



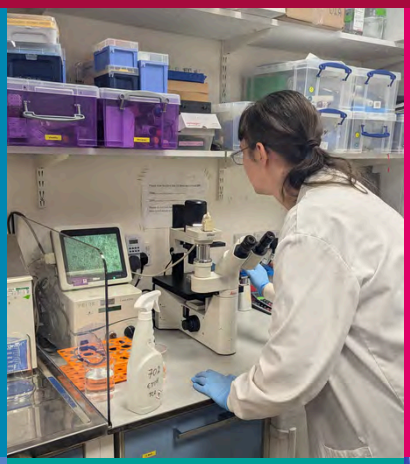


Cardiomyopathy UK
the heart muscle charity

20 Annual 25 Report

The difference we made in 2025









We're Cardiomyopathy UK

We save and improve the lives of people affected by cardiomyopathy. Our vision is a world where everyone affected by cardiomyopathy should live a long and fulfilling life.

In pursuit of this vision:

We raise awareness of the condition so that more people know the signs and symptoms and can be diagnosed early.

We campaign to improve access to quality treatment that meets the needs of people with cardiomyopathy.

We promote clinical research to advance the development of new treatments and provide hope for the future.

We support people affected by cardiomyopathy every step of the way, so that nobody has to face cardiomyopathy alone.

1 in 250 people have cardiomyopathy. That's approximately 266,000 people in the UK currently living with the condition.



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the heart muscle charity

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Reference and administrative details

Trustees

S Kirkham MC *(Chair)*

M Bloom

P Thomas *(Vice Chair)*

T Bueser

M Rees *(Treasurer)*

T Amiss

B Thomas

A Smith

Senior management/leadership team

K McIntosh, Chief Executive Officer

L Brady, Director of Finance and IT

C Jones, Director of Services

Registered Office

75A Woodside Road
Amersham
Buckinghamshire
HP6 6AA

Charity Registration Number

1164263

Auditors

Streets Audit LLP
Wiston House
1 Wiston Avenue
Worthing
West Sussex
BN14 7QL

Bankers

Lloyds
82 High Street
Rickmansworth
Hertfordshire
WD3 1AG

Charity Aid Foundation Ltd
Kings Hill
West Malling
Kent
ME19 4TA

Message from our chair

When I reflect on 2025, the words that comes to mind most readily are challenge and resilience. It was a testing second half of the year for Cardiomyopathy UK, one that brought leadership and governance to the forefront and which required careful navigation on the part of the Board and senior staff to whom I am extremely grateful. Despite this, as I hope this report demonstrates, we continued to deliver strongly for our community. Having now navigated that period and being wiser for it, I am confident that we emerge as a far stronger, more clear-sighted organisation.

My confidence comes from the quality and motivation of our people. The operational staff team have been outstanding. They have stepped up at every turn, taken on additional responsibilities and delivered some of the most impressive work in the Charity's history. My thanks too go to our remarkable volunteers and fundraisers. From our Heart to Heart peer supporters — now able to offer support in 13 languages — to our Change Makers advocates, our Support Group leaders and the many individuals who raise funds and awareness in our name every single day: you are the heart of everything we do, and we are deeply grateful.

Our support and information services have never been stronger, with a new Genetic Advice Helpline in addition to our standard helpline, nurse-hosted online support groups being exceptionally well-received, the 'Thriving Together' project exceeding targets, and our Acceptance and Commitment Education (ACE) programme growing significantly, providing our community with support to make a real difference to the psychological impact of living with cardiomyopathy.

2025 marked a landmark moment in our history when for the first time, Cardiomyopathy UK became a research grant-maker in our own right. This is a fantastic development — one that reflects the ambition of our community and our determination to invest in the future. I want to pay tribute to Alison Fielding, our Vice-President and former Chair of Trustees who played a key role in moving the charity in this direction. Alison died in April this year and we took the opportunity to mark her immense contribution and our gratitude for all she did for us, at The National Conference.

Looking ahead, as I write in June 2026, I am genuinely excited about the months and years to come. Recruited from a very strong field of candidates, Katharine McIntosh is now in post as our new Chief Executive, We are also in the process of recruiting new trustees to bring additional expertise to the Board and our staff team is being strengthened. The foundations are firmly in place for us to move forward and I could not be more proud of what this organisation stands for, or more confident of where it is headed.

Stephen Kirkham MC
Chair of Trustees, Cardiomyopathy UK

Trustees' Report

The trustees, who are directors for the purposes of company law, present the annual report together with the financial statements and auditors' report of the charitable company for the year ended 31 December 2025.

Public benefit

Cardiomyopathy UK confirms that in setting its programme of activity, it has had due regard to the Charity Commission's general guidance on public benefit. The programme of activity also conforms to the charity's charitable objectives and aims. No persons are excluded from the work of the charity on grounds of gender, race or religion.

The trustees confirm that they have complied with the requirements of section 17 of the Charities Act 2011 to have due regard to the public benefit guidance published by the Charity Commission for England and Wales.

Achievements and performance

2025 was the second year of our current five-year strategic plan and a year in which we turned ambition into delivery. Together with our service user community, our volunteers, our healthcare partners and our funders, we continued to make a meaningful difference to the lives of people affected by cardiomyopathy - extending our reach into more parts of the UK, investing for the first time in our own research grants programme, and strengthening the voice of our community in national policy.

This section sets out what we achieved in 2025 against each of the four areas of our strategy, and how we are planning for the future.

Providing support and information

Our support and information services exist so that nobody has to face cardiomyopathy alone. In 2025 we grew our support group network, developed welfare and mental health services, and took our information resources through an independent quality accreditation process. The physical, emotional and practical impact of cardiomyopathy remained at the heart of our approach.

We were also delighted to be finalists at the 2025 Third Sector Awards in two categories - Best Service Innovation (for our ACE Programme) and Best Volunteer Team (for our Support Group Leaders).

Specialist Nurse Team & Nurse Service

Our specialist nurse team continued to provide frontline support to the cardiomyopathy community, answering contacts by phone, by email, via our closed Facebook group, and via Live Chat on a range of topics, including navigating a new diagnosis, managing symptoms and medication, and genetic inheritance of cardiomyopathy.

Over a single three-month period in spring and summer 2025, our small nurse team handled more than 200 detailed contacts on these topics and many other aspects of living with cardiomyopathy.

2025 also saw the launch of the Genetic Advice Helpline - a new service dedicated to fielding complex enquiries about genetic testing, family history, cascade screening, family communication, and reproductive decision-making.

These contacts represent some of the most sensitive and consequential conversations we have with our community and reflect both the increasing importance of genetics in cardiomyopathy care and the gaps in accessible, patient-centred support.

Our weekly nurse-hosted online support group meetings continued to provide regular condition- and topic-specific peer support opportunities in a group setting. These are highly rated with attendees, with 91% saying they would recommend them to others.

'It was particularly useful having a nurse there to answer questions and provide information and being able to talk to people in same situation as me.'
– Nurse-led Support Group attendee

Our nurse team also produced new information pieces on energy conservation, Ramadan & fasting safely,

herbal remedies & medication, health concerns guidance, and women's health & pregnancy.

Community Engagement

Our National Lottery-funded Thriving Together project had an outstanding first year, exceeding many of its key project targets.

369 New individual Support Group users (target: 210)

117 Peer support volunteers trained, onboarded, and supported (target: 109)

We established 5 new regional support groups in England, including 3 in underserved areas: Manchester, Hampshire, and Lincolnshire.

We also established new regional support groups in North & North East Scotland and Mid Wales, as well as secured permanent volunteer leadership for our group in Antrim, Northern Ireland, further underlining our commitment to supporting cardiomyopathy communities in all 4 UK nations.

Furthermore, we launched a dedicated Cardiac Amyloidosis (ATTR-CM) online support group in partnership with Amyloidosis UK.

We also continued to deliver one-to-one peer support through our Heart to Heart service, matching service users with volunteers at important junctures in their cardiomyopathy journey (e.g. newly diagnosed, upcoming surgery, change in medication, moving towards transplant) to support them at times of particular need. The service made a significant difference to users, with all those surveyed reporting that that they felt better after speaking to a volunteer.

'I enjoyed the excellent community spirit and sharing experiences.'
– Support Group attendee

'She was totally amazing. I can't tell you what a difference this will make to me continuing to cope with my son's diagnosis.'
– Heart to Heart user

Our dedicated Welfare & Benefits service

In 2025 we developed and grew our dedicated welfare and benefits service in response to a clear and growing need within our community. Working with a specialist benefits adviser and with Turn2Us - whose grants search tool is now embedded on our website - we supported far more people than we had anticipated.

A single three-month window between May and July saw eight successful awards of Personal Independence Payment (PIP) and Employment & Support Allowance (ESA) alone, with individual outcomes ranging from enhanced-rate mobility awards worth £77/week and £7,800 backdated, to ESA awards worth more than £140/week. During the year as a whole we supported 49 beneficiaries against a target of 20.

Mental and emotional wellbeing

We were delighted to welcome our new Wellbeing Manager in March, a post funded by The National Lottery Community Fund. Through this role we have been able to further strengthen our emotional wellbeing offer.

The Acceptance & Commitment Therapy (ACT) pilot project that delivered such encouraging results in 2024 grew into the Acceptance and Commitment

Education (ACE) programme during 2025. The programme was developed in partnership with Principal Health Psychologist Dr Louise Roper and with input from our patient panel.

Two ACT-trained staff facilitators led 3 cohorts of service users through a 6-week online programme. Participants received a comprehensive programme resources pack, session slide decks, and post-programme aftercare, including lifetime access to a trusted ACE app.

A PhD student at the University of Sunderland is now conducting an independent evaluation of our ACE programme under NHS ethics approval, so that we can continue to build the evidence base needed to scale the programme sustainably.

'I particularly liked how attuned and knowledgeable the facilitators were, hearing experiences and tips from others, and learning many new skills that will help me to cope with life with cardiomyopathy.'
– ACE programme participant

Support for parents and carers - our 'Thriving with your child's cardiomyopathy' programme

We continued to offer our online programme for parents & carers of children with cardiomyopathy, hosted by a trained counsellor who is herself a parent of a cardiomyopathy-affected child.

Each programme session covered different aspects of how a child's cardiomyopathy diagnosis may impact family life; including social, financial, and educational impacts.

Our first Regional Roadshow

89% of delegates reported that they would attend the event again (vs.79% of delegates at our 2024 National Conference.)

89% of delegates reported that the distance that they travelled to get to the event was acceptable (vs. 77% of delegates at our 2024 National Conference.)

We hosted our first-ever Regional Roadshow in Leeds in late 2025 - a modern re-design of our popular pre-COVID Regional Information Days.

This pilot event was intended to assess the feasibility of a series of smaller, in-person conference-style events held at regional locations across the UK.

The event featured an exhibitor space, as well as a separate breakout room which allowed us to run concurrent sessions for both those directly affected by cardiomyopathy and their loved ones.

Information resources and the PIF TICK

During 2025 we were invited to apply for the Patient Information Forum's PIF TICK kitemark, the UK-wide quality standard for health and care information, after submitting a detailed map of our production process. We have since been approved and all our information resources are now subject to a rigorous, evidence-based approval process and annual spot checks by PIF.

Our kitemarked resources will also benefit from improved search visibility through the PIF-Google partnership.

Reaching more people online

In 2025, Cardiomyopathy UK's YouTube channel experienced remarkable growth,

with total views surging by nearly 86% from 100,783 in 2024 to 187,205, driving total watch time up from 4,376 hours to 4,811 hours. This expansion was primarily fuelled by a dramatic 150% increase in YouTube Search traffic, which leapt from 54,582 views to 136,869 views year-over-year. The geographic distribution of our audience also shifted significantly; while Great Britain was our primary demographic in 2024 (27,132 views), India and the United States overtook it in 2025 to become our largest audiences, generating 41,517 and 36,917 views respectively. Although this influx of new search traffic caused the channel's overall average view duration to dip slightly from 2 minutes and 36 seconds to 2 minutes and 23 seconds, deep engagement remained exceptionally strong for users discovering us through Suggested Videos, where the average watch time actually increased from 9 minutes and 54 seconds in 2024 to an impressive 10 minutes and 37 seconds in 2025.

The Cardiomyopathy Conversations podcast, launched in December 2024, continued to grow on YouTube, Spotify and Apple Podcasts. Feedback from listeners was very positive.

Promoting research

Research is how we build hope for the future. In 2025, for the first time in our history, we became a research grant-maker in our own right - a genuinely landmark moment for the charity and for the UK cardiomyopathy community.

Our first Catalyst Grants

We launched our Catalyst Grants programme in April 2025 and an accompanying Catalyst Connections programme, offering researchers the opportunity to gain input on their research and proposals from people affected by cardiomyopathy, before submitting them as applications. Eight online Catalyst Connections meetings took place in June. More than 40 members of our research network put themselves forward to take part - the first time we have hosted our own patient and public involvement events for research. Feedback from researchers and community members alike was extremely positive.

Two Catalyst Grants were awarded from 11 high-quality applications. Every application was reviewed in detail, including by people affected by cardiomyopathy, in line with Association of Medical Research Charities guidance, with the Research Grants Committee - chaired by Professor Simon Ray, with Professor Theresa McDonagh as Vice-Chair and a panel including experts by experience - making funding recommendations which were subsequently ratified by the Board of Trustees. The chosen projects are:

- A project to investigate a new artificial intelligence (AI) tool which analyses routine heart recordings (ECGs) to predict risk of developing serious problems such as dangerous heart rhythms, studying recordings from people with HCM, DCM and arrhythmogenic cardiomyopathy. Led by Dr Arunashis Sau, Imperial College London.
- A project to understand how HCM starts and progresses in children who have a genetic change linked to the condition, using blood tests to identify new drug targets to prevent/slow the

development of the condition. Led by Professor Juan Pablo Kaski, University College London and Great Ormond Street Hospital.

"Up to this point, our efforts have been focussed on facilitating research. Now we are actually commissioning and providing the initial funding for early-stage research projects ourselves - a really significant step forward."
– Stephen Kirkham, Chair of the Board of Trustees

Research partnerships delivering in 2025

Our research partnerships continued to develop strongly during the year. We now represent the patient community on several research partnerships:

- CureHeart: A BHF funded international effort developing genetic therapies aimed at delivering the first cures for inherited cardiomyopathies.
- SMASH-HCM: a project developing a hybrid digital twin platform to personalise the stratification and management of hypertrophic cardiomyopathy for patients and clinicians.
- Cross-HF: A major NIHR funded trial testing whether non invasive cross sectional imaging can safely reduce the need for invasive coronary angiography in newly diagnosed heart failure patients.
- Takotsubo 'Mending Broken Hearts': A transdisciplinary initiative using medical science, cultural studies, and participatory arts to improve understanding and care for Takotsubo cardiomyopathy ("broken heart syndrome").
- Heart Hive: an online portal for connecting people living with or at risk at developing cardiomyopathy with research studies.
- PREG-HEART: a project to understand more about how heart conditions affect women during and after pregnancy, to improve the future of care for all women.

A particular highlight from the year was taking 16 community members to visit the Oxford lab in June, with highly positive comments both from attendees and researchers, some of whom do not often have the opportunity to interface with patients.

We also contributed valuable patient insight to studies ranging from holistic clinical management of ATTR amyloidosis with cardiomyopathy, treatment attributes valued by patients with transthyretin amyloid cardiomyopathy, and quality standards for amyloidosis care. We were credited as a co-author on academic posters presented at the ESC Heart Failure Conference and the International ATTR Amyloidosis Meeting for Patients and Doctors, and on journal articles submitted for publication.

MyInsight survey data promotion

Our MyInsight national survey - which attracted more than 1,300 responses in 2024 - continued to deliver. The technical report was finalised with the Picker Institute; the Picker team began work on a journal article and an academic poster was presented at the

British Cardiovascular Society's June 2025 conference. We also provided the technical report to the NHS England team leading the rapid review of heart failure and cardiac rehabilitation.

Turning our Priority Setting Partnership into action

In 2024 we completed a James Lind Alliance Priority Setting Partnership to identify the top ten research priorities for people affected by cardiomyopathy. In 2025 we began the task of turning those priorities into funded research. Every Catalyst Grant application is required to show how it aligns with the top ten. We worked with a researcher to write and submit an academic article to a journal, and have begun working with the University of Cardiff's MSc Genetic and Genomic Counselling programme, which expects to support a Masters student next year on a cardiomyopathy topic drawn directly from the priority list.

Our research network

Our research network continued to grow, with over 750 subscribers by the end of the year. As well as letting the community know about relevant research developments, our regular newsletter connected our community with 14 opportunities to take part in research, and 21 opportunities to help shape research, thereby strengthening research through improved patient insight.

Advocating for people affected by cardiomyopathy

Our team of Change Makers volunteers, our clinical and policy advisers, and our partners in the cardiovascular sector continued to work with us during 2025 to improve care, treatment and public policy for people affected by cardiomyopathy.

Shaping the NHS

In January we submitted a detailed response to the Government's consultation on the NHS 10-Year Plan, underpinned by MyInsight data and focused on four priorities: earlier detection and diagnosis; a clear strategy connecting physical and mental health; equal access to specialist treatment, care and services; and cardiology workforce planning to reduce waiting lists and improve outcomes. We participated in stakeholder events and continued to carry these messages into engagement with the forthcoming Modern Service Framework for Cardiovascular Disease.

Access to medicines

2025 saw intense activity on access to medicines for our community. We submitted evidence to medicines appraisal processes for two new medicines for people affected by cardiac amyloidosis. We also undertook a survey on access to mavacamten, as the first dedicated cardiomyopathy drug available on the NHS, following emerging evidence of barriers to access. The survey results showed the huge difference that a dedicated medicine can make to those prescribed it. It also highlighted significant geographical variation in how people are being referred for the medicine and the extent to which hospital delays are blunting its impact. The accompanying report, illustrated with case studies, is being published in 2026 to inform commissioners and clinicians as the rollout continues.

We also started work on a survey to better understand the needs of those in

our community affected by HCM, and their treatment preferences, in order to provide the information needed to help try and ensure aficamten - another new medicine - becomes available on the NHS.

Our work on medications access also included continued efforts to improve access to disopyramide - a drug been beset by repeated shortages. In relation to this we joined a parliamentary reception hosted by the Royal Pharmaceutical Society, and signed a joint letter to the Secretary of State for Health and Social Care on medicines shortages.

Treatment

Our work to improve treatment for people affected by cardiomyopathy included work to respond to the NICE chronic heart failure consultation on behalf of our community, as well as work to advocate on behalf of people affected by cardiac amyloidosis, in face of delays to the promised rollout of amyloidosis centres.

Rehabilitation

Access to rehabilitation was highlighted as important to our community through the MyInsight survey. During 2025 we worked with the British Association for Cardiovascular Prevention and Rehabilitation to promote the survey results. We also advocated to improved access through our response to the NICE early value assessment consultation on digital cardiac rehabilitation platforms.

Working with our sector

We continued to be an active contributor to the collective voice of the cardiovascular sector. Highlights during the year included signing the British Heart Foundation's consensus statement on cardiovascular disease and its "Hearts Need More" campaign (and trying to ensure that cardiomyopathy is represented in the call for a National Cardiovascular Disease Plan); contributing to the CVD-Risk Coalition's five-year action plan "Getting to the heart of the matter"; supporting an application for establishing an ICC database within the National Institute for Cardiovascular Outcomes Research and taking part in National Voices' "workshop in a box" on the future of the NHS.

We continued to work alongside the Alliance for Heart Failure, as co-chairs, ensuring that cardiomyopathy - one of the most common causes of heart failure - is thought about across all its workstreams. We also continued as active members of NHS England's Expert Advisory Group on Heart Failure.

Internationally, we continued to lead and support the International Cardiomyopathy Network (ICoN) project on improving access to genetic testing in Europe. Our partnership provides patient insight, and governance support. Within our CureHeart research partnership work, we took on a leading role with the newfound Global Patient Engagement Board, setting the foundations for collaborative work with international cardiomyopathy charities on genetics education.

Our Change Makers

We are incredibly thankful to our Change Makers volunteers for their hard work during the year. One existing Change Maker applied for a lay member role on a national Health Technology Committee, and we began a new action plan for our wider campaigners network, which will

be developed in partnership with our incoming Policy and Advocacy Manager.

Working with healthcare professionals

During the year we continued to provide high-quality learning opportunities for healthcare professionals so that they are better able to diagnose and treat cardiomyopathy. 2025 saw a step change in both our in-person events and our digital learning platforms.

Our new Healthcare Professional Study Days

In 2025 we launched a series of dedicated Study Days for cardiology and heart failure clinicians. Our first, held in Essex in May, was hosted by Dr Henry Savage and Dr Jason Dungu and attracted around 90 delegates. Expert presentations covered amyloidosis, genetic cardiomyopathy, advanced imaging and multidisciplinary management, and were recorded for wider dissemination. A second, a well-received ICC/genomics Study Day followed in the East Midlands in July, hosted by Dr William Bradlowe, explored the role of AI, service redesign, and screening in inherited cardiac conditions, bringing together experts and med tech companies to explore related topics. Feedback gathered after the latter event showed that over 70% they had gained valuable insights they could apply in practice.

A new platform for clinical education

We continued to develop MedEd, our CPD-accredited online learning platform for healthcare professionals with 75+ hours of content. As well as undertaking a pilot to look at improving navigation and signposting to related resources, we strengthened links with our face-to-face events - such that professionals attending our Study Days can continue learning afterwards on CardioCare. The platform's modules, covering hypertrophic and dilated cardiomyopathy, and paediatric and adult heart failure, help clinicians recognise diagnostic red flags and apply best practice in ongoing management. Over 100 new healthcare professionals registered during the year, taking our total registered learners to 673. Given many clinicians are registering to explore specific content rather than completing full modules, we will be reviewing how the platform is used and its future shape over the coming year.

Our nurses on the national stage

Our nurse specialists were in demand throughout the year. The team continued steering committee membership of the UK Inherited Cardiac Conditions Nurse and Midwifery Forum, contributed to the Burdette sudden-cardiac-arrest education programme, and were invited to speak at the Faculty of Sexual and Reproductive Healthcare's Midlands Amyloidosis launch event. The team also joined Bayer's ATTR cardiomyopathy advisory board, bringing expertise in translating complex clinical language for patients and clinicians. A further invitation to present at the Faculty of Sexual and Reproductive Healthcare's annual conference in December, on supporting women with heart conditions, reflected the growing reputation of the team as a whole.

Trustees and officers

The trustees and officers serving during the year and since the year end were as follows.

Trustees

R Sutton *(Chair)* (resigned 6 September 2025)

E Jarman (resigned 30 January 2026)

S Cornish MBE (resigned 19 January 2026)

S Kirkham MC *(Chair)*

M Bloom

P Thomas *(Vice Chair)*

T Bueser

A Smith (resigned 6 September 2025)

M Rees *(Treasurer)*

G Favier (resigned 6 September 2025)

T Amiss

E B K Roy (appointed 11 January 2025 and resigned 19 January 2026)

M Zane *(Treasurer)* (appointed 6 September 2025 and resigned 19 January 2026)

B Thomas (appointed 6 September 2025)

A Smith (appointed 28 January 2026)

Senior management/leadership team

J Rose, Chief Executive Officer (resigned 28 February 2025)

A Tomlinson, Chief Executive Officer (appointed 1 March 2025 and resigned 21 January 2026)

K McIntosh, Chief Executive Officer (appointed 28 January 2026)

L Brady, Director of Finance and IT

C Jones, Director of Services (appointed 6 May 2026)

Structure, governance and management

Nature of governing document

The charity is controlled by its governing document and constitutes a charitable incorporated organisation. The charity is governed by its constitution adopted on 5 November 2015.

Recruitment and appointment of trustees

The charity continues to review and improve its trustee recruitment, induction and training processes to ensure new trustees are equipped to support our work to their maximum ability. As a patient-led charity, we prioritise recruiting trustees from within our own community, and sought candidates at our National Conference in November 2024. When this didn't identify suitable candidates, the CEO approached experienced volunteers in June 2025; following a robust process of information-sharing and panel interviews, one candidate was recommended and voted onto the Board.

Separately, having identified a skills gap for the role of Treasurer, and with no suitable candidate from within our community, trustees recruited a professional accountant with senior finance experience — a route taken only when specific professional expertise is required. All new trustees are required to familiarise themselves with our induction and training resources and, as a new development this year, are now offered the support and mentorship of an experienced trustee.

Arrangements for setting key management personnel remuneration

In 2025 we reviewed all our salary gradings, including those of senior staff. This exercise involved benchmarking against similar level roles at similar sized charities. In the first half of 2026 we have undertaken CEO recruitment, employing the services of an executive search firm with third sector expertise, for their expert input including on salary/renumeration matters.

Organisational structure

The charity has long had a division between strategic decisions, which are made by the Board of Trustees during Board Meetings, and decisions pertaining to operational matters, which are made by the CEO and staff. In order to ensure ongoing Board oversight, and agree which matters need to be taken to the Board, the Chair and CEO hold regular meetings. The Board has undertaken a governance and leadership review in the first half of 2026, and identified areas to strengthen.

Risks

Cardiomyopathy undertakes regular assessment of risks through maintaining a risk register, and taking steps to mitigate risks identified. Board level oversight of risks and mitigations is undertaken by the Finance and Risk Committee, which consists of Board members alongside members of the leadership team.

Financial review

Trustees are pleased to report that the charity was able to sustain a strong level

of income during the financial year due to the continued efforts of the charity's volunteer fundraisers and the generosity of its supporters. During the year, the charity made significant investments in its research, policy and marketing activity in line with the charity's five year strategic plan. The charity recognises that the biggest financial challenge in 2026 will be to secure additional income to fund the charity's research grant-making ambitions.

At the year-end the charity had total funds of £630,098 (2024: £742,685), of which £104,277 (2024: £178,096) were restricted. £11,528 (2024: £16,185) related to fixed assets, leaving free reserves of £512,293 (2024: £548,404).

Partnerships

The charity works closely with expert clinicians from a number of NHS Trusts to help ensure that its work is clinically appropriate and that it can reach as many people with cardiomyopathy as possible. During the year the charity continued to work with its President, Prof. Perry Elliott to develop the International Cardiomyopathy Network (ICoN), a registered UK charity. Cardiomyopathy UK's Chief Executive supported ICoN in their efforts to raise funding from corporate partners and provided strategic advice and patient insight as part of a shared commitment to improving the level of cardiomyopathy knowledge among clinicians, developing best practice and fostering research that will make a real difference to the lives of people with the condition.

During the year ICoN made a payment of £30,000 to the charity to cover the costs incurred in providing this support. The charity continued to have a positive relationship with a number of charities and healthcare professional organisations that provide support and information relating to heart diseases. Where possible, the charity works in collaboration with these charities, and is an active member in several coalitions. During 2025 the charity received funding from three pharmaceutical companies (Alnylam, Cytokinetics and Bristol Myers Squibb) who have developed or who are developing treatments or devices used by people with cardiomyopathy. The total income from these companies was £77,000 which is 8% of the charity's total income. Income from these sources covered the costs associated with the charity's medical education project, Tackling Inequity project and awareness raising. Additionally, the charity had other collaborations with pharmaceutical companies which include AstraZeneca, Bayer, Pfizer and Cytokinetics which constituted as Earned Income. All funding was provided in accordance with the Association of British Pharmaceutical Industry code of practice and the charity's own policy on working with the pharmaceutical industry which is available at: cardiomyopathy.org/about-us/our approach. This policy is designed to ensure the charity's independence.

Financial sustainability

2025 income continued to diversify. London Marathon runners raised more than £207,000 against a budget of £174,000, our best Marathon campaign to date. Millbrook Golf Club alone raised more than £42,000 for us during the year, including £20,000 on a single golf day. New legacies including a 50% residuary share were confirmed during the year.

We received £23,000 in trust funds to use towards our Helpline, these were funded by The Childwick Trust, The D'oyle Carte and The Hospital Saturday fund. Other trust funding received from The Edith Florence Spencer Memorial fund and Garfield Weston towards our general fund which totalled £45,000.

Pharmaceutical partnerships also remained strong, with approximately £82,000 received towards our missions and objectives, medical education and tackling inequity.

By the end of the year our total reserves of £630,098, equivalent to 7.6 months of normal unrestricted expenditure, comfortably within our target range. While the year-end deficit was larger than anticipated, the Board and leadership team are actively taking steps to address this, with a clear focus on returning to surplus in the coming years.

We are grateful to every donor, volunteer and fundraiser whose generosity is making possible the first generation of Cardiomyopathy UK-funded research possible.

Fundraising responsibly

We take a responsible and sustainable approach to raising funds. All of our fundraising is carried out either by our in-house fundraising team or by volunteer fundraisers working under their guidance and support - we do not engage third-party professional fundraisers or fundraising companies.

We have focused on ensuring our activities meet the standards laid out by the Fundraising Regulator. We have committed to follow the Code of Fundraising Practice and the Fundraising Promise, and are able to display their kitemark on our materials as a result. Our fundraising practices also align fully with the Charity Commission's guidance, and in 2025 we received no complaints regarding our fundraising activity.

Our work is also conducted in line with all GDPR regulations, and we are registered with the Fundraising Preference Service, which exists to protect people from unwanted intrusion, excessive or repeated requests for donations, or undue pressure to give money or property.

Thank you

We want to extend a heartfelt 'thank you' to every fundraiser, donor and volunteer whose efforts allow us to keep saving and transforming the lives of people living with cardiomyopathy, both now and in the years ahead. We are equally grateful for every gift given in memory of a loved one - whether through funeral collections, memorial events, individual donations or gifts left in Wills. Each of these contributions helps build a lasting legacy, bringing us closer to our vision: a world where everyone affected by cardiomyopathy can live a long, full life.

Policy on reserves

The charity aims to maintain unrestricted reserves at a level that equates to around six to nine months of normal unrestricted expenditure. Trustees believe this to be a prudent amount given that the charity operates in a competitive environment and, as the leading specialist provider of support services for people affected by cardiomyopathy, there is a duty to ensure that it can maintain core services for individuals in need. Reserves at the end of 2025 were equal to just under eight months of normal unrestricted expenditure.

Aims and key objectives for future periods

2025 was the second year of our five-year strategic plan. It was a year of embedding, consolidating and building the organisational foundations we will need to deliver on our ambitions.

During 2025 we made significant investments in the systems and processes that underpin a modern charity. We updated our financial management system, introduced digital purchase-order authorisation, and investigated options for improving our charity database. Our people remain our most important asset. We completed our staff appraisal cycle using a refreshed framework, and strengthened volunteer management through a new platform and updated policies. We also introduced an organisational policy on the use of artificial intelligence and reinforced our digital security arrangements.

Looking ahead

2026 will be the third year of our five-year strategic plan and the year in which our first Catalyst Grants will begin delivering new cardiomyopathy research, our MyInsight policy report will be published in full, and we expect to see decisions on access to vutrisiran and acoramidis that will materially affect our community. We will continue to expand our regional support group network under Thriving Together, deepen our welfare and ACE services, and take forward our Research Strategy following the Priority Setting Partnership.

Our trustees worked with our senior leadership team throughout 2025 to ensure that our activities were in line with our plans, that objectives were met, and that we remained responsive to emerging challenges.

Raising Awareness

When people are aware of cardiomyopathy, the more likely they are to seek help, and get diagnosed and treated sooner. In 2025 we continued to work with our community and with the wider cardiovascular sector to raise the profile of the condition and to help people recognise its signs and symptoms.

We once again joined with cardiomyopathy organisations from around the world as part of an international awareness campaign. This year's campaign, coordinated by the Global Heart Hub's Cardiomyopathy Patient Network - which now spans around 30 patient organisations across 19 countries - focused on the importance of knowing your family heart history, recognising that inherited cardiomyopathy is the most common form of genetic heart disease. Taking part in this campaign enabled us to reach more people, including some we would not otherwise have connected with.

Alongside our international campaign work, we marked World Heart Day on 29 September, using it as an annual opportunity to raise the profile of cardiomyopathy within the wider heart-health community.

A significant part of our public visibility during the year came through fundraising events that also carry an important awareness message. Our fundraiser helped ensure new audiences heard about the charity and our work through their amazing efforts in reaching out to their friends, families and communities for sponsorship, or to join

community fundraising events. Our fundraising work also secured meaningful national and local media coverage, with highlights including a mother of one of our London Marathon runners being interviewed live on BBC Radio 2 by Sara Cox.

Statement of trustees' responsibilities

The trustees are responsible for preparing the Annual Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice). The law applicable to charities in England and Wales, the Charities Act 2011, Charity , (Accounts and Reports) Regulations 2008 and the provisions of the trust deed requires the trustees to prepare financial statements for each financial 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 these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently
- observe the methods and principles in the Charities SORP
- make judgements and estimates that are reasonable and prudent
- state whether applicable accounting standards, comprising FRS 102 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 charitable company will continue in business.

The trustees are responsible for keeping proper accounting records which 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, the Charity (Accounts and Reports) Regulations 2008 and the provisions of the trust deed. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

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

Disclosure of information to auditor

Each trustee has taken steps that they ought to have taken as a trustee in order to make themselves aware of any relevant audit information and to establish that the charity's auditor is aware of that information. The trustees confirm that there is no relevant information that they know of and of which they know the auditor is unaware.

The annual report was approved by the trustees of the charity on 30 July 2026 and signed on its behalf by:



S Kirkham MC

Trustee

Independent Auditors' Report

Opinion

We have audited the financial statements of Cardiomyopathy UK (the 'charity') for the year ended 31 December 2025, which comprise the Statement of Financial Activities, Balance Sheet, Statement of Cash Flows, and Notes to the Financial Statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is United Kingdom Accounting Standards, comprising Charities SORP - FRS 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and applicable law (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charity's affairs as at 31 December 2025 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 responsibilities for the audit of the financial statements section of our report. We are independent of the charity in accordance with the ethical requirements that are relevant to our audit of the financial statements 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

In auditing the financial statements, we have concluded that the trustees use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the original financial statements were authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. Our opinion on the

financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements 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 financial statements 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

In the light of our knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report Trustees' Report.

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

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

Responsibilities of trustees

As explained more fully in the Statement of trustees' responsibilities (set out on page 23), the trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, 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 liquidate the charity or to cease operations, or have no realistic alternative but to do so.

Auditor responsibilities for the audit of the financial statements

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

Our objectives are to obtain reasonable assurance about whether the financial statements 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 financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- Obtaining an understanding of the legal and regulatory frameworks that the charity operates in, focusing on those laws and regulations that had a direct effect on the financial statements
- Enquiry of management to identify any instances of known or suspected instances of fraud
- Enquiry of management and those charged with governance around actual and potential litigation and claims
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates were indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business
- Reviewing minutes of meetings of those charged with governance
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards.

In addition, as with any audit, there remained a higher risk of non-detection of fraud, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. Our audit procedures are designed to detect material misstatement. We are not responsible for preventing non-compliance or fraud and cannot be expected to detect noncompliance with all laws and regulations. If a breach of operational regulations is not disclosed to us or evident from relevant correspondence, an audit will not detect that breach.

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

Use of our report

This report is made solely to the charity's Trustees, as a body, in accordance with the Charities Act 2011. 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's Trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Streets Audit LLP, Statutory Auditor

Wiston House
1 Wiston Avenue
Worthing
West Sussex
BN14 7QL

30 July 2026

Statement of Financial Activities for the Year Ended 31 December 2025

	Note	Unrestricted funds (£)	Restricted funds (£)	Total 2025 (£)	Total 2024 (£)
Income and Endowments from:					
Donations and legacies	3	768,234	287,115	1,055,349	968,969
Charitable activities	4	-	47,700	47,700	42,700
Other trading activities	5	8,564	-	8,564	32,433
Investment income	6	13,383	-	13,383	10,576
Total income		**790,181**	**334,815**	**1,124,996**	**1,054,678**
Expenditure on:					
Raising funds	7	(353,440)	(9,633)	(363,073)	(326,868)
Charitable activities	8	(340,455)	(400,461)	(740,916)	(714,577)
Other expenditure	9	(133,594)	-	(133,594)	(108,509)
Total expenditure		(827,489)	(410,094)	(1,237,583)	(1,149,954)
Net expenditure		**(37,308)**	**(75,279)**	**(112,587)**	**(95,276)**
Transfers between funds		**(1,460)**	**1,460**	**-**	**-**
Net movement in funds		**(38,768)**	**(73,819)**	**(112,587)**	**(95,276)**
Reconciliation of funds					
Total funds brought forward		**564,589**	**178,096**	**742,685**	**837,961**
Total funds carried forward	**20**	**525,821**	**104,277**	**630,098**	**742,685**

	Note	Unrestricted funds (£)	Restricted funds (£)	Total 2024 (£)
Income and Endowments from:				
Donations and legacies	3	704,375	264,594	968,969
Charitable activities	4	-	42,700	42,700
Other trading activities	5	32,433	-	32,433
Investment income	6	10,576	-	10,576
Total income		**747,384**	**307,294**	**1,054,678**
Expenditure on:				
Raising funds	7	(316,695)	(10,173)	(326,868)
Charitable activities	8	(436,466)	(278,111)	(714,577)
Other expenditure	9	(108,509)	-	(108,509)
Total expenditure		**(861,670)**	**(288,284)**	**(1,149,954)**
Net (expenditure)/income		**(114,286)**	**19,010**	**(95,276)**
Net movement in funds		**(114,286)**	**19,010**	**(95,276)**
Reconciliation of funds				
Total funds brought forward		**678,875**	**159,086**	**837,961**
Total funds carried forward	**20**	**564,589**	**178,096**	**742,685**

The notes on pages 29 to 47 form an integral part of these financial statements.

All of the charity's activities derive from continuing operations during the above two periods.

The funds breakdown for 2024 is shown in note 20.

Balance Sheet as at 31 December 2025

	Note	2025 (£)	2024 (£)
Fixed assets			
Tangible assets	15	11,528	16,185
Current assets			
Debtors	16	195,819	218,764
Cash at bank and in hand	17	572,057	604,354
		767,876	823,118
Creditors: Amounts falling due within one year	18	(149,306)	(96,618)
Net current assets		618,570	726,500
Net assets		630,098	742,685
Funds of the charity:			
Restricted income funds			
Restricted funds	20	104,278	178,096
Unrestricted income funds			
Unrestricted funds		525,820	564,589
Total funds	20	630,098	742,685

The financial statements on pages 25 to 47 were approved by the trustees, and authorised for issue on 30 July 2026 and signed on their behalf by:



S Kirkham MC
Trustee

Statement of Cash Flows for the Year Ended 31 December 2025

	Note	2025 (£)	2024 (£)
Cash flows from operating activities			
Net cash expenditure		(112,587)	(95,276)
Adjustments to cash flows from non-cash items			
Depreciation		4,657	7,793
Investment income		(13,383)	(10,576)
		(121,313)	**(98,059)**
Working capital adjustments			
Decrease in debtors	16	22,945	103,334
Increase in creditors	18	52,688	19,976
Net cash flows from operating activities		**(45,680)**	**25,251**
Cash flows from investing activities			
Interest received		13,383	10,576
Acquisitions of tangible assets		-	(6,658)
Net cash flows from investing activities		13,383	3,918
Net (decrease)/increase in cash and cash equivalents		(32,297)	29,169
Cash and cash equivalents at 1 January		604,354	575,185
Cash and cash equivalents at 31 December		572,057	604,354

All of the cash flows are derived from continuing operations during the above two periods.

Notes to the Financial Statements for the Year Ended 31 December 2025

1 Charity Status

Cardiomyopathy UK is a charity limited by guarantee and incorporated in England and Wales.

The address of its registered office is:

75A Woodside Road
Amersham
Buckinghamshire
HP6 6AA

These financial statements were authorised for issue by the trustees on 30 July 2026.

2 Accounting policies

Summary of significant accounting policies and key accounting estimates

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

Statement of compliance

The financial statements of the charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) `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) (effective 1 January 2019)', Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Charities Act 2011. The financial statements have been prepared under the historical cost convention.

Basis of preparation

Cardiomyopathy UK meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy notes.

The significant accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented unless otherwise stated

The presentation currency of these financial statements is Sterling (£), being the currency of the primary economic market in which the entity operates. All amounts in these financial statements have been rounded to the nearest pound unless stated otherwise.

Going concern

The finance statements have been prepared on a going concern basis as the Trustees believe that no material uncertainties exist. The Trustees have considered the level of funds held and the expected level of income and expenditure for 12 months from authorising these financial statements. The budgeted income and expenditure is sufficient with the levels of reserves for the charity to be able to continue as a going concern.

Key sources of estimation uncertainty

Critical accounting judgements and key sources of estimation uncertainty

The charity makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing material adjustment to the carrying amounts of the assets and liabilities within the next financial year are addressed below.

Useful economic lives of tangible assets:

The annual depreciation charge for tangible assets is sensitive to changes in the estimated useful economic lives and residual values of the assets. The useful economic lives and residual values are reassessed annually. They are amended when necessary to reflect the current estimates, based on technological advancement, future investments, economic utilisation and physical condition of the assets. The carrying amount is £11,528 (2024 -£16,185).

Income and endowments

All income is recognised once the charity has entitlement to the income, it is probable that the income will be received and the amount of the income receivable can be measured reliably.

Donations and legacies

Donations are recognised when the charity has been notified in writing of both the amount and settlement date. In the event that a donation is subject to conditions that require a level of performance by the charity before the charity is entitled to the funds, the income is deferred and not recognised until either those conditions are fully met, or the fulfilment of those conditions is wholly within the control of the charity and it is probable that these conditions will be fulfilled in the reporting period.

Legacy gifts are recognised on a case by case basis following the grant of probate when the administrator/executor for the estate has communicated in writing both the amount and settlement date. In the event that the gift is in the form of an asset other than cash or a financial asset traded on a recognised stock exchange, recognition is subject to the value of the gift being reliably measurable with a degree of reasonable accuracy and the title to the asset having been transferred to the charity.

Grants receivable

Grants are recognised when the charity has an entitlement to the funds and any conditions linked to the grants have been met. Where performance conditions are attached to the grant and are yet to be met, the income is recognised as a liability and included on the balance sheet as deferred income to be released.

Gift aid

Incoming resources from tax reclaims are included in the Statement of Financial Activities at the same time as the gift to which they relate.

Expenditure

All expenditure is recognised once there is a legal or constructive obligation to that expenditure, it is probable settlement is required and the amount can be measured reliably. All costs are allocated to the applicable expenditure heading that aggregate similar costs to that category. Where costs cannot be directly attributed to particular headings

they have been allocated on a basis consistent with the use of resources, with central staff costs allocated on the basis of time spent, and depreciation charges allocated on the portion of the asset's use. Other support costs are allocated based on the spread of staff costs.

Raising funds

These are costs incurred in attracting voluntary income, the management of investments and those incurred in trading activities that raise funds.

Charitable activities

Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.

Support costs

Support costs include central functions and have been allocated to activity cost categories on a basis consistent with the use of resources, for example, allocating property costs by floor areas, or per capita, staff costs by the time spent and other costs by their usage.

Taxation

The charity is exempt from tax on its charitable activities. The charity is considered to pass the tests set out in Paragraph 1 Schedule 6 Finance Act 2010 and therefore it meets the definition of a charitable entity for UK Tax purposes. Accordingly, the charity is potentially exempt from taxation in respect of income or capital gains to the extent that such income or gains are applied exclusively to charitable purposes.

Tangible fixed assets

Individual fixed assets costing £500 or more are initially recorded at cost, less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Depreciation and amortisation

Depreciation is provided on tangible fixed assets so as to write off the cost or valuation, less any estimated residual value, over their expected useful economic life as follows:

Asset class
Computer equipment

Depreciation method and rate
Variable rates on reducing balance

Trade debtors

Trade debtors are amounts due from customers for merchandise sold or services performed in the ordinary course of business.

Trade debtors are recognised initially at the transaction price. They are subsequently measured at amortised cost using the effective interest method, less provision for impairment. A provision for the impairment of trade debtors is established when there is objective evidence that the charity will not be able to collect all amounts due according to the original terms of the receivables.

Cash and cash equivalents

Cash and cash equivalents comprise cash on hand and call deposits, and other short-term highly liquid investments that are readily convertible to a known amount of cash and are subject to an insignificant risk of change in value.

Trade creditors

Trade creditors are obligations to pay for goods or services that have been acquired in the ordinary course of business from suppliers.

Fund structure

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

Restricted income funds are those donated for use in a particular area or for specific purposes, the use of which is restricted to that area or purpose.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Pensions and other post retirement obligations

The charity operates a defined contribution pension scheme. Contributions payable to the charity's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

Financial instruments

Classification

The charity has applied the provisions of Section 11 "Basic Financial Instruments" and Section 12 "Other Financial Instrument Issues" of FRS 102 to its financial statements.

Recognition and measurement

Financial instruments are classified and accounted for, according to the substance of the contractual arrangement, as either financial assets, financial liabilities or equity instruments. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

3 Income from donations and legacies

	Unrestricted funds general (£)	Restricted funds (£)	Total 2025 (£)
Donations and legacies			
Donations	154,961	-	154,961
Legacies	83,279	-	83,279
Grants, including capital grants			
Grants	-	287,115	287,115
Fundraising	529,994	-	529,994
	768,234	**287,115**	**1,055,349**

	Unrestricted funds general (£)	Restricted funds (£)	Total 2024 (£)
Donations and legacies			
Legacies	120,224	-	120,224
Grants, including capital grants			
Grants	-	264,594	264,594
Fundraising	584,151	-	584,151
	704,375	**264,594**	**968,969**

	Unrestricted (£)	Restricted (£)	2025 Total (£)	2024 Total (£)
Crucial	-	1,131	1,131	-
Browns Solicitors - Advovacy	-	60,000	60,000	30,000
The Hospital Saturday Fund	-	2,000	2,000	-
National Lottery	-	120,984	120,984	89,081
The D'oyly Carte Charitable Trust	-	6,000	6,000	-
Burdett Trust	-	-	-	57
National Survey project	-	-	-	35,000
The Childwick Trust	-	15,000	15,000	-
AstraZeneca (Med Ed)	-	15,000	15,000	15,000
Tenaya	-	-	-	40,200
Bristol-Myers Squibb Pharmaceuticals Limited	-	32,000	32,000	-
Cytokinetics	-	35,000	35,000	15,256
Alnlam	-	-	-	10,000
Devolved Nations	-	-	-	30,000
	-	287,115	287,115	264,594

4 Income from charitable activities

	Restricted funds (£)	Total 2025 (£)
Research	47,700	47,700
	Restricted funds (£)	**Total 2024 (£)**
Research	42,700	42,700

5 Income from other trading activities

	Unrestricted funds general (£)	Total funds (£)
Trading income		
Other trading income	8,564	8,564
Total for 2025	8,564	8,564
Total for 2024	32,433	32,433

6 Investment income

	Unrestricted funds general (£)	Total funds (£)
Interest receivable and similar income		
Interest receivable on bank deposits	13,383	13,383
Total for 2025	13,383	13,383
Total for 2024	10,576	10,576

7 Expenditure on raising funds

	Direct costs (£)	Total 2025 (£)	Total 2024 (£)
Costs of generating donations and legacies	363,073	363,073	326,868
Breakdown of costs:		**2025 (£)**	**2024 (£)**
Staff costs		191,599	202,735
Rates and water		1,030	713
Insurance		600	486
Postage and stationery		1,597	349
Sundries		2,793	3,670
Event costs		67,927	58,551
Marketing		52,889	29,460
Travel and subsistence		997	412
Computer		1,027	634
Recruitment		1,984	628
Staff training		1,290	1,140
Rent		5,656	5,280
Professional fees		1,458	6,297
Donation charges		18,239	14,752
Bank charges		-	203
Subscriptions		13,987	-
Depreciation		-	1,558
		363,073	**326,868**

8 Expenditure on charitable activities

	Unrestricted funds general (£)	Restricted funds (£)	Total funds (£)
Providing support	150,634	154,075	304,709
Public and medical education	98,485	23,682	122,167
Campaigning	31,230	93,787	125,017
Research	60,106	94,540	154,646
Other	133,594	34,377	167,971
Total for 2025	**474,049**	**400,461**	**874,510**
Total for 2024	**436,466**	**278,111**	**714,577**

	Activity undertaken directly (£)	Total expenditure (£)
Providing support	304,709	304,709
Public and medical education	122,167	122,167
Research	154,646	154,646
Campaigning	125,017	125,017
Other	167,971	167,971
Total for 2025	**874,510**	**874,510**
Total for 2024	**714,577**	**714,577**

9 Other expenditure

	Unrestricted funds general (£)	Total funds (£)
Staff costs		
Wages and salaries	83,822	83,822
Allocated support costs	49,772	49,772
Total for 2025	133,594	133,594
Total for 2024	108,509	108,509

10 Analysis of supporter costs

Support costs allocated to charitable activities.

	Other support costs (£)	Total 2025 (£)	Total 2024 (£)
Audit fees	6,420	6,420	6,000
Rent	29,635	29,635	4,224
Office expenses	8,656	8,656	46,246
Bank charges	404	404	143
Depreciation of fixed assets	4,657	4,657	1,247
	49,772	49,772	57,860

11 Net incoming/outgoing resources

Net outgoing resources for the year include:

	2025 (£)	2024 (£)
Audit fees	6,760	6,000
Other non-audit services	1,099	1,084
Depreciation of fixed assets	4,657	7,793

12 Trustees remuneration and expenses

During the year the charity made the following transactions with trustees:

During the year trustees were reimbursed expenses of £Nil (2024: £Nil) for equipment purchased for the charity and travel and subsistence expenses of £6,341 (2024: £4,302).

No trustees, nor any persons connected with them, have received any remuneration from the charity during the year.

No trustees have received any other benefits from the charity during the year.

13 Staff costs

Staff costs during the year were:	2025 (£)	2024 (£)
Wages and salaries	650,350	491,207
Social Security costs	67,975	161,939
Other pension costs	17,465	47,539
	735,790	**700,685**

The monthly average number of persons (including senior management / leadership team) employed by the charity during the year expressed as full time equivalents was as follows:

	2025	2024
Employees	20	21

Contributions to the employee pension schemes for the year totalled £17,465 (2024 - £18,410).

During the year, the charity made ex-gratia termination payments which totalled £5,000 (2024 - £Nil). This amount was paid to a member of staff under a settlement agreement and separate from contractual notice pay. It is recognised on an accruals basis and was paid in full during the year, with no outstanding liability as the balance sheet date.

The charity operates a defined contribution pension scheme. The pension cost charge for the year represents contributions payable by the charity.

The number of employees whose emoluments fell within the following bands was:

	2025	2024
£60,001 - £70,000	2	1
£80,001 - £90,000	0	1

The total employee benefits of the key management personnel of the charity were £82,797 (2024 - £85,604).

14 Taxation

The charity is a registered charity and is therefore exempt from taxation.

15 Tangible fixed assets

	Furniture and equipment (£)	Total (£)
Cost		
At 1 January 2025	58,067	58,067
At 31 December 2025	58,067	58,067
Depreciation		
At 1 January 2025	41,882	41,882
Charge for the year	4,657	4,657
At 31 December 2025	46,539	46,539
Net book value		
At 31 December 2025	11,528	11,528
At 31 December 2024	16,185	16,185

16 Debtors

	2025 (£)	2024 (£)
Trade debtors	12,280	36,180
Prepayments and accrued income	181,427	182,584
Other debtors	2,112	-
	195,819	**218,764**

17 Cash and cash equivalents

	2025 (£)	2024 (£)
Cash on hand	129	61
Cash at bank	56,776	47,898
Short-term deposits	515,152	556,395
	572,057	**604,354**

18 Creditors: amounts falling due within one year

	2025 (£)	2024 (£)
Trade creditors	21,925	4,387
Other taxation and social security	17,408	14,907
Other creditors	5,420	15,060
Accruals	104,553	62,264
	149,306	**96,618**

Included in accruals are deferred income amounts of £90,910 (2024: £48,647), these are donations for fundraising events that are taking place in the next year.

19 Obligations under leases and hire purchase contracts

Operating lease commitments

Total future minimum lease payments under non-cancellable operating leases are as follows:

	2025 (£)	2024 (£)
Land and buildings		
Within one year	26,400	26,400
Between one and five years	79,200	79,200
After five years	24,200	50,600
	129,800	156,200

Lease payments of £29,636 were expensed in the year.

20 Funds

	Balance at 1 January 2025 (£)	Incoming resources (£)	Resources expended (£)	Transfers (£)	Balance at 31 December 2025 (£)
Unrestricted funds					
General fund	564,589	790,181	(827,490)	(1,460)	525,820
Restricted funds					
Lottery Thriving	38,470	120,984	(133,064)	(123)	26,267
Youth services	1	-	-	(1)	-
Browns Advocacy	22,668	60,000	(43,730)	243	39,181
Community Peer Support (National Lottery Community Fund)	(5)	-	-	5	-
Online Medical Education	8,683	15,000	(23,682)	(1)	-
Devolved Nations	52,642	-	(20,056)	-	32,586
Awareness Campaign	-	37,000	(34,334)	-	2,666
Trust Income	-	23,000	(23,000)	-	-
Researching Further	2,862	-	(2,862)	-	-
National Survey	41,082	-	(41,094)	12	-
CureHeart	13,362	47,700	(57,485)	-	3,577
Research appeal	276	-	(276)	-	-
Crucial	(1,945)	1,131	(511)	1,325	-
Tackling Inequality	-	30,000	(30,000)	-	-
Total restricted funds	**178,096**	**334,815**	**(410,094)**	**1,460**	**104,277**
Total funds	**742,685**	**1,124,996**	**(1,237,584)**	**-**	**630,097**

	Balance at 1 January 2024 (£)	Incoming resources (£)	Resources expended (£)	Balance at 31 December 2024 (£)
Unrestricted funds				
General fund	678,875	747,384	(861,670)	564,589
Restricted				
Lottery Thriving	-	61,243	(22,773)	38,470
Youth services	1	-	-	1
Browns Advocacy	22,141	30,000	(29,473)	22,668
Community Peer Support (National Lottery Community Fund)	10,918	27,839	(38,762)	(5)
Online Medical Education	18	45,100	(36,435)	8,683
Devolved Nations	34,725	-	(12,083)	22,642
Researching Further	-	15,036	(12,174)	2,862
CAF Support Fund	309	-	(309)	-
BMS Grant	20,362	-	(20,362)	-
BMS Voice	17,781	-	(17,781)	-
Masonic Charitable Fund	17,008	-	(17,008)	-
National Survey	30,553	35,000	(24,471)	41,082
Cure Heart	5,270	42,700	(34,608)	13,362
Delivering for our community	-	20,100	(20,100)	-
Developed Nations	-	30,000	-	30,000
Research appeal	-	276	-	276
Crucial	-	-	(1,945)	(1,945)
Total restricted funds	**159,086**	**307,294**	**(288,284)**	**178,096**
Total funds	**837,961**	**1,054,678**	**(1,149,954)**	**742,685**

The specific purposes for which the funds are to be applied are as follows:

Thriving together (Lottery)

A 3-year project partly funded by the national lottery community fund to develop an innovative face to face and phone peer support service for people with life limiting heart muscle disease throughout England. This includes enhancements in our service delivery that is centred around mental health, wellbeing and welfare.

Advocacy

To cover the costs associated with the charity's regional advocacy volunteers and national advocacy work to improve access to treatment for people with cardiomyopathy.

Community Peer Support (National Lottery Community Fund)

A five year project partly funded by the National Lottery Community Fund to develop an innovative face to face and phone peer support service for people with life limiting heart muscle disease throughout England.

Online Medical Education

To fund the charity's online medical information and learning resource for healthcare professionals.

Reaching Further

A grant to enable the charity to create impactful awareness raising and support content that can reach more people who have cardiomyopathy or who are at risk of having the condition.

CAF support fund

Funding to ensure that the charity can continue to deliver its core services and improve its ability to reach more communities and individuals affected by cardiomyopathy. This funding has been received from the Charities Aid Foundation's coronavirus emergency fund.

BMS Grant

Funding from the pharmaceutical company, Bristol Myers Squibb to cover the costs of the charity's national conference, website, outreach and awareness work.

BMS Patient Voice

Funding from the pharmaceutical company, Bristol Myers Squibb to support a program which will use patient experiences to help shape and improve the support and treatment of cardiomyopathy.

Masonic Charitable Fund

2-year grant to fund the development of the Youth Support Program.

National Survey

To fund the charity's national state of cardiomyopathy survey ensuring that the charity is able to provide robust evidence to underpin its advocacy work and provide insights as to how to best target its services.

CureHeart

Income received from the British Heart Foundation funded CureHeart research project looking for genetic cures for cardiomyopathy. Funds go towards the charity's expenditure relating to providing service user insights as part of the research team.

Delivering for our community

To fund part of the deliverance of the annual Cardiomyopathy UK conference.

Devolved Nations

Covers the cost of our advocacy work and enhancing our policy and advocacy activity - working to improve access to care and treatment for people affected by cardiomyopathy - across all UK devolved nations.

Crucial

An international research partnership aiming to understand the heart-brain axis, particularly the role of the microvasculature in impacting cognitive decline. The funds received are to cover our patient insight and dissemination activities in relation to the project.

Awareness

To fund the charity's marketing activity and events, raising awareness of cardiomyopathy and the support available to those affected, ensuring we are able to reach and engage with as wide an audience as possible.

The transfers are amounts from unrestricted funds to cover over spends on restricted funds. There were some pound roundings that were transferred the other way, the total was £2. There were some adjustments to Lottery Thriving and Browns Advocacy, these were due to previous mis-allocations.

21 Analysis of net assets between funds

	Unrestricted funds general (£)	Restricted funds (£)	Total funds at 31 December 2025 (£)
Tangible fixed assets	11,528	-	11,528
Current assets	663,599	104,277	767,876
Current liabilities	(149,306)	-	(149,306)
Total net assets	**525,821**	**104,277**	**630,098**

	Unrestricted funds general (£)	Restricted funds (£)	Total funds at 31 December 2024 (£)
Tangible fixed assets	16,185	-	16,185
Current assets	645,022	178,096	823,118
Current liabilities	(96,618)	-	(96,618)
Total net assets	**564,589**	**178,096**	**742,685**

22 Related party transactions

There were no related party transactions in the year.

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the heart muscle charity

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Cardiomyopathy UK is registered as a charity in England and Wales (no. 1164263) and in Scotland (no. SC053398)