Charity Registration No (England and Wales): 1087982

THE SAVITRI WANEY CHARITABLE TRUST

TRUSTEES' ANNUAL REPORT AND ACCOUNTS FOR THE YEAR ENDED 31 MARCH 2018

LEGAL AND ADMINISTRATIVE INFORMATION

Trustees	Mr Arjun Chanrai Waney Mr Gulu Waney Mrs Judith Waney Mr Azad Shivdasani Mr Pritam Waney Mrs Devika Mokhtarzadeh Mr Edward Bond Mrs Rina Bijur Mr Jai Waney
Trust Manager	Emily Kerr-Muir
Trust Director	Maggie Gardner
Honorary Treasurer	Vijay Thapar
Charity number:	1087982
Correspondence address	122 Wigmore Street London WIU 3RX
Auditors	HW Fisher & Company Acre House 11-15 William Road London NWI 3ER
Bankers	The Royal Bank of Scotland London Corporate Service Centre Floors 8 & 9, 280 Bishopsgate London EC2M 4MB

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TRUSTEES' ANNUAL REPORT

FOR THE YEAR ENDED 31 MARCH 2018

The Trustees present the financial statements of the Trust for the period 1st April 2017 to 31st March 2018. The financial statements are prepared in accordance with Financial Reporting Standard 102 as issued by the Financial Reporting Council, the Statement of Recommended Practice (SORP 2015) "Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102)", the Charities Act 2011 and the Charity's Trust Deed.

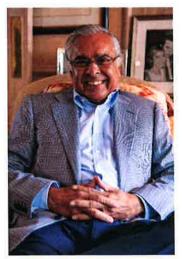
Message from Savitri Founder Arjun Waney

Dear Friends

Compassion I find is unbounded. There are so many people who need our help - from families experiencing huge pain, both emotional and physical - as they or their loved ones are dying, to people disabled through cataract blindness, or whole communities left homeless by natural disasters.

How we deal with others, our relationships and values, define who we are. As I get older I increasingly feel the work I have been able to do through Savitri has been one of the greatest achievements in my life. And a proud monument to my mother for who I named the trust.

As this year started remote areas in Peru were hit by devastating floods. I was fortunate to attend a reception with the Ambassador of Peru, and as a result of listening to the need, and also hearing the concerns and compassion of the team at Coya, Savitri stepped up to support two pieces of work. The first through an emergency fund set up by the government of Peru. The second very hands on working directly with communities impacted, together with Soluciones Practicas. I am proud of Savitri's ability to respond quickly when needed.



Savitri however is not just about giving grants – we seek to tackle some of the most human and often difficult problems in ways that are entrepreneurial, have wider impact and deliver direct help to people in need. Palliative care, care for people who are dying and their families, is just one example of this. Millions of people in India need decent palliative care, without it people die in pain and families are frequently bankrupted or pushed into poverty by the cost of treatments or loss of livelihoods. Yet only 1% of people in need receive care – and the numbers are even smaller for people who are poor and excluded. This work touches my heart. In March I met with Dr Savita Duomai who leads the Shalom Hospice and the broader palliative care work of Emmanuel Hospital Association (EHA) – both of which we support. She is an amazing woman who has dedicated her life to caring. What moved me most was her empathy, her ability to see herself in others – to care for people who are the poorest and most marginalised as equals. She spoke about Mohan Lal a poor farmer, who EHA nurses supported as he battled cancer and then through his final days. Mohan Lal was 38 when he died.

The bulk of Savitri's work and funding continues to deliver the miracle that is cataract surgery – people who were blind can see. We funded over 26,000 surgeries during the year and saw the early stages of construction at the new eye hospital we are supporting in a remote part of Bihar. I want to do more and while the challenge is huge the impact on individuals is fundamental. Maggie and Emily visited the cataract surgical work we fund in Nigeria in April 2017. There they met Elizabeth – she couldn't do anything for herself and her son had to help with even the most intimate tasks (*but said he didn't mind, he loved her, and she was his mum*). After the initial meeting, they saw her cataract operation and met Elizabeth again afterwards. Both told me she was unrecognisable, transformed from sad, quiet and unmoving into an excited, joyous and very voluble woman – shouting out 'I can see, I can see'.

Savitri is a family. It was named after my mother. My wife, brothers, daughter, nephew and others are trustees. The Savitri family however is much wider, it's also the people who join with me to deliver this outstanding work, who have compassion and share my values – who understand that life is about engaging with others and giving back. My promise to all who work alongside us is that every penny donated to Savitri will be used well and 100% of donations to projects will be spent directly on our work.

Thank you to everyone who joined with me, with Savitri this year. Sometimes the year felt long but at the end its joyous.

Arjun Waney

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Strategic Objectives

Savitri is a charitable trust and the focus of our giving is determined by our trustees. This year the trustees took the decision, alongside our ongoing work, to invest in growing our programme work through the expansion of our palliative care programme, and substantial capital support to Akhand Jyoti for a new eye hospital in a remote part of Bihar, India.

Our mission is to deliver high impact, innovative solutions to poverty - with compassion.

We help the blind to see, we ease the pain of the dying and we care for our environment. Poverty reduction is at the core of what we do.

We seek out entrepreneurial organisations; partners who can maximise benefits, who know their local community and who can deliver impact. We work alongside our project partners to ensure high quality, sustainable programmes providing funding, advice, capacity building and regular monitoring and evaluation. Our partnership model allows us to work in some of the hardest to reach rural areas, mainly in India and Nigeria. It also means we can focus on delivery and make a real difference.

We also actively seek to work with others to deliver our objectives – both through friends who join us to help deliver a cause and by Savitri joining with others so as to build momentum, greater impact or push for systems change.

We work in three programme areas:

I. Curable Blindness

Globally 36 million people are blind, and 90% of them live in developing countries. 80% of blindness could be prevented or cured. We work in rural areas with a high incidence of blindness, limited services and a significant backlog of cases. In Bihar for example, one of the poorest states in India, we funded 21,250 eye surgeries in 2017-18.

2. Care for the Dying

In India, at least 2 million people suffer in agony from terminal illness without effective pain relief. We provide vital care for people who are dying and support to families who, in the absence of effective palliative care, are often forced into crippling debt. Our work in this area will increasingly focus on those people in the later stages of life and their families. In 2017-18 we began our plans to substantially increase our support for effective propoor palliative care.

3. Environment

Ultimately the health of our planet impacts on everything we do from the quality of our lives here in richer countries, to the more immediate ability of poor communities in less developed countries to have enough food and water. Protecting our environment is an issue for everyone but climate change and environmental degradation hits poor people first and hardest. During the year alongside our work we have deepened our understanding of environmental funding through our active membership of the Environmental Funders Network.

What unites these three issues – blindness, care for the dying, environment – is the cascading impact our work has on wider families.

Curing blindness in a mum or grandfather often releases a young girl to be able to go to school and allows the adult to contribute to the livelihood of the family.

Providing decent palliative care stops families sinking deeper into poverty, taking out loans to pay for ineffective 'cures' – for example Sashi who had advanced cancer of the upper arm. Her family spent money and she undertook very painful journeys to receive treatment when unbeknown to her and her husband, the cancer had been judged incurable and the hospital was doing very little, while the tumour grew rapidly.

Without enough food to eat and sell, farming families can't afford school fees. Even if the children can go to school they lack proper nourishment and their education suffers. A report from Save the Children states that India has the highest

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rate of children stunted due to malnutrition in the world - 48.2 million children. Moreover, India Spend reported in May 2017 that only 1 child in 10 in India gets adequate nutrition.

Our work is for families; it targets some of the most effective yet sometimes overlooked poverty reduction interventions, and it delivers.

Alongside our three focused programmes we also have projects in the following areas:

- I. Education
- 2. UK and other projects
- 3. Emergencies and disasters

We guarantee quality, great monitoring and evaluation and local understanding through our sister organisation the Savitri Waney Charitable Foundation (Savitri Foundation) which is based in India, and works hand in hand with the Savitri Trust. Wherever possible, we channel donations to our partners in India via the Savitri Foundation to maximise the effectiveness of funding.

Together with our commitment to effective projects we are also committed to making the most efficient use of donated funds, promising that 100% of donations received go to the projects they were earmarked for.

Trustees are proud of the public benefit undertaken by Savitri and have due regard to the Charity Commission's guidance on this. We are grateful to our implementing partners, our friends and our donors – all of whom make Savitri the unique organisation it is.

Achievements and Performance 2017-18

Curable Blindness

Globally 36 million people are blind, and 90% of them live in developing countries. 80% of blindness could be prevented or cured. We work in rural areas with a high incidence of blindness, limited services and a significant backlog of cases. In Bihar for example, one of the poorest states in India, we fund over 20,000 eye surgeries every year.

Eradicating Cataract Blindness in Bihar, India

Our Partner: Akhand Jyoti Eye Hospital Project: Eradicating cataract blindness in Bihar Support:

- £415,294 Eye screening and cataract surgeries
- £634,744 Support for building a new eye hospital in Purnea, Bihar. Due to accounting rules the full cost of land purchase, construction etc is shown here even though the build will run across 3 financial years with the opening planned in July 2019
- Over 168,000 people's sight tested and eyes examined, via diagnostic screening camps held across rural Bihar.
- 21,000 adult cataract surgeries and 250 child surgeries (more expensive as young children require a general anaesthetic).
- Optometry Scholarships for 2 girls.
- Funding for the salary of the Financial Controller,
- Capacity building support including both financial and medical audits which assured quality and helped improve performance.

About our partner:

Akhand Jyoti Eye Hospital works primarily in Bihar and prioritizes outreach to those patients who are completely blind from cataracts.

This was the eighth year of our support and we remain committed to helping deliver our shared vision of a cataractblind-free Bihar. Akhand Jyoti are truly an amazing organisation dreaming of improved healthcare and social change across Bihar – and somehow even in the most remote and difficult locations - making it happen.

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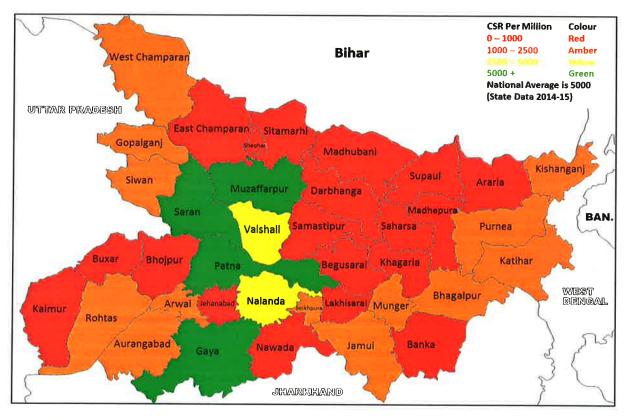
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Akhand Jyoti estimate that in Bihar, where the total population is 104 million, there is a backlog of over a million people who are blind due to cataracts. To date Akhand Jyoti has been able to significantly contribute to the reduction of cataract blindness in the state, this year carrying out 51,411 cataract surgeries, of which 21,250 were funded by Savitri. The year on year reduction in overall surgery numbers has been caused by a large USA charity which also funded Akhand Jyoti unexpectedly going into administration – increased fundraising efforts by Akhand Jyoti replaced some of the shortfall but they were unable, within the year, to raise all of the additional support needed. They however anticipate once again seeing a growth in surgery numbers in 2018–19.

A patient survey conducted by Savitri during the year found people were very happy with the service they received at Akhand Jyoti. This applied both to medical treatment and the care they received more generally – several patients, for example, commented that when they attended the hospital it was the first time they had slept on a mattress and others that they loved the food.

To deliver a cataract-blind-free Bihar, Akhand Jyoti plans to expand substantially so as to further eliminate the burden of cataract blindness - the new eye hospital we are funding just outside Purnea is part of these expansion plans and will reach into the sounding areas – as well as locally – to recruit and treat patients. The land was purchased for the new hospital and construction work started in 2017-18.

The following map shows cataract surgery rates compared to the national average. Much of the green area in the centre of the map is due to Akhand Jyoti's work. Purnea was chosen for good transport links into the surrounding even more poorly served districts.



AJEH operates to very high surgical standards, ahead of the levels set out by the World Health Organisation (WHO).

We have been pleased that in line with our guidance and advice, which contributed to their own internal assessment and decision making, over the last 2 years Akhand Jyoti have worked to strengthen their management capacity – through the recruitment of a high powered Advisory Board who support the hands on operation of the hospital and mentor staff – plus the strengthening of senior and mid management through recruitment, training and promotion.

One of the more unusual – and brilliant - elements of Akhand Jyoti is their commitment to use their hospital as a broader agent for social change. Bihar has a very poor record for gender equality and women and girl's rights. There is a high

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incidence of child marriage and in the strictly patriarchal society women are often expected to comply with restrictive, codes of behaviour. The ethos however behind Akhand Jyoti supports women's equality and gender empowerment.

Bringing together the dual goals of creating a stable and well-educated workforce and modelling a changed status for women, Mritunjay who runs Akhand Jyoti started the hugely impactful 'From Football to Eyeball' programme. This takes young women and girls from the local villages and trains them to become ophthalmologists and ultimately hospital managers and wider community changemakers. The girls' parents promise not to 'marry them off' before the age of 21 and in return the girls receive an education and a guaranteed job at the end of their studies – plus of course the opportunity to play football. The programme started slowly with Mritunjay having to coax parents to let the girls join, now it is hugely successful - in 2018 hundreds of girls applied and 126 were called for interview for the 30 places available. Akhand Jyoti plans to build another accommodation block to allow the expansion the programme (with only 9,000 trained ophthalmologists in the whole of India there is plenty of opportunity to expand). Savitri is pleased to provide long term support for 2 of these girls.

We are pleased to continue to support Akhand Jyoti and have taken great pleasure in seeing their work flourish and the immense impact regaining sight can have on individuals and their families.

A story from Bihar – Shiv Paswan

Shiv owns a cycle rickshaw and makes his income ferrying goods and people around his village and nearby areas. For over a year he struggled to work as he had cataracts in both eyes. Moreover, his wife who is a daily wage worker was also unable to earn as she had to stay at home and look after him. They and their 3 children

struggled, the children for example no longer attending school regularly.

Shiv learned about Akhand Jyoti and that he could get his eyes treated for free, at an eye screening camp held near his village. He says the surgery was life changing – he had accepted that he would never see again but now he has his sight back and has been able to go back to work and his children have returned to school.

The future for the family looks much brighter.

Mritunjay Tiwari, Director, Akhand Jyoti Eye Hospitals on the partnership with Savitri

"Our relationship with Savitri is more than a partnership; it's a shared mission to help people from the poorest communities. Reaching the unreached and working where it really matters, this is the essence of the collaboration. We have been fortunate to have found such an ally in our quest to make Bihar blind free".





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Improving Access to Eye Care in North East India

Our Partner: Mission for Vision

Project: Cataract surgeries in Assam, community outreach and primary eye care in Meghalaya and Mizoram. With SNN, SPECS and Synod Hospital.

Support:

- £76,565
- 28,149 people screened at 273 diagnostic screening camps
- 6,312 cataract surgeries
- 308 ASHA (village level health workers) and volunteers trained.

About our partner:

Mission for Vision (MFV) and their partners are working in some of the most remote and poorest parts of North East India: Mizoram, Meghalaya and Assam. Villages are often difficult to reach, over terrain and roads that are treacherous. In Assam, the need is for funding for outreach and cataract surgeries, whereas in Mizoram and Meghalaya surgeries are fully paid for either through profit from paying patients in the eye hospital or a local government health scheme. The issues stopping people regaining their sight through cataract surgery are:

- awareness treatment is possible and available for free
- locally available diagnostic screening and counselling
- links with quality hospitals
- challenging terrains

Each of these issues is addressed through this project. Moreover, different ways of working have evolved to tackle the remoteness, such as using local government village heath workers (ASHA workers), church leaders or volunteers to screen and counsel people for eye problems. This provides a consistent village level resource able to identify who should attend the screening camps and/or refer people to the hospital.

A story from the North East - Perison Marak

Perison lives in a remote village surrounded by hills and forests. He makes and sells bamboo products for a living, collecting the bamboo from the forest. About three years ago Perison started feeling loss of vision in his eyes. It became difficult for him to walk independently on the village road which is uneven and bumpy. Even if he collected the bamboo from the forest, he couldn't make the baskets as his sight wasn't accurate enough. Inevitably, this had an impact on how he was able to support his family financially.

Thanks to the SSN outreach programme, a health worker came to his village to carry out eye checks. She confirmed the reason for his deteriorating sight was due to cataract in both eyes and confirmed they could be treated with free surgery. Savitri visited Perion a few months after his surgery when he welcomed us into his home. He showed us his latest bamboo wares which he's now able to sell at market again.



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Arjun Waney Eye Centre, Odisha Our Partner: L V Prasad Eye Institute (LVPEI) Project: Secondary eye hospital in Berhampur Support:

- 14 outreach programmes with 768 people screened
- 18,576 people examined in the Out-Patient Department
- 1,340 surgeries were conducted, including 1,072 cataract surgeries

About our partner:

LVPEI's seeks to provide equitable and efficient eye care to all sections of society. Established in 1987, LVPEI offers a comprehensive eye health facility with its main campus located in Hyderabad, India. A World Health Organization Collaborating Centre for Prevention of Blindness. It also pursues cutting edge research and offers training in human resources for all levels of ophthalmic personnel.

The construction of the Arjun Waney Eye Centre (AWEC) was funded by Savitri in previous years and this was the second year of operation. While quality of service remains the very highest, patient numbers had not increased as expected. In discussion with LVPEI they highlighted a number of issues the most immediate being the lack of a second eye doctor – the first already performing to capacity. They plan that the second doctor will join the centre later this year with possibly a third soon after. They are also working with Mission for Vision to train vision technicians who will then open local centres providing eye tests, diagnosing cataracts, selling glasses, referring people to the hospital and providing follow up post-surgery, etc. They anticipate that the 10 vision centres which will open after the 12-month training will a significant increase in patients visiting the hospital.

When fully operational the Arjun Waney Eye Centre (AWEC) is expected to provide outpatient services to 25,000 people and undertake 2,500 to 3,000 surgeries annually. We continue to support and monitor the hospital and have confidence that alongside their consistent high quality they will ultimately deliver the patient numbers planned.

Sadly, in August 2018 Mr Bikash Mohanty, Assistant Director at LVPEI, and responsible for AWEC, passed away after a battle with cancer. He was a tireless advocate for universal quality eye care provision and a highly successful hospital manager. We are grateful to have worked with him and offer our condolences and best wishes to his family.

Tulsi Chanrai Foundation, Access to cataract surgery, Cross River State, Nigeria Our Partner: Tulsi Chanrai Foundation

Project: Access to cataract surgeries for people in the Cross-River State, Nigeria

- Support:
 - £34,000
 - 28 outreach camps
 - 5,982 people were screened for eye diseases
 - I,873 total surgeries performed of which 850 directly funded by Savitri

About our partner:

Tulsi Chanrai Foundation (TCF) has been working in Nigeria directing their focus across three broad programme areas; safe drinking water, primary healthcare and eyecare. Savitri support their Eyecare work in Calabar, Cross River State at the local government hospital, by subside free cataract surgeries to those who cannot afford to pay.

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A story from Nigeria – Elizabeth

When we met Elizabeth, she was blind with severe cataracts in both eyes. She was not able to do anything, and her son John had to help her, even to go to the bathroom. She seemed incredibly sad and struggled to sit on a chair without help. Elizabeth and John travelled 250km to the hospital for surgery having heard from a friend how good it was.

After surgery and a nights' rest, Elizabeth had her bandages removed, was given eye drops and the team of nurses and optometrist carried out further vision tests to check the success of the operation and the health of the eye. When we visited her in the post-op ward, she was beaming with a smile from ear to ear and simply exclaimed; "I can see, I can see!"



Care for the dying

A recent report in medical journal, The Lancet estimates that 10 million people in India need palliative care and at least 2 million people suffer in agony from terminal illness without effective pain relief. Palliative care in India is at a very nascent stage with the start of provision in some cities and services targeting more affluent consumers – however the main body of medicine in India remains profit driven and disease rather than patient focused. While great palliative care is proven to provide a longer life, better death and to protect families both emotionally and financially it is largely unavailable.

Savitri's ambition is to contribute to the growing movement for holistic palliative care across India by helping create propoor and rural models which can be shared with others. We also aim to be part of the movement encouraging greater understanding of the importance of care for people who have terminal illness and their families.

We provide vital care for people who are dying (or in some cases have long term debilitating illness) and support to families who, in the absence of effective palliative care, are often forced into crippling debt.

Improving the quality of life for patients with life-limiting illnesses

Our Partner: Emmanuel Hospital Association

Support:

- l. £93,181
- II. Shalom Hospital core hospital and out-patient clinic services including patient care by doctors and nurses, simple procedures, lab testing, home care teams working with patients and families with HIV/Aids and/or cancer, livelihood programme, etc
 - 914 treatments at the outpatient clinic
 - 250 inpatient admissions (average stay 5-7 days)
- III. 3 palliative care home-based programmes, with hospital support as required, at Lalitpur, Fatehpur and Utraula in Utra
- IV. 373 cancer and palliative care awareness sessions held attended by 10,654 people
- V. 12 medical staff funded by to attend the Indian Association of Palliative Care's course on palliative care, and 2 workshops attended by 34 people on symptom management and communication for palliative care practitioners.

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	Shalom	UP Hospitals	Total
In-Patient cases	250	85	335
Outpatient cases	914	508	1412
Home Care Services families supported	212	351	563
End of Life Care	23	145	168
Awareness on Cancer/Palliative Care sessions	2	371	373
People attending awareness sessions	271	10,383	10,654
Networking Meetings e.g. to sensitive government officials	7	36	43

About our partner:

Emmanuel Hospital Association is a network of hospitals across India providing care for those living in some the most underserved and/or remote parts of India. Initially Savitri worked with Shalom an EHA project based in a very poor area of Delhi.

Shalom works with people who are the most marginalized and economically poor, and who have the greatest difficulty accessing medical help – people ostracised by their families because of their HIV or cancer diagnosis, transgenders, patients with wounds so bad government hospitals refuse to treat them.

Shalom is the last inpatient clinic in the whole of Delhi providing care for poor people with HIV/Aids. Even though India has the third largest HIV population in the world funding has dried up as the epidemic has seemed to reduce. However, there are many people in the city who still receive and struggle with a new diagnosis and often very serious complications.

Many diagnoses are late – firstly as people are unaware of the symptoms of cancer and HIV or put off the cost of medical treatment or tests – and secondly very surprising to us reading this in Europe there is a stigma associated with both HIV/Aids and cancer which puts people off seeking treatment or being open about their illness.

People affected by HIV often come to Shalom for treatment for illnesses such as TB, cholera, chikungunya, etc. as well as management of AIDS.

They provide inpatient care for those with most serious illness, basic medical procedures (which can include interventions such as lumber punctures), outpatient clinics, lab facilities, home based care for HIV and/or cancer patients and their families, an adolescent programme, and a livelihood programme which provides income generation possibilities to people who have lost earning potential due to their disease.

At the end of 2016-17 Shalom's future was in doubt as funding was so difficult. Savitri decided - given Shalom were meeting a critical need, had a unique offering, and the work was hugely impactful – to step in and fund 50% of the services for a guaranteed 3 years to give them space to build alternative and more sustainable funding. This is not our normal way of working but reflects our responsiveness to circumstances and willingness to back great work.

In 2017-18 impressed by the work we had supported we also extended our partnership to Shalom's parent organisation EHA supporting palliative care work in 3 rural hospitals in Uttar Pradesh. In each of these hospitals nurse led palliative care teams support patients and families in their own homes, with access to doctors and allocated beds in hospital wards when required.

Teams will normally consist of a nurse, nursing assistant and social worker. The teams deal with the practicalities of wound care, pain relief, patient comfort, the management of medicine, emotional counselling for patients and their families, practical advice on treatment, finances, bereavement, etc.

Extending access to quality palliative care is vital in India. One necessary component of this is the training of doctors and other medical professionals. 12 medical staff were funded by Savitri to attend the Indian Association of Palliative Care's course on palliative care, and 2 workshops were run attended by 34 people on symptom management and communication for palliative care practitioners.

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We also supported 373 school and village meetings helping people understand the symptoms of cancer, the role of palliative care, and challenging the stigma associated with cancer in India – 10,654 people attended these meetings. For those of us living in Europe its difficult that cancer is still a disease in that in some sections of Indian society carries stigma – for example in November 2017 an Indian Minister, Himanta Biswas Sarma said publicly that 'Cancer is divine justice' caused by past sins 'or because of sins of their parents'. This type of view is dangerous for patients in that it encourages people to not get treatment for their cancer and very difficult in that many feel ostracised. The village and school meetings EHA run directly tackle these incorrect and inappropriate beliefs.

A story from Shalom - Satpal Singh

Satpal lives near the Shalom hospital on the outskirts of Delhi. He worked as a security guard for many years but when he was diagnosed with perianal cancer he became too ill to continue. He has developed severe wounds and is not able to sit for a long time and is receiving chemo from the Delhi State Cancer Institute; his treatment is going well.

He lives with his wife Sudha, they have one son who is married and lives separately – the son doesn't support them. They struggle for money and have defaulted on their rent of 2,500 rupees per month but their landlord is understanding and has allowed them to stay. They struggle to get enough to eat and Sudha is also very weak.



The Shalom team visit to provide medication, mainly pain-relief, and counsel. They also provide a food ration from their nutritional programme (families are given a monthly supply of basic food – the funding for which comes from staff and other voluntary donations).

Dr Savita who heads up Shalom and the wider EHA palliative care programme, says that lack of options for care, the costs of treatment and travel, plus the loss of livelihoods means that families can be pushed – often through lack of food and hope - to the brink of suicide. This is one of the reasons the staff came together to start the nutrition programme.

Dr Savita Duomai, Emmanuel Hospital Association

Dr Savita visited the UK to talk about the work of Shalom and EHA at Savitri's gala. While she was in the UK she also supported an exercise to map out potential future palliative care work and had meetings with the Waney family and the Savitri Advisory Committee.

After the visit, Savita was asked what impression she had of Arjun Waney she said:

'I met Arjun Waney when I visited the UK in March. What a large heart he has. I remember at the Gala how he tried to sensitise his friends to the reality of poverty, how life is hard for so many people, and their responsibly to give. Not only does

he give generously himself, but he also challenges, encourages and enthuses others to give, he sees himself as motivating others to contribute, and they respect him for that. It struck me.

He's also very sensitive, he can be moved to tears – I was surprised because wealth can, it has the potential to desensitize people from the pain of others. Just to see a man who can feel the pain of others, who listens, was very touching. Wealth hasn't desensitised him.

What struck me too was the way they are as a family – that was beautiful. It's not just him, it's his wife, his daughter, brothers, son in law, even his granddaughters. It's gone with the generations – he has passed on strong values.

He is also a businessman, I am sure he is shrewd, but the core of his heart is unaffected - he is able to feel, to give.'



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Remembering Wilfrid Bruce Davis - Devika Mokhtarzadeh

Bruce was a very dear friend of the Savitri Waney Charitable Trust.

We will miss him.

I admired him for many things - his passion, dedication and generosity of spirit but also his sense of adventure.

To me Bruce was a hero - something of a maverick he was also a man full of compassion and encouragement. I adored his stories of flying his children to school on a little plane which he then landed in a field, his devotion to Dodo, and his absolute love of sailing. Bruce was also a man who combined deep human compassion with a determination to make a difference.

He was a very dear friend of the Savitri Waney Charitable Trust and an inspiration for our palliative care work which he helped guide and fund for many years.

This is not easy work – to see, to fund, to engage with – there are many horrors, but Bruce was determined to bring about change. In Kerala, India, the work he funded helped transform the care of people who are dying across a whole State. While latterly his funding – via Savitri – for Pallium India has helped hundreds of people directly and brought about the start of wider change through advocacy – with greater access to morphine for people in extreme pain and increased awareness amongst the Indian government of the need for palliative care. The transformation needed is just starting but Bruce has helped catalyse a movement.

It was a joy to hear from the recent Indian Association of Palliative Care meeting that the Wilfrid Bruce Davis Award was presented at their conference.

The work he's inspired will continue across India.

I was deeply saddened to hear of Bruce's passing, as were my team – he was such a huge presence in the palliative care world, and in Savitri's life.

I am thankful to have known him. I am thankful for his life. I am deeply sad to say goodbye.

Devika



Dodo, Bruce and Devika

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Lymphedema and Physiotherapy

Our Partner: Pallium India

Project: Delivering palliative care to those with lymphedema and physiotherapy for those living with disability and facilitate the uptake of this work by local government

Support: This was a no cost extension funded via Savitri money unspent by Pallium in previous years

Project Aim: To improve the quality of life for those requiring physiotherapy and lymphedema treatment and to encourage the government to take up the long-term implementation of this work and scale up services.

About our partner:

Pallium is based in Trivandrum, Kerala and operates palliative care services plus training. However, its vision and advocacy is much broader looking to integrate palliative care across all health care in India and ensuring everyone who needs it has access to effective pain relief.

In Kerala, large numbers of people live with spinal injuries. These are mainly young people and are often the result of falls from trees or construction site and road traffic accidents. The consequences for individuals and their families are catastrophic.

After breast cancer surgery, women often can't access post-operative care, and lymphedema is a significant problem which is often ignored.

Children with congenital problems struggle to receive support.

Beyond this people become isolated, and often depressed.

2017-18 was the final phase of this project – a no cost extension – and saw a greater emphasis on sustainability through government.

83 patients from the earlier project continued to receive support to enable them to have maximum wellbeing with paraplegia or lymphedema conditions and another 32 new patients registered during the year.

The project also provided quarterly lymphedema management training for volunteers with 263 participants each undertaking 2 days of training.

70 people were provided with physical aids or wheelchairs

Influencing government remains difficult given the many calls on their resources however during the project overall Pallium did record some substantial success including

- 1. Pallium India was recognised as the Kerala government's approved training centre for Palliative Care 🔛
- 2. Field staff of National Health Mission of Government of Kerala now use a checklist prepared by Pallium for Lymphedema care.
- 3. The government incorporated lymphedema care into the six-weeks certificate course in palliative care conducted by the Government of Kerala. They are also using Pallium's training materials and faculties for this course 🔛
- 4. The government has agreed to allocate some fund a pilot colostomy and lymphedema training programme in some areas

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Savitri decided in 2016-17 to end our long-term funding partnership with Pallium as Kerala is recognised across India as having by far the best palliative care services (a recent study says that 93% of all palliative care services existing in India are located in Kerela) – the decision was to focus on areas where access is worse. We continue to co-ordinate and work in other ways with Pallium and have huge regard both for their services and their leader Dr Rajagopal who is regarded as the 'father of palliative care in India'.

We will take the lessons learned in Kerala with Pallium and we hope be part of the across India force for the extension of palliative care that Rajagopal has worked for.

Environment

A resilient environment underpins individual, country and planetary wellbeing but our environment is increasingly challenged and comprised. While environmental impacts can affect all of us, the devastation wrought, for example by climate change, affects those who are poorest first and hardest.

On the other hand, lack of livelihood choices can push poor communities into short term environmentally damaging activity – making sure their families have food today even if that compromises the future.

Environmental protection involves a maelstrom of inter related impacts and choices.

This year Savitri took time to explore further the way forward for our work on the environment – which is intended to grow slowly but consistently. While at the same time evaluating our water and livelihood programme in Chhattisgarh at the end of the agreed project, and continuing our support for a Whitley Fund for Nature Award – often known as the Green Oscars.

Increasing agricultural incomes and food security amongst poor farmers in Chhattisgarh, India Our Partner: Action for Social Advancement (ASA)

Project: Dug-wells and Lift Irrigation Systems in Chhattisgarh **Support:**

- £1,530
- Evaluation of the previous 3-year project

The project aimed to increase agricultural incomes and food security amongst poor tribal farmers in Chhattisgarh. It worked with farmers building dug wells and lift irrigation systems, and providing training in improved and diversified cropping systems etc. The work benefitted over 450 farming families, constructing 43 dug-wells and installing 16 lift irrigation systems (LIS). Outputs were ultimately achieved to plan however the project struggled with a significant turnover in partner staff which affected delivery timelines.

It was decided to undertake a rapid qualitative evaluation at the end of the project and an experienced external consultant familiar with the local conditions was appointed.

The evaluation found the project had an overall positive outcome increasing the area irrigated and the diversification of crops; leading in turn to a significant increase in income resulting in better health, improved housing, and greater education of children etc.

Issues however were identified with the quality of some of the construction, local monitoring of the project by the implementing partner, and lack of detailed planning for the optimum use of available water.

Following discussions with partners Savitri decided to affirm the work which had happened over the last 3 years but not to move forward with a further stage of the project.

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Supporting Local Conservation Heroes

Partner: Whitley Fund for Nature **Project:** Whitley Award to Olivier Nsengimana **Support:** £50,000

Throughout Savitri's work, our model of operation is to identify local change-making entrepreneurs who can leverage the support we provide to huge benefit in their communities and beyond.

Wanting to expand our environmental work beyond India we first funded a Whitley Award in 2016 – 17. These awards – often called the Green Oscars - identify successful local conservation heroes. Winning an award offers a spotlight on to some of the best locally-based environmental work in the world, and as a result, winners receive not only funding but also a greater opportunity to influence and share lessons.

This year's winner of the Savitri funded Whitley Award was Olivier Nsengimana who works with Rwanda's emblematic Grey Crowned Crane – less than 500 of whom remain in the wild.



The Winner of the 16-17 Savitri Funded award winner, Ximena Velez-Liendo from Bolivia works to conserve Andean Bears. She has had a year of highlights including;

- Delivering a two-day national workshop along with 46 participants including the local scientific community, local and national government representatives, park rangers and in-situ and ex-situ specialists. As a result, a draft Conservation Action Plan document is currently under review by the authorities and may well result in a shift in policy, allowing for more longterm protection.
- Improved plans to manage human- bear engagement. No crop damaged was recorded at any point during the project.
- A total of 53 camera traps have been set up since the project began, with five individual bears having been identified (based on their facial marks). Furthermore, eight other species have been identified that were not previously known to be in the area. This included species not only endemic to Bolivia but assessed as Critically Endangered by the IUCN. These new findings highlight how important Ximena's work in the area is.
- Since receiving her Award, she has secured further funding and support to ensure she can continue this important work.



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Education

Monthly Birthday and Special Lunch at David Sassoon Industrial School

Our Partner: David Sassoon Industrial School Project: Monthly Birthday Celebrations and special lunch Support: Via Savitri Foundation

Young people (11-18yrs) at David Sassoon come from a variety of backgrounds, some are petty criminals, others child runaways, some have escaped from bonded labour, while others have committed more serious crimes.

Savitri believes there should be some joy in these difficult lives and supports the school to celebrate the children's birthday once a month by organizing a special meal and providing birthday cakes. There are usually over 150 children at any one time in the school. The celebration is a highlight for the boys and what they report looking forward to the most each month.



This work is funded via the Savitri Foundation.

Support to children through education in the slums of Delhi

Our Partner: Project Why

Project: Enabling after-school support and education for children in the slums of Delhi **Support:**

- £44,647
- Full year funding for 2 centres providing before and after school education and a place of safety to 600 children who live in the Delhi slums

About our partner:

Project Why seeks to build a society where children have access to quality education, are able to develop their skills, experience gender justice, helped to flourish and complete their education to build a secure future for themselves and their families. Project Why operates 7 centres in the slums areas of Delhi.

Children living these areas face a series of challenges in achieving a quality education.

- The government school system is notoriously weak and teachers often 'top up' their salaries by offering paid, out of school tuition to pupils. Those children who can't afford the additional costs are significantly disadvantaged.
- Teaching is in Hindi or other local languages, whereas the job market prioritises an ability to speak English, meaning that it is much more difficult to move into professional employment.
- For some children even attending the government schools is impossible as their parents don't have the correct documents.

Moreover, due to poverty and location children in the slums are vulnerable to sexual exploitation, crime and peer pressure, for example being drawn into glue sniffing or drug taking. Children need a place of safety.

In partnership with Savitri, Project Why is ensuring the provision of after-school care and education for over 600 students (currently 660) in their centres in Okhla and Madan Khader.

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We have also supported and encouraged capacity strengthening within Project Why resulting in a stronger team, a new board and improved processes, all of which will contribute to long term success and sustainability.

Key Achievements during the year

- The majority of students have over 90% attendance rate at Project Why centres
- Improvement in learning outcome for the children
- All children have passed and moved to the next grade
- More girls than boys attending Project Why (important as often girl's education is a lower priority for families).

Project Why works closely with the communities it serves. Firstly, through its recruitment policies, since many of Project Why's staff are drawn from the locality or are former pupils. Secondly, Project Why engages parents. It understands that there are challenges in families which can lead to dropout and so staff meet with parents, they listen and understand, looking for solutions to problems while sharing the progress of their children.

Every Saturday in Project Why is a creative day which the children love, with drawing, painting, singing, dancing, storytelling and more, encouraging the children's imagination, spoken skills and confidence levels.

A Story from Project Why - Pushpa Devi

Pushpa, her husband and their four children live in the Okhla industrial area of Delhi. Her husband is a vegetable seller.

Pushpa is illiterate and struggled – was unable - to help her children with their school work. Now however they are enrolled with Project Why and she's happy both because there has been an improvement in their studies but also because after school they now have somewhere to go and no longer hang-out with the older kids in the area – who Pushpa worried were a bad influence.

She says, "If the children are educated, they can achieve their life goals. The girls should equally learn with boys and I am happy about it." Her younger son – shown with her in the picture - wants to be a policeman when he grows up.



UK and Other Projects

- The Soil Association £5,000
- OK Magazine for Thai Schools £2,143
- Client Earth £1,000
- Equal Community Foundation training boys and young men in India to become advocates and practitioners of gender equality
- Sadhu Vaswani Centre UK £5,000

Disasters and Emergencies

During the year we responded to the devastating floods in Peru

- £50,000 we donated to the Crisis Response via the Embassy of Peru
- £2,000 was provided for immediate relief via Soluciones Practicas

We also responded to the migrant crisis in Greece

• £3,000 METAdrasi Foundation

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The Savitri Foundation

We guarantee quality, great monitoring and evaluation and local understanding through our sister organization the Savitri Waney Charitable Foundation (Savitri Foundation) which is based in Mumbai, India, and works hand in hand with the Savitri Trust. Wherever possible we channel donations to our partners in India via the Savitri Foundation to maximise the effectiveness of funding.

Savitri overall achievements 2017-18

Target 2017-18	Achieved 2017-18
Over 300,000 people screened for cataract blindness in India and Nigeria	207,581 people screened – this level of screening was sufficient to identify the numbers of patients requiring cataract surgery. It is possibly as a result of Akhand Jyoti moving into new areas in Bihar where incidence of cataract blindness is even higher.
Over 24,000 cataract surgeries	26, 528 cataract surgeries supported
250 child cataract surgeries	250 child cataract surgeries conducted
Land purchased, and work starts on building new eye hospital in Purnea, Bihar	Land purchased, some delays in planning but building work started at the end of the year. New hospital progressing well
Expand our work on palliative care to 3 new hospitals in Uttar Pradesh	Working with 3 new hospitals in Lalitpur, Fatehpur and Utraula in Uttar Pradesh. Palliative care teams providing high quality support to patients.
Ongoing support to Shalom, hospital, homecare and outreach in Delhi	Significantly expanded our support to Shalom – supporting the hospital, homecare teams, outreach, etc in Delhi
Training for palliative care practitioners	I doctor and II nurses undertook the Indian Association of Palliative Care course, while a further 34 were trained on communication skills and/or symptom management
Before and after school provision for 600 children from slum areas of Delhi	660 children received before and after school education and were provided with a place of safety
Special meals and Birthday cakes for boys at the David Sassoon Industrial Society School in Mumbai	Monthly meals and birthday cakes were provided for the boys
An Evaluation of our work with ASA	Evaluation completed
Fund a Whitey Award for the second year	The Savitri sponsored award went to Olivier Nsengimana who works to protect Grey Crowned Cranes in Rwanda
Explore opportunities for funding other environmental projects	Worked with the Environmental Funders Network building knowledge and expanding networks. Have plans in place for further funding in 2018-19
UK and Other Projects	5 projects supported with grants
Support families impacted by the flooding in Peru	Supported work both by the Peruvian government and via NGO Soluciones Practicas

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Fundraising

As we approached 2017-18, reflecting on the success of the previous year, the decision was taken to focus on programme development and scale back fundraising slightly. The target for 2017 -18 excluding investment income was £883,426 against which $\pounds1,00,611$ was raised (113% of target). Including investments income was $\pounds1,353,028$.

Just to highlight three events during the year:

- The Savitri Gala held at The Arts Club which brought together some of our most engaged supporters to celebrate our palliative care work and provide funds for future projects
- The Eye Ball a World Sight Day party held in conjunction with Coya, Mayfair
- The Ladies Lunch bringing together new and existing Savitri supporters to learn about and fund our work

We are very grateful to our Advisory Committee and to each of our supporters and donors for all their support.

The Small Change for Big Change partnership with restaurants – Zuma, Roka, La Petite Maison and Coya - continue to underpin our fundraising and we remain ever grateful for their enthusiasm, encouragement and support. Thank you to everyone who makes this possible.

During the year **Sanjay Dwivedi**, Executive Chef and Brand Ambassador at Coya travelled out with Maggie Gardner to visit Akhand Jyoti and meet with some of the people helped by our work. Below is what Sanjay said about meeting just one patient Kadni Devi a woman in her 80's who has no family and makes ends meet by begging from her neighbours. Kadni had lost one eye many years ago and her second was now sightless due to a very mature cataract.

When Sanjay Dwivedi met Kadni Devi

This is the transcript of a recording made when Sanjay, visited Akhand Jyoti Eye Hospital in February 2018.

Kadni reminded me of my grandmother – the height, the smile. She can't see anything, but she has this warmth and this energy.....

I met her first before her operation. She was having final tests, and was with a bunch of people, not smiling. I asked her, why aren't you smiling, you should be excited you're going to get your sight back?

She said, I'm really scared and started holding my hand. I think she felt alone. I consoled her and said everything is going to be fine tomorrow.

I spoke to a few doctors and I asked if I could see her first thing. I saw her this morning before her operation – she is still scared and doesn't know what's happening as there are so many people around her and she is blind and old ... and then we went into the operating theatre.



This was the first time for me to go into an operating theatre. It was a 15-minute procedure done by Doctor Poddar. I found it interesting to see what he was doing. Obviously very skilled.

Afterwards Kadni was expecting everything to happen straight away, she said I can't see anything, I can't see anything... and I said, take your time, it will take 15 mins for it to settle down...

I was holding her hand and she had these shades on and when we removed the shades, that moment, the smile on her face, I will never forget that for the rest of my life. It was a real pure connection. She was hugging me and thanking me.... for a 15-minute operation, it costs $\pounds 20$ and I promise you, it's better than anything I will ever spend $\pounds 20$ on... and I think we all need to contribute – and I really, really mean this.

And I am sitting in this amazing room and I am proud to be Indian and really, really, proud to be part of this.

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Looking Ahead

The focus in 2018-19 will be the development and consolidation of our programmes plus the further expansion of our environmental work. Recognising the importance of our partners diversifying their income we will also work to support this area of their activity through advice and hands on capacity building.

We anticipate continuing to fund:

- Eye Screening for over 250,000 people in India and Nigeria
- Over 24,000 cataract surgeries (including 250 child surgeries)
- The ongoing construction of the hospital in Purnea, Bihar (opening July/August 2019)
- Palliative care work including programmes at the three EHA hospitals in Uttar Pradesh, support to Shalom in Delhi and the training of palliative care practitioners
- A new most likely small palliative care programme that expands our understanding and learning of how the ecosystem might develop
- Funding for before and after school provision for 600 children at Project Why
- Special meals and birthday cakes for boys at the David Sassoon Industrial Society School in Mumbai
- A Whitley Award recognising the work of environmental heroes
- At least 2 new environmental projects at least one of which will be focused on the UK/Europe
- Continue to support UK, emergency and other projects at our trustee's discretion
- The work of the Savitri Foundation in supporting and monitoring our work in India, plus support to build diversified and more sustainable sources of funding amongst our partners

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Trustees Administrative Report 2017-18

Structure, Governance and Management

The Trust was created with a Trust Deed dated 29th June 2001.

The first trustees were appointed by the trust deed. There are currently nine trustees on the board and the trust deed states that the number of trustees shall not exceed twelve. The power of appointing new or additional trustees is vested jointly in the Settlors of the Trust. The Settlors and Director of the Trust are responsible for the induction and training of newly appointed trustees, which involves awareness of trustee responsibilities, the governing documents, administration procedures, history and ethos of the Trust as a whole. The day-to-day running operations are delegated to the Director.

Organisational Structure and Legal and Administrative Details

The Trust is principally UK-based with its offices in London. Please refer to the legal and administrative page for more details.

Objects and Policies

The objects of the Trust are to hold the capital and income of the Trust Fund, upon trust for such purpose or purposes as shall be exclusively charitable according to the law of England and Wales and in such shares and proportions as they shall think fit. The Trust seeks to achieve its objects through the raising of funds by way of donations and returns on investments.

Aims, Objectives and Activities

The aim of the Trust is to help alleviate poverty (particularly India) through supporting localised community-based charitable organisations to deliver appropriate care to those in need.

The Trust seeks to make these changes through identifying, monitoring and evaluating new and existing Trust supported non-governmental organisations (NGOs) to deliver quality health care services (particularly eye care) and community development in poorer, neglected areas. The objectives of this year were to continue with the support towards eye care, palliative care, livelihood and water resource management, and community development partners throughout India and one eye care partner in Nigeria.

The Savitri Trust has supported the following organisations in 2017-18:

- The Savitri Waney Charitable Foundation (SWCF) who supported the following organisations:
 - Akhand Jyoti Eye Hospital (AJEH) under registered charity Yugrishi Shriram Sharma Acharya Charitable Trust (YSSACT) to deliver cataract surgeries, the construction of a new eye hospital and to provide optometry training for 2 girls
 - o Mission for Vision India (MFV) to deliver cataract surgeries in North East India
 - Emmanuel Hospital Association (EHA) to deliver palliative care via programmes run by 3 hospitals in Uttar Pradesh and one in Delhi, and the training of palliative care professionals
 - Pallium India providing palliative care to people living with life limiting illness and training volunteers to provide greater long-term sustainability
 - o Project Why, to deliver educational support to children from slum areas in Delhi
 - The David Sassoon Industrial School (DSIS) to organise monthly birthday celebrations and special lunches for pupils in Mumbai, India
- Tulsi Chanrai Foundation (TCF) to deliver cataract surgeries in Calabar, Nigeria.
- The Whitley Fund for Nature, to deliver a Whitley award to a local conservation hero
- In response to damaging flooding in Peru the Trust made a grant from its emergency fund to support relief work via the Government of Peru, and also a donation to the NGO Soluciones Practicas.
- METAdrasi Foundation supporting refugees arriving in Greece
- Soil Association food and farming charity
- OK Magazine Foundation environmental projects in Thailand
- Client Earth for its work on air pollution in London

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- Equal Community Foundation training boys and young men in India to become advocates and practitioners of gender equality
- Sadhu Vaswani Centre UK education

Management of the Trust

All staff members of the Trust are now based in London, UK. The Trust Director is Maggie Gardner, who was appointed on 21st March 2016. The Trust Manager is Emily Kerr-Muir, who was appointed on 29th February 2016. The Finance and Administration Coordinator, Nicola Sorsby Administration was appointed on 13th March 2017 and left on 2nd March 2018.

Review of Income

In 2017 - 18 a total of £1,353,028 has been received.

Fundraising Activities

The Savitri Trust's main fundraising event took place on 25th March at the Arts Club. A total of **£553,069** was raised in connection with this event.

The Trust also held an event at Coya restaurant on World Sight Day, 12th October 2017. A total of £17,680 was raised.

A third event was a 'Ladies Lunch' held on the 14th June at The Arts Club raising £18,090

Fundraising efforts have been directed to our regular donor base as well as reaching out to new supporters. The Trust has also focused its attention on the $\pounds I$ billing initiative, *Small Change for Big Change*, which raises funds at its UK corporate partners - Zuma, Roka, Coya and La Petite Maison restaurants.

£1 Billing Initiative

Donations are received from a $\pounds 1$ voluntary contribution from diners of La Petite Maison, Zuma, Coya and Roka restaurants. In 2017-18 a total of $\pounds 259,239$ was raised collectively by our partner restaurants.

Individual Donations

A total of £129,578 was received from individual donations in 2017-18.

Of this total, £49,687 of funds were unrestricted and £79,891 of funds were restricted to specific project spending.

Restricted funds brought forward from 2016-17

In addition to the funds received throughout the year, several donations totalling £885,068 were brought forward from previous financial years to be implemented in 2017-18.

In 2017-18 the Trust adhered to its ethos 'to donate 100% of all donations received to charitable projects'. The total income raised through donations, Gift Aid and event income in 2017-18, excluding investment income and including restricted funds brought forward from 2016-17, was \pounds 1,885,679. The total charitable expenditure was \pounds 1,425,104.

Funds to carry forward to 2018-19

Restricted funds totalling £61,569 are to be carried forward to the financial year of 2018-19 when they can be implemented.

Savitri Waney Charitable Trust Investment Performance Report

The Savitri Waney Charitable Trust's investment portfolio is managed by Citibank, Schroders Cazenove and Safra Sarasin in the UK.

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Citibank, Cazenove and Safra Sarasin provide performance reports to the Savitri Trust, which give an indication of how various benchmarks performed across 2017-18.

<u>Citibank</u>

In 2017-18 the portfolio's market value decreased by \pounds 240,578 after accounting for transfers to Safra Sarasin and Cazenove.

<u>Cazenove</u>

In 2017-18, the portfolio's market value decreased by £72,271 after accounting for transfers from Citibank.

Safra Sarasin

In 2017-18 the portfolio's market value decreased by £345,421 after accounting for transfers from Citibank.

Public Benefit Compliance Statement

In furtherance of this objective, the charity's trustees have complied with the Charities Act 2011 to have due regard to the guidance contained in the Charity Commission's published general and relevant sub-sector guidance concerning the operation of the public benefit requirement under the Act.

Reserves Policy and Risk Management

It is the policy of the charity to maintain sufficient reserves to ensure the charity meets all its support costs from reserves and any grants made are from any fundraising activities and donations. The Trust maintains adequate reserves to fulfil its obligations.

A number of measures are in place to manage risk.

The trustees actively review the major risks that the charity faces on a regular basis and believe controls over key financial resources in the event of adverse conditions are sufficient.

The trustees have also examined other operational and business risks that they are faced with and confirm that they have established systems to manage any significant risk.

Key Management Personnel Remuneration Policy

The key management of the Charity are regarded as its trustees, the Director and Trust Manager. The Trustees do not receive any remuneration or benefits in kind. The Director and Trust Manager receive salaries based on market rate with no benefits in kind.

The Savitri Trust aims to pay our staff a fair salary that is competitive within the charity sector, proportionate to the complexity of each role, and responsible in line with our charitable objectives.

The remuneration policy's suitability and relevance is reviewed as appropriate, including reference to comparisons with other charities ensuring Savitri Trust remains sensitive to pay and employment conditions in the broader sector.

One member of staff earns more than £60,000 per annum.

Plans for the Future

The charity will continue to support selected projects that are finalised in Trustees Meetings and fully expects to be able to continue this support through its anticipated fundraising events and donations. The support costs will continue to be met in line with the objectives of the charity.

Savitri Trust Investment Policy 2017-18

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I. Introduction

- 1.1 The Savitri Waney Charitable Trust (hereon 'Savitri Trust') is an incorporated charity and registered in the UK with the Charities Commission under the number 1087982.
- 1.2 The purpose of the Savitri Trust is to support healthcare and community development projects, with a focus on marginalised communities. The Savitri Trust does this by raising money through individual donations from the public, corporate donations and fundraising events and activities.
- 1.3 As at year end 2018 the Savitri Trust has approximately £11.07m total assets. In 2017, total assets were £11.68m. A portion of these reserves has been identified as long-term reserves, with the remainder being held as short-term reserves, to meet any unanticipated cash flow needs. The long-term reserves should be invested to grow at least in line with inflation; the short-term reserves should be invested with an emphasis on certainty of value.

2. Investment Objectives

- 2.1 The Savitri Trust aims to invest its assets mainly in liquid investments, spread over an allocation to Fixed Income and Equities. The remainder may be held as short-term reserves, to meet any unanticipated cash flow needs. The long-term reserves should be invested to grow at least in line with inflation; the short-term reserves should be invested with an emphasis on certainty of value.
- 2.2 The overall objectives are predominantly capital preservation and income generation with some focus on capital growth, to enable the charity to carry out its purposes consistently year by year with due and proper consideration for future needs and the maintenance of, and if possible, enhancement of the value of the invested funds while they are retained.
- 2.3 Both capital and income may be used at any time for the furtherance of the charity's aims and therefore the portfolio should be managed on a total return basis.
- 2.4 The Savitri Trust seeks to produce the best financial return within an acceptable level of risk.
- 2.5 The investment objective for the long-term reserves is to generate a return in excess of inflation over the long term, whilst generating an income to support the on-going activities of the Savitri Trust.
- 2.6 The investment objective for the short-term reserves is to preserve the capital value with a minimum level of risk. Assets should be readily available to meet unanticipated cash flow requirements.

3. Investment Decisions

3.1 The Trustees Board has delegated investment decisions to the Managing Trustee, Mrs Devika Mokhtarzadeh and/or the Founder and Trustee Mr Arjun Waney with advice and guidance from the Trustees Board. Advice on the investment portfolio is provided by an authorised professional investment manager, regulated by the FSA.

4. Risk

4.1 Attitude to Risk

The Savitri Trust is reliant on fundraising and donations for its activities. Investment assets are held as reserves.

The key risk to the long-term reserves is inflation, and the assets should be invested to mitigate this risk over the long-term. The short-term reserves are held to provide financial security, and may be required at short notice.

4.2 Assets

The Savitri Trust's assets can be invested widely and should be diversified by asset class, by manager and by security.

5. Ethical Investment Policy

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- 5.1 The Savitri Trust assets should be invested in line with its aims. The Trustees do not wish to adopt an exclusionary policy, but individual investments may be excluded if perceived to conflict with the Trust's purpose.
- 5.2 The Savitri Trust will consider the issues of health, the environment and human rights when taking decisions on investment positions. It aims to focus at least part of the portfolio investments in Socially Responsible Investments. Currently, the advisors for this part of the portfolio are Cazenove.

6. Management, Reporting and Monitoring of Investments

- 6.1 The Savitri Trust has appointed a professional management firm to manage the assets on a discretionary basis, in line with this investment policy. The Savitri Trust has nominated a list of authorised signatories, two of which are required to sign instructions to the investment manager.
- 6.2 The manager will provide the following information on a monthly basis: valuation of investments, transactions reports, cash reconciliation, performance analysis and commentary.
- 6.3 The Managing Trustee has responsibility for agreeing strategy and monitoring the investment assets. The Managing Trustee will review the information provided by the investment manager at each quarterly meeting.
- 6.4 Performance of the long-term reserves will be measured against inflation and agreed market indices. The return of the short-term reserves will be monitored against benchmark cash rates. The level of capital volatility will be monitored to ensure the risk profile remains appropriate for the Savitri Trust.

7. Approval and Review

This Investment Policy Statement was prepared by the Trustee Board of the Savitri Waney Charitable Trust to provide a framework for the management of its reserves. It will be reviewed on an annual basis to ensure continuing appropriateness. Any changes must be given in writing and approved by the Managing Trustee Devika Mokhtarzadeh.

Approved by the Managing Trustee Devika Mokhtarzadeh, on behalf of the Trustees Board:

i4/11/2018.

STATEMENT OF TRUSTEES RESPONSIBILITIES FOR THE YEAR ENDED 31 MARCH 2018

The Charity's trustees are responsible for preparing a trustees' annual report and financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

Charity law requires the Charity trustees to prepare financial statements for each year which give a true and fair view of the state of affairs of the Charity and of the incoming resources and application of resources, including the income and expenditure, of the Charity for that period. In preparing the financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP (Statement of Recommended Practice);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Charity will continue in business.

The trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the Charity and to enable them to ensure that the financial statements comply with the Charities Act 2011. They are also responsible for safeguarding the assets of the Charity and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES FOR THE YEAR ENDED 31 MARCH 2018

Opinion

We have audited the accounts of the Savitri Waney Charitable Trust (the 'charity') for the year ended 31 March 2018 which comprise the Statement of Financial Activities, the Balance Sheet, the Statement of Cash Flows and the notes to the accounts, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the accounts:

- give a true and fair view of the state of the charity's affairs as at 31 March 2018 and of its incoming resources and application of resources, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Charities Act 2011.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the accounts section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the accounts in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the Trustees' use of the going concern basis of accounting in the preparation of the accounts is not appropriate; or
- the Trustees have not disclosed in the accounts any identified material uncertainties that may cast significant doubt about the charity's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the accounts are authorised for issue.

Other information

The other information comprises the information included in the annual report, other than the accounts and our auditor's report thereon. The Trustees are responsible for the other information. Our opinion on the accounts does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the accounts, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the accounts or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the accounts or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information; we are required to report that fact.

We have nothing to report in this regard,

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters in relation to which the Charities (Accounts and Reports) Regulations 2008 require us to report to you if, in our opinion:

- the information given in the accounts is inconsistent in any material respect with the Trustees' Report; or
- sufficient accounting records have not been kept; or
- the accounts are not in agreement with the accounting records; or
- we have not received all the information and explanations we require for our audit.

INDEPENDENT AUDITOR'S REPORT TO THE TRUSTEES FOR THE YEAR ENDED 31 MARCH 2018

Responsibilities of Trustees

As explained more fully in the Statement of Trustees' Responsibilities, the Trustees are responsible for the preparation of the accounts and for being satisfied that they give a true and fair view, and for such internal control as the directors determine is necessary to enable the preparation of accounts that are free from material misstatement, whether due to fraud or error.

In preparing the accounts, the Trustees are responsible for assessing the charity'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 Trustees either intend to cease operations. or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

We have been appointed as auditors under section 144 of the Charities Act 2011 and report in accordance with the Act and relevant regulations made or having effect thereunder.

Our objectives are to obtain reasonable assurance about whether the accounts as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) 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 these accounts.

A further description of our responsibilities for the audit of the accounts is located on the Financial Reporting Council's website at: http://www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

This report is made solely to the charity's trustees, as a body, in accordance with part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the charity's trustees those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Other matters which we are required to address

Your attention is drawn to the fact that the charity has prepared accounts in accordance with "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) in preference to the Accounting and Reporting by Charities: Statement of Recommended Practice issued on I April 2005 which is referred to in the extant regulations but has now been withdrawn. This has been done in order for the accounts to provide a true and fair view in accordance with Generally Accepted Accounting Practice effective for reporting periods beginning on or after I January 2015.

Use of our report

This report is made solely to the charity's trustee, as a body, in accordance with part 4 of the Charities (Accounts and Reports) Regulations 2008. Our audit work has been undertaken so that we might state to the trustee those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the trustee as a body, for our audit work, for this report, or for the opinions we have formed.

HW field Company Andrew Rich (Senior Statutory Auditor) for and on behalf of H W Fisher & Company Chartered Accountants Statutory Auditor Acre House II-15 William Road London NWI 3ER H W Fisher & Company is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006 13/12/18

STATEMENT OF FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

		Unrestricted funds	Restricted funds	Total 2018	Total 2017
	Notes	£	£	£	£
Income and endowments					
Donations	2	331,880	79,892	411,772	609,392
Other trading activities	3	186,239	402,600	588,839	915,880
Investment income	4	352,417	1.	352,417	326,531
Total		870,536	482,492	1,353,028	1,851,803
Expenditure		(40)			
Raising funds					
Fundraising expenses		15,845	75,000	90,845	90,925
Investment management fees		39,495	-	39,495	37,274
Charitable activities					
Poverty reduction programmes	5 & 6	410,731	I,230,991	1,641,722	953,373
Total expenditure		466,071	1,305,991	1,772,062	1,081,572
Net gains/(losses) on investments	8	(658,270)		(658,270)	1,281,742
Net income and net movement in funds		(253,805)	(823,499)	(1,077,304)	2,051,973
Reconciliation of funds:					
Total funds brought forward		10,803,392	885,068	11,688,460	9,636,487
Total funds carried forward		10,549,587	61,569	10,611,156	11,688,460

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

BALANCE SHEET

FOR THE YEAR ENDED 31 MARCH 2018

	Notes	2018	2017
Fixed assets	Notes	£	£
Investments	8	10,308,380	- 10,669,074
	0		
Total fixed assets		10,308,380	10,669,074
Current assets			
Investments	9	: - :	30,132
Debtors	10	474,895	97,226
Cash at bank and in hand		351,278	901,778
Total current assets		826,173	1,029,136
Liabilities			
Creditors falling due within one year	11	(523,397)	(9,750)
Total net assets		302,776	1,019,386
Total assets less current liabilities		10,611,156	l 1,688,460
The funds of the charity:			
Restricted funds	14	61,569	885,068
Unrestricted funds:	13	10,549,587	10,803,392
Total charity funds		10,611,156	11,688,460

Approved by the Board of Trustees on: 14/11/2018

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Mrs Devika Mokhtarzadeh

Trustee

STATEMENT OF CASHFLOWS

FOR THE YEAR ENDED 31 MARCH 2018

	Note	2018 £	2017 £
Net cash used in operating activities	15	(635,473)	406,383
Cash flows from investing activities: Investment income Proceeds from sale of investments Purchase of investments		352,417 1,989,012 (2,256,456)	326,531 6,151,880 (6,132,780)
Net cash provided by investing activities		84,973	345,631
Change in cash and cash equivalents in the year		(550,500)	752,014
Cash and cash equivalents at the beginning of the year		901,778	149,764
Cash and cash equivalents at the end of the year	16	351,278	901,778

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

I Accounting Policies

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

I.I Basis of preparation

The accounts (financial statements) have been prepared under the historical cost convention, with the exception of investments which are included at fair market value. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014 and the Charities Act 2011. The trust constitutes a public benefit entity as defined by FRS 102.

1.2 Preparation of the accounts on a going concern basis

The trustees consider that there are no material uncertainties about the Trust's ability to continue as a going concern. With respect to the next reporting period, the most significant areas of uncertainty that affect the carrying value of assets held by the Trust are the level of investment return and the performance of investment markets.

1.3 Income

Income is recognised when the charity has entitlement to the funds, any performance conditions attached to the income has been met, it is probable that the income will be received and the amount can be measured reliably.

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the charity; this is normally upon notification of the interest paid or payable by the bank. Dividends are recognised once the dividend has been declared and notification has been received of the dividend due. Rental income is accounted for when receivable. Investment income is allocated to restricted and unrestricted funds based on the proportion of assets held within each fund.

I.4 Expenditure

Expenditure is recognised on an accruals basis. All costs which can be directly attributed to charitable activities are allocated to the relevant activity. Liabilities are recognised as expenditure as soon as there is a legal or constructive obligation committing the charity to that expenditure, it is probable that settlement will be required and the amount of the obligation can be measured reliably.

Costs of charitable activities include grants made, governance costs and support costs.

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include the audit fees and costs linked to the strategic management of the charity.

1.5 Grants payable

Grants payable are payments made to third party charities in the furtherance of the charitable objects of the Charity. In the case of an unconditional grant offer this is accrued once the recipient has been notified of the grant award. The Foundation does not normally accrue for multi-year commitments as the Trustees exercise the discretion to review each award annually and determine whether future instalments will be paid. During the year a grant was made for the building of a new hospital in Purnea which has been accrued in full.

i.6 Investments

Investments are included in the financial statements at fair value. Investments are a form of basic financial instrument and are recognised initially at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price.

NOTES TO THE FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2018

Accounting Policies

(Continued)

I.7 Debtors

Debtors are recognised at the settlement amount due after any discount. Prepayments are valued at the amount prepaid net of any discounts due.

1.8 Cash at bank and in hand

Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

I.9 Creditors and provisions

Creditors and provisions are recognised where the Charity has a present obligation resulting from a past event that will probably result in the transfer of funds to a third party and the amount due to settle the obligation can be measured or estimated reliably. Creditors and provisions are normally recognised at their settlement amount after allowing for any discounts due.

1.10 Financial instruments

The Charity only has financial assets and liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

I.II Gains and losses

All gains and losses are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and their opening carrying value or their purchase value if acquired subsequent to the first day of the financial year. Unrealised gains and losses are calculated as the difference between the fair value at the year end and their carrying value. Realised and unrealised gains and losses are combined in the Statement of Financial Activities.

1.12 Fund accounting

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

Restricted funds are donations that can only be used for particular restricted purposes within the objects of the charity.

1.13 Critical judgements and estimates

There are no significant areas of judgement or key assumptions that effect items in the financial statements with respect to the next reporting period for the year ended 31 March 2019. The most significant areas of uncertainty that effect the carrying value of assets held by the Charity are the level of investment return and the performance of the investment markets and any outcome on the principal risks and uncertainties that face the Charity on a day to day basis, as explained within investment policy and risk management sections of the Trustees' report.

1.14 Foreign currencies

Transactions in foreign currencies are translated at rates prevailing at the date of the transaction. Balances denominated in the foreign currencies are translated at the exchange rate prevailing at the balance sheet date.

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

2 Donations and legacies

		2018	2017
		£	£
	Donations	388,819	577,972
	Gift Aid	22,953	31,420
		411,772	609,392
3	Other trading activities		

	Total	Total
	2018	2017
	£	£
Arts Club and Roka Events	553,069	915,880
Ladies Lunch Event	18,090	-
Savitri World Sight Event	17,680	₩
-	588,839	915,880

4 Investment income

	Total	Total
	2018	2017
	£	£
Income from listed investments	342,794	297,022
Bank interest	9,623	29,509
	352,417	326,531

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

5 Poverty reduction programmes

	Unrestricted Funds 2018 £	Restricted Funds 2018 £	Total Funds 2018 £	Total Funds 2017 £
Grants payable				
SWCF				
AJEH/ YSSACT	-	395,294	395,294	520,220
AJEH/YSSACT – New				
Purnea Hospital	85,248	549,496	634,744	-
Mission for Vision (MFV)	-	76,565	76,565	58,299
Pallium India	-	-		17,072
Emmanuel Hospital				
Association (EHA)	-	93,181	93,181	16,000
Action for Social				
Advancement (ASA)	-	1,530	1,530	20,286
Project Why	28,346	9,301	37,647	18,000
Tulsi Chanrai Foundation	5,126	28,874	34,000	32,000
AJEH/YSSACT	9946	20,000	20,000	
Whitley Fund for Nature	50,000		50,000	50,500
Project Why	7,000	-	7,000	7,000
Emergency Donation	2,000	53,000	55,000	
OK Thailand Charity	2,143	-	2,143	-
Other donations	-	-	_,	-
One Off Donations	18,000		18,000	21,438
	197,863	1,227,241	1,425,104	760,815
Support costs (Note 6)	212,868	3,750	216,618	192,558
,	410,731	1,230,991	1,641,722	953,373

Details of the projects supported above are expanded on the Trustee Report.

(*YSSACT – Yugrishi Shri Sharma Acharya Charitable Trust; AJEH – Akhand Jyoti Eye Hospital)

6 Support Costs

	2018	2017
	£	£
Staff costs	149,430	142,102
Bank charges and differences on foreign exchange	[9,179	3,993
Office costs	26,659	25,973
Training	887	355
Travel	4,463	12,315
Audit – current year provision	6,000	6,000
Audit – prior year under-provision	-	I,820
	216,618	192,558

NOTES TO THE FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2018

7 Staff Costs

Analysis of staff costs, trustee remuneration and expenses, and the cost of key management personnel.

	2018	2017
	£	£
Salaries and wages	136,976	130,270
Social security costs	12,454	11,832
	149,430	142,102

Staff costs relate to the employment of three full time members of staff in an administration capacity (2017: 4). One employee had employee benefits in excess of £60,000 (2017: 1). Employer pension contributions were £2,879 (2017: nil).

No trustee received any remuneration or reimbursement of expenses during the year (2017: nil).

The key management personnel comprise the Trustees, Trust Director and Trust Manager. The total employee benefits of the key management personnel of the Trust were £122,948 (2017: £122,939).

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

8 Fixed asset investments

9

10

Listed & Unlisted investments

	2018	2017
At April 2017	£ 10,669,074	£ 9,406,458
Additions	2,256,546	6,132,780
Disposals	(1,958,970)	(6,151,905)
Exchange gain on revaluation	(1,143,115)	1,393,666
Net loss on revaluation	484,845	(111,925)
At 31 March 2018	10,308,380	10,669,074

The analysis of investment is as follows:	2018	2017
	£	£
Assets held in UK	3,641,845	2,949,645
Assets held outside UK	6,666,535	7,719,429
	10,308,380	10,669,074
The portfolios are spread across the following areas:	2018	2017
	£	£
Fixed income	I,209,439	1,095,452
Equities	5,228,782	4,245,855
Alternative investments	756,463	1,780,165
Cash	3,113,696	3,547,602
	10,308,380	10,669,074
Current asset investments		
	2018	2017
	£	£
Money market fund	: =	30,132
		30,132
Debtors		
	2018	2017
	£	£
Restaurant donations due (note 17)	88,185	59,901
Gift Aid	22,729	37,325
Arts Club	363,981	
	474,895	97,226

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

II Creditors: amounts falling due within one year

	2018	2017
	£	£
Grant commitments	463,342	-
Accruals	60,055	9,750
	523,397	9,750

The grant commitment relates to the balance of a new grant agreed to fund the building Purnea Hospital. The balance is due to be paid by July 2019. The total granted was $\pounds 634,744$ of which $\pounds 171,402$ was paid during the year.

12 Taxation

As a charity, The Savitri Waney Charitable Trust is exempt from UK tax on income and gains to the extent that these are applied to its charitable objects. No UK tax charges have arisen in the Charity, during the year or the previous year.

13 Analysis of Net Assets between Funds

	Unrestricted Funds	Restricted Funds	Total
	£	£	£
Fund balances at 31 March 2018 are represented by:			
Fixed asset investment	10,308,380	-	10,308,380
Current assets and current asset investment	764,604	61,569	826,173
Creditors	(523,397)	-	(523,397)
	10,549,587	61,569	10,611,156

14 Restricted funds analysis

	Balance at 31 March 2017	Incoming resources	Outgoing resources	Balance at 31 March 2018
	£	£	£	Ĺ
Eyecare	744,309	277,046	1,021,355	-
AJEH/YSSACT	31,866	1,883	20,000	13,749
Tulsi Chanrai Foundation	<u>1</u>	28,874	28,874	-
Palliative Care	102,500	25,388	93,181	34,707
Project Why	1,750	7,551	9,301	S a 1
Action for Social Advancement (ASA)	4,643	10,000	1,530	13,113
Emergency funds	÷	53,000	53,000	9 4
Office Administration	8	3,750	3,750	- -
Event Sponsorship		75,000	75,000	
Total	885,068	482,492	1,305,991	61,569

<u>Eyecare</u>

This money was primarily raised through our restaurant partnerships with Roka, Coya and Zuma in London and was directed towards eyecare in India. This went towards funding surgeries at AJEH, as well as eyecare with our partner Mission for Vision in the states of Assam, Meghalaya and Mizoram.

Included in this money is:

- £11,194 which was raised through our £3 billing initiative with the Arts Club, October 2017
- £17,680 which was raised through our Eye Ball event at Coya for World Sight Day, October 2017
- £25,000 donation from Gulu Waney

NOTES TO THE FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2018

AJEH/ YSSACT

In addition to the restaurants, funds restricted to eyecare for AJEH in Bihar were raised through

- Tickets from Ladies Lunch event (£680)
- Individual restricted donations (£1,040)
- Funds brought forward from 2016-17

Tulsi Chanrai Foundation (TCF)

Funds for TCF were raised through our partner restaurant in London, La Petite Maison. An additional £4,000 restricted donation was also made to this project.

Palliative Care

In addition to donations brought forward from the year 2016-17 which were restricted to Palliative Care, a further £25,388 was raised from:

- £25,000 donation from Gulu Waney
- £388 Anil Goutam

Project Why

• We received a £7,551 donation during 2017-18 which was restricted to Project Why, and this was spent during the year to deliver educational support to children in the slum areas of New Delhi.

Action for Social Advancement (ASA)

• £13,113 funds received for water projects.

Emergency Funds

- £50,000 Arjun Waney donation
- £3,000 Devika Mokhtarzadeh donation to MetDrasi Refugees Greece

Event Sponsorship

• £75,000 Amex for March Fundraiser Gala

15 Reconciliation of Net Incoming Resources to Net Cash Inflow from Operating Activities

	2018	2017
	£	£
Net income/(expenditure) for the reporting period	(1,077,304)	2,051,973
(Gains)/losses on investments	658,270	(1,281,742)
Investment income	(352,417)	(326,531)
Decrease/(Increase) in debtors	(377,669)	(27,034)
(Decrease)/Increase in creditors	513,647	(10,283)
	(635,473)	406,383

16 Analysis of Net Funds

	As at I April 2017	Cashflow Movement in period	As at 31 March 2018
	£	£	£
Cash at bank and in hand	901,778	(550,500)	351,278

17 Transactions with Related Parties

During the year, a total of £775,619 (2017: £649,877) was paid to the Savitri Waney Charitable Foundation based in India for various project works. The Foundation works in partnership with the Trust and Mr Arjun Waney and Mrs Devika Mokhtarzadeh sit as trustees on the Foundation's board.

NOTES TO THE FINANCIAL ACTIVITIES FOR THE YEAR ENDED 31 MARCH 2018

During the year donations are received from our partner restaurants in London, UK. Donations are received from a £1 voluntary contribution from diners of La Petite Maison (Azur Ltd), and Zuma, Roka and Coya (Azumi Ltd). Mr Arjun Waney is a shareholder and director of these restaurants. Mrs Judith Waney, Mrs Devika Mokhtarzadeh, and Mr Jai Waney are also directors of Azumi Ltd. Mr Pritam Waney is a director of Azur Ltd. During the year, La Petite Maison raised £24,874 (2017: £26,836), Zuma raised £57,347 (2017: £58,136), Roka raised £145,260 (2017: £137,884) and Coya raised £20,565.08 (2017: £22,564). For the month of October, the Trust partnered with The Arts Club where donations are received from a £3 voluntary contribution from diners. Mr Arjun Waney and Mr Jai Waney are shareholders and senior directors of The Arts Club and Mr Pritam Waney is a director. Throughout the month, The Arts Club raised £11,193. In addition, the Trust used the Arts Club as the venue for the Ladies Lunch and Gala dinner fundraiser. As such, the Trust received a discounted rate on venue hire.

At the yearend a total of £60,759 (2017: £59,901) was due from the restaurants.

The Savitri Trust also receives contributions each year from the Waney family towards both project costs and the ongoing overheads of the Trust. 100% of overheads are borne by the Family Trust Corpus with 100% of all public donations directed to our supported projects. Included within donation and legacies received during the year £174,897 (2017: £98,700) was received from the trustees and their close family members.

During the year The Savitri Trust also makes use of the family owned or managed restaurants and The Arts Club to host fundraising events. For these events the charity receives a substantial discount on the normal costs charged. During the year £57,187 was paid to Coya and The Arts Club for three charity fundraising events.

The Savitri Trust holds its investments with three companies Citi Bank, Casenove and J. Safra Sarasin Mrs Rina Bijur is Managing Director and Head of Private Banking with Safra, and as such excuses herself from any conversations or meetings relevant to investment decisions. During the year The Savitri Trust set up an Investment Committee with trustee representatives to take all decisions on investments. The Investment Committee members are Mr Arjun Waney, Mrs Devika Mokhtarzadeh and Mr Gulu Waney.

NOTES TO THE FINANCIAL ACTIVITIES

FOR THE YEAR ENDED 31 MARCH 2018

Comparative Statement of Financial Activities

		Unrestricted funds	Restricted funds	Total 2017	Total 2016
Income and endowments	Notes	£	£	£	£
Donations and legacies Other trading activities Investment income Total	2 3 4	76,343 89,080 326,531 491,954	533,049 826,800 - 1,359,849	609,392 915,880 326,531 1,851,803	485,344 37,483 260,362 783,189
Expenditure Raising funds Fund raising expenses Investment management fees		90,925 37,274		90,925 37,274	20,956 36,003
Charitable activities		57,271			50,000
Poverty reduction programme	5&6	315,213	638,160	953,373	593,814
Total expenditure		443,412	638,160	1,081,572	650,773
Net gains on investments	8	1,281,742	-	1,281,742	(376,789)
Net income and net movement in funds		1,330,284	721,689	2,051,973	(244,373)
Reconciliation of funds: Total funds brought forward Total funds carried forward		9,473,108	163,379 885,068	9,636,487 11,688,460	9,880,860