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**HAEMODIALYSIS CENTRES**

**BISHAN CENTRE**

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Singapore 570197  
**Tel:** 6254 9514/5 **Fax:** 6254 9512

**GHIM MOH CENTRE**

Blk 6 Ghim Moh Road #01-188  
Singapore 270006  
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**SAN WANG WU TI CENTRE**

Blk 333 Kreta Ayer Road #03-33  
Singapore 080333  
**Tel:** 6255 3133 **Fax:** 6225 0080

**PERITONEAL DIALYSIS CENTRE**

**GHIM MOH CENTRE**

Blk 6 Ghim Moh Road #01-188  
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*Stronger Support for*  
**Brighter Hopes**  
*Annual Report 2006/07*





## FOUNDER & CHAIRMAN'S MESSAGE

*Stronger Support for Brighter Hopes*



The year 2006 was a fruitful year for KDF as we have turned ten. It is gratifying to see KDF realize the mission of a few committed volunteers into what the Foundation represents today. For ten years, KDF has always had one definitive vision: to ensure that no kidney patient will be deprived of treatment due to the lack of funds. As we go into our 11th year, we are proud to say that we continue to fulfill our vision through the support of the general public, charitable organizations, the medical profession and the Ministry of Health (MOH).

The year has also witnessed a very generous donation made by the Estate of Tan Sri Khoo Teck Puat to KDF for the building of a new centre to replace KDF-Alexandra Centre, which was closed down in 2005. The \$5 million donation would see to not only the set up capital but also the recurring expenses of the centre. The newly built centre at Ghim Moh houses 20 dialysis stations with the capacity to treat an additional 120 new patients over the next three to four years, starting with 35 patients during its first year of operation.

KDF is proud to announce the following figures for Financial Year (FY) 2006/07: 22 staff helped to raise \$3.8 million; 236 patients received affordable dialysis treatment, 13 patients had successful kidney transplant; 74% of our expenditure was used for dialysis services and education, 13% for fund-raising, 12% for administration, and 1% for publicity.

Moving forward, KDF is faced with three key challenges. The first is in a niche area to provide suitable dialysis facilities for the elderly, high-dependency, needy kidney patients, with multiple

medical problems, who are best treated in an environment, with full medical and nursing care, proximity of hospital facilities and not in a satellite dialysis centre. With 60% of our patients above 50 years of age and a growing aging population in Singapore, KDF will look into a high-dependency centre to address these needs. The second is to cater to a growing number of needy kidney patients as the population grows. With the incidence of new dialysis patients in Singapore estimated at about 250 per million of population per year and with a projected population of 6.5 million, statistically, there will be about 1,625 new dialysis patients yearly. This is a mammoth task for the VWOs, the Government and the private sector as they strive to meet this challenge.

Thirdly, KDF is positioning itself upstream to prevent end-stage renal disease through education and to support research projects that would lead to the prevention of kidney-related diseases. KDF continues to organize public forums annually, to raise awareness of kidney and other related diseases and educational programs for healthcare and medical professionals.

In the field of research, KDF will work with an established and reputable institution like the National University of Singapore to identify research projects, monitor their progress, and control the disbursement of funds. The objective is to ensure a transparent system, which will enhance the public's confidence and sustain the donations to the KDF Research Fund.

It goes without saying that our modest achievements have been made possible by the generous support of the public. We at KDF are humbled and privileged by the opportunities given to us to achieve these life-saving subsidies from the MOH and for the unflagging support of our board members, volunteer doctors, staff, and supporters of KDF. Together, we will strive to continue our mission of saving lives.

**DR GORDON KU**  
Founder & Chairman

## ABOUT THE KIDNEY DIALYSIS FOUNDATION

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The Kidney Dialysis Foundation (KDF) is a non-profit charitable organisation, established in February 1996 by Dr Gordon Ku, a kidney specialist. KDF provides subsidised dialysis treatment to needy members of our community so that these patients will not be deprived of treatment due to financial difficulties. Patients needing treatment from KDF are referred by medical social workers from the restructured hospitals.

A holistic approach is taken when caring for patients as it is KDF's mission to look after the well-being of patients by nurturing hope and confidence to make life more meaningful, even for the most destitute. With the commitment to provide high quality, low cost treatment to patients who are unable to afford treatment, KDF has with the support of donors and sponsors, set up a few centres to care for its patients.

### OUR VISION

To ensure that no kidney patient will perish because of the lack of funds for dialysis and to prevent kidney failure due to diabetes and other complications

### OUR MISSION

To look after the well-being of needy people stricken with end-stage kidney disease by nurturing hope and confidence to make their lives more meaningful and to support research that will help prevent kidney-related diseases

### OUR COMMITMENT

- To provide high quality, low cost treatment to needy kidney patients
- To offer patient support services to all kidney patients in Singapore
- To promote public awareness and education of kidney diseases
- To organise educational programs on renal-related issues for healthcare and medical professionals
- To promote live-donor organ transplant
- To support research work that would lead to prevention of kidney-related diseases

### OUR MANAGEMENT POLICY

Since its inception, KDF has implemented a number of policies to ensure transparency and that donations received are utilised directly for patients' treatment and not for costly overheads and miscellaneous expenditure. A fixed-cost subcontracting system allows for minimal administration and overhead costs.

To keep costs low while providing quality treatment, KDF keeps its management lean and trim with a team of volunteers and staff. Its Chairman, Board of Directors and Executive Committee do not receive any remuneration or honorarium. For good corporate governance, objectivity and independent judgement, on 1 January 2007, the Board Of Directors hired a Chief Executive Officer for the executive management of the Foundation.

KDF's financial statements are easily available for scrutiny on the website at [www.kdf.org.sg](http://www.kdf.org.sg), and upon the request of donors.

### OUR POLICY ON RESERVES

The Board of KDF shall maintain some level of reserves to ensure long term financial sustainability. As at 31 March 2007, assuming KDF receives no income from the government, patients and donors, the accumulated surplus would only last for 2.6 years. As dialysis treatment for end-stage renal disease is a life long process, it is the intention of the management to ensure that the level of reserves is adequate to support the KDF programs for its needy patients during their life-time.

### OUR HISTORY

In the 1980s, most needy kidney patients in Singapore were provided with dialysis treatment under the then Government-funded program; the Self-Dependency Dialysis Unit (SDDU).

To keep the cost of the treatment low, patients had to provide a dialysis helper who was usually their spouses. Patients and their helpers had to spend numerous hours in the treatment process, preventing them from seeking full-time employment and thus leaving them trapped in the poverty cycle.

## ABOUT THE KIDNEY DIALYSIS FOUNDATION

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To address this issue, KDF was set up with the support of the Ministry of Health to subsidise the treatment fees for these low-income patients. KDF overhauled the SDDU program to provide patients with fully aided treatment so as to enable their family members to seek full-time employment.

In 1996, KDF's first Haemodialysis (HD) centre, the KDF-Alexandra Centre situated in Alexandra hospital opened its doors to patients. To accommodate the rising number of needy patients, more centres were built over the years. The KDF-Bishan Centre was opened on 20 November 1997 by Mr Wong Kan Seng, Minister for Home Affairs and Member of Parliament for Bishan-Toa Payoh GRC. The centre is easily accessible to patients living in the northern and central parts of Singapore.

On 9 October 2004, KDF inaugurated two new dialysis centres – San Wang Wu Ti (SWWT)-KDF Centre and KDF-Peritoneal Dialysis (PD) Centre located at Kreta Ayer Road. President Nathan and Mrs Nathan were invited to grace the occasion as KDF's Guests-of-Honour. Other distinguished guests included Mr Khaw Boon Wan, Minister of Health, and Dr Lily Neo, Member of Parliament for Jalan Besar GRC.

The haemodialysis centre, SWWT-KDF Centre, was so named because of the generous contribution made by the disciples and devotees of the San Wang Wu Ti Religious Society towards the full cost of building and maintenance of the Centre. The establishment of KDF-PD Centre was made possible with the generous combined donation from the Khoo Foundation (now known as the Estate of Tan Sri Khoo Teck Puat) and Singapore Pools (Pte) Ltd.

In mid 2005, the KDF-Alexandra Centre ceased operations as the lease for the location ended. With its closure, KDF needed a new centre to serve its existing patients. In December 2006, KDF received a generous donation from the Estate of Tan Sri Khoo Teck Puat enabling KDF to build a dialysis centre to replace the Alexandra Centre. With this centre, KDF hopes to relieve the workload at the current centres and to better serve its patients. This new haemodialysis centre would be located at Ghim Moh.

### OUR DIALYSIS CENTRES

#### KDF – BISHAN CENTRE

Located northeast of the island, the KDF-Bishan Centre is the first KDF centre to be situated along the MRT line. It is easily accessible to patients living in the north and central parts of Singapore.

To treat the rising number of needy patients, the centre was expanded in February 2003. It now houses 19 dialysis stations and has a maximum patient capacity of 114. It now also has an upgraded Reverse Osmosis System and a resource Room for medical training and patient education.

#### SAN WANG WU TI – KDF CENTRE

As part of KDF's effort to reach kidney patients beyond the suburban housing estates of Singapore, the SWWT-KDF Centre was set up at Kreta Ayer, the traditional retail hub of Chinatown.

The centre houses 15 dialysis stations and has a maximum patient capacity of 90.

#### KDF – GHIM MOH CENTRE

The Ghim Moh Centre situated in the north-western part of Singapore, was built to replace the KDF-Alexandra Centre when its lease ended in 2005.

The centre currently has 10 dialysis stations and a maximum patient capacity of 40. However, KDF will be increasing the number of dialysis stations and maximum patient capacity to 20 and 120 respectively, in the near future.

#### PERITONEAL DIALYSIS CENTRE

KDF's first PD Centre previously located in the central district of Singapore, was built with the kind contribution of \$130,000 from the Singapore Pools (Pte) Ltd and the Khoo Foundation (now known as the Estate of Tan Sri Khoo Teck Puat). It has since been shifted to Ghim Moh.

The centre focuses on educating medical workers, patients as well as their caregivers on PD. PD is currently the main mode of dialysis treatment in the United Kingdom and Hong Kong. The centre has the capacity to serve a maximum of 200 patients.

## CORPORATE INFORMATION

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### CHAIRMAN

01. Dr Gordon Ku  
Consultant Nephrologist and Physician

### DIRECTORS

02. Mr Cheng Wai Keung  
Chairman and Managing Director, Wing Tai Holdings Pte Ltd
03. Mr Stephen Lee Ching Yen  
Managing Director, Great Malaysia Textile Mfg Co Pte Ltd  
President, Singapore National Employers Federation  
Chairman, Singapore Airlines Limited
04. Mr Watson Ong  
Chairman and Director, Magnus Worldwide Inc.
05. Mr Yeo Thiam Teng  
Retiree
06. Mr Yeoh Oon Jin  
Partner and Head of Assurance, PricewaterhouseCoopers

### TREASURER

07. Mr Peter Tan  
Retiree

### EXECUTIVE COMMITTEE

01. Dr Gordon Ku  
04. Mr Watson Ong  
05. Mr Yeo Thiam Teng  
07. Mr Peter Tan

## CORPORATE INFORMATION

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### MEDICAL ADVISORY BOARD

#### CHAIRPERSON AND MEDICAL DIRECTOR

08. Assoc Prof Lina Choong Hui Lin  
Senior Consultant, Department of Renal Medicine,  
Singapore General Hospital

#### MEDICAL DIRECTOR – PERITONEAL DIALYSIS

09. Dr Grace Lee  
Consultant Nephrologist and Physician

#### MEMBERS

01. Dr Gordon Ku  
Consultant Nephrologist and Physician
10. Assoc Prof Evan Lee  
Head, Division of Nephrology, National University Hospital
11. Dr Stephen Lim  
Consultant Surgeon and Urologist
12. Prof Woo Keng Thye  
Senior Consultant and Advisor, Department of Renal Medicine,  
Singapore General Hospital
13. Dr Yong Nen Khiong  
General and Cardiothoracic Surgeon

### OTHER OFFICE BEARERS

#### LEGAL ADVISOR

Ms Angela Wong

#### SECRETARY

Mdm Lim Chin Bee

### AUDITORS FOR KDF

KPMG

### REGISTRATION DETAILS

Charity Registration  
No. 1156

Company Registration  
No. 199600830Z

GST Registration  
No. 19-9600830-Z

### REGISTERED OFFICE:

Block 333  
Kreta Ayer Road #03-33  
Singapore 080333

## OUR PATIENTS

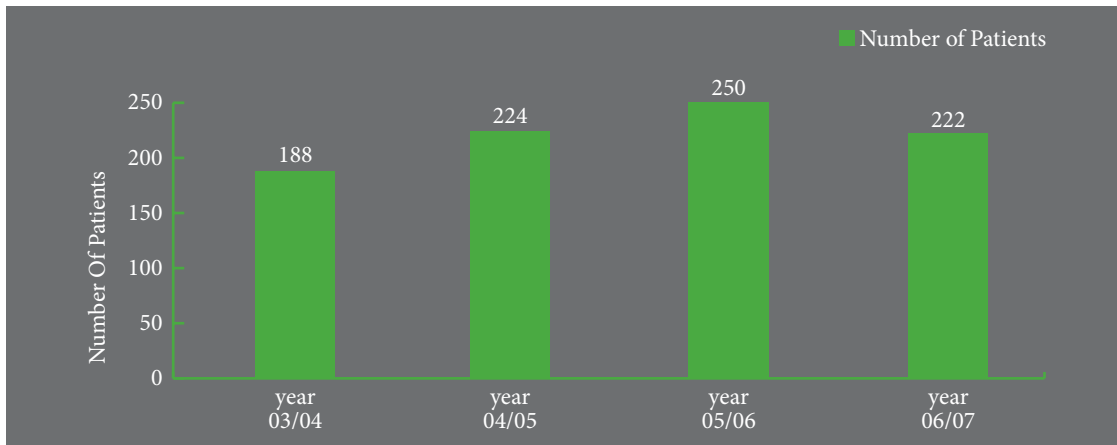
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### OUR PATIENTS

Since its inception, KDF has strived to provide treatment and support to those who are in need so that no one should be denied treatment just because he or she could not afford it. Over 89% of our patients are above 40 years old and many of them hold jobs such as cleaners, hawker assistants, store assistants, taxi drivers, etc. In the Financial Year (FY) 06/07, some patients paid as little as \$130 per month out of their own pocket, after subsidy and in cases where a patient was completely unable to afford treatment, KDF would place them under the Adopt a Patient Program so that they would not have to pay for treatment at all. In fact, 91% of all patients paid less than \$600 per month in cash as compared to the full monthly cost of about \$2,000.

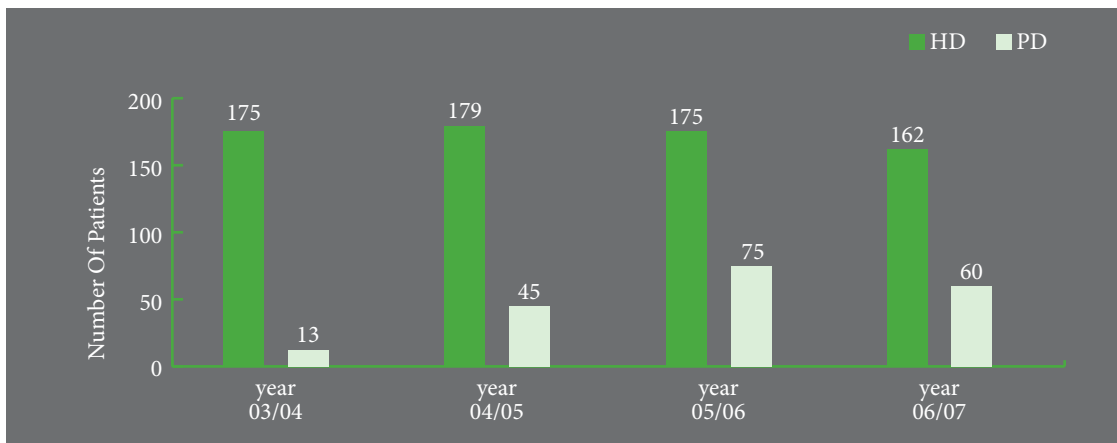
### PATIENT POPULATION

As at 31 March 2007, the total patient number stood at 222 which is 11.2% less patients compared to FY 05/06.



### BREAKDOWN OF HD & PD PATIENTS

As at 31 March 2007, PD patients constituted 27% of the total patient population compared to 30% at 31 March 2006. The ratio of HD patients remained higher than the PD patients which is consistent with the previous three years.



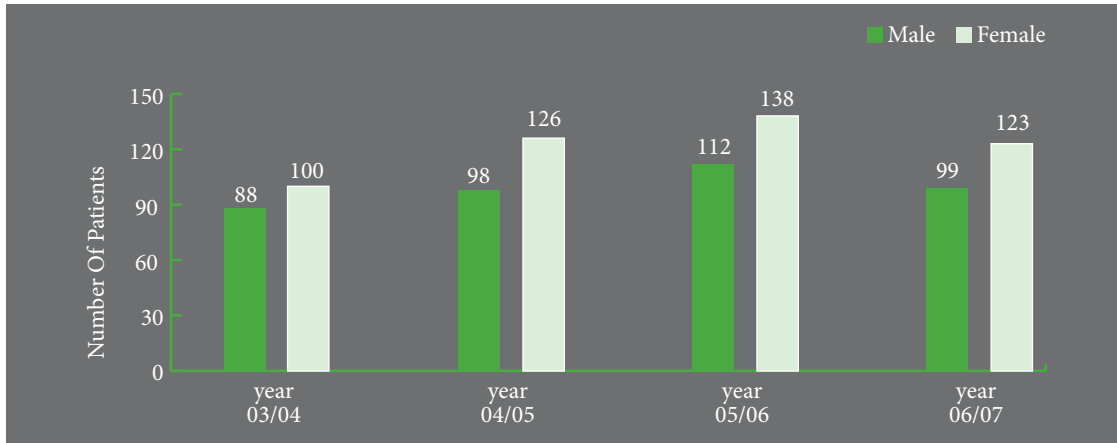


## OUR PATIENTS

### *Stronger Support for Brighter Hopes*

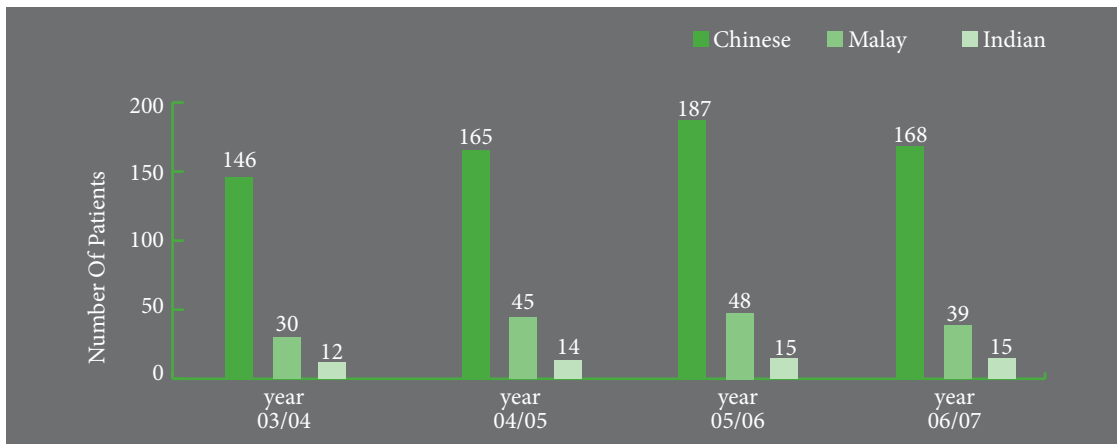
#### GENDER

As with the previous three years, the ratio of female patients is higher than that of male patients.



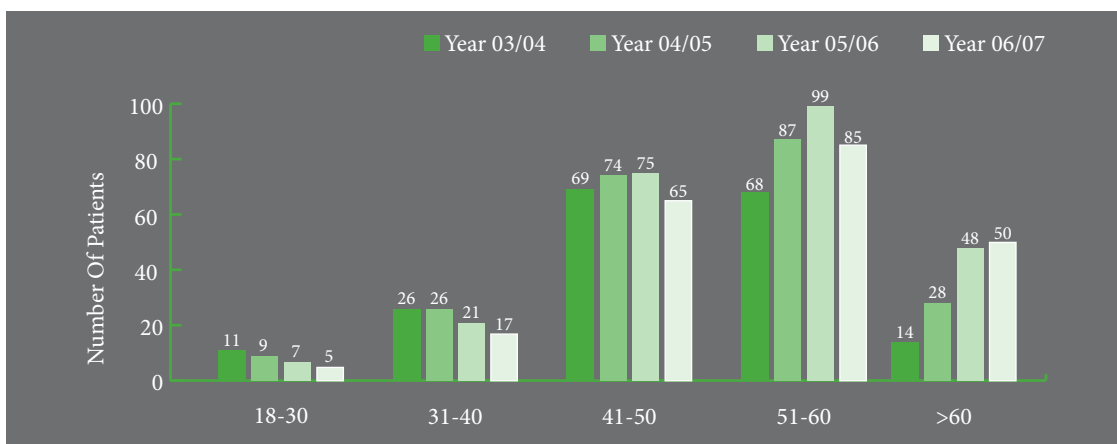
#### RACE

The race distribution profile was relatively unchanged over the last three years. As at 31 March 2007, 76% of patients were Chinese, 18% were Malay and 7% were Indian.



#### AGE

Our patients are mainly from the 41 to 60 year-old age group. As at 31 March 2007, this group of patients constituted 68% of the total patient population. The elderly patients (more than 60 years old) had increased from 19% to 22%.



## EDUCATION & TREATMENT CARE

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KDF is continuously playing an active role in promoting education on renal-related issues to the medical fraternity, students and patients, and preventive education to the general public. KDF has a sizable pool of volunteer nephrologists from both the public and private sectors, who review the Foundation's patients at regular intervals with no additional costs to patients. The Foundation endeavours to provide better treatment care to our patients.

As part of KDF's effort to provide holistic care to the patients, it initiated the 'Subsidised Erythropoietin Injection Program' in 1998. This program helps alleviate the associated problems of anaemia such as fatigue, poor appetite and insomnia, enabling patients to lead a normal lifestyle. As at 31 March 2007, 69% of KDF's patients have benefited from the program. In 2005, KDF introduced two more subsidized medications – Calcijex and Venofer – to enhance patients' treatment.

### CONTINUOUS RENAL NURSING EDUCATION

The program commenced in January 2006 and ended in January 2007. The aim of this education program was to fulfill the on-going needs of increasing knowledge to add to the skills of the nurses who provide care. The enhancement of knowledge and nursing skills are provided to balance the needs of the learner and KDF. In this program, workshops and tutorials were used. The program is also very popular as it received active participation from the nurses.

### GLUCOMETER MONITORING

This is an on-going training where the medical staff are trained on how to monitor patients' blood glucose level using the glucometer and to assess and act when complications arise. A yearly re-certification test is conducted by the charge nurse to maintain the standard.

### INTRAVENOUS ADMINISTRATION OF MEDICINES

A yearly re-certification on oral and practical test is conducted to ensure that the registered nurses (RN) are equipped and authorised to perform the extended role in the administration of the specific intravenous medicines according to KDF guidelines. KDF's Medical Director, Assoc Prof Lina Choong would endorse the certification. The KDF nursing personnel and charge nurse of the centres will keep a register of the approved staff for administering intravenous medicines. An intravenous therapy course was conducted in April 2006 for all new RN. The pharmacology lecture was facilitated by pharmacist Dr Lou Huei Xin from Singapore General Hospital (SGH). A practical test was also incorporated.

### DIABETIC CARE TRAINING

All RN from the various centres attended the diabetic care training conducted by KDF nursing personnel. Clinical examination of diabetic foot is performed half yearly for diabetes patients to detect any abnormalities for early intervention.

### NANYANG POLYTECHNIC POST-ADVANCED DIPLOMA COURSE STUDENT (NEPHRO-UROLOGY)

There were 18 students who had their one day orientation in July and clinical attachment for a period of one week in October 2006 at both the San Wang Wu Ti and Bishan Centres.

### NANYANG POLYTECHNIC POST-DIPLOMA CERTIFICATE IN NURSING (DIABETIC NURSE EDUCATOR)

The post-advanced diploma students visited Bishan Centre in May 2006. The purpose of the visit was to gain understanding of the dialysis process.

## EDUCATION & TREATMENT CARE

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### PATIENT ORIENTATION AND EDUCATION

The KDF nursing personnel will educate all new patients on the treatment and dialysis process. Each patient is given a patient's handbook. The primary nurse and the dietitian will continue to educate the patients on medication and diet compliance periodically. This is an on-going process.

### PUBLIC FORUM: "KIDNEY DISEASE - WHAT DO I NEED TO KNOW?"

The Public Forum was held on 15 July 2006 at Suntec Singapore. An estimated 1,400 participants spent an afternoon learning about kidney diseases. This was the first Public Forum that KDF has conducted in Mandarin. The forum chairman was Dr Tan Seng Hoe. The invited speakers were Dr. Marjorie Foo, Dr Ho Chee Khun, and Ms Chow Pek Yee. The forum was held as part of KDF's public education plan to raise awareness on kidney diseases.

### STATE OF THE ART NEPHROLOGY COURSE (SOTANC)

The fourth SOTANC was held from 9 to 13 September 2006 at the Furama Riverfront Hotel. Renowned speakers from USA, Europe and the Asia-Pacific were invited to discuss the latest researches and developments in the field of Nephrology. The four and half day course attracted 185 delegates from Singapore and the various parts of the Asia-Pacific region.

### HEALTH SCREENING

On 17 September 2006, the Bishan-Toa Payoh GRC organized "Healthy Heart Day" at the Bishan stadium. They had invited KDF to conduct a free health screening for the participants. A total of 106 participants were screened. Abbot Diabetic Care sponsored the glucose monitoring.

### CONTINUOUS QUALITY IMPROVEMENT

A team comprising of the charge nurses from the centres and KDF's nursing personnel under the guidance of KDF's Medical Directors continued to monitor the CQI of patients' KT/V or dialysis adequacy. All centres achieved a dialysis adequacy of more than 80%,  $KT/V > 1.3$ , where the ideal clearance level of  $KT/V$  is about 1.2.

### STAFF COMPETENCY CHECK

A yearly competency check on the dialysis procedures is conducted on the service providers' staff. This is done in collaboration with the centre's charge nurse to ensure that the standard of practice is maintained according to the KDF protocols and guidelines.

### AUDIT ON INFECTION CONTROL

An audit on the dialysis centres' infection control measures is conducted every six months to ensure that patients at KDF receive the standard of practice and care according to the KDF Medical and Nursing Standard. KDF nursing personnel together with the charge nurses performed the audit. All centres maintained the overall standards of above 80%.

## RENAL FRIENDS

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Renal Friends is a patient support group initiated by the Medical Director of KDF, Assoc Prof Lina Choong for all kidney patients and their families in Singapore. Renal Friends aims to bring kidney patients together for interaction and mutual sharing. It consists of committed and enthusiastic volunteers who include kidney patients themselves. Through the kind support of sponsors, KDF is able to arrange for several excursions for the patients and their families.

### PATIENT FAMILY DAY CUM EDUCATION SEMINAR

On 23 April 2006, the Renal Friends' Patient Education and Social Sub-Committee organized a Patient Family Day and a talk on "Understanding your blood results" at the Hewlett Packard (HP) auditorium. Patients and family members from the People's Dialysis Centre, Singapore General Hospital (SGH) and National University Hospital (SLF) were invited to join KDF's patients in this event. HP sponsored the venue and their staff volunteered to assist in the event. Roche Singapore Pte Ltd sponsored the educational seminar and the buffet lunch.

Dr Yeoh Lee Ying, consultant nephrologists from the National University Hospital was invited to give the talk in both English and Mandarin. It was an interesting and engaging talk, after which, patients adjourned for a sumptuous buffet lunch that was followed by a party. The theme of the party "Back to the 60s" comprised of performance from Yishun JC Guitar Ensemble and the Renal Friends volunteer choir group. All participants enjoyed themselves throughout the games and dance and left for home with a big smile.

### DAY TRIP TO MALACCA

A day trip to Malacca on 23 July 2006 was organised by Renal Friends. Patients and their family members from KDF, the People's Dialysis Centre, SGH and National University Hospital (SLF) filled up two tour buses.

The group went to visit various places in Malacca such as the bee farm, Jonker Street, the famous red Christ Church and the popular

Tan Kim Hock, a sundry goods store, which is famous for its local products. The trip was well-spent with everyone bringing home at least one shopping bag. It was close to midnight when they reached home.

### PATIENT EDUCATION SEMINAR

The second patient education seminar for kidney patients and their family members was held on 12 November 2006 at the Aloha Resorts in Pasir Ris. Roche Singapore Pte Ltd had been very supportive and once again sponsored the seminar. Dr Chan Choong Meng, Consultant Nephrologist from SGH delivered the talk on "Heart Disease in Dialysis Patients" in English. It was translated to Mandarin by a nurse volunteer from SGH. The talk was followed by a quiz where the participants were divided into five groups and the group with the highest marks was awarded prizes. There was also a singing competition where many talents of the patients surfaced. It was a fun-filled afternoon.

### KDF PATIENTS' FAMILY DAY AT LABRADOR PARK

A Family Day for KDF's patients was held on 14 January 2007 at Labrador Park. Invitations were extended to patients from the People's Dialysis Centre, National University Hospital and SGH haemodialysis centres.

Various activities were planned for the patients and their family, such as line dancing conducted by one of the volunteers, a treasure hunt and a short tour around the park conducted by the park rangers. It was the first time that a BBQ was being organized. Despite the drizzle, the volunteers managed to start the fire and cooked the food for the participants.

During the event, there was an awards ceremony. The most compliant patients from each of KDF centres were given a token for complying with their treatment and taking care of themselves. A certificate of appreciation was also given to 18 volunteers for their work with Renal Friends for the past 2 years.

KDF would like to thank Asia Renal Care for its support towards this event.

## FUNDRAISING HIGHLIGHTS

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### FUNDRAISING HIGHLIGHTS

KDF's appeals for donations are based strictly on a predetermined annual target. This is to ensure that other worthy charities will not be deprived of public funds. In FY 06/07, KDF, with the help of many generous donors and supporters, managed to reach its fund raising target of \$3.8 million.

#### KDF FLAG DAY (1 APRIL 2006)

KDF held its Flag Day on April Fools Day in 2006. With the support of 2,700 volunteers recruited for the event, the Foundation raised over \$75,000.

#### CHARITY RIDE BY BIKE-AID (5 - 11 JUNE 2006)

This was the third time that KDF has received assistance from Bike-Aid and the Foundation was very happy to be named the beneficiary of the Bike-Aid Charity Ride 2006. The 28 cyclists rode a gruelling 970 km from Alor Setar, Kedah, Malaysia to Singapore over a span of one week. According to Ms Cristina Oh, spokesperson from Bike-Aid, "The ride was a small tribute to the KDF patients' daily struggle with the pain and discomfort of kidney failure. Through this effort, we wanted to encourage patients to continue their treatment despite the pain and not give up."

However, the real challenge started way before the ride. These cyclists had to raise a set target of \$3,000 each in order to participate in the road trip. They went round to friends, relatives and well-wishers to appeal for funds through donation cards. It was no easy task but given their determination, this group of empathetic individuals raised a total of \$126,000 for the needy patients of KDF.

#### BOUNCE FOR LIFE! - DONATION DRAW (11 JUNE 2006)

Bounce For Life! is a fundraising campaign started by a group of volunteers to raise funds for KDF, Students Care Service and The Yellow Ribbon Fund through the "adoption" of ping-pong balls or Bouncers. The finale for the Bounce for Life! Charity Draw was held during the Police Week Carnival at the Police Academy on 11 June 2006 with Mr Chan Soo Sen, Member of Parliament for Joo Chiat Constituency gracing the event. The event raised a total of around \$104,000 for the three charities.

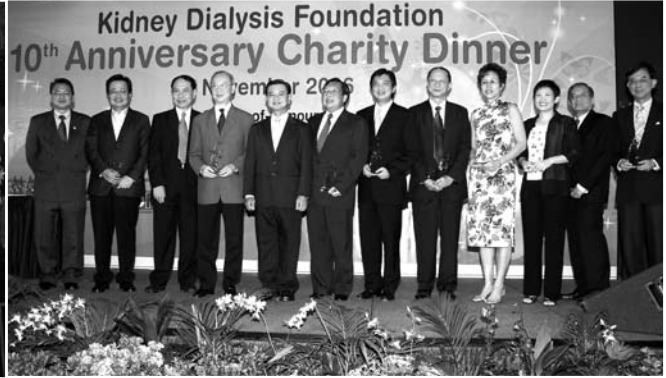
#### LUNAR SEVENTH MONTH 2006 (2 JULY 2006)

The lunar seventh month has always been an important month for KDF when the Chinese community comes forward to aid KDF in its fund raising efforts through traditional Chinese auction dinners. A launch dinner was held on the 2 July 2006 to jumpstart this month long event with Mr Chan Soo Sen, Member of Parliament for Joo Chiat Constituency, as the Guest of Honour.

Mr Chan, together with the members of the Lunar Seventh Month fundraising committee, launched the ceremony by pouring coins into the charity icons - LiuLi Treasure Bowl. The auction with the help of Mr Chan, who sang a few songs in bid to raise more funds, brought in more than \$10,000 for KDF's needy kidney patients. KDF raised a total of \$99,000 for the duration of the Hungry Ghost Festival.

## FUNDRAISING HIGHLIGHTS

*Stronger Support for Brighter Hopes*



### TOGETHER WE PIECE HOPE (JULY - NOVEMBER 2006)

Together We Piece Hope is a charity fund-raising project organised by KDF in partnership with the Singapore Management University (SMU). The generous contributions and concerted efforts from the public, patients, corporations, sponsors, schools and tertiary institutions formed a 22 ft by 10 ft giant jigsaw puzzle. The puzzle was unveiled during a memorable commemorative ceremony on 17 November 2006 at the SMU Lee Kong Chian School of Business building with Mr Zainudin Nordin, Mayor of Central Singapore District, as the Guest-of-Honour.

The highlight of the ceremony was the presentation of a record breaking certificate by the Singapore Books of Records President to KDF for the "Largest Jigsaw Puzzle to Raise Funds for Charity". KDF raised a total of \$76,000 through the sales of \$2-jigsaw puzzle pieces sold from July to November 2006. This success was made possible by the generous support of the Isetan Foundation, Singapore Totalisator Board, Singapore Management University and many more sponsors and donors.

### TOGETHER WE ROCK FOR CHARITY CONCERT (4 NOVEMBER 2006)

Taiwan's No 1 hip hop boyband – Energy, ballad crooner – Sam Lee, and the talented duo – Yuan Wei Jue Xing lent their star appeal to KDF on 4 November 2006 at its first fundraising concert at Fort Canning Green. Together with Singapore's newly minted Superband Mi Lu Bing, runner-up Soul and Lucify, they put up a sizzling performance that made it a night to be remembered. With the help of Carlton Hotel, our sponsors, donors and artistes, the concert helped raise \$364,000 for our patients.

### 10TH ANNIVERSARY CHARITY DINNER (22 NOVEMBER 2006)

KDF celebrated its 10th Anniversary with a Charity Dinner at the Meritus Mandarin Singapore on 22 November 2006. The volunteer appreciation and fund-raising dinner was attended by 500 guests amongst whom were the KDF Board of Directors, volunteer doctors, donors and supporters. It was indeed a joyous occasion as everyone gathered on this special occasion to show gratitude to these volunteers and supporters, some serving the Foundation since its beginning.

Guests were seated to the lovely chorus of the 100-member choir from G Team Vocal and Training School as they awaited the arrival of the Guests-of-Honour for the evening, Mr Wong Kan Seng, Deputy Prime Minister and Mrs Wong.

One of the highlights of the evening was an auction of some prized items like the Grand Vin de Chateau Latour (1970) and a painting called "Hope" done by nine-year-old Singaporean artist Dawn Kwan. Taiwan's evergreen songstress, Pan Yue Yun added much glamour to the function as she belted out old time favourites. Although the night marked the end of KDF's Tenth Anniversary celebration, it definitely signifies a new chapter for us as we look forward to the Foundation's 20th Anniversary.

KDF managed to raise a total of \$15,676 from the auction itself and a grand total of \$107,000 from the event.

## FUNDRAISING HIGHLIGHTS

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### THE ESTATE OF TAN SRI KHOO TECK PUAT'S GIFT OF \$5 MILLION

Following the legacy left by Tan Sri Khoo Teck Puat, the trustees of the Estate of Tan Sri Khoo Teck Puat donated \$5 million to KDF for the setting up of a new dialysis centre at Ghim Moh to replace KDF-Alexandra Centre. This generous donation will be used to fund the operation of KDF-Ghim Moh Centre for the next several years.

### CHARITY WINE AUCTION DINNER AND WINE TASTING (2 - 4 FEBRUARY 2007)

In celebration of his 80th Birthday, Dr NK Yong organised a charity dinner naming KDF as one of its three beneficiaries. The highlight of the event was a wine auction which was accompanied by two subsequent days of wine tasting.

Guests flew in from round the world to attend the grand affair. The Guests-of-Honour for the night were Deputy Prime Minister Mr Wong Kan Seng and Mrs Wong. Special guest Ms Serena Sutcliffe, the International Head of Sotheby's Wine Department, charmed the guests with her wit. With her urging and encouragement, prices for the many bottles of rare wine scaled new heights as the auction continued. The star of the auction was a bottle of 1961 Chateau Figeac which was sold for a whopping \$45,000. The whole event ended after two days of wine tasting at the Four Seasons Hotel.

### FUN ON FOOT (11 MARCH 2007)

In conjunction with World Kidney Day, KDF with the support of the Singapore Society of Nephrology, organised a walkathon on 11 March 2007. The 4 km walkathon was attended by around 1,000 participants from all walks of life. With a wave of the flag by Guest-of-Honour, Mr Zainudin Nordin, Mayor of Central Singapore District, the participants started on their 4 km walk along the Singapore River which will eventually lead them back to Hong Lim Green Community Centre.

Once back, participants donned their kidney shaped balloon hats to join in a dance led by the Kebayaerobics Ladies. With the help of every participant and supporter, KDF is now the proud record holder of "Most Number of People Doing a Dance with Balloon Hats".

## MORE INFORMATION ON EXPENDITURE

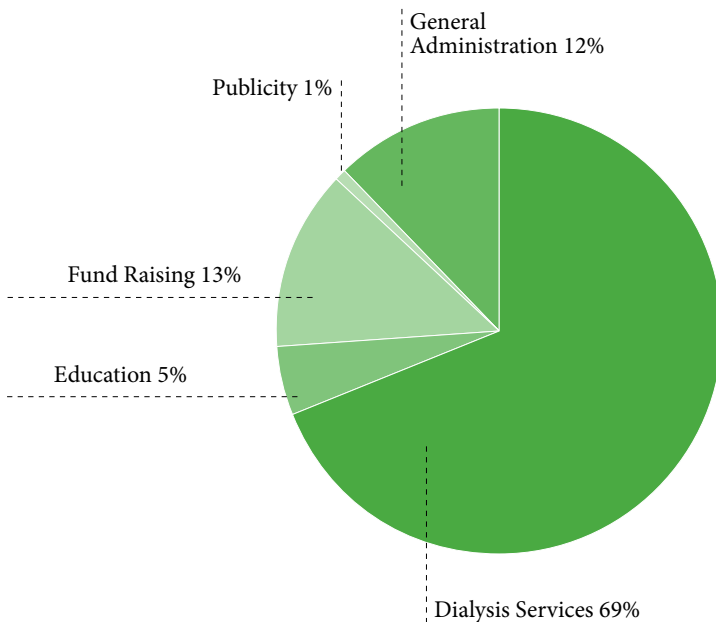
### *Stronger Support for Brighter Hopes*

#### ALLOCATION OF EXPENDITURE

The total expenditure incurred in FY 06/07 was approximately \$6.48 million. Sixty-nine percent (69%) of that expenditure was utilized on dialysis services. KDF remains committed to keep spending on publicity, fundraising and administration to a minimum so that, a large portion of donations received can be channeled into patient care.

For FY 06/07, part of KDF's general administration expenditure was used to increase our level of corporate governance. KDF engaged the services of an independent consultancy firm to review our internal practices and controls. Since then, recommendations from the consultancy firm and the Ministry of Health have been adopted.

*Figure 1: Total Expenditure Percentages*



#### FUND RAISING RATIO

Under the Charities Regulations for Fund-Raising Appeals (Charities Act, Chapter 37), the total fund-raising and sponsorship expense of a charity must not exceed 30% of the total gross receipts from fund-raising and sponsorships. In keeping with the regulations of the Charities Act, KDF's direct fund-raising expenses ratio for FY 06/07 was 7%.

#### TOP EXECUTIVE REMUNERATION

As shown in Table 1, the remuneration package of KDF's top three executives is within the range of \$50,000 - \$100,000.

*Table 1: Top 3 Executive Remuneration*

Salary Ranges	Number of Executives
\$101,000 - \$150,000	-
\$50,000 - \$100,000	3
\$0 - \$50,000	-



## OUR DONORS

### *Stronger Support for Brighter Hopes*

KDF would like to express its heartfelt gratitude and appreciation to the following organizations and individuals for supporting its work.

#### CORPORATE DONORS

##### ABOVE \$100,000

Estate of Tan Sri Khoo Teck Puat  
Koh Kock Leong Enterprise Pte Ltd

##### \$50,000 - \$100,000

Isetan Foundation  
Lee Foundation

##### \$20,000 - \$49,999

Baxter Healthcare (Asia) Pte Ltd  
Golden Development Private Limited  
Hewlett-Packard Singapore (Private) Ltd  
Hong Leong Foundation  
Koyo Kaiun Asia Pte Ltd  
Le Merciers Fine Furnishings Pte Ltd  
Patronics (s) Pte Ltd  
Petra Foods Limited  
Platinum Securities Company Limited  
Prospect Investment Pte Ltd  
San Wang Wu Ti Religious Society  
Singapore Totalisator Board  
Trustees of Isaac Manasseh Meyer Trust Fund

##### \$10,000 - \$19,999

Avantis Pte Ltd  
Fairfield Methodist Church - Singapore  
Fresenius Medical Care Singapore Pte Ltd  
Health Promotion Board  
Jurong Point Reality Ltd  
Kew Estate Limited  
Lee Foundation States Of Malaya  
Lee Kim Tah Holdings Ltd  
Local Engineering Pte Ltd  
Roche Singapore Pte Ltd  
Singapore Power Pte Ltd

Tan Ean Kiam Foundation  
Thomson Shin Min Foundation  
Transmedic Pte Ltd  
UOB Kay Hian Pte Ltd  
Vifor (International) Inc  
Wee Aik Koon Pte Ltd  
Wen Wei Investments Pte Ltd  
Wing Tai Holdings Ltd

#### INDIVIDUAL DONORS

##### \$10,000 AND ABOVE

Chan Wing To  
Cheah Wai Han  
Chua Hong Thuan  
Ho Peng Ann  
Ho Seng Fook Richard  
Late Mdm Woo Oi Ying  
Lim Soo Ngoh  
Low Check Kian  
Onn Eng Joo  
Quek Koh Kheng  
Tan Dixie  
Tan Hup Boon  
Tan Tong Leong  
The Cheng Family  
Woh Kok Meng  
Wong Khang Wee  
Wong Yook Loong

##### \$5,000 - \$9,999

Chan Ka Sing Eddy  
Chee Im Lian, Lily  
Chew Beow Chin  
Goh Hui Kuan  
Goh Kok Hwee  
Khoo Linda  
Kung Thian Hwei  
Leon Le Mercier  
Lim Oon Teik Eugene  
Lincoln Cheng Ling K A

Loke Keng Fai Gloria  
Martin Robert Gilliland  
Ng Kair Yeow  
Ng Tiong Sun  
Ong Teck Song  
President S R Nathan  
Soo Nam Chow  
Tan Chin Chai  
Tan Lay Hock  
Teo Nian Seng  
Tong Ping Heng  
Yong Chin Hwee Serene  
Zung Bei Fan Ronald

##### \$1,000 - \$4,999

Aditia Wardana  
Akira Nagano  
Ang Cheok Huan  
Ang Choon Cheng  
Ang Chui Peng  
Ang Eng Hieang  
Ang Lay Geok  
Ang Swee Chee  
Ang Swee Chye  
Anh Tuan Bui  
Bay Gek Heng James  
Catherine Ang Cay Eng  
Chan Chut  
Chan Geok Huay  
Chan Heng Kiat Cuthbert  
Chan Jim Kee  
Chan Judy on behalf of Late  
Mr Jason Lum  
Chan Shiu Kau, Anthony  
Chan Teck Hock David  
Chao Sing Ming  
Chasani Shofa  
Chau Sik Ting  
Chay Oh Moh  
Che Rosie Bin Draman

## OUR DONORS

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### \$1,000 - \$4,999 (CONT'D)

Chee Ah Kim	Estate of Doo Gee Lily	Lau Lai Yong	Loh Wai Ching
Chen Chiang Chow	Fong Leroy	Lau Nyap Heng	Loke Yuen Kin Ruby
Chen Yu Ming	Foo Chik Kin Eddie	Lau Tuan Lin	Low Hon Kwok
Cheng Siew Hong	Foo Shick Thai	Lee Bee Gan	Low Jin Kheng
Cheng Tim Jiam	Foong Li Ping Selina	Lee Chew Loh	Low Kong Peng
Cheong Sim Eng	Foong Yin Hong	Lee Chin Cheng	Low Kum Choy
Cheong Wing Sum	Gee Siew Chin	Lee Geok Chuan	Lui Swee Seah
Cheung Wai Keung	Goh Chiu Gak	Lee H.Y. Alfred	Lui Tuck Choon
Chew Kwee San	Goh Chwee Teck	Lee Hock Guan	Lum Chui Kam
Chew Lean Huat	Goh Kah Soon	Lee Ing Fatt	Lum Weng Piu
Chew Tuan Moo	Goh Keng Lee Terence	Lee Inn Peng	Ma Kah Woh Paul
Chia Gin Sun	Goh Lee Hong	Lee Tee Keong Paul	Margaret Cheong Siok Cheng
Chia Kee Chye	Grecia Darunday	Leong Jenn Lok Melvin	Mariana Tan
Chiam Meng Huat Ian	Guay Kim Hua	Leong Say Haur	Marica Croft
Chiang Liew Chin	Gwee Song How	Leong Shin Loong	Matthew Lee
Chin Kum Choy	Han Hui Fong	Leong Siew Loong	McCully Leonard John
Chin Yoke Choong Bobby	Hee Soo Yin	Leong Sin Kwong	Michele Yap
Chionh Chye Khye	Heng Boon Siong	Leong Wei Weng	Mochammad Thaha
Chiou Yuan Yow	Heng Yong Seng	Lew Kah Hock	Mohamed Ibrahim M
Chong Wai Siak	Ho Joo Meng	Lim Ah Swan	Mr Tan Hock Choon
Choo Hsun Yang	Ho Poey Wee	Lim Chye Kim	Muthu Arusu s/o Murugayair
Choo Poh Eng	Hoe Seok Keng Sylvia	Lim Giap Khiam	Nakulugamuwe Sumana Thero
Choy Weng Keat	Hong Tuck Meng	Lim Hock Beng	Neo Eng Kee
Christopher Quek	0.Kim Chong Wah	Lim Jit Fung Angelina	Ng Ai Lian
Chua Bee Lian	Koh Beng Ling	Lim Lay Keng	Ng Boon Hai
Chua Chu Huwe	Koh Eng Chew	Lim Lay Kuan	Ng Chu Keng
Chua Kim Chiu	Koh Kim Tit Gordon	Lim Meng Huan	Ng Felix
Chua Peck Kiang	Koh Lai Thiam	Lim Paik See	Ng Hai Poh
Chua Siew Mong	Koh Liang Wee	Lim Siew Eng	Ng Kim Lan
Clarence Tan Hung Chua	Kong Hung Lau Paul	Lim Tuang Lee	Ng Lee Choo Caroline
Darmoko Halim Lim	Koo Say Hee	Lim Wee Tee	Ng Peng Chew
Dawani Manohar	Krishnan Tamilarasi	Lim Yan Har Joanne	Ng Poh Tiong
Dominic Er	Ku Swee Yong	Ling Chuang King	Ng Soon Kai
Ee Kiam Keong	Kuah Poh Kok	Ling Sock Leng	Ng Tee Meng
Eng Kwee Chew	Kwa Hock Seng	Lo Chin Chai Daniel	Ng Ting Ting
Eng Philip	Lai Boon Ching	Loh Loon Tong	Ng Wei Yong William

## OUR DONORS

### *Stronger Support for Brighter Hopes*

#### **\$1,000 - \$4,999 (CONT'D)**

Ng Yew Sang	See Lai Min	Tan Khee Hua	Wang Jie Yan
Ng Yi Xian	Seet Cher Hung	Tan Lee Cheng Catherine	Wang Tiong Seng Rennie
Nico A Lumenta	Seet Iris	Tan Mei Ling	Wee Aik Koon
Oh Cheng San	Seow Siow Liang	Tan Peng Tow	Wee Hui Pheng
Oh Kar Hong	Serly	Tan Puay Yong	Wee Liang Chyan
Omar Sarani	Shum Wei Keong Joseph	Tan See Hong	Welly
Ong Cheng Ho	Sia Chin Hua	Tan Seng Hoe	Widiati S
Ong Choy Hong	Sim Gian San	Tan Seok	Widodo
Ong Joo Li	Sim Kim Tee	Tan Sieu Lee Amelia	Winarni Hudono
Ong Pang Chew	Sim Piah Chew	Tan Soo Huat	Witt Michael Armin
Ong Poh Hong	Sim Sem Peng	Tan Soon Chuan	Wong Boh Pow
Ong Poh Lee	Sim Yong Kok	Tan Tiah Yeow	Wong Foo Yuan
Ong Say Teong	Sio Sit Min	Tan Wan Ling	Wong Khang Wee
Ong Ser Choong Andrew	Soh Chung Hian Daniel	Tang Joo Kiah	Wong Kok Wing
Ong Swee Aik	Soong Gum Chuen	Tang Keng Boon Gary	Wong Lai Siong
Ong Teck Eng	Soong Oong Ho	Tang Kian Chye	Wong Lup Siap
Ooi Choo Lian	Stanley Ang	Tang Poh Kheng David	Wong Poh Chun
Ooi Yan Tong	Sua Tock Swee	Tang See Chim	Wong Soon Chin
Oon Chiew Seng	Tai Ah Moi	Tay Cheng Poh	Wong Toon Jin
Oon Peng Heng	Tam Yeow Lan	Tay Khoon Hua	Woon Tek Seng
Pang Weng Choy	Tan Bee Eng	Tay Kwan Hun Stephen	Yang Yuen Tsyrr Caroline
Pek Tiong Khuan	Tan Bee Leng	Tay Tiam Huat	Yeo Lang Lee
Pham Nhu Tuyen	Tan Chia Siong	Teng Hwee Peng	Yeo Meng Chaun Eric
Phay Yee Long	Tan Chiap Hua	Teo Bee Kheng	Yeo Seok Beng
Phee Ser Wah Johnny	Tan Chin Bee	Teo Chen Pon	Yeo Shu Fang
Poenar Daniel Pui	Tan Chin Huat	Teo Chin Luan	Yeoh Khwai Hoh Patrick
Poh Bee Li	Tan Chok Hwee	Teo Guan Hoe	Yeow Aik Liang Daniel
Power Vantage	Tan Ewee Peng	Teo James	Yeow Jen Ai Susan
Quek Bek Choo	Tan Gek Gnee	Teo Kwang Peng	Yong Chin Chin
Quek Gim Pew	Tan Guang Teck	Teo Soo Guek	Yu Kok Wah
Quek Guan Seng	Tan Ho Seng	Teo Teik Loon Allan	
Quek Koh Chiew	Tan Ho Tiong	The Late Loh Kim Fook	
Quek Seow Heon	Tan Hock Lai	The Late Tong Betty	
Romesh Gooneratne	Tan Huan Tiow	Tien Wai Keong Micheal	
Ruben De Asis	Tan Hwee Bin	Toh Hong Leong	
Seah Bee Eng	Tan Ju Hock	Tony Foo	



## FINANCIAL STATEMENT

*Year Ended 31 March 2007*

Kidney Dialysis Foundation Limited  
(A Company Limited by Guarantee)  
Registration Number: 199600830Z

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## DIRECTORS' REPORT

We are pleased to submit this annual report to the members together with the audited financial statements of the Foundation for the financial year ended 31 March 2007.

### DIRECTORS

The directors in office at the date of this report are as follows:

Dr Gordon Ku

Cheng Wai Keung

Lee Ching Yen, Stephen

A/P Lee Jon Choon Evan (Resigned on 1 December 2006)

Yeo Thiam Teng

Watson Ong

Yeoh Oon Jin

### PRINCIPAL ACTIVITIES

The Foundation was incorporated on 1 February 1996 as a company limited by guarantee and is registered as a charity under the Charities Act, Chapter 37.

The principal activities of the Foundation during the financial year have been those relating to the provision of subsidized and/or free medical treatment and dialysis services for patients suffering from kidney and related illnesses. These activities are funded by subsidies from the Government, administered by the Ministry of Health, and donations received from the general public. The Foundation generally does not accept private patients who are financially able to pay for dialysis treatment from private centres. There have been no significant changes in such activities during the financial year.

### DIRECTORS' INTERESTS

As the Foundation is a company limited by guarantee and has no share capital, the statutory information required to be disclosed by the directors under Section 201 (6) (g) and Section 201 (12) of the Companies Act, Chapter 50 does not apply.

Neither at the end of nor at any time during the financial year was the Foundation a party to any arrangement whose objects are, or one of whose objects is, to enable the directors of the Foundation to acquire benefits by means of the subscription to or acquisition of debentures of the Foundation or any other body corporate.

In the normal course of business, the Foundation paid dialysis fees amounting to \$1,447,635 (2005: \$1,538,460) to the subsidiary of a company in which a director is a shareholder. However, the director has neither received nor will he be entitled to receive any benefits arising out of this arrangement other than that to which he may be entitled as shareholder of that company.

Except as disclosed above, since the end of the last financial year, no director has received or become entitled to receive a benefit by reason of a contract made by the Foundation or a related corporation with the director or with a firm of which he is a member or with a company in which he has a substantial financial interest.



## DIRECTORS' REPORT

### SHARE OPTIONS

As the Foundation is a company limited by guarantee and has no share capital, the statutory information required to be disclosed under Section 201 (12) of the Companies Act, Chapter 50 does not apply.

### AUDITORS

The auditors, KPMG, have indicated their willingness to accept re-appointment.

On behalf of the Board of Directors



**Dr Gordon Ku**

Director



**Lee Ching Yen, Stephen**

Director

19 July 2007



## STATEMENT BY DIRECTORS

In our opinion:

- (a) the financial statements set out on pages FS1 to FS16 are drawn up so as to give a true and fair view of the state of affairs of the Foundation as at 31 March 2007 and of the results and cash flows of the Foundation for the year ended on that date in accordance with the provisions of the Singapore Companies Act, Chapter 50 and Singapore Financial Reporting Standards; and
- (b) at the date of this statement, there are reasonable grounds to believe that the Foundation will be able to pay its debts as and when they fall due.

The Board of Directors has, on the date of this statement, authorized these financial statements for issue.

On behalf of the Board of Directors



**Dr Gordon Ku**

Director



**Lee Ching Yen, Stephen**

Director

19 July 2007



## INDEPENDENT AUDITOR'S REPORT

*Kidney Dialysis Foundation Limited (A Company Limited by Guarantee)*

We have audited the financial statements of Kidney Dialysis Foundation Limited (the "Foundation"), which comprise the balance sheet as at 31 March 2007 and the income and expenditure statement and cash flow statement for the year then ended, and a summary of significant accounting policies and other explanatory notes, as set out on pages FS1 to FS16.

### **DIRECTORS' RESPONSIBILITY FOR THE FINANCIAL STATEMENTS**

The Company's directors are responsible for the preparation and fair presentation of these financial statements in accordance with the provisions of the Singapore Companies Act, Chapter 50 (the "Act") and Singapore Financial Reporting Standards. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### **AUDITOR'S RESPONSIBILITY**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Singapore Standards on Auditing. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statement 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **OPINION**

In our opinion:

- (a) the financial statements of the Foundation are properly drawn up in accordance with the provisions of the Act and Singapore Financial Reporting Standards to give a true and fair view of the state of affairs of the Foundation as at 31 March 2007 and the results and cash flows of the Foundation for the year ended on that date; and
- (b) the accounting and other records required by the Act to be kept by the Foundation have been properly kept in accordance with the provisions of the Act.



**KPMG**

Certified Public Accountants

Singapore

19 July 2007





## BALANCE SHEET

As at 31 March 2007

	Note	2007 \$	2006 \$
<b>NON-CURRENT ASSETS</b>			
Plant and equipment	4	337,777	546,479
Quoted bonds	5	2,018,803	2,033,004
		<u>2,356,580</u>	<u>2,579,483</u>
<b>CURRENT ASSETS</b>			
Trade and other receivables	6	296,297	328,206
Cash and cash equivalents	9	15,170,280	8,412,725
		<u>15,466,577</u>	<u>8,740,931</u>
<b>TOTAL ASSETS</b>		<u>17,823,157</u>	<u>11,320,414</u>
<b>ACCUMULATED FUNDS</b>			
Building Funds	10	1,305,379	164,113
Education Fund	11	133,134	136,991
Deficit Funds	12	4,719,590	1,115,371
General Funds		10,906,521	9,220,807
		<u>17,064,624</u>	<u>10,637,282</u>
<b>NON-CURRENT LIABILITIES</b>			
Deferred capital grants	14	17,583	-
<b>CURRENT LIABILITIES</b>			
Trade and other payables	15	740,950	683,132
<b>TOTAL LIABILITIES</b>		<u>758,533</u>	<u>683,132</u>
<b>TOTAL ACCUMULATED FUNDS AND LIABILITIES</b>		<u>17,823,157</u>	<u>11,320,414</u>
<b>MEMBERS' GUARANTEE</b>	3	<u>300</u>	<u>300</u>

The accompanying notes form an integral part of these financial statements.

## INCOME & EXPENDITURE STATEMENT

*Year Ended 31 March 2007*

	Note	Building Funds \$	Education Funds \$	Deficit Funds \$	General Funds \$	Total \$
<b>INCOME</b>						
Donations		1,300,000	-	3,700,000	3,063,641	8,063,641
Donations in kind		-	-	-	16,053	16,053
Education						
-Nephrology course 2006		-	250,468	-	-	250,468
-Public forum 2006		-	46,707	-	-	46,707
-Renal friends & other activities		-	8,956	-	-	8,956
Fund raising		-	-	-	268,516	268,516
Interest income		-	-	-	394,370	394,370
Other income	16	-	-	-	8,203	8,203
		1,300,000	306,131	3,700,000	3,750,783	9,056,914
<b>EXPENDITURE</b>						
Dialysis services		158,734	-	95,781	4,230,784	4,485,299
Dialysis and medication fees		-	-	-	(2,544,075)	(2,544,075)
Government subsidies	17	-	-	-	(1,309,398)	(1,309,398)
		158,734	-	95,781	377,311	631,826
Education expenses						
-Nephrology course 2006		-	255,486	-	-	255,486
-Public forum 2006		-	42,438	-	-	42,438
-Renal friends & other activities		-	12,064	-	-	12,064
Fund and donation raising expenses		-	-	-	862,750	862,750
Publicity		-	-	-	59,107	59,107
General administrative		-	-	-	765,901	765,901
		-	309,988	-	1,687,758	1,997,746
Total expenditure		158,734	309,988	95,781	2,065,069	2,629,572
Surplus/(deficit) before taxation	18	1,141,266	(3,857)	3,604,219	1,685,714	6,427,342
Income tax expense	19	-	-	-	-	-
Surplus/(deficit) after taxation		1,141,266	(3,857)	3,604,219	1,685,714	6,427,342
Accumulated surplus brought forward		164,113	136,991	1,115,371	9,220,807	10,637,282
Accumulated surplus carried forward		1,305,379	133,134	4,719,590	10,906,521	17,064,624

No separate statement of recognised gains and losses has been prepared as the surplus/(deficit) for the year would be the only component of this statement.

*The accompanying notes form an integral part of these financial statements.*

## INCOME & EXPENDITURE STATEMENT

*Year Ended 31 March 2006*

	Note	Building Funds \$	Education Funds \$	Deficit Funds \$	General Funds \$	Total \$
<b>INCOME</b>						
Donations		-	-	-	3,525,444	3,525,444
Donations in kind		-	-	-	23,520	23,520
Education						
-Public forum 2005 and other activities (includes donation of \$45,550)		-	46,105	-	-	46,105
Fund raising		-	-	-	234,093	234,093
Interest income		-	-	-	213,122	213,122
Other income	16	-	-	-	20,814	20,814
		-	46,105	-	4,016,993	4,063,098
<b>EXPENDITURE</b>						
Dialysis services		224,854	-	264,370	4,289,208	4,778,432
Dialysis and medication fees		-	-	-	(2,317,344)	(2,317,344)
Government subsidies	17	-	-	-	(1,365,593)	(1,365,593)
		224,854	-	264,370	606,271	1,095,495
Education expenses						
-Public forum 2005 and other activities		-	49,361	-	-	49,361
Fund and donation raising expenses		-	-	-	703,468	703,468
Publicity		-	-	-	56,565	56,565
General administrative		-	-	-	520,664	520,664
Government subsidies	17	-	-	-	(15,038)	(15,038)
		-	49,361	-	1,265,659	1,315,020
Total expenditure		224,854	49,361	264,370	1,871,930	2,410,515
Surplus/(deficit) before taxation	18	(224,854)	(3,256)	(264,370)	2,145,063	1,652,583
Income tax expense	19	-	-	-	-	-
Surplus/(deficit) after taxation		(224,854)	(3,256)	(264,370)	2,145,063	1,652,583
Accumulated surplus brought forward		388,967	140,247	1,379,741	7,075,744	8,984,699
Accumulated surplus carried forward		164,113	136,991	1,115,371	9,220,807	10,637,282

No separate statement of recognised gains and losses has been prepared as the surplus/(deficit) for the year would be the only component of this statement.

*The accompanying notes form an integral part of these financial statements.*

## CASH FLOW STATEMENT

*Year Ended 31 March 2007*

	2007	2006
	\$	\$
<b>OPERATING ACTIVITIES</b>		
Surplus before taxation	6,427,342	1,652,583
Adjustments for:		
Amortisation of premium bonds	14,201	14,195
Depreciation of plant and equipment	342,798	464,109
(Gain)/loss on disposal of plant and equipment	(18)	968
Interest income	(394,370)	(213,122)
Operating surplus before changes in working capital	6,389,953	1,918,733
Changes in working capital:		
Trade and other receivables	36,906	(90,278)
Trade and other payables	57,818	(389,961)
Deferred capital grant	17,583	-
Cash flows from operating activities	6,502,260	1,438,494
<b>INVESTING ACTIVITIES</b>		
Purchase of plant and equipment	(135,059)	(33,954)
Proceeds from disposal of plant and equipment	981	11,448
Interest received	389,373	197,833
Cash flows from investing activities	255,295	175,327
<b>NET INCREASE IN CASH AND CASH EQUIVALENTS</b>		
Cash and cash equivalents at beginning of year	8,412,725	6,798,904
<b>CASH AND CASH EQUIVALENTS AT END OF YEAR (NOTE 9)</b>	<b>15,170,280</b>	<b>8,412,725</b>

*The accompanying notes form an integral part of these financial statements.*

# NOTES TO THE FINANCIAL STATEMENTS

Year Ended 31 March 2007

These notes form an integral part of the financial statements.

The financial statements were authorized for issue by the directors on 19 July 2007.

## 1 DOMICILE AND ACTIVITIES

The Foundation was incorporated in the Republic of Singapore on 1 February 1996 as a company limited by guarantee and is registered as a charity under the Charities Act, Chapter 37. Its registered office is at Block 333 Kreta Ayer Road, #03-33 Singapore 080333.

The principal activities of the Foundation are those relating to the provision of subsidized and/or free medical treatment and dialysis services for patients suffering from kidney and related illnesses. These activities are funded by subsidies from the Government, administered by the Ministry of Health, and donations received from the general public. The Foundation generally does not accept private patients who are financially able to pay for dialysis treatment from private centres.

## 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### 2.1 BASIS OF PREPARATION

The financial statements have been prepared in accordance with Singapore Financial Reporting Standards (FRS).

The financial statements have been prepared on the historical cost basis except as described below.

The financial statements are presented in Singapore dollars which is the Foundation's functional currency.

The preparation of financial statements requires management to make judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the period in which the estimate is revised and in any future periods affected.

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

### 2.2 FUNCTIONAL CURRENCY

The functional currency of the Foundation is the Singapore dollar. As income and expenses denominated are primarily in Singapore dollar and receipts from operations are usually retained in Singapore dollars, the directors are of the opinion that the Singapore dollar reflects the economic substance of the underlying events and circumstances relevant to the Foundation.

### 2.3 PLANT AND EQUIPMENT

Plant and equipment are stated at cost less accumulated depreciation and impairment losses.

Depreciation is provided on a straight-line basis so as to write off items of plant and equipment over their estimated useful lives as follows:

Air-conditioners	-	4 years	Medical equipment	-	4 years
Computers	-	3 years	Office equipment	-	6 <sup>2</sup> / <sub>3</sub> years
Software	-	3 years	Renovations	-	3 years
Furniture and fittings	-	6 <sup>2</sup> / <sub>3</sub> years	Motor vehicles	-	5 years

Plant and equipment under construction are stated at cost. Expenditure relating to plant and equipment under construction are capitalized when incurred. Depreciation will commence when construction is completed.

Fully depreciated assets are retained in the financial statements until they are no longer in use.

The useful lives and residual values, if not insignificant, are reassessed annually.



## NOTES TO THE FINANCIAL STATEMENTS

Year Ended 31 March 2007

### 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

#### 2.4 FINANCIAL INSTRUMENTS

Financial instruments comprise investments in debt securities, trade and other receivables, cash and cash equivalents and trade and other payables.

Financial instruments are recognized initially at fair value. Subsequent to initial recognition, non-derivative financial instruments are measured at amortised cost using the effective interest method, less any impairment losses.

A financial instrument is recognized when the Foundation become a party to the contractual provisions of the instrument. Financial assets are derecognized when the Foundation's contractual rights to the cash flows from the financial assets expire or if the Foundation transfers the financial asset to another party without retaining control or transfers substantially all the risks and rewards of the asset. Financial liabilities are derecognized if the Foundation's obligations specified in the contract expire or are discharged or cancelled.

Cash and cash equivalents comprise cash balances and bank deposits.

#### HELD-TO-MATURITY INVESTMENTS

As the Foundation has the positive interest and ability to hold debt securities to maturity, they are classified as held-to-maturity. Held-to maturity investments are measured at amortised cost using the effective interest method, less any impairment losses.

#### 2.5 IMPAIRMENT

##### NON-FINANCIAL ASSETS

The carrying amounts of the Foundation's non-financial assets are reviewed at each reporting date to determine whether there is any indication of impairment. If any such indication exists, the assets' recoverable amounts are estimated.

An impairment loss is recognized if the carrying amount of an asset or its cash-generating unit exceeds its recoverable amount. A cash-generating unit is the smallest identifiable asset group that generates cash flows that largely are independent from other assets and groups. Impairment losses are recognized in the income and expenditure statement.

The recoverable amount of an asset or cash-generating unit is the greater of its value in use and its fair value less costs to sell. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset or cash-generating unit.

Impairment losses recognized in prior periods are assessed at each reporting date for any indications that the loss has decreased or no longer exists. An impairment loss is reversed if there has been a change in the estimates used to determine the recoverable amount. An impairment loss is reversed only to the extent that the asset's carrying amount does not exceed the carrying amount that would have been determined, net of depreciation, if no impairment loss had been recognized.



## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

#### 2.5 IMPAIRMENT (CONT'D)

##### *FINANCIAL ASSETS*

A financial asset is considered to be impaired if objective evidence indicates that one or more events have had a negative effect on the estimated future cash flows of that asset.

An impairment loss in respect of a financial asset measured at amortised cost is calculated as the difference between its carrying amount, and the present value of the estimated future cash flows discounted at the original effective interest rate.

Individually significant financial assets are tested for impairment on an individual basis. The remaining financial assets are assessed collectively in groups that share similar credit risk characteristics.

All impairment losses are recognized in the income and expenditure statement. An impairment loss is reversed if the reversal can be related objectively to an event occurring after the impairment loss was recognized.

#### 2.6 EMPLOYEE BENEFITS

##### *DEFINED CONTRIBUTION PLANS*

Obligations for contributions to defined contribution pension plans are recognized as an expense in the income and expenditure statement as incurred.

##### *SHORT-TERM BENEFITS*

Short-term employee benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided.

#### 2.7 GRANTS

Grants from the Government for the purchase of plant and equipment are taken to the deferred capital grants account and are recognized as income over the useful life of the asset purchased, to match the depreciation of the asset. On disposal of the asset, the balance of the related grant is recognized in the income and expenditure account.

Grants from the Government to fund operating expenditure are recognized as income over the period necessary to match the related expenditure.

#### 2.8 INCOME RECOGNITION

##### *DONATIONS*

Donations are recognized on a receipt basis. Revenue from the sale of goods from fund raising activities is recognized at the point of sale.

##### *INTEREST INCOME*

Interest income is accrued on a time-apportioned basis.

##### *SUBSIDIES*

Medishield subsidies are recognized when the right to receive payment is established.

### 3 MEMBERS' GUARANTEE

The Foundation is a company limited by guarantee whereby each member of the Foundation undertakes to meet the debts and liabilities of the Foundation, in the event of its liquidation, to an amount not exceeding \$100 per member.

As at 31 March 2007, the Foundation has 3 members (2006: 3).

# NOTES TO THE FINANCIAL STATEMENTS

Year Ended 31 March 2007

## 4 PLANT AND EQUIPMENT

	Air-	Furniture	Medical	Office	Motor	Total
	conditioners	and fittings	equipment	equipment	vehicles	
Cost	\$	\$	\$	\$	\$	\$
At 1 April 2005	74,999	199,115	2,109,572	89,558	36,880	3,344,615
Additions	2,300	1,155	7,560	5,456	-	33,954
Disposals	(16,984)	(20,710)	(733,400)	(24,000)	-	(861,463)
Transfers	-	(119,848)	-	-	-	-
At 31 March 2006	60,315	179,560	1,383,732	71,014	36,880	2,517,106
Additions	4,532	654	3,700	2,070	-	90,000
Disposals	(18,400)	-	(3,500)	(1,979)	(36,880)	(62,462)
At 31 March 2007	46,447	180,214	1,383,932	71,105	-	2,589,703
<b>Accumulated Depreciation</b>						
At 1 April 2005	56,980	-	1,497,151	52,705	36,880	2,355,565
Depreciation for the year	8,962	21,896	252,140	9,949	-	464,109
Disposals	(16,984)	(17,691)	(725,433)	(22,341)	-	(849,047)
Transfers	-	(87,268)	-	-	-	-
At 31 March 2006	48,958	89,740	1,023,858	40,313	36,880	1,970,627
Depreciation for the year	9,779	21,224	240,455	8,848	-	342,798
Disposal	(18,400)	-	(3,437)	(1,079)	(36,880)	(61,499)
At 31 March 2007	40,337	123,173	1,260,876	48,082	-	2,251,926
<b>Carrying Amount</b>						
At 1 April 2005	18,019	-	612,421	36,853	-	989,050
At 31 March 2006	11,357	30,108	359,874	30,701	-	546,479
At 31 March 2007	6,110	23,786	123,056	23,023	90,000	337,777



## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 5 QUOTED BONDS

	2007	2006
	\$	\$
Quoted bonds, held-to-maturity		
At cost	2,065,500	2,065,500
Accumulated premium amortised	(46,697)	(32,496)
	2,018,803	2,033,004
Market value	2,069,604	2,010,200

### 6 TRADE AND OTHER RECEIVABLES

	2007	2006
	\$	\$
Trade receivables (note 7)	6,779	34,361
Deposits	20,728	16,893
Prepayments	74,199	54,383
Interest receivable	45,917	40,920
Input GST	-	18,567
Other receivables (note 8)	148,674	163,082
	296,297	328,206

### 7 TRADE RECEIVABLES

	2007	2006
	\$	\$
Trade receivables	50,610	50,618
Allowance for doubtful receivables -		
At 1 April	16,257	620
Allowance utilised	(1,365)	(100)
Allowance written back	(3,035)	-
Allowance made during the year	31,974	15,737
At 31 March	43,831	16,257
	6,779	34,361

### 8 OTHER RECEIVABLES

	2007	2006
	\$	\$
Medical insurance claims	122,081	122,237
Others	33,079	48,481
Allowance for doubtful receivables	(6,486)	(7,636)
	148,674	163,082

## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 9 CASH AND CASH EQUIVALENTS

	2007	2006
	\$	\$
Fixed deposits	14,046,837	7,923,545
Cash at bank and in hand	1,123,443	489,180
	15,170,280	8,412,725

### 10 BUILDING FUNDS

	Kreta Ayer Building Fund \$	Ghim Moh Building Fund \$	Total Building Fund \$
<b>2006</b>			
At 1 April 2005	388,967	-	388,967
Donations received	-	-	-
Depreciation of plant and equipment	(224,854)	-	(224,854)
At 31 March 2006	164,113	-	164,113
<b>2007</b>			
At 1 April 2006	164,113	-	164,113
Donations received	-	1,300,000	1,300,000
Depreciation of plant and equipment	(158,734)	-	(158,734)
At 31 March 2007	5,379	1,300,000	1,305,379

The Building Funds consist of donations received by the Foundation, net proceeds of fund raising events and such funds as the Foundation may decide to transfer from the General Fund for the development of new dialysis centres for the Foundation. Expenditure from the Building Funds relates to development costs and depreciation of plant and equipment for the centres.

The Kreta Ayer Building Fund was set up in 1999 to accumulate funds for the development of the Kreta Ayer Dialysis Centre ("KADC"). The KADC was completed and has been operational since October 2004.

The Ghim Moh Building Fund was set up in August 2006 with a donation received from the Khoo Foundation for the development of a new haemodialysis centre in Ghim Moh ("GMDC"). The donation received of \$5,000,000 has been allocated by the directors as to \$1,300,000 to the Building Fund for the development of GMDC and the balance of \$3,700,000 to the Deficit Fund (note 12) for the operation of the GMDC when developed. GMDC is expected to be operational in July 2007.

### 11 EDUCATION FUND

The Education Fund was set up in 1999 to fund educational activities approved by the Foundation. The Fund consists of donations received by the Foundation for the Education Fund, as well as such funds as the Foundation may decide to transfer from the General Fund.

## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 12 DEFICIT FUNDS

	Kreta Ayer Deficit Fund \$	Ghim Moh Deficit Fund \$	Total Deficit Fund \$
<b>2006</b>			
At 1 April 2005	1,379,741	-	1,379,741
Donations received	-	-	-
Operating expenses	(264,370)	-	(264,370)
At 31 March 2006	1,115,371	-	1,115,371
<b>2007</b>			
At 1 April 2006	1,115,371	-	1,115,371
Donations received	-	3,700,000	3,700,000
Operating expenses	(95,781)	-	(95,781)
At 31 March 2007	1,019,590	3,700,000	4,719,590

The Deficit Funds consist of donations received by the Foundation, net proceeds of fund raising events and such funds as the Foundation may decide to transfer from the Building and General Funds to meet the operational costs of the Foundation's dialysis centres.

The Kreta Ayer Deficit Fund was set up in 2003 to meet the operating costs of the KADC.

The Ghim Moh Deficit Fund was set up in December 2006 with a donation from the Khoo Foundation, details of which are set out in note 10.

### 13 RESTRICTION ON DISTRIBUTION OF RESERVES

The Foundation's Memorandum of Association provides that no portion of the income and property of the Foundation shall be paid by way of dividend, bonus or otherwise to the members of the Foundation.

### 14 DEFERRED CAPITAL GRANTS

	2007 \$	2006 \$
Deferred capital grants	1,037,337	1,019,754
Accumulated accretion - At 1 April and 31 March	(1,019,754)	(1,019,754)
	17,583	-

## NOTES TO THE FINANCIAL STATEMENTS

Year Ended 31 March 2007

### 15 TRADE AND OTHER PAYABLES

	2007	2006
	\$	\$
Trade payables	463,757	348,779
Other payables	67,522	82,037
Output GST	11,074	-
Accrued expenses	87,018	112,316
Unutilised annual leave	21,579	19,381
Deferred income	-	120,619
Accrual for construction in-progress	90,000	-
	<u>740,950</u>	<u>683,132</u>

The deferred income in 2006 related to donations raised from two fund raising projects. The amounts, net of expenses, were recognized in the income and expenditure statement in 2007 upon completion of the fund raising exercise.

### 16 OTHER INCOME

	2007	2006
	\$	\$
Sundry income	4,489	18,531
Bad debts recovered	3,714	2,283
	<u>8,203</u>	<u>20,814</u>

### 17 GOVERNMENT SUBSIDIES

The Foundation receives a Government subsidy on dialysis provided to patients who meet the Ministry of Health's criteria for subsidised haemodialysis and peritoneal dialysis. The subsidies are subject to the condition that the number of private patients accepted by the Foundation should not exceed 25% of the total number of patients accepted. The Foundation has decided not to accept private patients who are financially able to pay for dialysis treatment from private centres.

Amounts received under these subsidies are credited to the income and expenditure statement in the same period as the related expenditure.

## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 18 NET OPERATING SURPLUS/(DEFICIT)

Net operating surplus/(deficit) includes the following:

	2007	2006
	\$	\$
<b>STAFF COSTS</b>		
Wages and salaries	561,429	533,157
Contributions to Central Provident Fund	83,608	81,703
	645,037	614,860
<b>EXPENDITURE</b>		
Allowance for doubtful receivables	31,974	23,373
Amortisation of premium on bonds	14,201	14,195
Bad debts written off	156	378
Depreciation of plant and equipment (note 4)		
-Building fund	158,734	224,854
-General fund	184,064	239,255
(Gain)/loss on disposal of plant and equipment	(18)	968
Operating lease expense	25,225	38,647
	25,225	38,647

### 19 TAXATION

The Foundation is registered as a charity under the Charities Act, Chapter 37. By virtue of Section 13(M) of the Income Tax Act, Chapter 134, charitable institutions are exempt from taxation provided at least 80% of the adjusted income for the year is spent for charitable purposes in the following year. No provision for taxation has been made in the financial statements as the Foundation does not anticipate any difficulty in meeting this requirement.

### 20 RELATED PARTY TRANSACTIONS

#### **KEY MANAGEMENT COMPENSATION**

Key management personnel of the Foundation are those persons having the authority and responsibility for planning, directing and controlling the activities of the Foundation. The directors are considered as key management personnel of the Foundation. The directors of the Foundation render their services on a voluntary basis and do not receive any remuneration.

#### **OTHER RELATED PARTY TRANSACTIONS**

For the purposes of these financial statements, parties are considered to be related to the Foundation if the Foundation has the ability, directly or indirectly, to control the party or exercise significant influence over the party in making financial and operating decisions, or vice versa, or where the Foundation and the party are subject to common control or common significant influence. Related parties may be individuals or other entities.

During the financial year, the transactions with related parties are as follows:

	2007	2006
	\$	\$
<b>EXPENDITURE</b>		
Dialysis fees paid and payable to a subsidiary of a company in which a director is a shareholder	1,447,635	1,538,460
Consultancy fee paid and payable to a firm in which a director is a partner	-	16,050
	-	16,050

## NOTES TO THE FINANCIAL STATEMENTS

*Year Ended 31 March 2007*

### 21 FINANCIAL RISK MANAGEMENT

Exposure to credit and interest rates arise in the normal course of the Foundation's business. The Foundation's board of directors reviews and agrees policies for managing the following risks:

#### CREDIT RISK

Management monitors the exposure to credit risk on an ongoing basis. The Foundation's cash balances are placed with reputable financial institutions. The maximum exposure to credit risk is represented by the carrying amount of each financial asset in the balance sheet. At the balance sheet date, there is no significant concentration of credit risk.

#### INTEREST RATE RISK

The Foundation's exposure to market risk for changes in interest rates relates primarily to the Foundation's fixed deposits and quoted bonds. Interest rates on the Foundation's fixed deposits and quoted bonds are disclosed below.

#### EFFECTIVE INTEREST RATES AND REPRICING ANALYSIS

In respect of interest-earning financial assets, the following table indicates their effective interest rates and the periods in which they reprice.

Interest rates at balance sheet date and the periods in which they reprice:

	Note	Effective Interest Rate %	Total \$	Within 1 year \$	1 to 5 years \$
<b>2007</b>					
<b>Financial Assets</b>					
Quoted bonds	5	2.16% - 5.07%	2,018,803	-	2,018,803
Fixed deposits	9	1.60% - 3.33%	14,046,837	14,046,837	-
			<u>16,065,640</u>	<u>14,046,837</u>	<u>2,018,803</u>
<b>2006</b>					
<b>Financial Assets</b>					
Quoted bonds	5	2.16% - 5.07%	2,033,004	-	2,033,004
Fixed deposits	9	1.55% - 3.06%	7,923,545	7,923,545	-
			<u>9,956,549</u>	<u>7,923,545</u>	<u>2,033,004</u>

#### SENSITIVITY ANALYSIS

At 31 March 2007, it is estimated that a general increase of one percentage point in interest rates would increase the Foundation's surplus before tax by approximately \$161,000 (2006: \$99,000).

#### FAIR VALUES

Fair value of quoted bonds held to maturity are disclosed in note 5 to the financial statements.

The fair values of other financial assets and liabilities approximate their carrying values and are disclosed in the balance sheet and in the notes to the financial statements.

### 22 NEW ACCOUNTING STANDARDS AND INTERPRETATIONS NOT YET ADOPTED

The Foundation has not applied the accounting standards and interpretations that have been issued as of the balance sheet date but are not yet effective. The initial application of these standards and interpretations are not expected to have any material impact on the Foundation's financial statements.

The Foundation has not considered the impact of accounting standards issued after the balance sheet date.