuation plans in respect of current services of current employees.

No employee received remuneration equal to or greater than the base executive remuneration level.

5.4 Employee benefits - liability

- Current

Annual leave	21	21
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- Non-current

Long service leave	53	48
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These benefits accrue as a result of services provided up to the reporting date that remain unpaid.

Annual leave and sick leave:

The annual leave liability is expected to be payable within 12 months and is measured at the nominal amount expected to be paid.

No provision has been made for sick leave as all sick leave is non-vesting and the average sick leave taken in future years by employees is estimated to be less than the annual entitlement for sick leave.

Long Service Leave:

The estimated long service leave liability has been measured at nominal value as the total amount of the liability is not material and would approximate the result if it had been calculated using the projected unit credit method.

6 Expenses

Employee and Commissioner benefits expenses are disclosed in note 5.3.

6.1 Supplies and services

Accounting fees	86	63
Auditor's remuneration	30	36
General administration expenses	152	95
	268	194

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025	2024
	\$'000	\$'000

6.1 Supplies and services (continued)

Supplies and services generally represent day-to-day running costs, including maintenance costs, incurred in the normal operations of the Board. These items are recognised as an expense in the reporting period they are incurred.

Auditor's remuneration comprises audit fees paid/payable to the Audit Office of South Australia for work performed under the *Public Finance and Audit Act 1987*. No other services were provided by the Audit Office of South Australia.

6.2 Depreciation

Depreciation on equipment	4	5
	<u>4</u>	<u>5</u>

All non-current assets, having a limited useful life, are systematically depreciated over their useful lives in a manner that reflects the consumption of their service potential. Depreciation is applied to tangible assets such as equipment.

Useful life

Depreciation is calculated on a diminishing value basis over the estimated useful life of the following classes of asset as follows:

Class of asset	Useful life (years)
Equipment	10

Review of accounting estimates

Assets' residual values, useful lives and depreciation methods are reviewed and adjusted, if appropriate, on an annual basis. Changes in expected life or the expected pattern of consumption of future economic benefits embodied in the asset are accounted for prospectively by changing the time period or method, as appropriate.

6.3 Funds distributed to public health entities and prescribed research bodies

Funds distributed to public health entities and prescribed research bodies	7,587	9,854
	<u>7,587</u>	<u>9,854</u>

Funds distributed to public health entities and prescribed research bodies are recognised as an expense in the financial year to which the related budget or funding allocation pertains and are expected to be verified as correct and in accordance with the budgets previously approved by the Board of \$14,600,142 (2024: \$20,608,000).

7 Financial assets

7.1 Cash and cash equivalents

- Current

Cash at bank	175	1,553
	<u>175</u>	<u>1,553</u>

Interest rate risk:

Cash at bank earns a floating interest rate. The carrying amount of cash and cash equivalents represent fair value.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
7.2 Receivables		
- Current		
<u>Statutory receivables</u>		
Imputation credits receivable	275	311
Prepayments - legal fees	4	3
Total statutory receivables	<u>279</u>	<u>314</u>
<u>Other receivables</u>		
Gifts to public health entities vesting in the Board accrued	305	288
Interest income accrued	114	121
Other income receivable	1,063	60
Prepayments - other	11	10
Rental income accrued	200	200
Total other receivables	<u>1,693</u>	<u>679</u>
	<u>1,972</u>	<u>993</u>

Statutory receivables do not arise from contracts with customers. They are recognised and measured similarly to contractual receivables.

Gifts to public health entities vesting in the Board accrued includes gifts received by the PHEs prior to 30 June 2025 and not paid until July 2025.

Receivables, prepayments and accrued revenues are non-interest bearing. Receivables are held with the objective of collecting the contractual cash flows and they are measured at amortised cost. Rental income accrued includes an estimated amount for improved rent of \$200,000 (2024: \$200,000) due from the head lessee of Town Acre 86. Apart from this amount there is no significant concentration of credit risk.

Refer to note 12.2 for further information on risk management.

7.3 Other financial assets

- Current		
Investments in Funds SA unlisted unit trusts at fair value	564	539
Secured investment at cost	-	445
Secured loan at cost	718	-
	<u>1,282</u>	<u>984</u>
- Non-current		
Investments in Funds SA unlisted unit trusts at fair value	147,348	134,997
Secured investment at cost	-	-
Secured loan at cost	6,941	7,659
	<u>154,289</u>	<u>142,656</u>

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$'000	\$'000

7.3 Other financial assets (continued)

Investments in Funds SA are recognised and derecognised on trade date and are initially measured at fair value, net of transaction costs.

The Board classifies its other financial assets into the following categories:

- financial assets at fair value through profit and loss, or
- amortised cost.

The classification depends on the purpose for which the investments were acquired. Management determines the classification of its investments at initial recognition.

Financial assets at fair value through the profit and loss:

These assets are measured initially at fair value excluding any transaction costs that are directly attributable to the acquisition or issue of the financial asset. Transaction costs on financial assets at fair value through profit or loss are expensed immediately. Subsequent to initial recognition, all instruments held at fair value through profit and loss are measured at fair value with changes in their fair value recognised in the Statement of Comprehensive Income.

The Board's financial assets are primarily invested in investment products offered by Funds SA. For these products the determination of fair value and actions to manage portfolio risk are undertaken by Funds SA and monitored by the Board.

Portfolio risk includes liquidity risk, credit risk and market risk. Please refer to note 12.2 for further information regarding the Board's management of portfolio risk.

Amortised cost:

These are non-derivative financial assets with fixed or determinable payments and fixed maturities that the Board's management have the ability and the positive intention to hold to maturity. They are measured at amortised cost.

Secured investment at cost

The secured investment is an advance to the Port Pirie Regional Health Service Inc. (Service) in the form of a first mortgage over land and buildings held by the Service. Since commencement this investment has been interest free. Under the terms of the agreement this represents an asset of the Service and as a result no income is allocated to the Service on this component of their funds.

Mortgage review:

In May 2025, the Board received approval from the Minister for Health and Wellbeing to discharge the mortgage secured by equivalent public health funds allocated to Port Pirie Regional Health Services. Following approval, the Board proceeded to discharge the mortgage, and the liability has been settled in full. Accordingly, no mortgage balance is reported as at 30 June 2025. The value of the mortgage, recorded at cost, at 30 June 2024 was \$445,000.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$'000	\$'000

7.3 Other financial assets (continued)

Secured loan at cost

The Board provided a loan of \$15 million to South Australian Health and Medical Research Institute (SAHMRI) to acquire, establish and commission a cyclotron facility in South Australia to produce isotopes for use by South Australian organisations in the 2014 year for a total period of 15 years. The loan term has since been extended to 30 September 2033.

Initially, the loan required interest-only payments for the first five years, with both principal and interest repayments commencing from the quarter ending December 2018.

The interest rate is based on the Reserve Bank of Australia Official Cash Rate (OCR) plus a margin of 2.00%, which is consistent with the margin applied in the 2024 financial year.

The loan terms were recently renegotiated, effective 1 October 2023 to incorporate this rate adjustment. The interest rate applicable to the loan from 1 October 2023 until the final payment date is based on the OCR as declared monthly by the Reserve Bank of Australia, plus an additional 2% per annum. As of the renegotiation date, the remaining loan balance is \$7,659,000.

The loan is currently under an interest only period, which is schedule to end on 30 September 2025. During this period, quarterly interest only payments are required, with each payment due no later than 14 days after receipt of the invoice provided by the Board.

The Board has considered reasonable and supportable information that is available without undue cost or effort relating to the SAHMRI loan and is of the view there is no significant increase in credit risk that SAHMRI will cause a financial loss to the Board by failing to discharge an obligation on the loan. The loan is secured by SAHMRI Investments Pty Ltd as the guarantor in the Deed of Guarantee and Indemnity in the loan agreement with SAHMRI. The funds held and invested by SAHMRI Investments Pty Ltd is greater than the outstanding SAHMRI loan amount as at 30 June 2025.

Investments in Funds SA unlisted unit trusts at fair value

The Board is a Prescribed Public Authority and holds significant financial assets in a range of managed investment unit trust products offered by Funds SA. Based on the nature of the underlying assets of each fund, amounts invested in the Funds SA Cash B - Taxed Fund have been classified as current and all other funds are classified as non-current. All funds held in Funds SA are subject to a 48 hours call.

The fair value of investments in unlisted trusts is based on fair value reported by the managers of such funds. The fair value of all of these instruments have been categorised as Level 2.

(a) Categorisation and maturity analysis of other financial assets - refer note 12.2

(b) Risk exposure information - refer note 12.2

8 Non-financial assets

8.1 Equipment

- Non-current

Equipment at cost	36	36
Less: Accumulated depreciation	(19)	(15)
	<u>17</u>	<u>21</u>
Total equipment	<u>17</u>	<u>21</u>

The Board holds its equipment for their service potential (value in use).

Equipment with a value equal to or in excess of \$5,000 is capitalised, otherwise it is immediately expensed. Equipment owned by the Board is recorded at fair value. Detail about the Board's approach to fair value is set out in note 12.1.

Impairment:

Equipment has not been assessed for impairment as they are non-cash generating assets, that are held for continued use of their service capacity.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
8.2 Investment properties		
- At fair value		
Opening balance at the beginning of the period	39,067	38,817
Net gain from fair value adjustment	-	250
Balance at the end of the financial year	<u>39,067</u>	<u>39,067</u>
- Non-current		
Investment properties - held for long term rental	39,067	39,067
	<u>39,067</u>	<u>39,067</u>
Amounts recognised in profit for investment properties		
Rent and recoveries income	3,218	3,179
Direct operating expenses	(20)	(21)
Total amount recognised in profit for the year	<u>3,198</u>	<u>3,158</u>

Investment properties represent properties held to earn rentals and/or capital appreciation. Notwithstanding the occupation of a small area of one of the properties, the Board has determined that it is appropriate to treat all properties as investment properties.

Investment properties are initially measured at cost, including transaction costs, and are subsequently measured at fair value. Any change in fair value is recognised in the Statement of Comprehensive Income in the period in which it arises. The properties are not depreciated.

Fair value measurements for investment properties recognised as at 30 June 2025 are the amounts for which the properties could be exchanged between willing parties in an arms length transaction, based on current prices in an active market for similar properties. The fair values have been determined by the Board with reference to independent property valuations having appropriate, recognised professional qualifications and recent experience in the location and category of property being valued.

The fair value of all investment properties have been categorised as Level 2. Refer to Note 12.1 for more information on fair value.

Town Acre 86 property:

An independent valuation of the Board's interest in Town Acre 86 (Citi Centre) was performed in the 2022 financial year by Mr Simon Hickin, a Certified Practising Valuer from M3 Property, as part of the 5-yearly revaluation as required by the lease. The Board has considered the outcome of that valuation together with other relevant information currently available and, notwithstanding that aspects of the valuation remain the subject of ongoing discussions, the Board is satisfied that the carrying amount of the property at 30 June 2025 continues to materially reflect its fair value.

Waymouth Street property:

The Waymouth Street property comprises four tenancies with the street address of 234–240 Waymouth Street. This property was independently valued at 30 June 2024 by a Certified Practising Valuer from Savills Valuations Pty Ltd, resulting in an increase in the carrying value for the 2024 financial year of \$250,000. The existing lease arrangements are in place until the 2026 financial year, at which time the lease for unit 238 will not be renewed. The Board has considered this in its assessment and remains satisfied that the carrying amount at 30 June 2025 appropriately reflects the fair value of the property.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
9 Liabilities		
9.1 Payables		
- Current		
<u>Statutory payables</u>		
GST payable	48	81
Accrued expenses - Audit Office of SA	32	35
	<u>80</u>	<u>116</u>
<u>Other payable</u>		
Accrued expenses - other	1,422	1,524
	<u>1,502</u>	<u>1,640</u>
<p>Accrued expenses includes claims and other reimbursements due to public health entities of \$1,361,000 (2024: \$1,490,000).</p> <p>Payables and accruals are raised for all amounts owing but unpaid. Sundry payables are normally settled within 30 days from the date the invoice is first received. All payables are non-interest bearing.</p> <p>Statutory payables do not arise from contracts but are sourced in legislation.</p> <p>The net amount of GST payable to the ATO is included as part of payables.</p>		
9.2 Other liabilities		
- Current		
Rent received in advance	<u>-</u>	<u>268</u>

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
10 Other disclosures		
10.1 Total equity		
Funds held on behalf of the following public health entities or their successor bodies:		
Royal Adelaide Hospital - General	152,274	144,677
Royal Adelaide Hospital - Private Practice Funds	1,538	1,579
Royal Adelaide Hospital - Glenside Campus	613	566
Hillcrest Hospital	176	162
Port Augusta Hospital & Regional Health Service	646	500
Port Lincoln Health & Hospital Services	924	843
Port Pirie Regional Health Services	301	721
Modbury Hospital	263	241
The Queen Elizabeth Hospital	4,362	3,816
Whyalla Hospital and Health Service	536	499
Mount Gambier and Districts Health Service	612	563
Northern Yorke Peninsula Health Service	50	46
SA Pathology	17,528	15,372
Women's & Children's Hospital	11,658	10,616
Lyell McEwin Hospital	792	728
Flinders Medical Centre	1,650	1,384
Noarlunga Hospital	729	671
BreastScreen SA	144	8
MedSTAR Emergency Medical Retrieval	106	98
Royal Adelaide Hospital, The Queen Elizabeth Hospital & Hampstead Joint Funds	324	207
	<u>195,226</u>	<u>183,297</u>

Allocation of Net Profit to Funds:

Income generated by pooled assets held by the Board is distributed to individual funds based on the average balance of each fund after allowing for administration expenses incurred.

Gifts, other investment income and expenses that are directly related to an individual fund are allocated directly to that fund.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
10.2 Cash flows		
Cash flows are included in the Statement of Cash Flows on a gross basis and the GST component of cash flows arising from investing activities, which is payable to the ATO, is classified as part of operating cash flows.		
Cash flow reconciliation		
Reconciliation of cash and cash equivalents at the end of the reporting period:		
Cash and cash equivalents disclosed in the Statement of Financial Position	175	1,553
Balance per Statement of Cash Flows	175	1,553
Reconciliation of net result to net cash provided by operating activities:		
Net result for the year	11,929	10,623
Non-cash items:		
(Gain)/loss on disposal of financial assets	-	(9)
(Gain) on change in fair value of other financial assets	(12,376)	(9,759)
(Gain) from fair value adjustment of investment properties	-	(250)
Depreciation	4	5
Discharge of mortgage	445	
	(11,927)	(10,013)
Movement in assets and liabilities:		
(Increase) in operating receivables	(14)	(105)
Decrease in imputation credits receivable	36	38
(Decrease) in payables	(106)	(179)
Increase in employee entitlements	5	-
(Decrease) in unearned revenue	(268)	(3)
(Decrease)/Increase in GST payable	(33)	12
	(380)	(237)
Net cash generated from operating activities	(378)	373

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

11 Outlook

11.1 Unrecognised contractual commitments

Operating lease revenue commitments as lessor

The properties owned by the Board are leased to third parties for commercial use. Lease terms vary between lessees with most requiring the payment of outgoings by the lessee.

Future minimum rental revenues (exclusive of GST) due under non-cancellable operating commercial property leases at the reporting date but not recognised as receivable in the financial report, are as follows:

	2025 \$'000	2024 \$'000
Not later than one year	2,947	2,964
Later than one year but not later than five years	11,616	11,653
Later than five years	64,281	67,185
Total commitments	78,844	81,802

The lease over the Citi Centre property is for ground rent only and provides for a base annual rental, payable monthly, calculated at 8% of the value of the land. In accordance with the lease terms, the land value is formally reviewed every five years. The Board also undertakes an annual assessment of the land value and, where the carrying amount is considered to be materially different from fair value, the land is revalued accordingly (refer Notes 8.2 and 12.1).

The most recent valuation was determined in 2021 and finalised in 2022, effective from August 2021. The lease has been renewed for a further term of 33 years, expiring in August 2052.

In addition to the base rent, the lease requires payment of an annual supplementary amount equal to 4% of the Lessee's net income. This variable at-risk component has not been included in the above calculation.

11.2 Contingent assets and liabilities

At balance date the Board does not have any contingent assets or liabilities.

11.3 Events after the reporting period

No events requiring disclosure occurred between 30 June and the date the financial statements were authorised.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

12 Measurement and risk

12.1 Fair value

AASB 13 *Fair Value Measurement* defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants, in the principal or most advantageous market, at the measurement date.

Initial recognition:

Non-current tangible assets are initially recorded at cost or at the value of any liabilities assumed, plus any incidental cost involved with the acquisition.

Where assets are acquired at no value, or minimum value, they are recorded at fair value in the Statement of Financial Position.

Revaluation:

Equipment is subsequently measured at fair value after allowing for accumulated depreciation.

The revaluation process is reviewed by the Executive Officer and the Board each year.

Non-current tangible assets are valued at fair value and revaluation of non-current assets or group of assets is only performed when the fair value at the time of acquisition is greater than \$1.5 million and estimated useful life is greater than three years.

The Board has no equipment assets with a value greater than \$1.5 million at acquisition. No revaluations have been performed.

Investment properties have a value greater than \$1.5 million therefore have been revalued, refer to note 8.2.

Fair value hierarchy:

The Board classifies fair value measurement using the following fair value hierarchy that reflects the significance of the inputs used in making the measurements, based on the data and assumptions used in the most recent revaluation:

- Level 1 - traded in active markets and is based on unadjusted quoted prices in active markets for identical assets or liabilities that the entity can access at measurement date.
- Level 2 - not traded in an active market and are derived from inputs (inputs other than quoted prices included within level 1) that are observable for the asset, either directly or indirectly.
- Level 3 - not traded in an active market and are derived from unobservable inputs.

Fair value of financial assets at fair value through profit and loss and of investment properties have been categorised as level 2. For more information and disclosures regarding fair value measurement techniques used, refer to note 7.3 for other financial assets and note 8.2 for investment properties.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

12.2 Financial instruments

Financial risk management:

The Board manages risk and its policies are in accordance with the SA Government *Risk Management Guide* and the principles established in the Australian Standard *Risk Management Principles and Guidelines*.

The Board's exposure to financial risk (liquidity risk, credit risk and market risk) is low due to the nature of financial instruments held.

Liquidity risk:

Liquidity risk arises where the Board is unable to meet its financial obligations as they fall due.

Other than the specific items mentioned below the Board's exposure to liquidity risk is considered insignificant based on past experience and current assessment of risk.

Details of significant accounting policies and methods adopted including the criteria for recognition, the basis of measurement, and the basis on which income and expenses are recognised with respect to each class of financial asset and financial liability are disclosed in the respective note.

As previously outlined in these financial statements the Board primarily invests through various products offered by Funds SA. Funds SA is a large institutional investment specialist servicing the South Australian Government and its statutory authorities. The Board invests in unlisted units of investment funds managed by Funds SA. The Board's liquidity risk for these products is now the risk of a request to redeem units not being satisfied by Funds SA in the required timeframe. Funds SA requires a notice period of two business days for the redemption of units, which are otherwise liquid.

The Board is satisfied that the resulting liquidity risk is also insignificant based on Funds SA liquidity risk management policies as follows;

- The allocation of cash in the strategic asset allocation of each investment option is set at a sufficient level to manage expected cash redemptions, and
- A large proportion of each investment option is invested in highly liquid investments as actively traded equities, unit trusts or securities with short term maturities.

Credit risk:

Credit risk arises when there is the possibility of the Board's counterparties defaulting on their contractual obligations resulting in financial loss to the Board. The Board measures credit risk on a fair value basis and monitors the risk on a regular basis.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

12.2 Financial instruments (continued)

The Board has policies and procedures in place to manage credit risk and to ensure that transactions occur with customers with appropriate credit history. The Board does not hedge its financial assets.

Note 7.3 refers to the long term secured loan made to SAHMRI to establish a cyclotron facility and to the Board previously holding a first mortgage charge over advances made to the Port Pirie Regional Health Service Inc. which has since been discharged.

At reporting date funds totalling \$147,920,000 were invested through Funds SA. The Board considers the credit risk for financial assets invested through Funds SA lies with Funds SA and the fund managers responsible for the management of the underlying investments. The Board monitors Funds SA's performance relative to their competitors and also against their own benchmarks monthly. The Board also monitors the makeup of the underlying assets of the investment managers their products are invested in and that Funds SA are investing in accordance with the agreed Annual Performance Plan.

The maximum exposure to credit risk at the reporting date is the carrying amount of the financial assets.

The Board does not consider that any of the financial assets are impaired.

Refer to note 7.2 and 7.3 for further information.

Market risk:

Market risk is the risk that investment returns generated by the different financial markets will be volatile and will deviate from long-term expectations over the short/medium term.

As previously outlined in these financial statements the Board primarily invests through various investment products offered by Funds SA. The Board invests in unlisted units of investment funds managed by Funds SA. The Board's market risk is now the risk of a change in value of underlying assets adversely affecting the value of the Board's investment in these units.

The Board is satisfied that the resulting market risk has been significantly reduced based on Funds SA market risk management policies as follows;

- Ensuring a diversity of exposures to different financial markets and sub-markets; and
- Ensuring asset allocations for different investment options are consistent with the time horizon of each.

Sensitivity Analysis:

A general fall in the fair value of long term investments in unlisted unit trusts of 5% and 10%, if equally spread over all assets in the portfolio, would lead to a reduction in value of \$7,367,000 (2024: \$6,750,000) and \$14,735,000 (2024: \$13,500,000) respectively.

The Board believes the underlying quality of the assets support the conclusion that the value of financial assets are not overstated.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

12.2 Financial instruments (continued)

Categorisation of financial instruments

Details of material accounting policy information and methods adopted including the criteria for recognition, the basis of measurement, and the basis on which income and expenses are recognised with respect to each class of financial asset and financial liability disclosed in the respective financial asset/liability note.

On initial recognition, a financial asset is classified as measured at amortised cost or fair value through profit or loss.

A financial asset is measured at amortised cost if it meets both of the following conditions:

- It is held within a business model whose objective is to hold assets to collect contractual cash flows; and
- Its contractual terms give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

A financial asset is measured at fair value through profit or loss unless it has been measured at amortised cost or fair value through other comprehensive income.

The Board measures financial instruments at either amortised cost or fair value through profit or loss as applicable.

The following table discloses the maturity analysis of financial assets and financial liabilities.

Carrying value of financial assets and financial liabilities	Note	Carrying amount/ fair value	Contractual maturities		
		2025 \$'000	< 1 year \$'000	1-5 years \$'000	>5 years \$'000
<u>Financial Assets</u>					
Cash and cash equivalents					
Cash and cash equivalents	7.1	175	175	-	-
Financial assets at amortised cost					
Receivables *	7.2	1,682	1,682	-	-
Other financial assets	7.3	7,659	718	3,829	3,112
Financial assets at fair value					
Other financial assets	7.3	147,912	564	-	147,348
Total Financial Assets		157,428	3,139	3,829	150,460
<u>Financial Liabilities</u>					
Financial liabilities at amortised cost					
Payables *	9.1	1,422	1,422	-	-
Total Financial Liabilities		1,422	1,422	-	-

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

12.2 Financial instruments (continued)

Carrying value of financial assets and financial liabilities	Note	Carrying amount/ fair value	Contractual maturities		
		2024 \$'000	< 1 year \$'000	1-5 years \$'000	>5 years \$'000
Financial Assets					
Cash and cash equivalents					
Cash and cash equivalents	7.1	1,553	1,553	-	-
Financial assets at amortised cost					
Receivables *	7.2	669	669	-	-
Other financial assets	7.3	8,104	445	3,590	4,069
Financial assets at fair value					
Other financial assets	7.3	135,536	539	-	134,997
Total Financial Assets		145,862	3,206	3,590	139,066
Financial Liabilities					
Financial liabilities at amortised cost					
Payables *	9.1	1,524	1,524	-	-
Total Financial Liabilities		1,524	1,524	-	-

* The receivable and payable amounts disclosed here exclude amounts relating to statutory receivables and payables. This includes Commonwealth, State and Local Government taxes and equivalents, fees and charges; Audit Office of South Australia audit fees. Receivables do not include prepayments as these are not financial instruments. Prepayments are presented in note 7.2.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$	\$

13 Ray & Shirl Norman Cancer Research Trust

The Ray & Shirl Norman Cancer Research Trust ('Trust' or 'Fund') was created under the will of Mr Raymond Norman who passed away on 23 March 2006. All income derived by the Trust is to be "used for the purpose of the prevention and cure of cancer and anything incidental or conducive to those purposes".

Under the terms of the will the Royal Adelaide Hospital (RAH) was appointed as trustee of the Fund and was required to administer the Fund for the designated purpose. Following legal advice that the RAH was not able to act as trustee application was made to the Supreme Court and the HSCGB assumed the role as sole Trustee from 21 September 2011.

The following summary of the financial results for the year of the Ray & Shirl Norman Cancer Research Trust are included for information purposes only. All amounts are rounded to the nearest dollar.

Schedule of income and expenses

Total investment income	765,661	626,158
Total expenses	<u>393,405</u>	<u>504,026</u>
Total comprehensive result	<u>372,256</u>	<u>122,132</u>

Schedule of financial position

Total assets	8,184,352	7,812,096
Total liabilities	<u>59,999</u>	<u>59,999</u>
Net assets	<u>8,124,353</u>	<u>7,752,097</u>

14 Dorothy E Brown Charitable Trust

The Dorothy E Brown Charitable Trust ('Trust' or 'Fund') was established by Deed Poll dated 17 December 2014 pursuant to Section 21 of the *Health Services Charitable Gifts Act 2011*.

In accordance with the will of Mrs Dorothy E Brown dated 16 August 1971 the residue of her estate was bequeathed to the now defunct Hospitals Department of the South Australian Government for the "benefit of sufferers from kidney diseases or complaints". The amount of the residue was held by SA Health from October 2009 and was the subject of Supreme Court proceedings seeking directions in relation to the residue.

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$	\$

14 Dorothy E Brown Charitable Trust (continued)

The judgement of the Court from those proceedings was that the deceased's will established a charitable trust and that, having consented to its appointment, HSCGB should be appointed as trustee of this charitable trust. The Deed Poll dated 17 December 2014 appoints the HSCGB as trustee and provided further guidance of the administration of the charitable trust.

Under the terms of the Deed Poll the HSCGB was appointed as trustee and an initial sum of \$286,621 was provided by SA Health to be administered by the HSCGB. These funds are invested through Funds SA in an account in the name of the Trust.

In accordance with the judgment the terms of the Trust were varied whereby -

- the trust monies (income and/or capital) may be applied for the benefit of any patient of a hospital incorporated under the *Health Care Act 2008* who is suffering from a kidney disease or complaint; and
- the trust monies (income and/or capital) shall be expensed on benefits that such patients would not normally receive or enjoy as patients of those hospitals.

The following summary of the financial results for the year of the Dorothy E Brown Charitable Trust are included for information purposes only. All amounts are rounded to the nearest dollar.

Schedule of income and expenses

Total income	19,128	15,345
Total expenses	<u>25,892</u>	<u>13,849</u>
Total comprehensive result	<u>(6,764)</u>	<u>1,496</u>

Schedule of financial position

Total assets	<u>240,159</u>	<u>246,923</u>
Net assets	<u>240,159</u>	<u>246,923</u>

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$	\$

15 P F Beinke Charitable Trusts

In accordance with the Will of Mr Peter Francis Beinke dated 19 February 2014, the residue of his estate was to be used to establish three Charitable Trusts "...for the express purpose of providing education and training and associated expenses for Chaplains in their role at (one of three institutions)".

The residue of his estate was therefore split into three equal parts to create the following Trusts:

- Royal Adelaide Hospital (The Chapel Fund)
- Flinders Medical Centre (Pastoral Care Account)
- Daw Park Repatriation Hospital (Pastoral Care Chapel Account)

The amount of this residue was held by Australian Executor Trustees Limited (AET) since his death in March 2014. Pursuant to a Deed of Trustee Retirement, Appointment & Indemnity dated 1 July 2020 AET retired as trustee and the Health Services Charitable Gifts Board (HSCGB) was appointed in its place.

On finalisation of the Estate of Mr P F Beinke, AET transferred three amounts of \$249,998 each to the HSCGB in its capacity as Trustee of each of the Charitable Trusts. These funds were initially invested through HSCGB pooled assets and interest paid to the Charitable Trust. In due course all funds were transferred to, and are now invested through Funds SA in an account in the name of the Trust.

The following summary of the financial results for the year of the P F Beinke Charitable Trust - Royal Adelaide Hospital (The Chapel Fund) are included for information purposes only. All amounts are rounded to the nearest dollar.

Schedule of income and expenses

Total income	22,416	16,570
Total expenses	<u>3,833</u>	<u>2,838</u>
Total comprehensive result	<u>18,583</u>	<u>13,732</u>

Schedule of financial position

Total assets	302,942	281,697
Total liabilities	<u>2,662</u>	<u>-</u>
Net assets	<u>300,280</u>	<u>281,697</u>

HEALTH SERVICES CHARITABLE GIFTS BOARD

NOTES TO THE FINANCIAL STATEMENTS for the year ended 30 June 2025

2025	2024
\$	\$

15 P F Beinke Charitable Trusts (continued)

The following summary of the financial results for the year of the P F Beinke Charitable Trust - Flinders Medical Centre (Pastoral Care Account) are included for information purposes only. All amounts are rounded to the nearest dollar.

Schedule of income and expenses

Total income	21,665	16,282
Total expenses	11,829	3,997
Total comprehensive result	<u>9,836</u>	<u>12,285</u>

Schedule of financial position

Total assets	286,900	277,064
Total liabilities	-	-
Net assets	<u>286,900</u>	<u>277,064</u>

The following summary of the financial results for the year of the P F Beinke Charitable Trust - Daw Park Repatriation Hospital (Pastoral Care Chapel Account) are included for information purposes only. All amounts are rounded to the nearest dollar.

Schedule of income and expenses

Total income	20,409	16,265
Total expenses	13,579	24,664
Total comprehensive result	<u>6,830</u>	<u>(8,399)</u>

Schedule of financial position

Total assets	268,192	261,362
Total liabilities	-	-
Net assets	<u>268,192</u>	<u>261,362</u>