

**ANNUAL REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST MARCH 2026**



**Polymyalgia Rheumatica
& Giant Cell Arteritis UK**

CHARITY REGISTRATION No: 1128723

COMPANY REGISTRATION No: 6763889

Independent Examiners Ltd
The Grain Store
Hills Barn
Appledram Lane South
Chichester
PO20 7EG

PMRGCA UK

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PMRGCA UK

LEGAL AND ADMINISTRATIVE INFORMATION

CHARITY NAME	Polymyalgia Rheumatica and Giant Cell Arteritis UK (PMRGCAuk)
WORKING NAME	PMRGCA UK
CHARITY NUMBER	1128723
COMPANY REGISTRATION NUMBER	06763889
DATE OF INCORPORATION	20 March 2009: Standard registration 08 March 2019: Funds received from 1138409 PMR & GCA UK NORTH EAST SUPPORT
START OF FINANCIAL YEAR	1st April 2025
END OF FINANCIAL YEAR	31st March 2026
DIRECTORS AT YEAR END	Humphrey Hodgson (Chair until Sept 25) Fiona Johnson (Chair from Sept 25) Janice Maddock (Deputy Chair until Sept 25) Geoff Holroyd (Treasurer) Gail Booth (Deputy Chair from Sept 25) Dr Vanessa Quick William Mansfield Margaret Bassendine.
GOVERNING DOCUMENT	MEMORANDUM AND ARTICLES OF ASSOCIATION INCORPORATED 2 DECEMBER 2008 AS AMENDED BY SPECIAL RESOLUTION 16 MARCH 2009
REGISTERED ADDRESS	10 Coldbath Square London EC1R 5HL
Office/Correspondence Address	BM PMRGCAuk, London, WC1N 3XX
BANKERS	HSBC 13 Parliament Street York
INDEPENDENT EXAMINER	K Gomes Independent Examiners Ltd The Grain Store Hills Barn Appledram Lane South Chichester PO20 7EG

PMRGCA UK

REPORT OF THE DIRECTORS FOR THE YEAR ENDED 31ST MARCH 2026

About the Charity

PMRGCAuk is the national charity for those with Polymyalgia Rheumatica and Giant Cell Arteritis. We were formed in 2008 by the 'PMR Fighters', a group of patients who came together determined to find out more about these little-known conditions and create a national network of support so that no one need face these diseases alone.

With the support of many wonderful volunteers, PMRGCAuk now supports over 3000 people a year through our national network of support groups, our telephone helpline, and our online forum. We have become a go-to source of information through our website. Reaching out to the medical research community, we have been instrumental in helping to shape and perform research, have lobbied for new treatments, and raised awareness on the front line of diagnosis – the GP surgery.

We campaign to raise awareness amongst the general public and healthcare professionals so the correct diagnosis and treatment can be rapidly reached by GPs and other healthcare professionals.

With an urgent need for support and information, the charity was set up over 10 years ago by a patient group - The PMR fighters - and remains governed today by Trustees the majority of whom live with one of the conditions, as well as being shaped by a membership of patients with either PMR or GCA. The charity ensures those diagnosed never need feel alone or unsupported. Empowered with information, those living with the conditions are better able to have informed discussions with their doctors and health professionals and feel more in control of their destiny.

The charity's objects are :

- a) To advance the education of the public through the collection, assimilation and recording of information and data relating to polymyalgia rheumatica and giant cell arteritis by the provision, establishment and maintenance of an educational website, and a network of support groups.
- b) To preserve and protect good health by the promotion of research into polymyalgia rheumatica and giant cell arteritis and the dissemination of the useful results thereof for the benefit of the public.

The charity's activities

We provide information and support to people with PMR and GCA

- Support a national network of support groups.
- Provide a telephone helpline run by volunteers with experience of the conditions.
- Maintain an online forum for peer support.
- Produce a free information pack to people newly diagnosed with PMR and GCA
- Organise an annual members' day with guest speakers and facilitated discussions.
- Publish a members' magazine three times per year & send regular email and letter updates.
- Maintain and up to date website and improved social media.
- Distribute information to rheumatology departments and other relevant locations. We raise awareness within the public domain, medical profession and government.
- Conduct national press and media work to increase public awareness.
- Speak to groups of people over 50 and those who work with them.
- Attend meetings with health professionals and NHS England.
- Advocate for fast and effective diagnosis and treatment to prevent sight loss resulting from undiagnosed GCA.
- We support and promote research into PMR and GCA.
- Provide patient representation on international working groups, such as those to develop new guidelines for the management of PMR and GCA.
- Become actively involved in research projects undertaken by other organisations, primarily through patient representation.

For a small charity, we are proud of our impact, helping thousands of individuals each year through the services we provide, online, on the telephone and through our national network of support groups. Our work supporting the medical and research community through vital patient representation has also helped to drive change in diagnosis and treatment including the release of new international clinical guidelines for GCA, released in January 2020, developed to standardise diagnosis and treatment around the world.

Since forming, demand for the services of the charity has grown considerably and we are now supporting over 5,000+ people a year through our various services, run by a small core staff team supporting a network of over 50 volunteers. The need for our work is clear to us, highlighted by our growth in membership; the growth of our national network of support groups and the increase in those accessing our information, as well as a wealth of positive stories from those using our services.

Message from Chair of Trustees

This past year has been a definitive period of growth and resilience for PMRGCAuk. As Chair of Trustees, I am incredibly proud of how the charity has over the last year navigated the simultaneous change of Director and Chair of Trustees. Thanks to the unwavering dedication of our staff, volunteers, and supporters, we have achieved this without any reduction in the quality of the services provided to members. This report highlights not only our financial health and strategic milestones but also the real, life-changing impact of your continued investment in our vision. We enter the new financial year with clear direction, financial stability, and an enduring commitment to delivering maximum value to our community.

At its heart, PMRGCAuk is powered by people, and this year's Annual Report is a testament to the power of our community. Achievements over the last year include the conclusion of PMR-PARADOX project led by Sarah Mackie, one of our patrons and long-term supporter of the charity. This research identified inequalities in diagnosis and support for people with PMR in the North and South of the UK. This is something the charity is also aware of and are working to address.

We also made a significant contribution to the NICE consultation over whether to allow the prescribing of Upadacitinib on the NHS. Whilst this matter has not yet been finally decided, I am confident that we can say that PMRGCAuk did contribute to making NICE pause in its decision-making and forced them to listen to the real lived experience of people with GCA managing the minefield of long-term steroid use because of the absence of any easily accessible alternative treatments.

As the report identifies, we have also continued to provide support to our members through the provision of Newswire, the Helpline, Support Groups across the country and online, as well as Health Unlocked. All of this is only possible with the significant input of a growing group of volunteers who all have direct experience of PMR and GCA and use that knowledge to contribute to our unique services.

I am also happy to report that thanks in part to a significant legacy PMRGCAuk is currently financially secure and we are using this position to develop and expand the charity. Reflecting on the past year, I am filled with immense gratitude for the generosity and passion that has enabled our work. As you read through this year's highlights, please know that every success belongs to you—our members, donors, and volunteers—who believe in our mission and make our work possible.

Fiona Johnson

Chair of Trustees

Membership

Membership – our driving force.

Our members aren't just vital to the work we do, they are the reason we exist. Our members shape our services and strategy, they are our best ambassadors, and we are always bowled over by their generosity in sharing their time and experience to help others. They volunteer, participate in research, raise awareness and fundraise.

By the end of March 2026 we had 1934 members, around 100 of whom are professional members. This includes patient, friend and professional members.

As part of our membership offer, all members receive our Newswire magazine three times a year. Topics included in Newswire this year have included: Learning about steroids and adrenal glands, updates on research and development, the use of DMARDs, webinar reports, nutrition, and sick day rules to name a few. Members receive either a digital copy or print copy depending on their preference.

Members' Day

Our 2025 Members' Day and AGM took place online again. Our speakers this year were Professor Bhaskar Dasgupta, MBE and Dr Claire Owen

Professor Dasgupta spoke about the development of treatment in PMR and GCA and the evolving views of the disease. He then focused on the use of ultrasound as a diagnostic tool for both GCA and PMR. He shared images throughout his presentation to illustrate what can be seen in ultrasound in both GCA and PMR. He emphasised that imaging does more than confirm diagnosis; it underpins stratification, dividing patients into subgroups according to disease severity and phenotype. Each subgroup has different risks and may need distinct therapies. Importantly, ultrasound can also track treatment response. Baseline imaging, followed by scans at follow-up, can monitor resolution or persistence of inflammation.

Prof Dasgupta concluded that access to imaging remains uneven. Few PMR patients receive ultrasound, and GCA services are not universally available. He described three main barriers: entrenched reliance on steroids ("steroid obsession"), insufficient ultrasound training, and resource constraints. He called for expanding ultrasound training for rheumatology trainees, providing machines in district hospitals, and campaigning for awareness among clinicians and patients alike.

Our second speaker of the day, Dr Claire Owen spoke about the role of imaging in revealing the cause of PMR symptoms. Dr Owen started by talking about how PMR has long been misunderstood due to the limitations of early biopsy and scanning technology, as well as a historical focus on the joints. While some inflammation can occur within the joints, it is far less compared to rheumatoid arthritis, and in many PMR patients is absent altogether. She described how PET scans combined with CT imaging can identify where the areas of abnormal inflammatory activity are and there are clear patterns of inflammation affecting patients with PMR.

Dr Owens recognises that it's not all about pain and stiffness in PMR, and discussed additional studies on fatigue, sleep disturbance and depression, as well as physical tests of PMR patients

Both talks were extremely well received and our thanks to Vanessa Quick for compering the talks.

PMRGCAuk Week 2025

We hosted three professional webinars for PMRGCAuk week in June 2025. We had more than 300 members and guests to our PMRGCAuk week webinars.

Dr Mark Hughes, Rheumatology Consultant at Royal Cornwall Trust spoke about the benefits of exercise in managing PMR and GCA. He discussed how exercise can help tackle some of the symptoms of PMR as well as the side-effects of the steroids. He suggested ways that different types of exercise could be built into everyday activities and how to use your support network to encourage you to exercise.

Our second speaker, Professor Toby Helliwell gave an insightful talk about the challenges of managing PMR in Primary care – a common discussion topic among our members.

Our third speaker, Dr Susan Mollan, gave a really in-depth talk about exactly how giant cell arteritis causes sight loss and what to look out for.

Thank you to all our members who got involved with fundraising and awareness raising efforts during PMRGCAuk week.

Providing support and information

We provide support through our Telephone Helpline, our national network of Support Groups, through our online forum through HealthUnlocked, and on our own website and social media feeds.

Telephone Helpline

Our Telephone Helpline team takes calls from Monday to Friday, 9am to 5pm, and callers are invited to leave their details for a call back if their call can't be answered immediately. Stephanie, Fiona, Yvonne and Chris were delighted to welcome two new volunteers onto the Helpline this year – Rosemary and Angela and also to have Monica back with us after a break. This brings the team up to seven and has lightened the load considerably. However, we are still happy to consider more additions to the team as it can sometimes be challenging to cover when holidays and other commitments are factored in. All volunteers have experienced either PMR, GCA or both.

The Helpline team continues to work with trainer Alice Hanscomb (thanks to grant support) which enables the volunteer team to further develop and improve their skills. We enjoy these sessions and find them essential to give us the tools and support that we need to best help our callers.

The Helpline volunteers spoke to 448 callers from April 2025 to March 2026, an increase of 64 from last year, again with slightly fewer calls received in December (20) and the most in July (45)

Statistics from April 2025 – March 2026

- 70% of callers had PMR; 20% GCA; and 20% had either GCA or both PMR and GCA. This is a very similar spread to 2024/2025.
- The average age of callers was 74 years old, very similar to last year.
- 79% of callers were female; 21% male – also similar to last year.

- 49% of callers were newly or recently diagnosed; 34% had been diagnosed between 1-4 years and 9% had been diagnosed over 5 years. 9% of callers did not state how long since diagnosis or it was not noted. This shows a decrease of 10% from newly or recently diagnosed callers on the previous year.
- 56% of people we spoke to were first time callers (65% last year), and 41% of callers had spoken to us one or more times (33% last year). 3% did not say.
- 92% of callers were seeking general information about the conditions and 56% of callers were seeking information about prednisolone generally and / or prednisolone reduction. There seems to be a wide range of advice from medical teams on prednisolone reduction which appears to prompt calls to the helpline.
- 6% of callers requested information on steroid sparing medications.
- 81% of callers expressed that they appreciated being able to speak about their concerns with someone who has experienced the condition(s) and understands how they feel as well as being on long-term steroid medication. This is an increase from 73% last year. Many of these callers expressed how helpful the call had been.
- Around 15% of callers shared that they felt unhappy, dissatisfied or angry before calling the helpline.
- 24% of callers are recorded as being members of PMRGCAuk while 8% of repeat callers were not recorded as being members.
- 3.7% of callers stated they experienced sight loss with GCA..

Support groups

Our local support groups remain a valuable resource for members and non-members around the country. Not only do they offer much needed support to those that attend, but they also help to grow the reach of the charity and spread awareness of PMR and GCA.

We currently have 36 face to face support groups and several online groups to meet the needs of those who can't travel or don't have a local group in their area. The face to face groups meet in public settings, such as coffee shops and community rooms, with some hiring a dedicated space for each of their meetings.

We continue to update our website with details of each group's next meeting and Support Group Organisers (GO's) to advertise their groups locally. Charon Aluko has been supporting the GO's this year, making sure posters are sent out and details updated on the website. We hold regular meeting for our GO's to attend, which gives everyone a chance to share how things are going, troubleshoot challenging situations, and keep up to date with charity news.

We are always warmed to hear the positive impact people have felt from attending a support group and we cannot thank our GOs enough for making them possible. We share regular group news in NewsWire, which is published three times a year, and we try to feature a different group organiser in every edition to share how all of our groups work.

PMRGCAuk Information Packs

Our information packs continue to be a popular resource, with the total number of packs requested in 2025-2026 representing an increase on 2024-2025's figures. The information packs can be requested online through our website, and requests also come in through the Telephone Helpline and direct to the office via email or telephone.

The packs are available as a digital copy – which is sent automatically when a request is made through the website, and in hard copy. They consist of information about the charity, our Symptoms and How We Can Help leaflets, booklets produced in conjunction with

Arthritis UK, British Society for Rheumatology (BSR) guidelines on PMR and GCA, and details of how to join the charity.

2022/2023

Total information packs requested: 1046

Hard copy: 342

Digital copy: 704

2023/2024

Total information packs requested: 1590

Hard copy: 349

Digital copy: 1241

2024/2025

Total information packs requested: 1731

Hard copy: 425

Digital copy: 1306

2025/2026

Total information packs requested: 1749

Hard copy: 456

Digital copy: 1293

Our thanks go to Laurene Brooks, who volunteers her time to send out all hard copy information packs and track the information and figures on packs sent out.

HealthUnlocked Forum

Our PMRGCAuk forum is provided through the HealthUnlocked platform. It is a patient-led community that allows members to share their experiences and seek support from others who have, or have had, PMR/GCA. You don't have to be a member of the charity to access the forum, and it has members from around the globe.

At the end of March 2026, we had 4551 active members. This number is based on the number of people that have logged onto HealthUnlocked in the past month, and it fluctuates throughout the year. 66% of our members are from the UK, 21% from the USA and the remainder from other countries such as Australia, Canada and Ireland. 84% of our members are over the age of 60 and 78% are female.

It is a very active forum with a mix of longstanding and regular users, and those that drop in more irregularly. For example, in March 2026, there were 400 posts (threads) made on the forum, inviting a total of 6396 replies from members.

HealthUnlocked is administrated and moderated by PMRGCAuk staff and volunteers. We are very grateful for all the support we receive on HealthUnlocked, but particularly to our volunteers known as PMRPro and DorsetLady who work tirelessly to ensure the smooth running of the forum.

Fundraising

MARATHON IN A MONTH

In July 2025 we ran our Marathon in a Month campaign for a second time. The event raised a phenomenal £14,000 for the charity and we received so much positive feedback on the benefits members felt from taking part.

It was brilliant to see so many people join in, either individually or as part of a team, sharing the miles between them. Support groups took on a starring role, with many of them participating, so a special thank you to the group organisers who promoted them and/or joined in. As well as raising awareness and vital funds for the charity, it has been wonderful to hear stories of how rewarding taking part has been, of friendships made and health improved.

"Marathon in a Month motivated me to start walking again after months of fatigue-and I did a mile every day in July."

"I live in an apartment block & because of this campaign, discovered that another resident had PMR & a third person had GCA! We joined forces, completed the marathon and have carried on walking since.

REMEMBER A CHARITY WEEK

In our second year of participating in Remember a Charity Week, we shared videos and stories on social media. Thank you to everyone who shared or commented on our posts or got in touch to let us know they would be leaving a gift to the charity in their will.

"Finding the charity two years into my PMR was an absolute lifeline for me and also made me realise that my late mum had PMR but had never been diagnosed. It gave me the knowledge to manage my condition and therefore improve my quality of life. So, in our memory and for the incredible support I've had, I will be leaving a gift in my will to PMRGCAuk to help others in the future. I am proud to be a trustee of this small but brilliant charity, and I know that all donations, large or small, make a huge difference."

BIG GIVE

In December 2025, we took part in the Big Give Christmas Challenge for the first time and were overwhelmed by the generosity of our supporters –raising over £12,000! The Big Give campaign is built around matched funding where donations are doubled (up to the target), meaning every pound given has twice the impact. Thanks to four very generous pledgers we were able to far exceed our target and the money raised will be used to support awareness and work around both PMR and GCA.

Research and awareness

Raising awareness of PMR and GCA and getting involved in working groups and research is a key part of the work we do. Some highlights this year included:

- Participation in the British Society of Rheumatology (BSR) working group on new Guidelines for Giant Cell Arteritis. The BSR published its last GCA guidelines in 2020 and this group is working to update these guidelines. The group is chaired by Dr Sarah Mackie who is very keen to ensure the guidance takes full account of the patient experience. PMRGCAuk members have generously volunteered to join the Guideline Working Group as experts by experience. This includes PMRGCAuk Chair,

Fiona Johnson and Treasurer, Geoff Holroyd. Trustee Dr Vanessa Quick also contributed to this group.

Geoff said, "We are excited to be able to give the patient's perspective and make sure those views are taken into account in the way the guidelines are drafted."

- Participation in the British Society of Rheumatology (BSR) PMR Guidelines working group. Trustee, Janice Maddock was invited to participate as an expert by experience. This group is aimed at updating the guidelines to include a more person-centred approach for treatment of PMR. These guidelines are now completed and are currently out for peer review.

Janice said: "It has been a privilege to be part of the development of the guidelines - as someone with lived experience I was truly heartened by the enthusiasm of the professionals to get this right."

- Dr Vanessa Quick, trustee, has been involved in extensive research projects and working groups in the field, both in the UK and internationally. For example, the British Society Rheumatology National Audit (NEIAA) GCA steering group with Max Yates and Sarah Mackie; National Project Lead for TOC STOP, a multi-site service evaluation of 336 GCA patients in England who have stopped Tocilizumab, and Educating Health professionals about PMR - Community of Practice working group led by Dr Anne O'Brien to name a few. Having this clinical engagement in the field really helps to ensure that the patient voice is heard and integrated into all of this work and ensures that the views of PMRGCAuk and its' members are part of the process.
- Consultation on NICE guidance for the use of Upadacitinib. In January 2026, NICE published their draft decision not to approve it. We felt that this was the wrong decision and that upadacitinib would be a valuable treatment option for people with GCA. We ran an online consultation event and encouraged our members to get involved in the consultation. We submitted the charity response which included submissions from 80 of our members.
- The Paradox Project 2025, a collaborative project co-led by PMRGCAuk and Leeds Teaching Hospitals NHS Trust was completed in March 2025. The final report was published and shared widely in the summer of 2025. Using creative, community-led approaches such as storytelling and mapping, the project gathered lived experiences to establish concrete recommendations for change. The team advocates for dismantling communication barriers between doctors and patients, increasing local awareness, and improving ongoing support for clinicians treating PMR.

PMRGCA

Annual Report and Accounts for 2025/26

Financial Review

This year we recorded a surplus on all activities of £258,630 largely due to the receipt of over £250,000 of legacies. Excluding legacies, income and expenditure were broadly even which is similar to last year when there was a small surplus of £6,620.

Income

Income for the year was £371,740 of which £258,810 was from legacies, £109,620 from donations, subscriptions and fundraising activities and £3,310 from other sources. In addition we earned £13,084 of interest from the investment of our cash balances.

Expenditure

Expenditure for the year was £126,194 of which the major cost was employment costs of £90,615. The only expenditure on restricted funds was £750 for consultancy support at the initiation of a project to replace our customer relations management system.

Balance Sheet

As a result of the surplus for the year total funds increased to £480,874. The trustees intend to use these reserves and future income to continue providing services to our members and to develop and extend these services in a sustainable way.

Reserves analysis

During the year the Legacy Reserve increased by £216,801, Restricted Reserves increased by £22,497 and the General Reserve increased by £19,361 to £104,943 and remains consistent with the reserves policy to maintain at least three to six months of operating costs in line with Charity Commission guidance.

Reserves Policy

Charities are required to have a reserves policy to show they have sufficient reserves to continue to meet their obligations and to show that excess reserves are not being held. The trustees have resolved to maintain the following reserves.

1. General Reserve

The Trustees have resolved that the General Reserve should be sufficient to meet three to six months of the charity's ongoing operating costs.

2. Restricted Reserves

These are made up of grants, legacies and donations that have been received by the charity under condition that they be used for specific defined purposes. A proportion of the interest earned on our cash balances is allocated to each restricted reserve until the funds have been spent.

3. Legacies Reserve

The Trustees have resolved to create a Legacies Reserve the purpose of which is to enable the Trustees to manage large unrestricted legacies in an efficient and effective manner to best promote the Charity's objectives and the Public Benefit. This policy provides for the steady and controlled release of such funds into the charity's general reserves in order to avoid the financial distortions and instabilities which can be created by the irregular and unexpected receipt of significant legacies.

The Trustees have established the following principles to apply to the Legacy Reserve:

- The first £5,000 of any individual unrestricted legacy will be treated as part of the General Reserve and any excess over £5,000 will be added to the Legacies Reserve.
- At the start of each financial year one-eighth of the remaining balance of each legacy previously added to the Legacies Reserve will be released to the General Reserve.
- This policy was introduced with effect from 01 April 2020.

PMRGCA UK

REPORT OF THE DIRECTORS (Continued)
FOR THE YEAR ENDED 31ST MARCH 2026

Statement of Directors' Responsibilities

The Charities Act and the Companies Act require the Board of Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity as at the end of the financial year and of the surplus or deficit of the charity. In preparing the financial statements the Board is required to :-

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in business and;
- state whether applicable accounting standards and statements of recommended practice have been followed, subject to any material departures disclosed and explained in the financial statements.

The Trustees are also responsible for maintaining adequate accounting records which disclose with reasonable accuracy at any time the financial position of the charity and which are sufficient to show and explain the charity's transactions and enable them to ensure that the financial statements comply with the Companies Act 2006 and comply with regulations made under the Charities Act. 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.

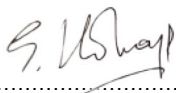
The trustees are also responsible for the contents of the trustees' report, and the responsibility of the independent examiner in relation to the trustees' report is limited to examining the report and ensuring that on the face of the report, there are no inconsistencies with the figures disclosed in the financial statements.

These accounts have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

I approve the attached statement of financial activities and balance sheet for the year ended 31st March 2026 and confirm that I have made available all information necessary for its preparation.

12.8.26

Approved by the Directors on the



Signed on their behalf by Director

Printed Name: Geoff Holroyd

INDEPENDENT EXAMINER'S REPORT ON THE ACCOUNTS

Report to the Trustees of PMRGCA UK on the accounts for the year ended 31st March 2026 set out on pages 15 to 21.

Respective responsibilities of trustees and examiner

The Charity's trustees (who are also the directors of the company for the purposes of company law) are responsible for the preparation of the accounts in accordance with the requirements of the Companies Act 2006 ('the 2006 Act').

Having satisfied myself that the accounts of PMRGCA UK are not required to be audited under Part 16 of the 2006 Act and are eligible for independent examination, I report in respect of my examination of your charity's accounts as carried out under section 145 of the Charities Act 2011 ('the 2011 Act'). In carrying out my examination I have followed the Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act.

Independent examiner's statement

Since PMRGCA UK's gross income exceeded £250,000 your examiner must be a member of a body listed in section 145 of the 2022 Act. I confirm that I am qualified to undertake the examination because I am a member of the Association of Charity Independent Examiners, which is one of the listed bodies.

I have completed my examination. I confirm that no matters have come to my attention in connection with the examination giving me cause to believe:

- accounting records were not kept in accordance with section 386 of the Companies Act 2006; or
- the accounts do not accord with such records; or
- the accounts do not comply with relevant accounting requirements under section 396 of the Companies Act 2006 other than any requirement that the accounts give a 'true and fair' view which is not a matter considered as part of an independent examination; or
- the accounts have not been prepared in accordance with the methods and principles of the Statement of Recommended Practice for accounting and reporting by charities.

I have no concerns and have come across no other matters in connection with the examination to which attention should be drawn in this report in order to enable a proper understanding of the accounts to be reached.

Signed 

Date : 13.8.26

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PMRGCA UK

STATEMENT OF FINANCIAL ACTIVITIES
FOR THE YEAR ENDED 31ST MARCH 2026

(Incorporating Income and Expenditure Account)

	Notes	Unrestricted Funds £	Restricted Funds £	TOTAL 2025/26 £	TOTAL 2024/25 £
INCOMING RESOURCES					
Incoming Resources from Generated Funds					
Donations & Legacies	3a	348,403	20,000	368,403	97,617
Charitable Activities	3b	1,502	-	1,502	36,532
Other Trading Activities	3c	1,835	-	1,835	509
Investments Income	3d	11,088	1,995	13,083	9,030
TOTAL INCOMING RESOURCES		362,828	21,995	384,823	143,688
RESOURCES EXPENDED					
Costs of Generating Funds					
Raising Funds	4a	38,862	-	38,862	35,113
Charitable Activities	4b	82,452	- 472	81,981	98,119
Other Costs	4c	5,350	-	5,350	3,836
TOTAL RESOURCES EXPENDED		126,664	- 472	126,193	137,068
NET INCOMING/ (OUTGOING) RESOURCES		236,164	22,467	258,630	6,620
Total Funds Brought Forward		181,650	40,594	222,244	215,624
TOTAL FUNDS CARRIED FORWARD		417,813	63,061	480,874	222,244

Movements on all reserves and all recognised gains and losses are shown above. All of the organisation's operations are classed as continuing.

The notes on pages 17 to 21 form part of these financial statements.

PMRGCA UK
COMPANY REGISTRATION NUMBER : 06763889

BALANCE SHEET
AS AT 31ST MARCH 2026

	Note	Total 31-Mar-26 £	Total 31-Mar-25 £
Fixed Assets			
Tangible Assets	2	-	-
Total Fixed Tangible Assets		-	-
Current Assets			
Debtors & Prepayments	7	18,861	20,894
Cash at bank and in hand	6	466,360	203,253
Total Current Assets		485,221	224,147
Creditors: Amounts falling due in one year	8	4,347	1,903
NET CURRENT ASSETS		480,874	222,244
Long Term Liabilities	9	-	-
NET ASSETS		480,874	222,244
Funds of the Charity			
General Funds		417,813	181,650
Restricted Funds	5	63,061	40,594
Total Funds		480,874	222,244

Directors' Responsibilities:

For the financial year ending 31 March 2026 the charity was entitled to exemption from audit under section 477 of the Companies Act 2006 relating to small companies.

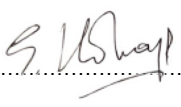
Directors' responsibilities:

- The members have not required the charity to obtain an audit of its accounts for the year in question in accordance with section 476; and
- The directors acknowledge their responsibilities for complying with the requirements of the Act with respect to accounting records and the preparation of accounts.

These financial statements have been prepared in accordance with the special provisions relating to companies subject to the small companies regime within Part 15 of the Companies Act 2006.

The financial statements on pages 15 to 21 were approved by the trustees, and authorised for issue on and signed on their behalf by:

Approved by the Directors on the **12.8.26**

Signed on their behalf by Director 

Printed Name: **Geoff Holroyd**

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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST MARCH 2026**

1. ACCOUNTING POLICIES

Basis of Preparation & Assessment of Going Concern

Basis of Preparation

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated in the relevant notes. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2015) - (Charities SORP - FRS102) and the Charities Act 2011.

The Charity meets the definition of a public benefit entity under FRS102. Assets and liabilities are initially recognised at historical cost unless otherwise stated in the relevant accounting policy notes.

Assessment of Going Concern

At the time of the approving the accounts, the trustees have a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. Thus the Directors continue to adopt the going concern basis of accounting in preparing the accounts.

Incoming Resources

Recognition of Incoming Resources

Income is recognised when there is entitlement to the funds, the receipt is probable and the amount can be measured reliably. Income is recognised in the year to which it relates and on an accruals basis. Legacies are included when the legacy is received or when the charity is notified of an impending distribution which can be quantified and receipt is probable, whichever is the earlier. Recoverable taxation is accounted for on an accruals basis.

Expenditure and Liabilities

Expenditure is accounted for on an accruals basis and allocated directly to the expenditure headings as far as practically possible to reflect the activities of the charity. Charitable activities comprise direct expenditure including direct staff costs attributable to the activity.

Employee benefits - Pensions

The Company operates a defined contribution plan for its employees. These contributions are recognised as an expense when they are due. Amounts not paid are shown in accruals in the balance sheet.

Fund Accounting

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by the donor or are raised by the charity for specific restricted purposes.

Unrestricted funds are funds which are available for use at the discretion of the trustees in furtherance of the general objects of the charity.

The Legacies Fund is to enable the Trustees to manage large legacies in an efficient and effective manner avoiding the financial distortions and instabilities which can be created by the irregular and unexpected receipt of significant legacies.

Cash and cash equivalents

Cash and cash equivalents include cash in hand and bank deposits.

Critical accounting estimates and areas of judgement

In the view of the trustees in applying the accounting policies adopted, no judgements were required that have a significant effect on the amounts recognised in the financial statements nor do any estimates or assumptions made carry a significant risk of material adjustment in the next financial year.

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31ST MARCH 2026

2. TANGIBLE FIXED ASSETS

The charity did not hold any fixed assets for this financial year (2025 - Nil)

3. INCOME RESOURCES

				2025/26	2024/25
a) Donations & Legacies	Note	£	£	£	£
Donations		61,835	-	61,835	54,620
Membership Fees		36,384	-	36,384	30,934
Gift Aid		11,374	-	11,374	7,978
Legacies		238,810	20,000	258,810	4,085
		348,403	20,000	368,403	97,617
b) Charitable Activities					
Other Income		1,502	-	1,502	36,532
		1,502	-	1,502	36,532
c) Other Trading Activities					
Events Sales		1,835	-	1,835	509
		1,835	-	1,835	509
d) Investment Income					
Interest		11,088	1,995	13,083	9,030
		11,088	1,995	13,083	9,030
Total Income		362,828	21,995	384,823	143,688

PMRGCA UK

NOTES TO THE FINANCIAL STATEMENTS (continued)
FOR THE YEAR ENDED 31ST MARCH 2026

4. RESOURCES EXPENDED	Note	Unrestricted Funds	Restricted Funds	TOTAL 2025/26	TOTAL 2024/25
		£	£	£	£
a) Raising Funds					
Staff Costs	10	31,787	-	31,787	29,530
Support Costs		5,877	-	5,877	4,253
Other Costs		1,199	-	1,199	1,330
		38,862	-	38,862	35,113
b) Charitable Activities					
Staff costs	10	58,827	-	58,827	78,939
Funding Research project		-	1,222	1,222	-
Other costs		23,625	750	24,375	19,180
		82,452	-	81,981	98,119
c) Other Costs					
Bank Charges		821	-	821	612
Insurance		617	-	617	616
Subscriptions/Legal fees		699	-	699	2,608
Equip costs		2,286	-	2,286	-
Trustee expenses	11	927	-	927	-
		5,350	-	5,350	3,836
Total Expenses		126,665	-	126,193	137,068

5.FUNDS ANALYSIS

CURRENT FINANCIAL YEAR

	Balance 01-Apr-25	Income	Expenditure	Transfers	Balance 31-Mar-26
Restricted Funds					
Stone King legacy	20,628	793	750	-	20,671
Wellcome Trust	6,596	264	-	-	6,860
Research funding donation & legacies	2,342	21,729	-	-	24,071
Amalgamation with North East PMRGCA	11,028	432	-	-	11,460
Total Restricted	40,594	23,217	750	-	63,061
Unrestricted (General) Funds	181,650	362,828	126,665	-	417,813
Total Funds	222,244	386,045	127,415	-	480,874

Fund Purpose

Stone King legacy	To be spent on new development
Wellcome Trust	Roadshows outside London
Research funding donation & legacies	Funding for research projects
Amalgamation with North East PMRGCA	To fund awareness in the medical professions of PMR and GCA in the North West

PMRGCA UK

NOTES TO THE FINANCIAL STATEMENTS (continued)
FOR THE YEAR ENDED 31ST MARCH 2026

5.FUNDS ANALYSIS continued

PREVIOUS FINANCIAL YEAR	Balance				Balance
<i>Restricted</i>	01-Apr-24	Income	Expenditure	Transfers	31-Mar-25
Stone King legacy	19,721	907	-	-	20,628
Anonymous Grantor	700	-	700	-	-
Wellcome Trust	6,306	290	-	-	6,596
Research funding donation & legacies	2,239	103	-	-	2,342
Amalgamation with North East PMRGCA	10,543	485	-	-	11,028
Total	39,509	1,785	700	-	40,594
	39,509	1,785	700	-	40,594
<i>Unrestricted Funds</i>	176,116	141,903	136,368	-	181,650
Total Funds 2025	215,625	143,688	137,068	-	222,244

6. CASH AT BANK AND IN HAND

	Unrestricted Fund £	Restricted Fund £	Total 31-Mar-26 £	Total 31-Mar-25 £
Cash at Bank and in Hand	15,891	4,589	20,480	27,731
Investments	387,408	58,472	445,880	175,522
	403,299	63,061	466,360	203,253

7. DEBTORS & PREPAYMENTS

	Unrestricted Fund £	Restricted Fund £	Total 31-Mar-26 £	Total 31-Mar-25 £
PMR Paradox Project	-	-	-	8,750
Prepayments	61	-	61	51
Gift Aid	11,000	-	11,000	8,200
Investment Interest Accrual	7,800	-	7,800	3,893
	18,861	-	18,861	20,894

8. CREDITORS & ACCRUALS

	Unrestricted Fund £	Restricted Fund £	Total 31-Mar-26 £	Total 31-Mar-25 £
Other Creditors	263	-	263	810
Independent Examiners Fee	1,470	-	1,470	800
Sundry Creditors	2,094	-	2,094	-
Payroll & Pension Costs	520	-	520	293
	4,347	-	4,347	1,903

PMRGCA UK

NOTES TO THE FINANCIAL STATEMENTS (continued)
FOR THE YEAR ENDED 31ST MARCH 2026

9. CREDITORS: AMOUNTS FALLING DUE IN MORE THAN ONE YEAR

Nil (2025 Nil)

10. STAFF COSTS AND NUMBERS

	31-Mar-26 £	31-Mar-25 £
Gross Wages and Salaries	72,169	86,040
Employer's National Insurance Costs	14,621	17,908
Pension Contributions	3,824	4,521
	90,615	108,468
Average number of employees for the year:	31-Mar-26 TOTAL	31-Mar-25 TOTAL
on a full time equivalent basis	2.5	3.3
	2.5	3.3

11. DIRECTORS AND OTHER RELATED PARTIES

During the financial year Directors were reimbursed £927 for expenses in furtherance of the Charitable objects(2025 Nil).

No other payments were made to directors or any persons connected with them during this financial period. No material transaction took place between the organisation and a trustee or any person connected with them.

12. RECONCILIATION OF MOVEMENT ON CAPITAL AND RESERVES

	31-Mar-26 £	31-Mar-25 £
Profit / Deficit for the financial year	258,630	6,620
Other Recognised Gains	-	-
	258,630	6,620
Balance Brought Forward	222,244	215,624
Closing Funds at 31st March 2026	480,874	222,244