

AAMRI MEMBERS REPORT 2016

ABOUT AAMRI

AAMRI is the peak body representing medical research institutes (MRIs) across Australia.

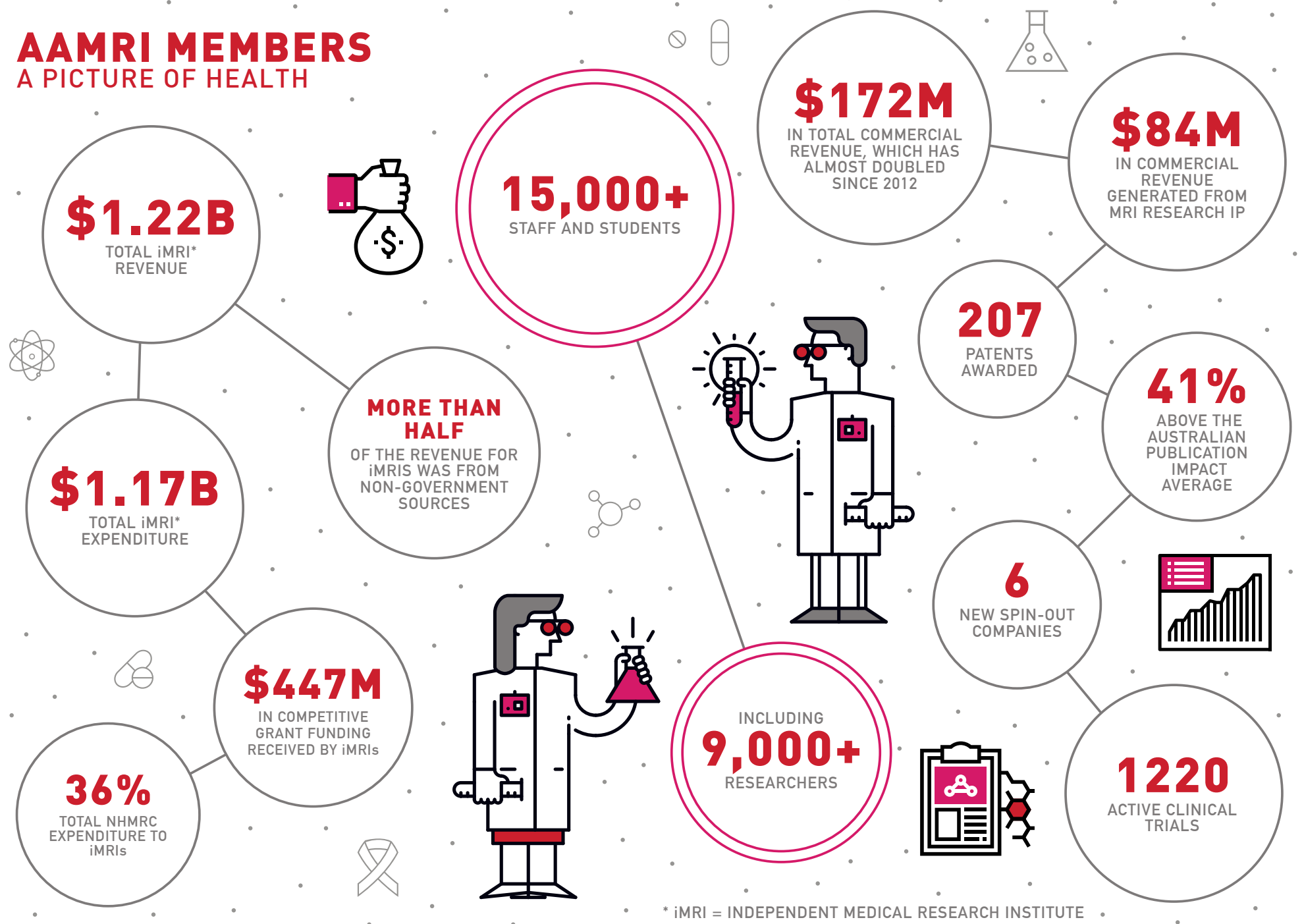
Our 47 member organisations are internationally recognised leaders in health and medical research. The majority of our members are 'independent' MRIs, that is, mission-driven charities legally independent of a university or hospital, and co-located with a hospital or healthcare provider. The remainder of our members are university- and hospital-based institutes with a central focus on health and medical research. Collectively, independent MRIs have an annual turnover of more than \$1.2 billion, receive around a third of National Health and Medical Research Council (NHMRC) funding, and account for over 15,000 staff and students.

Australia's MRIs work on an extensive range of human health issues, from preventative health and chronic disease, to mental health, Indigenous health and improved health services. Their research ranges from fundamental biomedical discovery through to clinical research and the translation of research findings from bench to bedside. Together, they aim to drive innovation in healthcare to improve the lives and livelihoods of people in Australia and worldwide.



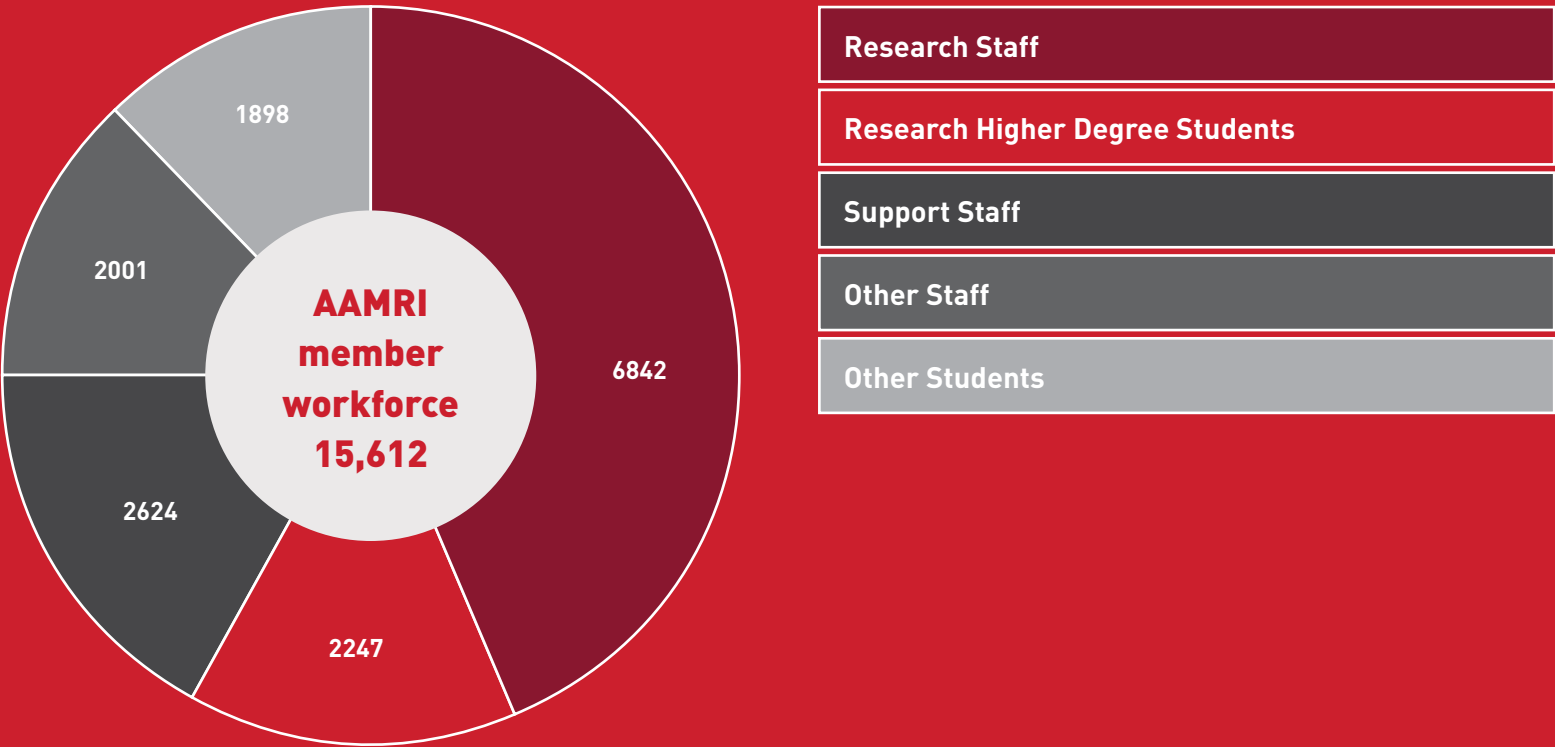
AAMRI MEMBERS

A PICTURE OF HEALTH



* iMRI = INDEPENDENT MEDICAL RESEARCH INSTITUTE

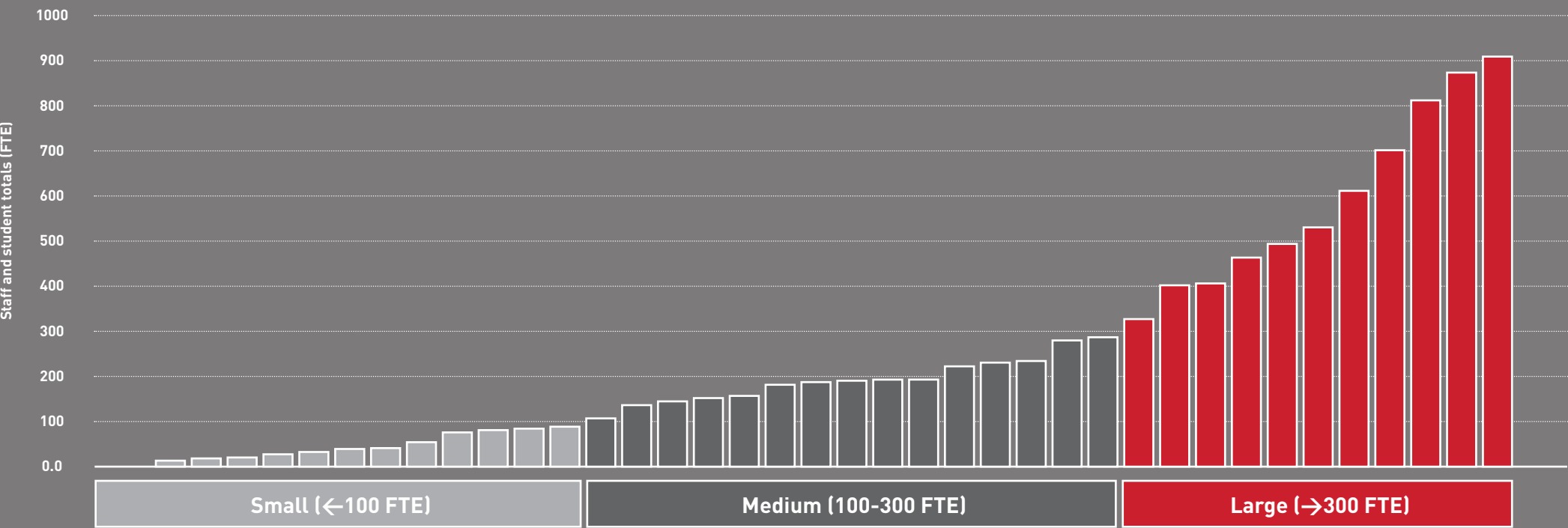
AAMRI MEMBERS HAVE MORE THAN 15,000 STAFF AND STUDENTS, INCLUDING 9,089 RESEARCHERS.



AAMRI member workforce breakdown (headcount)*.

* AAMRI member data includes 45 institutes. Workforce data was collected for research staff, research higher degree students (domestic and international), support staff including corporate and research services and other staff and students (includes international staff, visiting staff and students). Data reported here reflects workforce numbers as at July 1, 2015.

INDEPENDENT MEDICAL RESEARCH INSTITUTES (iMRIS) VARY IN SIZE FROM LESS THAN 10 STAFF AND STUDENTS TO MORE THAN 900 (FTE)*.



Diversity of iMRI size, represented by full-time equivalents (FTE) of all staff and students*

* includes 38 of 38 iMRIs. Data reported here reflects workforce numbers as at July 1, 2015.

OPENING THE BOOKS: AAMRI MEMBERS' FINANCIAL REPORT

REVENUE AND EXPENDITURE

- Medical research institute (MRI) income is used to fund research projects conducted at the institute including both direct research costs (i.e. salaries of researchers and costs of consumables used in experiments), and infrastructure support costs associated with the operations of the institute (e.g. electricity, laboratory equipment, research facilities and services, research governance, administration and support services, etc.). A full explanation of 'direct' and 'indirect' research costs is provided in the Glossary (page 22).
- MRIs receive income from a range of sources, including federal and state governments, trusts and foundations, bequests and donations, fundraising, and industry. As registered charities, MRIs attract substantial philanthropy into the sector. This extra stream of funding is a vital component of MRIs' revenue as it provides additional (often more discretionary) funding, for example, for blue-sky research projects that are often not successful in obtaining funding from more conservative government funding sources.

COMPETITIVE GRANT FUNDING

A large proportion of MRI income is sourced from research grants, primarily from competitive granting schemes. These schemes are funded by several sources including government, such as the National Health and Medical Research Council (NHMRC) and Australian Research Council (ARC), as well as trusts, foundations and international funding schemes.

INFRASTRUCTURE SUPPORT COSTS

- Infrastructure Support Costs are a substantial expense incurred by MRIs in providing the support services and facilities necessary to carry out research. These costs are normally not covered by research grants, which are only permitted to be used to directly fund research activities.
- MRIs obtain partial funding for infrastructure support costs from specific funding schemes from the NHMRC and some state governments, however, these schemes do not cover the full costs of doing research. Therefore, other funding sources such as philanthropy are used to subsidise infrastructure support costs, though sometimes with difficulty (i.e. philanthropic gifts often stipulate how the funding should be spent). This puts MRIs under increasing strain to meet basic operational costs such as those for electricity and staff for corporate support services. The use of these alternative funding sources to cover infrastructure support costs is not an attractive investment proposition for donors, philanthropists and industry.

AAMRI MEMBERS' REVENUE AND EXPENDITURE

KEY FINDINGS

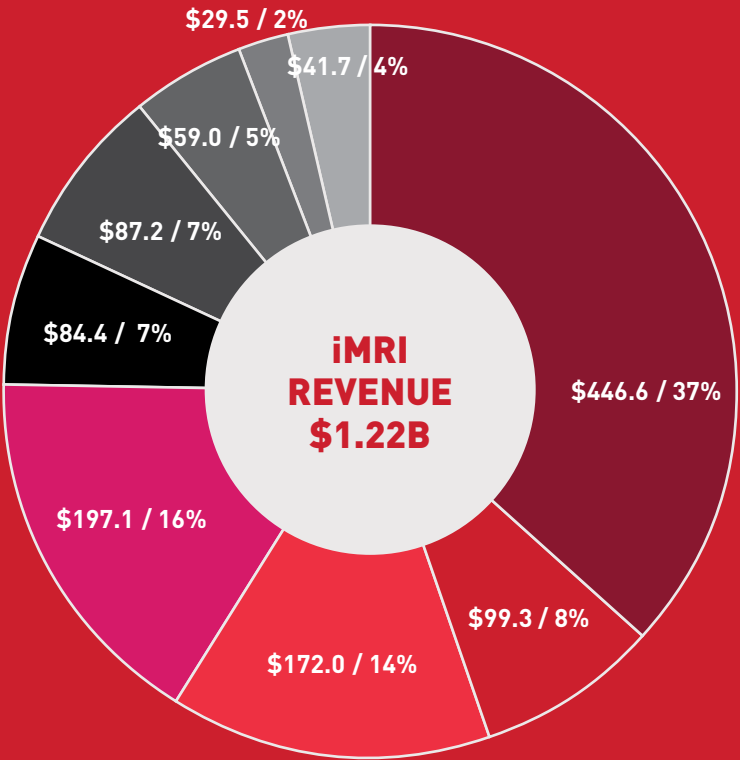
- iMRI revenue was \$1.22 billion in 2014, which has increased by 4% in the last two years (\$1.17B in 2012).
- Over half the funding to AAMRI member institutes was from non-government sources
- Commercial income almost doubled from 8% (\$89M) to 14% (\$172M) of total iMRI revenue in the last two years.
- 45% total income for independent medical research institutes (iMRIs) was derived from grants from both government and non-government sources.
- Overall, Australian iMRIs received about one eighth of their revenue from philanthropy, which increased from 13% (\$158M) to 16% (\$197M) of total iMRI revenue in the last two years.
- iMRI income received specifically for infrastructure support costs comprises 14% of total iMRI income (\$1.22B).
- Capital income greatly decreased from 12% (\$144M) to 2% (\$30M) of total iMRI revenue in the last two years.
- iMRI expenditure was \$1.17 billion in 2014, which has increased by 12% in the last two years (\$1.04B in 2012). The proportion of total expenditure spent in each category (research, infrastructure support, capital and other) has remained at similar levels.
- Expenditure on health and medical research across iMRIs, universities and government sectors was similar in 2012 and 2014.

AUSTRALIA'S iMRI SECTOR RECEIVED \$1.22B IN REVENUE IN 2014

Revenue of Australian iMRIs in 2014 by funding source (\$ millions).*

* iMRI data include 36 of 38 institutes. The collective income of all AAMRI members (40 of 45 institutes) was \$1.32B compared to \$1.22B for iMRIs. Total iMRI revenue has increased by 4% in the last two years (\$1.17B in 2012).

§ National Health and Medical Research Council (NHMRC) Independent Research Institute Infrastructure Support Scheme (IRIIS)



Competitive Grant Income

Non-competitive Grant Income

Infrastructure Support Income

Philanthropy

Commercial income (research)

Commercial income (other)

Investment income

Capital income

Other income

Competitive and non-competitive grant income - received from federal, state and local governments, trusts and foundations, and international sources.

Infrastructure Support Income - funding received specifically for costs associated with infrastructure support for research activities e.g. NHMRC IRIIS§, state government schemes for Infrastructure support, income for infrastructure support from affiliated universities.

Philanthropy includes revenue from bequests, donations and fundraising activities (excludes Trusts and Foundations grants).

Commercial income (research) - revenue raised as a direct result of intellectual property (IP) generated by research at the institute e.g. licences, royalties, options or industry funding for research activities through collaboration.

Commercial income (other) - income from other sources that are not based on institute-generated IP or direct research activities. e.g. providing clinical trials as a service, renting floor space.

Investment Income - income generated from Investment Income - income generated from investments e.g. interest.

Capital income - funding received for major buildings projects.

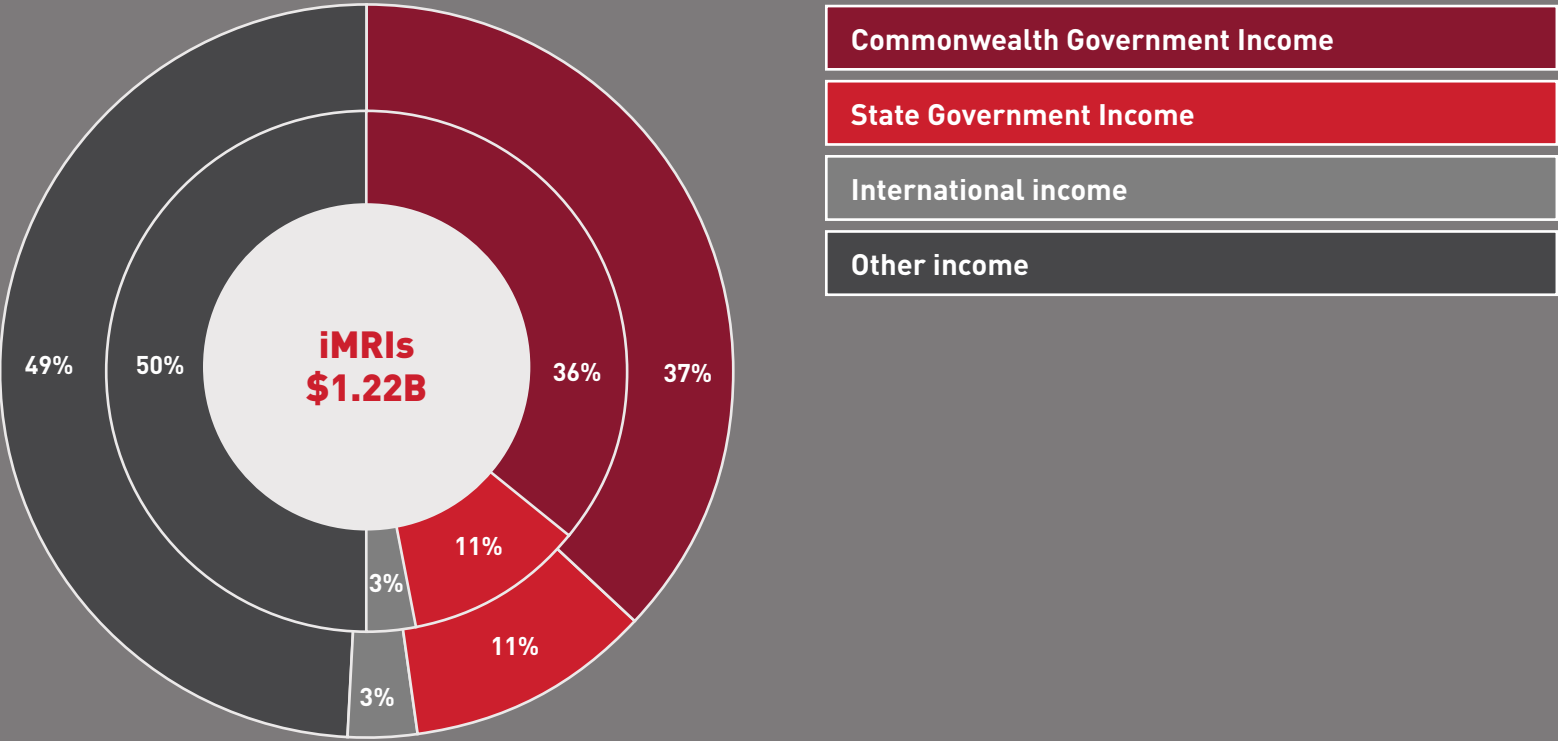
Other income - other miscellaneous income.

OVER HALF THE FUNDING TO AAMRI MEMBER INSTITUTES WAS FROM NON-GOVERNMENT SOURCES

Total funding for AAMRI members from the Commonwealth and State governments, and international funding schemes**.

* iMRI data include 36 (of 38) institutes and all AAMRI members include 40 (of 45) institutes.
Total Funding includes Capital Income. Total Funding includes Capital Income of \$7.8M from the Commonwealth Government and \$7M from State Governments.

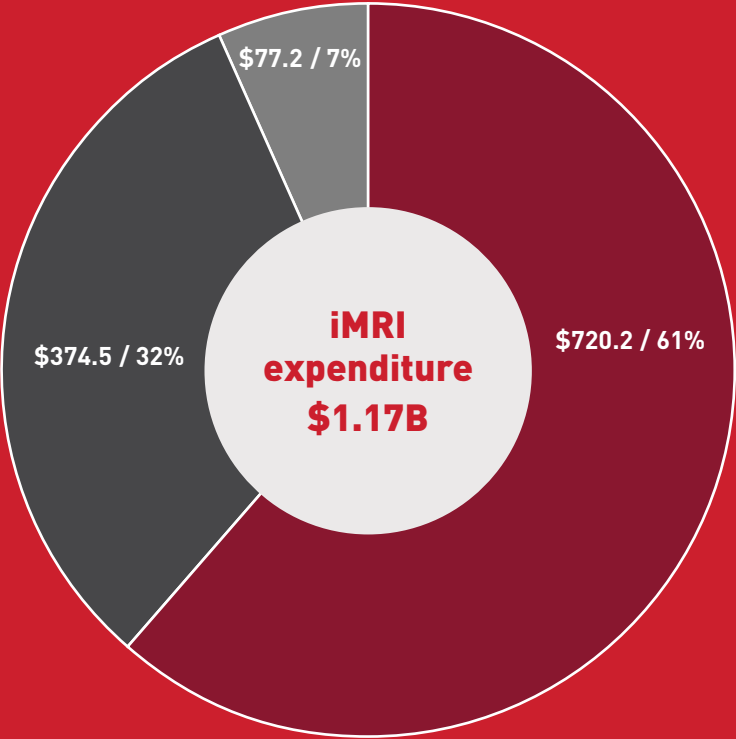
AAMRI members \$1.32B



AUSTRALIA'S iMRI SECTOR HAD OUTLAYS OF \$1.17B IN 2014.

Expenditure of Australian iMRIs in 2014 by activity (\$ millions).*,†

* iMRI data include 36 (of 38) institutes. The collective expenditure of all AAMRI members (40 institutes) was \$1.24B compared to \$1.17B for iMRIs. Total iMRI expenditure has increased by 12% in the last two years (\$1.04B in 2012).† Infrastructure support costs excludes extraordinary depreciation of assets.



Research Expenditure

Infrastructure support costs

Other Expenditure

Research expenditure - research staff salaries and on-costs, research consumables, specialised equipment purchased specifically for an individual research project (i.e. included on the budget of a grant proposal), travel expenses required for the successful completion of a research project, other direct research expenses normally attributable to a research grant.

Infrastructure support costs¹ (i.e. indirect research costs) –includes salaries and expenses related to laboratory support services (e.g. animal house, imaging facilities, flow cytometry), general laboratory equipment, salaries and expenses of professional support services (e.g. administration, IT, human resources, OH&S, finance, business development and commercialisation, operations, public relations, executive staff, ethics committees, grant office), operational and maintenance costs of infrastructure (e.g. electricity, cleaning, rent, waste removal, security), and travel expenses not attributable to a grant.

Other expenses - expenditure for activities unrelated to research such as health service delivery and engagement activities (e.g. fundraising costs).

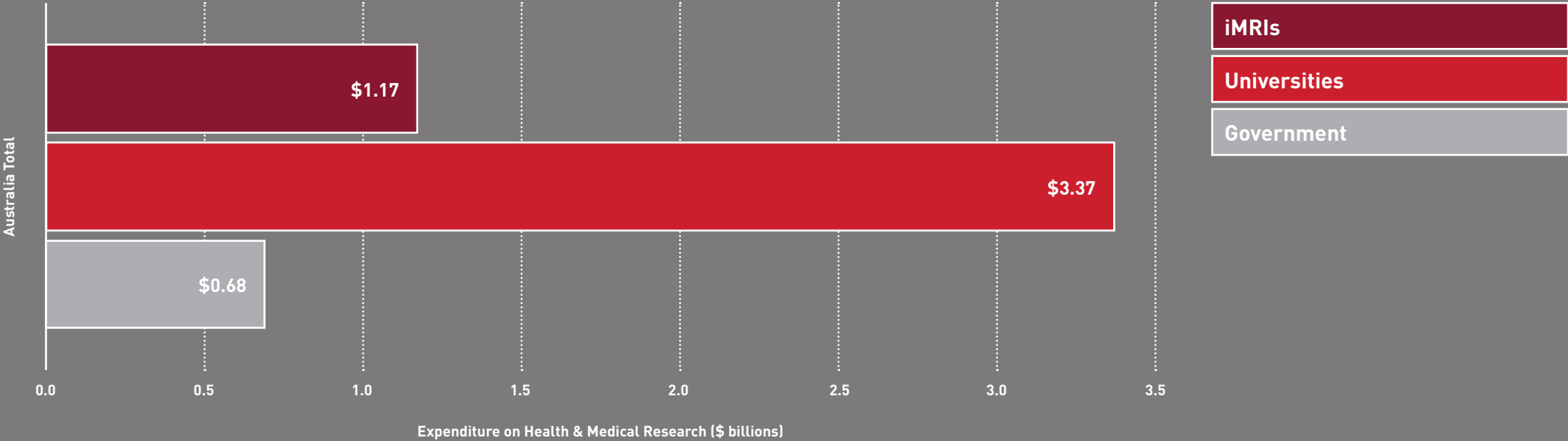
EXPENDITURE ON HEALTH AND MEDICAL RESEARCH FOR THE iMRI SECTOR
WAS AROUND ONE THIRD OF THAT FOR UNIVERSITIES.*,†

Expenditure on health and medical research in 2014 by performing sector and region.*

* iMRI data includes 36 of 38 institutes. Excludes extraordinary depreciation of assets.

† Figures refer to the sector performing the research, not the sector funding the research, and include direct and infrastructure support costs. Data for universities and government sector refers to research classified under the socio-economic objective of Health. Universities include universities and other institutions of post-secondary education regardless of their source of finance or legal status, excluding colleges of Technical and Further Education. Government comprises intramural expenditure on health research by all government units of the Australian government, each state and territory government, and all local government authorities.

Sources: University expenditure obtained from ABS 81110D0006_2014, Higher Education Organisations, Table 3.4 Higher education expenditure on R&D, by location and socio-economic objective, 2014, released: 17 May 2016. Government expenditure obtained from ABS 81090D0003_201213 Research and Experimental Development, Government and Private Non-Profit Organisations, Australia, 2012-2013, Table 3.3 Government expenditure on R&D, by socio-economic objective, 2012-13, released: 9 Jul 2014.



AAMRI MEMBERS' COMPETITIVE GRANT FUNDING

KEY FINDINGS

- **iMRIs received most of their competitive grant funding (65%) from NHMRC¹ schemes**, followed by 22% from non-ACGR² competitive schemes, and a further 22% from other ACGR schemes (including ARC³).
- **iMRIs received 36% of the total NHMRC expenditure for competitive schemes in 2014.** iMRIs also received 42% of all NHMRC Fellowship funding, 36% of the total NHMRC Project grant funding, and 46% of the total Program Grant and Centre for Research Excellence funding.
- **iMRIs received the majority (35-40%) of their competitive grant funding from NHMRC Project grants.**

¹ National Health and Medical Research Council (NHMRC)

² Australian Competitive Grants Register (ACGR)

³ Australian Research Council (ARC)

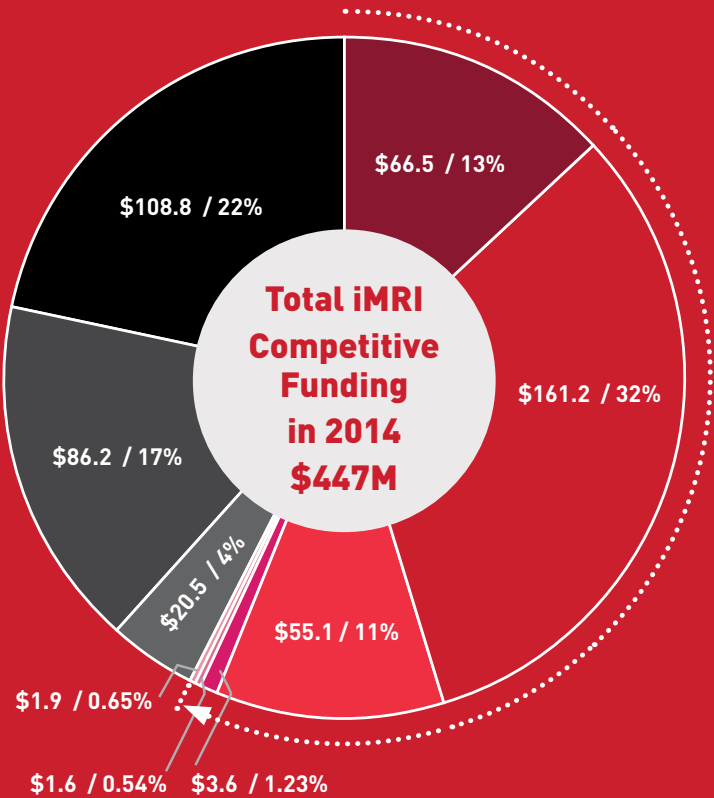
iMRIS RECEIVED \$447M IN COMPETITIVE FUNDING FOR RESEARCH IN 2014.

Total competitive funding to iMRIs in 2014, by funding source (\$ millions). iMRIs received \$290M (65%) in NHMRC¹ competitive funding, \$20.4M (4%) in ARC² funding and \$136M (33%) in other competitive funding from Australian and International schemes in 2014.

* Includes data for 36 (of 38) iMRIs.¹ National Health and Medical Research Council (NHMRC),² Australian Research Council (ARC),³ Centres of Research Excellence (CoE),⁴ Excludes IRISS funding and funds provided by an administering iMRI to collaborating institutions

The NHMRC reported that iMRIs received 24% (\$202M) of NHMRC funding in 2014, differing from AAMRI data by 12% percentage points (~\$88M). This discrepancy is likely due to the NHMRC reporting on the administering institute, rather than the institute performing the research. Of AAMRI's members, more than 60% predominantly or entirely administer their grants through an affiliated university.

Sources: NHMRC expenditure - 2._summary_tables_2000_-_2015.xlsx
<https://www.nhmrc.gov.au/grants-funding/research-funding-statistics-and-data>



| |
|------------------------------------|
| NHMRC Programs / CoE ³ |
| NHMRC Projects |
| NHMRC Fellowships |
| NHMRC Scholarships |
| NHMRC Equipment Grants |
| Other NHMRC Grants |
| ARC Funding |
| Other ACGR Funding |
| Other Competitive Grants |
| International Competitive Grants |
| ◀ Total NHMRC funding \$290M |

- **NHMRC¹ funding** refers to funding received in 2014 by iMRIs from NHMRC and from other administering organisations, regardless of award year for the grant⁴.

NHMRC schemes:
<https://www.nhmrc.gov.au/grants-funding/apply-funding>
- **Australian Research Council (ARC) funding** includes Future Fellowships, ARC Linkage Grants, and ARC grants on which an MRI was a partner organisation.
- **Other ACGR funding** includes all other Australian Competitive Grants Register (ACGR) schemes.
- **Other Competitive Grants** includes other Australian Competitive grant schemes.
- **International Competitive Grants** includes funding from any competitive scheme administered by an international body.

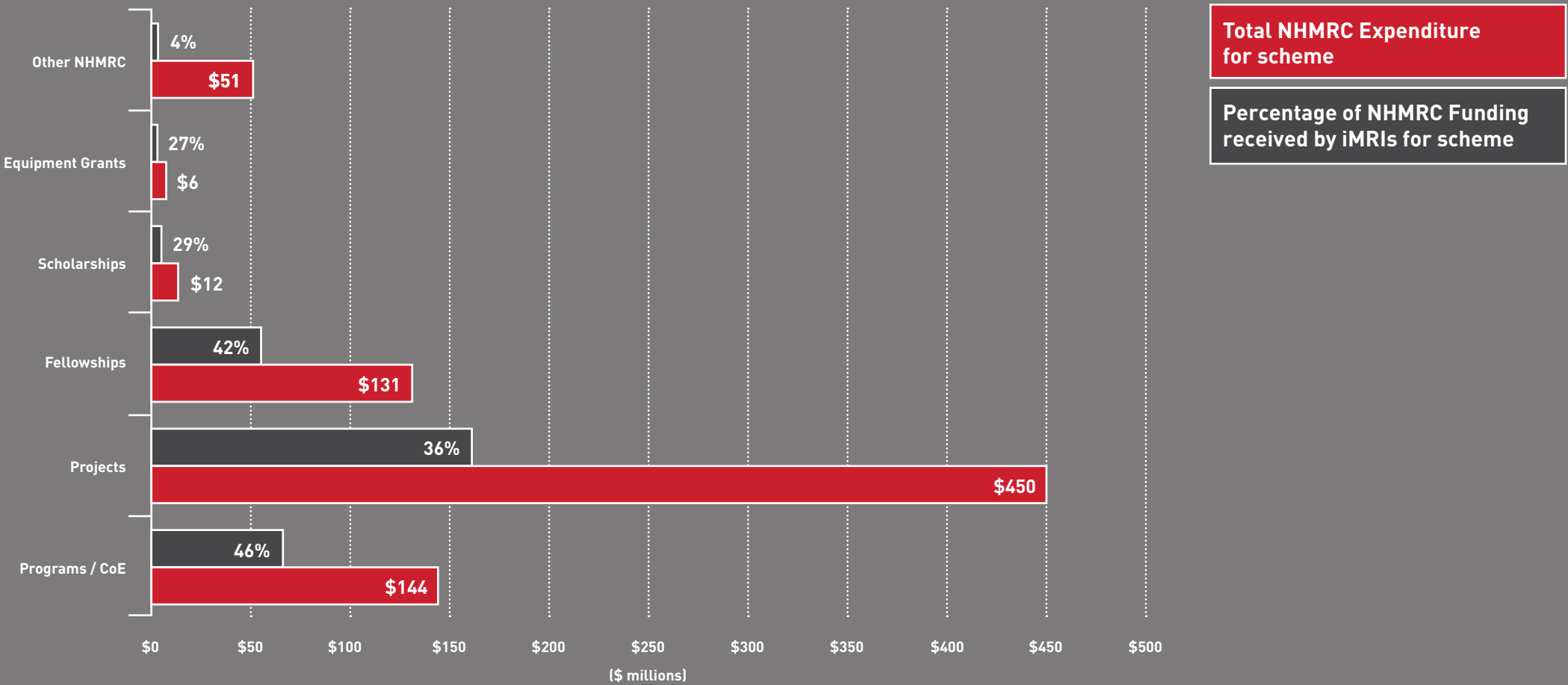
iMRIS RECEIVED 46% (\$67M) OF THE TOTAL NHMRC FUNDING FOR PROGRAM AND COE¹ GRANTS, AND 36% (\$161M) OF TOTAL NHMRC FUNDING FOR PROJECT GRANTS IN 2014*.

NHMRC funding received by iMRIs for each NHMRC grant or fellowship scheme in 2014 (\$ millions).*#.

* Includes data for 36 (of 38) iMRIs.

¹ Centre of Research Excellence (CoE)

Source: 2_summary_tables_2000_-_2015.xlsx <https://www.nhmrc.gov.au/grants-funding/research-funding-statistics-and-data>



INFRASTRUCTURE SUPPORT COSTS FOR AAMRI MEMBER INSTITUTES

KEY FINDINGS

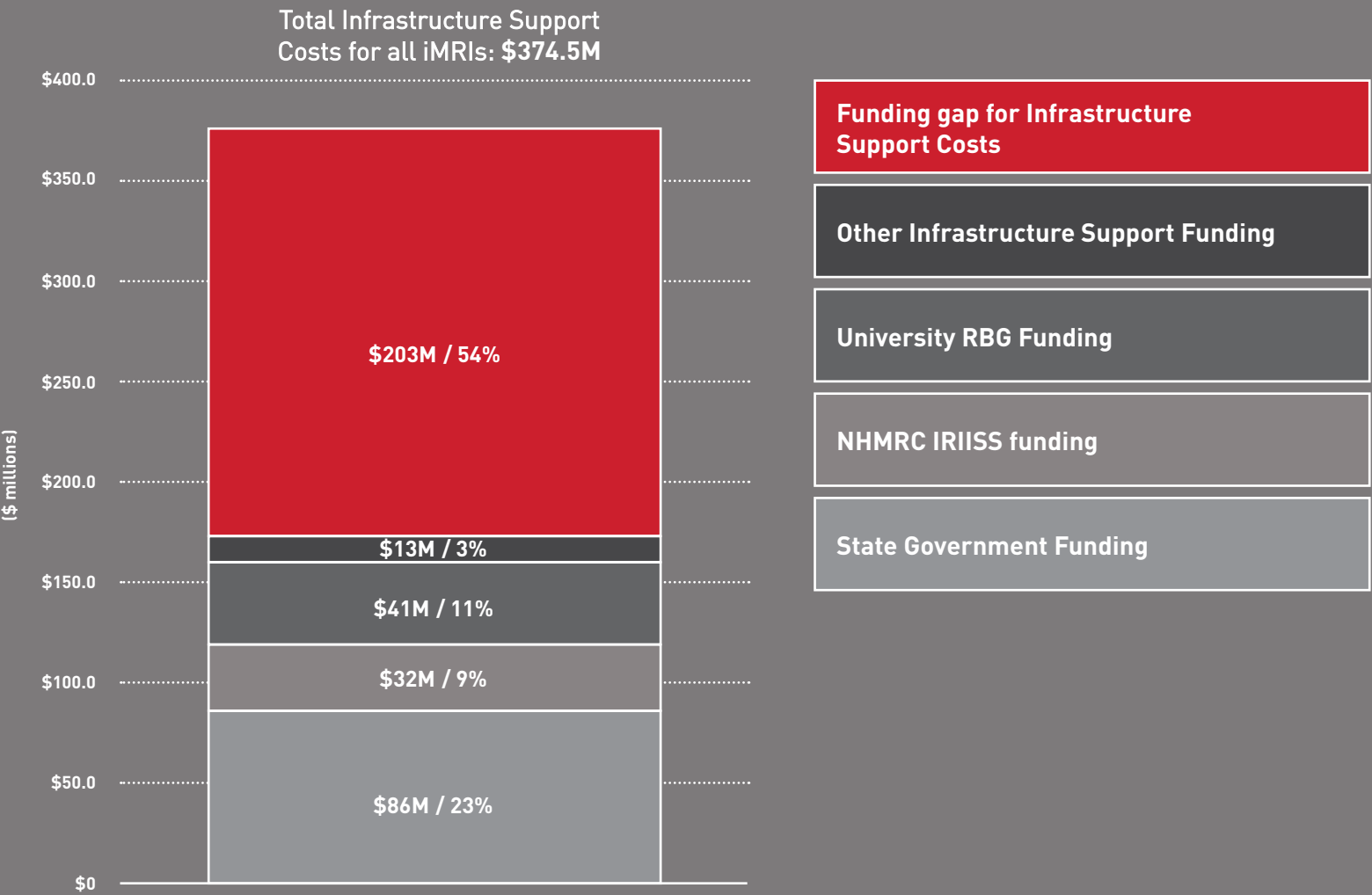
- iMRIs received less than half the funding needed to meet the infrastructure support costs associated with medical research activities in 2014, leaving a funding gap of \$203M that iMRIs were required to raise from other sources.
- The funding shortfall for Australian iMRI's infrastructure support costs was 29 cents per dollar of research expenditure.
- Australia-wide, iMRIs received 12c of State Government funding for infrastructure support per dollar of research expenditure in 2014.

iMRIS NEEDED TO BRIDGE A \$203M FUNDING GAP FOR THE INFRASTRUCTURE SUPPORT COSTS ASSOCIATED WITH MEDICAL RESEARCH IN 2014. *,†

Infrastructure Support costs and funding for iMRIs in 2014 (\$ millions). *,†

* iMRI data includes 36 (of 38) institutes.

† Calculations of total infrastructure support costs do not include extraordinary depreciation of assets.



Funding Gap for infrastructure support costs (i.e indirect costs of research): Funding for infrastructure support costs at the current level provides only 46% of funding needed to support the total infrastructure costs for iMRIs.

Other infrastructure support revenue: Includes discretionary funding provided to some MRIs from other sources

University Research Block Grants (RBG): The Commonwealth Government provides RBGs under several schemes for university infrastructure support costs. MRIs are not eligible for RBGs directly but may receive partial funding from their affiliated universities.

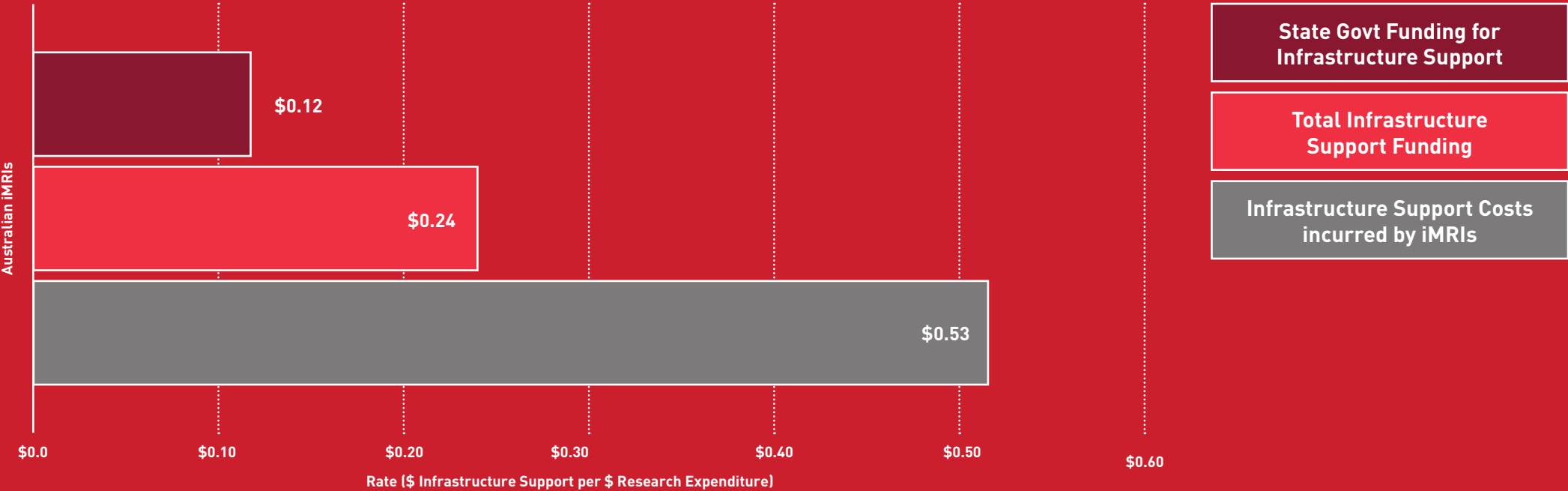
NHMRC IRISS funding: The NHMRC's Independent Research Institute Infrastructure Support Scheme (IRISS) provided 20 cents per dollar of NHMRC grant received by iMRIs. Universities are not eligible for this scheme.

State Government funding: Some state and territory governments provide partial funding for infrastructure support costs of iMRIs. Each state government has its own guidelines for the amount of funding support provided.

AUSTRALIAN iMRIs HAVE A FUNDING SHORTFALL FOR INFRASTRUCTURE SUPPORT COSTS OF 29 CENTS PER DOLLAR OF RESEARCH EXPENDITURE. *,†

Rates of infrastructure support funding for iMRIs per dollar of research expenditure in 2014.

* iMRI data include 36 of 38 institutes.
† Calculations of total infrastructure support costs do not include extraordinary depreciation of assets.



COMMERCIALISATION

MRIs engage in commercialisation activities to translate their research discoveries towards the marketplace. Metrics of commercialisation reported here represent data collected by AAMRI for a two year period (2014 and 2015) as well as data collected as part of the National Survey of Research Commercialisation (NSRC)² for all research sectors (including 17 AAMRI members).

PUBLICATIONS

Research conducted at MRIs is shared with the wider research community through publication in peer-reviewed journals. The quality of the publications can be estimated by how frequently they are cited by other researchers in their publications. Because different research fields have different average citation rates, the citation rate of a publication must be compared with the average citation rate of its field.

Information here is based on the NHMRC report *Measuring up 2013*,¹ which summarised the impact of journal publications in the period of 2005-2009 for universities, AAMRI members, and other research organisations.

KEY FINDINGS

Commercialisation

- AAMRI members were engaged in commercialisation activities resulting in 6 spin-out companies (in 2014 and 2015) and generating over \$84M in commercial revenue from intellectual property arising from MRI research discoveries (2014).
- 207 patents were awarded to AAMRI members in 2014-2015.
- The MRI sector generated \$29M income from active licenses, options and assignments (LOAs), where the average income per LOA was \$456K (3 times higher than the income per LOA in the university sector)².
- Active LOAs held by the MRI sector generated an average income per active LOA that was over twice that (\$457K) of the average across all Australian non-profit research sectors (\$210K). The MRI sector had 4% higher rate of LOAs yielding income than the average across all sectors (29%).

Publications

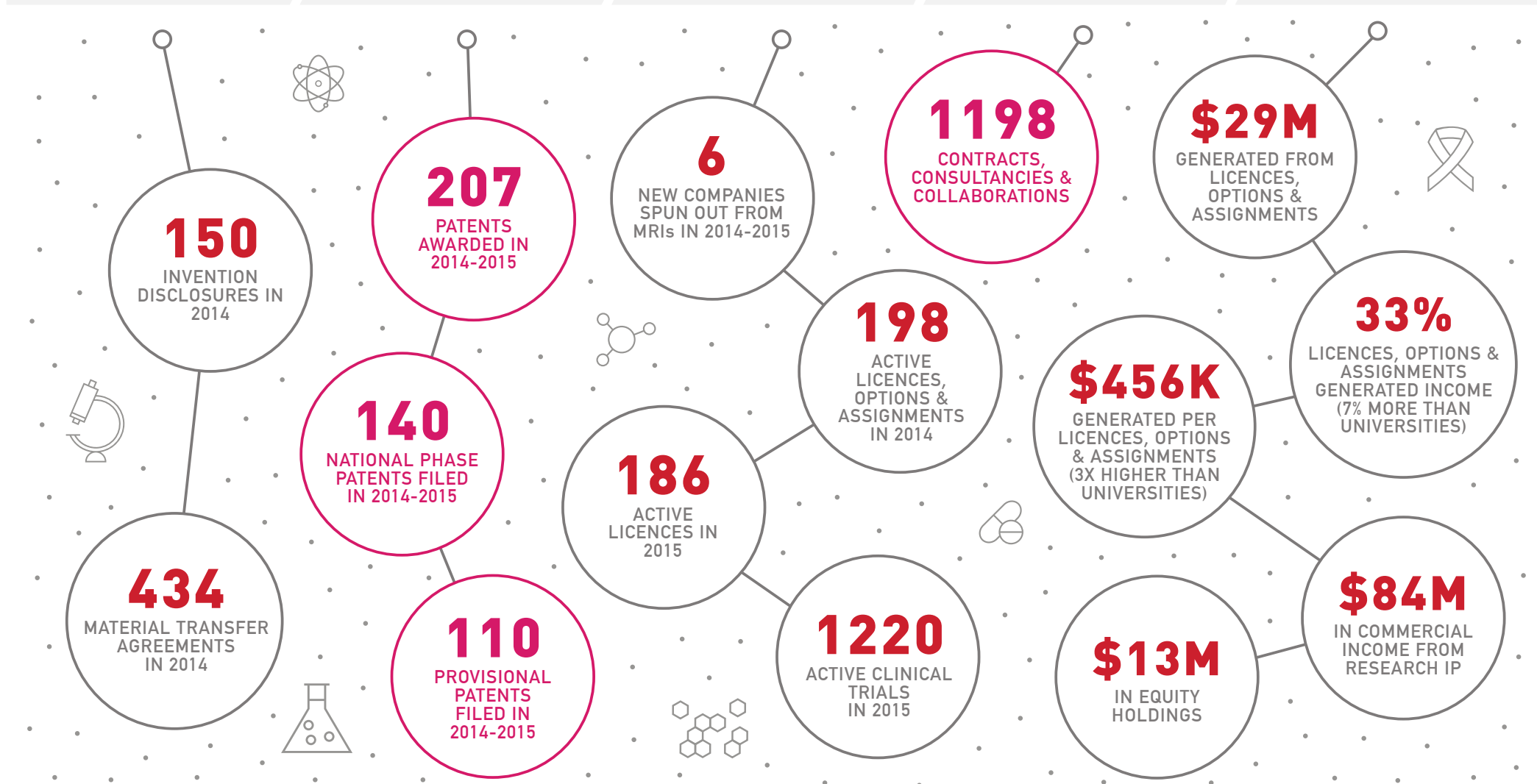
- Publications by AAMRI members had an impact 41% above the Australian average¹.
- Per dollar of health and medical research expenditure, AAMRI members had a biomedical publication output 5.5% greater than the university sector.

¹ NHMRC Report, *Measuring Up 2013*, based on publication data for 2005-2009.

² Data from the 2014 National Survey of Research Commercialisation (NSRC), Department of Industry, Innovation and Science (17 AAMRI members).

MRIs IN THE RESEARCH COMMERCIALISATION PIPELINE

(IN 2014 AND 2015)



33% OF ACTIVE LICENSES, OPTIONS OR ASSIGNMENTS (LOA) IN THE MRI SECTOR YIELDED INCOME IN 2014, WHICH WAS 7% MORE THAN THE UNIVERSITY SECTOR. THE AVERAGE INCOME PER LOA WAS THREE TIMES HIGHER THAN THE UNIVERSITY SECTOR (\$457K PER LOA).

Active licenses, options and assignments (LOAs) held by non-profit research sectors and income generated in 2014*.

| | Number of Institutions | Active LOAs held | Active LOAs yielding income | % active LOAs yielding income | Total income from active LOAs | Average income per active LOA |
|--------------|------------------------|------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|
| MRI* | 18 | 196 | 64 | 33% | \$29,223,844 | \$456,623 |
| PFR0# | 7 | 429 | 166 | 39% | \$46,082,534 | \$277,606 |
| Uni | 37 | 1609 | 419 | 26% | \$61,103,709 | \$145,832 |
| Total | 62 | 2233 | 649 | 29% | \$136,410,087 | \$210,185 |

* Of the 18 MRIs included in the table, 17 were AAMRI members. A total of 19 MRIs contributed data to the National Survey of Research Commercialisation (NSRC) where one nominated to be de-identified.

publicly funded research organisation (includes CSIRO)

Source: Department of Industry, Innovation and Science, National Survey of Research Commercialisation (NSRC) <http://www.industry.gov.au/innovation/NSRC/Data/Pages/default.aspx>



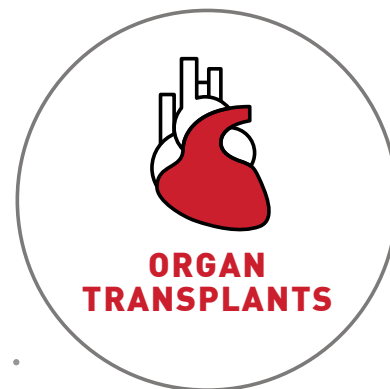
ALLERGIES

Peanut and other anaphylactic food allergies may soon be a thing of the past thanks to scientists at the Murdoch Childrens Research Institute. The Institute ran a successful clinical trial evaluating a treatment using probiotics and peanut oral immunotherapy.



CANCER

In a world-first clinical trial, researchers from Peter Mac and the Walter and Eliza Hall Institute have shown that patients with an advanced form of leukaemia can achieve complete remission with a novel tablet treatment.



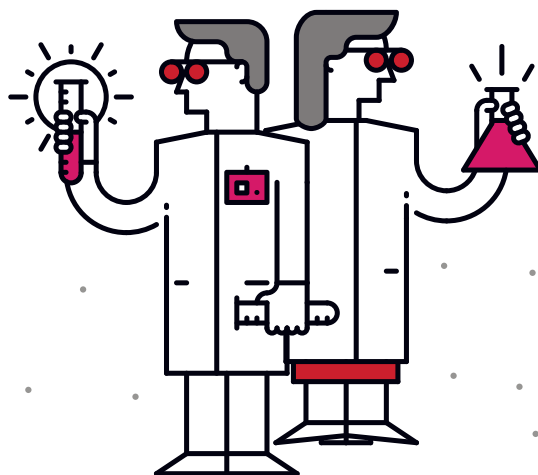
ORGAN TRANSPLANTS

A unique preservation solution developed at the Victor Chang Cardiac Research Institute has helped extend the amount of time a donor heart can spend in transit from 4 to as many as 14 hours.



GENETICS

The Garvan Institute is home to Australia's first clinical whole-genome sequencing service, which could triple diagnosis rates and provide answers to hundreds of thousands Australians living with rare genetic conditions.

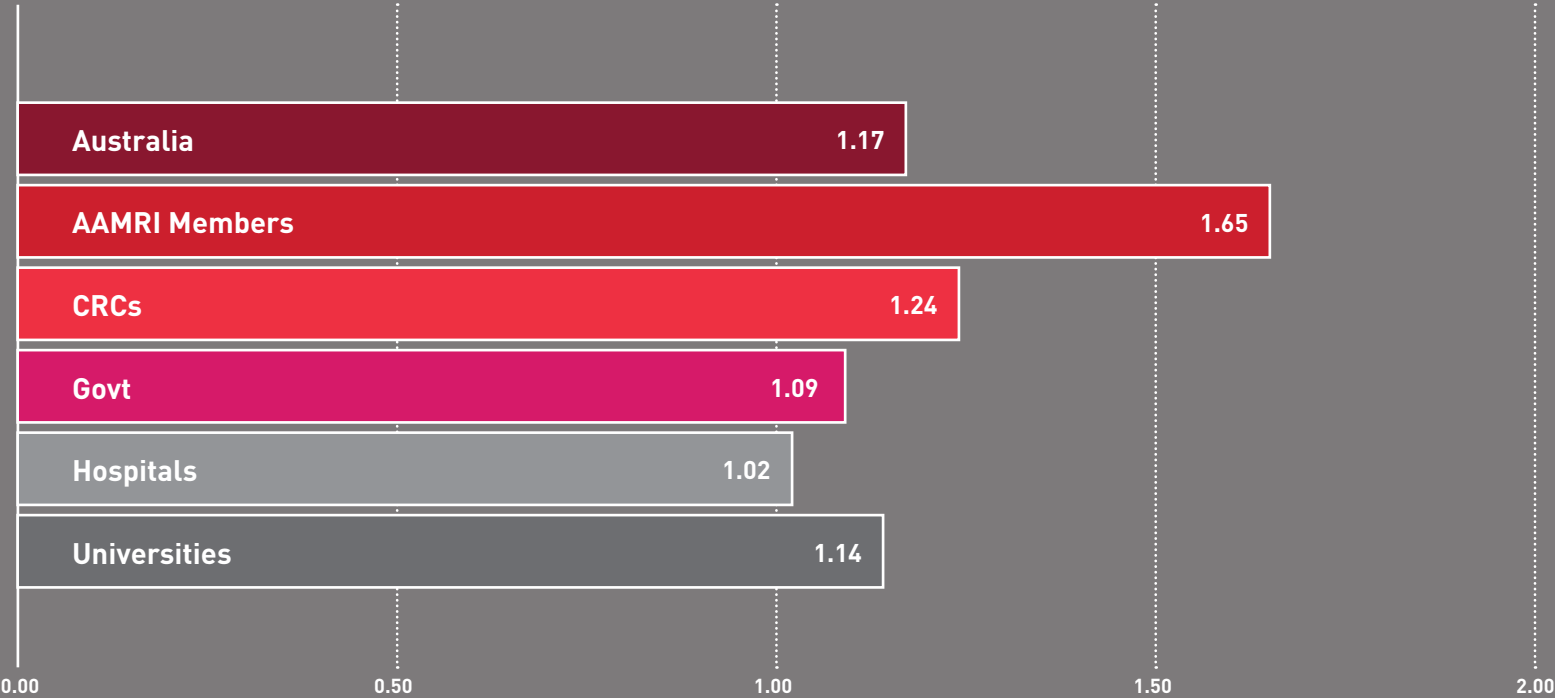


MENTAL ILLNESS

Researchers at QIMR Berghofer are working on a non-invasive treatment for mental health disorders, which uses magnetic fields to stimulate nerve cells.

* AT AAMRI MEMBER INSTITUTES IN 2015

RESEARCH PUBLICATIONS FROM AAMRI MEMBER ORGANISATIONS HAD AN IMPACT 41% ABOVE THE AUSTRALIAN AVERAGE.



| No. of Publications | % total Aus Publications |
|---------------------|--------------------------|
| 69,657 | 100% |
| 14,044 | 20.5% |
| 607 | 0.9% |
| 6,578 | 9.6% |
| 18,764 | 27.3% |
| 58,822 | 76.9% |

EXPLANATORY NOTES

This report is based on information collected from AAMRI members in December 2015. Information was received from 45 AAMRI members (of 46 AAMRI members at the time of collection), including 38 independent medical research institutes (iMRIs). A list of AAMRI members and iMRIs by state/territory, is provided in page 21.

Financial data collected by AAMRI was supplemented by information from publically available MRI annual financial reports in several cases. In cases where data from an MRI required for analysis was unavailable or incomplete, the MRI was omitted from that particular analysis where indicated. This may have resulted in minor discrepancies throughout the report, depending on whether MRIs were omitted from one or other analysis. AAMRI members reported grant funding received from the National Health and Medical Research Council (NHMRC) and Australian Research Council (ARC) and other competitive funding sources for 2014 (or the financial year 2014-2015), regardless of what year the grant was awarded or commenced.

Financial, workforce and research translation data refer to either the calendar year of 2014, or the financial year 2014-2015 for those MRIs that have a standard financial reporting period. NHMRC grant funding data refers to total grant funding received for financial reporting period by the organisations performing the research, rather than the organisation administering the NHMRC grant.

Financial data is either presented for all available AAMRI members or specifically for the iMRI sector, as indicated throughout the report. For state-based analyses, financial data was aggregated by region for Victoria, New South Wales, and Rest of Australia (comprising Queensland, South Australia, Northern Territory, Tasmania and Western Australia).

University sector data are based on publically available information from the Department of Education and the Australian Bureau of Statistics (ABS). University research income refers to the average of years 2014 and 2015, while university indirect research cost funding refers to that allocated in 2016. (Note, allocation of university funding for the indirect costs of research in 2016 was based on the average research income for each university in 2014 and 2015.) Australian Bureau of Statistics (ABS) data for the higher education sector refers 2014.

Commercialisation data collected by AAMRI refers to a two year period of 2014 and 2015 or 2013-2014 and 2014-2015 depending on the financial year of the individual institute. Commercialisation data based on the publicly-available National Survey of Research Commercialisation (NSRC) conducted by the Department of Industry, Innovation and Science refers to the either the calendar year 2014 or financial year 2014-2015, depending on the financial year of the individual organisation.

Rounding of figures may have resulted in minor inconsistencies in totals.

AAMRI MEMBERS INCLUDED IN THIS REPORT

| ORGANISATION | iMRI | STATE |
|--|-------|-------|
| ANZAC Research Institute | iMRI | NSW |
| Baker IDI Heart and Diabetes Institute | iMRI | VIC |
| The Bionics Institute of Australia | iMRI | VIC |
| Brien Holden Vision Institute | iMRI | NSW |
| Burnet Institute for Medical Research and Public Health | iMRI | VIC |
| Centenary Institute of Cancer Medicine and Cell Biology | iMRI | NSW |
| Centre for Eye Research Australia | iMRI | VIC |
| Children's Cancer Institute | iMRI | NSW |
| Children's Medical Research Institute | iMRI | NSW |
| Garvan Institute of Medical Research | iMRI | NSW |
| Harry Perkins Institute of Medical Research | iMRI | WA |
| The Heart Research Institute | iMRI | NSW |
| Hudson Institute of Medical Research | iMRI | VIC |
| Hunter Medical Research Institute | iMRI | NSW |
| Institute for Breathing and Sleep | iMRI | VIC |
| Lions Eye Institute | iMRI | WA |
| Mater Medical Research Institute | iMRI | QLD |
| Melanoma Institute Australia | iMRI | NSW |
| Menzies School of Health Research | iMRI | NT |
| Murdoch Childrens Research Institute | iMRI | VIC |
| National Ageing Research Institute | iMRI | VIC |
| Neuroscience Research Australia | iMRI | NSW |
| Olivia Newton-John Cancer Research Institute | iMRI | VIC |
| Orygen, The National Centre of Excellence in Youth Mental Health | iMRI | VIC |
| Peter MacCallum Cancer Centre | iMRI# | VIC |

| ORGANISATION | iMRI | STATE |
|---|------|-------|
| Queensland Institute of Medical Research (QIMR Berghofer) | iMRI | QLD |
| Queensland Eye Institute | iMRI | QLD |
| South Australian Health and Medical Research Institute | iMRI | SA |
| St Vincent's Institute of Medical Research | iMRI | VIC |
| Telethon Kids Institute | iMRI | WA |
| The Florey Institute of Neuroscience & Mental Health | iMRI | VIC |
| The George Institute for Global Health | iMRI | NSW |
| Wesley Medical Research | iMRI | QLD |
| Victor Chang Cardiac Research Institute | iMRI | NSW |
| Walter & Eliza Hall Institute of Medical Research | iMRI | VIC |
| The Westmead Institute for Medical Research | iMRI | NSW |
| Women's & Children's Health Research Institute | iMRI | SA |
| Woolcock Institute of Medical Research | iMRI | NSW |
| Australian Institute of Tropical Health and Medicine | - | QLD |
| Australian Regenerative Medicine Institute | - | VIC |
| Centre for Cancer Biology | - | SA |
| Hanson Institute (and SA Pathology) | - | SA |
| Kolling Institute of Medical Research | - | NSW |
| Menzies Research Institute Tasmania | - | TAS |
| Translational Research Institute | - | QLD |

* Some members were not included in the analysis of financial data presented in this report. Numbers of MRIs for each analysis are indicated throughout.

Peter MacCallum Cancer Centre is a hospital, but was included as an independent MRI (iMRI) for the purposes of this report.

GLOSSARY

| | |
|--|--|
| Australian Bureau of Statistics (ABS) | The national statistical agency, providing summaries of statistics for spending in research and development in different sectors. |
| Australian Competitive Grant Register (ACGR) | A list of schemes that provide competitive research grants compiled by the Federal Government. |
| Australian Research Council (ARC) | The Federal Government agency responsible for managing the National Competitive Grants Program, for research across all fields except health and medical research. |
| CoE | Centres of Research Excellence. |
| Direct research costs / Research expenditure | This category of expenditure includes direct research staff salaries, on-costs and salary package items; research consumables; specialised equipment purchases for research projects (included in grants); travel expenditure associated with the grants or fellowships; and scholarships provided by the MRI. |
| Independent medical research institute (iMRI) | A medical research institute that is an independent legal entity, with its own governing body; while iMRIs are independent, some administer grants through an affiliated university. |
| Infrastructure Support Costs | Costs incurred by the MRI that are not directly related to the outcome of the grant projects but are operational activities required to support research including laboratory support staff salaries, on-costs and salary package items (not including support staff for any health services 'arm' of the organisation); other professional support staff (including administration, HR, IT, OH&S, public relations, finance, operations, etc.) and executive staff salaries; operational and maintenance costs of buildings, land and vehicles (power, cleaning, rent, phone, security, waste removal, etc.); laboratory support costs not attributable to a grant or fellowship, including animal services, ethics committees, analytical and other technical services and facilities; general laboratory equipment (that are not directly attributable to a grant or fellowship); administrative and support services expenditure (e.g. IT equipment, HR, OH&S, public relations, finance, legal costs, office expenses, administration travel expenditure); commercialisation and business development activities; depreciation; and travel not funded through research grants or fellowships. |
| Independent Research Institute infrastructure Support Scheme (IRIISS) | An NHMRC-funded scheme to partially cover the infrastructure support costs incurred by research funded by NHMRC grants. |
| Joint Research Engagement Scheme (JRE) | A Department of Education grant provided to universities based on success in research and research training of students. |
| Medical research institute (MRI) | An institute whose core purpose is to undertake health and medical research and translate findings into new health products, techniques, treatments and policies. An MRI may be independent (i.e. an iMRI), university-based or part of a hospital or health services provider. |
| National Health and Medical Research Council (NHMRC) | The Federal Government agency responsible for providing grants for health and medical research. |
| National Survey of Research Commercialisation (NSRC) | A Department of Industry, Innovation and Science survey of commercialisation activities non-profit sectors conducted every two years until 2016, and now conducted every year. |
| Peer-reviewed funding | Refers to grants awarded on a competitive basis (by peer review) for the direct funding of research projects. |
| Philanthropy | Income generated from fundraising, bequests, donations and gifts, used for direct research or for infrastructure support costs. (This term does not include competitive grants from Trusts and Foundations. |
| Research Block Grant (RBG) | A Federal Government scheme from the Department of Education that provides support to universities, awarded based on the criteria of research output. |

