



The Fred Hollows
Foundation NZ

Performance Report 2025



“I’m an optimist, always, that
the world can be a better place.”

PROFESSOR FRED HOLLOWES

Contents

Overview	02	Our Stories	13	2025 Consolidated General Purpose Financial Report	23		
Professor Fred Hollows	03	Country Highlights	14	Statement of Compliance and Responsibility	24	Consolidated Statement of Financial Position	39
Entity Information	04	Patient Stories	15	Auditor's Report	25	Consolidated Statement of Cash Flows	40
A Word from Our Leaders	05	Our Community	16	Consolidated Statement of Service Performance	27	Notes to the Consolidated Financial Statements	41
About Us	08	Graduate Impact	17	Consolidated Statement of Comprehensive Revenue and Expenses	37	Thank You	57
What We Do	09	State of Eye Health	18	Consolidated Statement of Changes in Net Assets/Equity	38		
Where We Work	10	Spotlight on Our Supporters	19				
How We Work	11	Key Events	20				
About This Report	12	Our Sustainability Initiatives	22				

Overview

Professor Fred Hollows

Entity Information

A Word from Our Leaders

About Us

What We Do

Where We Work

How We Work

About This Report



Professor Fred Hollows 1929—1993

Legendary Kiwi, the late Professor Fred Hollows, was an internationally renowned eye doctor and social justice activist, who championed the right of all people to high-quality and affordable eye care.

Born in Dunedin and raised in Palmerston North, Fred studied medicine at the University of Otago in the 1960's and then trained as an ophthalmologist in the United Kingdom. Upon his return, Fred moved to Australia where he began working in remote indigenous communities.

As a consultant for the World Health Organization, Fred visited many low to middle income countries and was appalled by the lack of basic eye care services and equipment that was available. Millions of people were impacted needlessly from cataract blindness and Fred believed that modern cataract surgery should be available to all people. To overcome the prohibitive cost of intraocular lenses (the artificial lens which replaces the natural one clouded by cataract), Fred raised the money to build factories in Nepal and Eritrea to produce the lens for as little as \$7, instead of over \$200, reducing the cost of cataract surgery to as little as \$25 per patient in some countries. As a result of Fred's initiative, modern cataract surgery using cost-effective manual surgical techniques is now widely used in developing nations.

Fred died of cancer on 10 February 1993, just three months after The Fred Hollows Foundation NZ was established.



Professor Fred Hollows anaesthetises the eye of a patient being prepared for cataract surgery in Hanoi, Vietnam.

Entity Information

The Fred Hollows Foundation (NZ)

Nature of Business

Registered Charity

Registered Office

Level 22, 120 Albert Street,
Auckland 1010, New Zealand

Postal Address

Private Bag 99909, Newmarket,
Auckland 1149, New Zealand

Telephone

+64 9 304 0524 or 0800 227 229

Website

www.hollows.org.nz

Email

info@hollows.nz

Charity Registration Number

CC23722

Date of Incorporation

5 November 1992

Auditors

BDO, Chartered Accountants - Auckland and Fiji
GUINN Accountants - PNG
Morris & Sojnocki Chartered Accountants
- Solomon Islands

Solicitors

DLA Piper New Zealand
John Hannan, Barrister

Patrons



Gabi Hollows
AO; Founding Director
of The Fred Hollows
Foundation



**Her Excellency
The Right Honourable
Dame Cindy Kiro**
GNZM, QSO; Governor
General of New Zealand

Board of Trustees



Craig Fisher
FCA, BCom, CMIInstD
Board Chair;
Nominations Committee
Chair



Sir Maarten Wevers
KNZM, CMIInstD
Deputy Board Chair;
Programme, Clinical Audit
& Risk Committee Chair



Dr Will Cunningham
MBChB, FRANZCO



Martin Enright
BA, LLB, LLM, MBA, MPA,
PGCert.s, Churchill Fellow
Finance, Audit, Risk
& Remuneration
Committee Chair



Leo Foliaki
CA, BCom



Lady Roslyn Morauta
BA Hons (Government),
MA (African Studies)



Lisa Tai
BCom (Economics)
(appointed 24 February
2025)



Sifa Taumoepeau
BA (Art History),
BA (Education Policy)



**Professor Ifereimi
Waqainabete**
MBBS, MMed (Surgery)
(appointed 3 November
2025)



Kath Watson
MInstD

Senior Leadership Team

Dr Audrey Aumua - PhD (Public Policy),
MPP (Master of Public Policy), MInstD
Chief Executive Officer

Katie Hart - DPT (Physiotherapy),
CIM (Marketing), BSc Hons (Zoology)
Philanthropy & Communications Director

Sharon Orr - CA, MInstD
Chief Operating Officer

Kirti Prasad - MPH (Master of Public
Health), MMgt (Master of Management),
PGCert (Health Service Management)
Fiji Country Manager

Peter Raynes - MSc (Public Health
in Developing Countries)
Programme Director

Kathy Robinson - BA Hons (Economics),
PGDip (Arts Psychology), Dip (Positive
Psychology)
People Capability and Culture Director

Priscilla Sine Mal Peter - MA
(International Relations), BA (Political
Science)
Papua New Guinea Country Manager

Dr John Szetu - MSc (Ophthalmology),
DO, MBBS
Medical Director

A Word from Our Leaders



**Craig
Fisher**

Board Chair

This Performance Report reflects the collective effort of many. As you read the report, I hope you'll see not only the progress made, but the community of people and organisations who made it achievable.

I am proud of what has been achieved this year, and equally proud of the way it was achieved, with respect, partnership, and a clear focus on equity.

At the heart of this progress is work like the build of the Centre for Eye Health in Papua New Guinea. Sometimes the most worthwhile sustainable solutions are the hardest to achieve, and bringing this project to life has been many years in the making — and thanks to many people.

Construction began in late December 2024 and is progressing steadily, with completion due by the end of the year. Once operational, it will be PNG's first purpose-built facility dedicated to both specialist eye care and the training of eye health professionals.

This major investment also provides important context for The Foundation's financial position this year. A significant portion of funding currently held in reserves is already committed to the PNG Centre for Eye Health, including funding received in advance for construction and support for its early years of operation. We also continue to hold a contingency reserve in line with policy to help protect the continuity of our work through unexpected challenges or changes in funding. In short, these reserves reflect careful stewardship, existing commitments, and responsible planning for long-term impact.

In August 2025 we welcomed Prime Minister Christopher Luxon to the construction site, providing an opportunity to acknowledge the partnership between New Zealand and Papua New Guinea in improving eye health.

I look forward to the day we can welcome our partners to see the doors open — and the difference it will make in the lives of so many Papua New Guineans.

The word 'sustainability' has many interpretations. For me, one of them has always been; supporting people to better help themselves for the long-term, and that remains a key motivation for The Foundation. One example is our *'Building Climate-Resilient Healthcare Facilities in the Pacific'* report, released in November 2025. It draws on research undertaken over the past two years and sets out the climate risks facing healthcare services, alongside practical steps to protect and future-proof essential care, including eye health. This work provides a vital evidence base for governments and health leaders, helping ensure Pacific communities can continue to access the care they need, even in the face of climate challenges.

It's been a year of recognition. Our 2024 Performance Report won the Excellence in Financial Reporting Award at the NZ CFO Awards — a result that reflects the collaboration, transparency and accountability behind our reporting. We were also honoured to be jointly awarded the 2025 António Champalimaud Foundation Vision Award, alongside the International Agency for the Prevention of Blindness and Lions Clubs International, recognising our shared contribution to preventing blindness and restoring sight.



Sarita (left), from Tavua, lost her sight to cataracts and diabetes, relying on her caregiver Suliana (right) for daily support. After sight-restoring surgery, she can now see her garden, read her Bible, and looks forward to reuniting with her family.

In December, we were delighted to welcome Dr Ifereimi Waqainabete to the Board. Professor Waqainabete is a Fijian surgeon, former Minister of Health, and health systems leader who will bring a strong Pacific voice to the team. His experience will strengthen our focus on Pacific-led solutions and long-term, sustainable eye health systems.

Behind every outcome in this report are people — supporters who chose to give, partners who worked alongside us, and a team who delivered with care and consistency. Thank you for supporting the mahi of The Fred Hollows Foundation NZ and keeping Fred's vision of eye care for all alive.

A Word from Our Leaders



Dr Audrey Aumua

Chief Executive
Officer

In 2025, The Fred Hollows Foundation NZ remained focused on what matters most: delivering quality eye care alongside our Pacific partners and strengthening the systems that sustain it.

A defining milestone this year was surpassing 100,000 sight-restoring surgeries delivered in the Pacific since our work began – achieved together with our partners. This is a powerful reflection of what can be accomplished when local eye care teams, governments, partners and donors unite around a shared goal. Behind each surgery is a life changed – a grandparent returning to work, a parent caring for their whānau, or a student able to stay in school.

Importantly, this milestone represents far more than a number. It reflects sustained investment in eye health systems – training, equipment, outreach and clinical leadership – ensuring people can access care not just once, but for generations to come. This long-term approach is especially critical in Papua New Guinea, where avoidable blindness remains unacceptably high.

During the year we strengthened our work in Papua New Guinea through two significant partnerships. We signed an agreement with Tilganga Eye Hospital in Nepal to build the capability of local eye care workers, confirmed at the International Agency for the Prevention of Blindness (IAPB) 2030 IN SIGHT LIVE event in Kathmandu. This collaboration will support mutual learning and the exchange of clinical knowledge, resources and training approaches. We also established a strategic partnership with the Sir Brian Bell Foundation, supporting the training of three eye care nurses each year for the next three years, and contributing to long-term impact through the Papua New Guinea Centre for Eye Health.

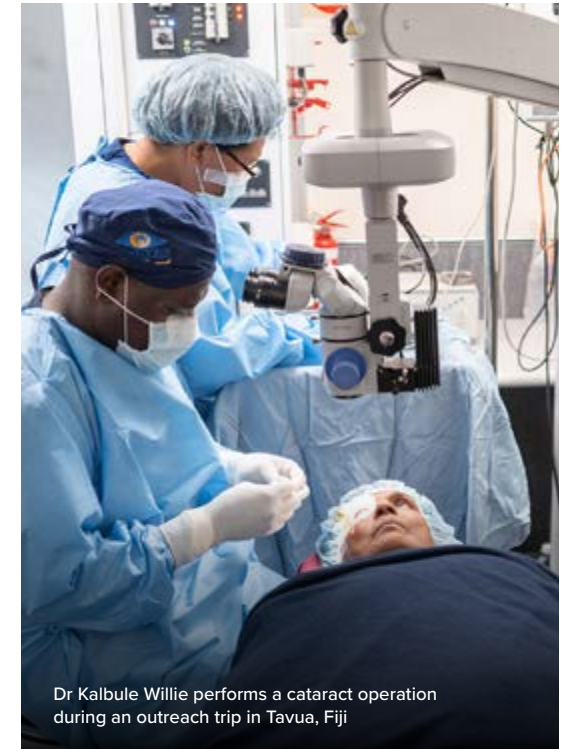
These steps forward also highlight the people whose leadership has shaped our Pacific programme over many years. On behalf of Team Fred, I would like to acknowledge Dr John Szetu as he prepares to retire as Medical Director. Dr John has been part of our Pacific programme since its inception in 2001 and has delivered eye care across the region since 1988.

Over nearly four decades, he has made an extraordinary contribution to strengthening eye health in the Pacific, and his leadership has helped shape sustainable, locally led services across the region.

Together with our Pacific partners, he played a key role in establishing the Pacific Eye Institute in Fiji and co-founding the Pacific Eye Care Society (PacEYES). His leadership has been defined by a deep commitment to developing the Pacific eye care workforce by formalising training pathways, mentoring emerging clinicians, and championing Pacific-led services in their own communities.

Dr John will continue as Medical Director Emeritus, mentoring at the Regional Eye Centre in Solomon Islands and providing technical and clinical support as the Papua New Guinea Centre for Eye Health is commissioned and begins operations. We wish him every happiness in his well-earned retirement and are grateful that he will remain a trusted colleague, mentor, and friend to so many of us.

To everyone who supports our work – thank you. With your continued partnership, we will keep removing the barriers that prevent people with avoidable blindness or vision impairment from accessing high-quality, affordable eye care, while continuing to back Pacific-led solutions that deliver lasting change.



Dr Kalbule Willie performs a cataract operation during an outreach trip in Tavua, Fiji

A Word from Our Leaders



Dr John Szetu

Medical Director

In eye health, the moments people remember are often the simplest: a patient seeing clearly again, a trainee gaining confidence, a clinic able to meet demand without outside support. In my final year as Medical Director, I've been proud to see those moments multiply.

In 2025, together with our partners, we enabled the delivery of 64,300 consultations, 4,935 sight-saving surgeries, and training of 38 eye doctors and nurses. While the highlights in this report may appear as separate stories, they are deeply connected – each reflects how we are restoring sight today while strengthening Pacific-led services for the future.

That connection was especially evident in November, when we had the privilege of hosting ThreeNews reporter Laura Tupou and camera operator Chino Barrett-Lovie in Solomon Islands. They witnessed first-hand the life-changing impact of restoring sight, alongside the growing challenges our teams face as climate pressures intensify. Their visit coincided with the launch of our report, *Building Climate-Resilient Healthcare Facilities in the Pacific*, and resulted in four powerful stories – following three patients through cataract surgery, and exploring the links between climate change, food insecurity, diabetes and preventable vision loss.

This coverage underscores a critical reality: the need is increasing, and meeting it sustainably requires investment in local capability. During their visit, the ThreeNews team also saw how stronger local training pathways are essential to safeguarding Pacific eye health. That is why The Fred Hollows Foundation NZ is working with partners to establish satellite training campuses, including in Solomon Islands – expanding access to training, enabling clinicians to learn closer to home, and strengthening local eye care services for the long term.



After travelling more than 27 hours by boat from Tokelau to Samoa for cataract surgery, husband and wife Penetito and Setefania were able to see each other clearly again for the first time in years.

Building the workforce is one part of the picture; supporting communities to protect their eye health is another. This commitment to prevention and partnership was reflected in World Sight Day activities across the region. Our teams led community outreach and advocacy initiatives to raise awareness about eye health, including free eye screenings for children, visits to workplaces, schools and community groups, and public engagement campaigns. These efforts do more than inform – they build trust, encourage earlier care-seeking, and reinforce the shared responsibility to ensure no one goes needlessly blind.

Over the past four decades, it has been a privilege to serve the Pacific and to be part of The Fred Hollows Foundation NZ's journey. As I step back from the role of Medical Director, I do so with deep gratitude for the Pacific colleagues, communities and partners whose commitment has always driven this work forward. I am especially proud of the growth of Pacific-led eye care, and of the many doctors, nurses, and clinicians who have trained and gone on to lead services in their own countries.

While I will remain connected to the work as Medical Director Emeritus, I feel confident in what lies ahead. The foundations are strong, and they are grounded in a shared belief that everyone has the right to high-quality, affordable eye care.

About Us

Our Vision

A world in which no person is needlessly blind or vision impaired.

Our Purpose

We work to end avoidable blindness and vision impairment in the Pacific;

We advocate for the right of all people to high-quality and affordable eye care; and

We strive for eye care to be locally-led and accessible to all. In doing this we continue Fred's legacy.

Our Strategy

Advancing the Pacific's vision of universal access to quality eye care.

Our Strategy (2023-2032) sets the course for The Fred Hollows Foundation NZ's journey alongside Pacific Island countries, supporting efforts to strengthen and integrate eye health within national health systems.

At its heart is a shared goal: **Pacific people are benefitting from their own sustainable, resilient and high-quality eye health systems.** While this is a 10-year strategy, the work itself is generational, reflecting both the scale of need and the growing rates of vision across the region.

Over the past two decades, our partnerships with governments, universities and regional organisations have helped establish and expand eye health services across the Pacific. A key part of this progress has been the development of specialised eye health training through Pacific universities, resulting in the training of 426 eye doctors, nurses and clinicians. Today, 74% of these graduates are actively delivering eye care services across 14 Pacific countries and Timor-Leste. Together, they have delivered more than 100,000 sight-restoring surgeries and over 1.2 million eye consultations.

The Fred Hollows Foundation NZ continues to support this workforce through professional development, sub-speciality training, leadership pathways, ongoing technical support, and provision of medical equipment and consumables to ensure eye health services continue to grow in both quality and reach.

These achievements, along with the lessons learnt, have shaped *Our Strategy*. Its development was grounded in extensive consultation, including more than 100 engagements with over 50 partners across the Pacific, from ministries of health and academic institutions, to non-government organisations, disability groups, development partners, and regional organisations. This collaborative approach ensures *Our Strategy* reflects the aspirations and priorities of our partners, brought to life through four Key Focus Areas and their associated ambitions.

As we implement *Our Strategy*, we remain focussed on sustainability and resilience. The partnerships we nurture, and the leadership of our Pacific partners, are central to achieving our shared vision of universal access to quality eye care.



The Mobile Eye Clinic team on outreach to Tavua, Fiji

What We Do

Our Key Focus Areas



Key Focus Area 1

**Support
Eye Health System
Strengthening**



Key Focus Area 2

**Support Eye
Health Workforce
Development**



Key Focus Area 3

**Strengthen
Pacific Eye Health
Governance
Capacity**



Key Focus Area 4

**Evolve
The Fred Hollows
Foundation NZ**

Our Joint Ambitions with our Partners

Pacific Island countries have strong nationally integrated eye health systems.

Pacific Island countries have a competent, quality and sustainable eye care workforce.

Eye health systems are determined, governed and managed by national partners.

The Foundation evolves its capability as a partner supporting Pacific national and regional partners' aspirations to strengthen sustainable eye health systems.

To advance these ambitions, we will focus our work on five Strategic Pathways based on our own capabilities: partnership and collaboration, equity and inclusion, capability strengthening, innovation, and research and advocacy.

Our work to support the delivery of sustainable quality eye health services that are embedded in Pacific Island countries' eye health systems remains the cornerstone of what we do.

With the generous support of our donors, we will continue to work in partnership with Pacific Island countries and training institutions to ensure the ongoing development of a representative eye health workforce that meets the needs of Pacific people today and into the future.

This is the only way we will sustainably end avoidable blindness and vision impairment in the Pacific.

Where We Work

While we are based and fundraise in New Zealand as a charity, we currently focus the majority of our eye health investments in the following Pacific Island countries:

- Fiji
- Kiribati
- Papua New Guinea
- Samoa
- Solomon Islands
- Tonga
- Vanuatu

We also respond to requests from other Pacific Island governments and assess these based on need and funding. To date we have supported the following additional countries:

- Cook Islands
- Federated States of Micronesia
- Marshall Islands
- Nauru
- Niue
- Timor-Leste
- Tokelau
- Tuvalu



How We Work

Our Values



Integrity

Our relationships with supporters, partners and those with whom we work are carried out with integrity, transparency, honesty and objectivity



Responsibility

We protect the health, wellbeing, safety and security of our workers, patients and students.



Respect

We treat people fairly, with dignity and respect



Accountability

We have a responsibility towards our people, partners and communities, as well as property, and information. We adhere to laws, regulations and policies that are relevant to the areas in which we operate.

Our People

The capability, expertise and commitment of our people are the cornerstone of our success.

Our people are at the heart of delivering *Our Strategy* bringing our vision and purpose to life by supporting locally led eye care and expanding access to high-quality, affordable services across the Pacific.

In 2025, we continued to build the capability, leadership and capacity of our 110 employees across the Pacific and New Zealand, enhancing our ability to deliver sustainable eye health outcomes across the region. Three-quarters of our staff are female, and two-thirds are from the Pacific.

We expanded capability in several strategic areas, including clinical training, partnerships and programme delivery. Around one-fifth of our staff joined the organisation in 2025, bringing valuable expertise and fresh perspectives that are already strengthening our work. At the same time, we invested in developing existing talent through expanded roles, leadership development, internal promotions and targeted professional learning.

Building Pacific capability and leadership remains central to our approach. We are committed to supporting Pacific-based staff to deepen specialist expertise and take on greater leadership in programme delivery and health system strengthening. In 2025, more than 35% of Pacific-based staff participated in tertiary study or external professional development. Staff also engaged in mentoring, leadership programmes and regional collaboration initiatives that built confidence,



The Papua New Guinea team on the last day of their 2025 Annual Team Refresher workshop

strengthened technical skills, and deepened connections across our Pacific network.

Our culture – grounded in performance, collaboration, care and shared purpose – continues to underpin our work. Staff engagement surveys across New Zealand, Fiji and Papua New Guinea show very high levels of commitment and alignment with our vision and purpose, with 93% of staff saying they would recommend The Fred Hollows Foundation NZ as a great place to work. Staff consistently report strong leadership, opportunities for growth, and a clear understanding of how their work contributes to *Our Strategy* and purpose.

Staff turnover remained low at under 10% in 2025, reflecting a highly engaged and committed workforce. Through continued investment in our people and their development, we are building a resilient organisation, well positioned to deliver sustainable eye health outcomes into the future.

Sustainable Development Goals

Good eye health is essential for the achievement of the 2030 Sustainable Development Agenda and was formally recognised by the United Nations (UN) General Assembly in 2021 with the unanimous adoption of a Resolution that enshrines eye health in the Sustainable Development Goals (SDGs), specifically linking eye care to half of the goals. The graphic below illustrates the 12 SDGs, out of the total of 17, that are relevant to our work with our partners. Our work is guided by Pacific Island countries' national development priorities and will support the advancement of their progress towards SDGs, in particular SDG 3 and its target of Universal Health Coverage.



About this Report

This Performance Report presents the operational and financial performance of The Fred Hollows Foundation NZ for the year ended 31 December 2025.

It outlines the progress we have made in delivering *Our Strategy* and strengthening eye health systems across the Pacific, with results detailed in the Consolidated Statement of Service Performance on [pages 27 to 34](#).

The report includes both audited service performance and financial information for The Fred Hollows Foundation NZ and its controlled entities (together referred to as The Foundation) and as described on [page 41](#).


Our work contributes to the United Nations Sustainable Development Goals, reflecting our commitment to improving health outcomes, strengthening systems, and supporting resilient communities.


We also continue to build our approach to sustainability, including how we work, our values, and our people, outlined on [page 11](#).


This report has been prepared in accordance with the Public Benefit Entity Standards (Reduced Disclosure Regime). The Consolidated Statement of Service Performance and Consolidated Financial Statements on [pages 27-56](#) have been audited by BDO Auckland.

We welcome your feedback and suggestions on this report. Please contact us at info@hollows.nz


2025 AT A GLANCE

 **56,000+ people received eye care**

 **4,200+ sight-restoring surgeries delivered**

 **100,000+ surgeries milestone reached**

 **25 new eye care graduates trained**

 **Construction of Papua New Guinea Centre for Eye Health progressed beyond 50%**



Tokelauan patients who made the long journey by boat to Samoa for sight-restoring surgery, alongside clinicians from the Pacific Eye Institute in Fiji and the local Samoa eye care team.

Our Stories

Country Highlights

Patient Stories

Our Community

Graduate Impact

State of Eye Health

Spotlight on our Supporters

Key Events

Our Sustainability Initiatives



Country Highlights

We partner with governments and health systems across the Pacific to deliver eye care where it's needed most, and to build local capability for the future.

This includes training eye health professionals, supporting national systems, and delivering outreach and surgery to underserved communities.

Together, these efforts are restoring sight today and creating stronger, locally led eye care systems for generations to come.

Training pathways

- Eye nurse: 1-year postgraduate training
- Trainee eye doctor: 1-year diploma (pathway to specialist training)
- Eye doctor: 3-year specialist qualification (Ophthalmology)

Training is delivered at Fiji National University, Divine Word University in Papua New Guinea and the University of Papua New Guinea.



Patient Stories

Click a patient's name to read their story.



Our Community



Graduate Impact

Graduates of Foundation-supported training programmes deliver eye care services independently within their national health systems. This reflects the long-term impact of investing in local capability.

The results below show services delivered by these graduates in 2025, based on data shared with us. This approach aligns with our commitment to data sovereignty, recognising each country's authority over its health data.

Eye care services provided by Foundation-supported graduates

Outcome	Indicator	2025	2024
Increased eye care services provided	Number of consultations ⁽¹⁾	8,095	9,590
	Number of surgeries	674	1,170

⁽¹⁾ Data is collected from Papua New Guinea, Solomon Islands, Fiji, Vanuatu, and Tonga (from the eye screening van activities). In 2025, data collecting ceased in Samoa, Kiribati and the main eye clinic in Tonga, reflecting a transition to locally led eye care services where ministries of health now independently manage and deliver eye care.



Dr Alice Irafa presenting during class at the University of Papua New Guinea's School of Medicine and Health Sciences.

State of Eye Health

Expanding the evidence base

In 2023, The Foundation launched the *State of Eye Health Research Programme*, a five-year collaboration with Pacific Island governments, the New Zealand Government, the University of Auckland, and Ian Anderson Economics.

Led by Pacific priorities and local leadership, the programme is addressing critical gaps in eye health data and strengthening understanding of the social and economic impacts of blindness and vision impairment. This evidence is essential for Pacific governments to plan, invest and deliver equitable, sustainable eye health services.

In 2025, the programme delivered significant new insights to support decision-making across the region.

Samoa's *Rapid Assessment of Avoidable Blindness (RAAB)*, completed in 2024, examined nearly 4,500 people aged over 50 across 132 communities. It found 83.4% of blindness is avoidable, with untreated cataract the leading cause (70.8%). The findings also highlighted unmet need for appropriate spectacles and diabetic eye screening – key priorities for strengthening primary eye care and referral pathways.

Building on this, Tonga completed its first-ever RAAB survey in 2025, delivering the country's first comprehensive snapshot of avoidable blindness and vision impairment. Teams examined 4,000 people across 122 communities.

A health economics module was also piloted, exploring how blindness and vision loss affects productivity, workforce participation, and the affordability of eye health services in Tonga. This work reflects strong regional collaboration, with Pacific clinicians working alongside Tongan eye care teams.

Together, the Samoa and Tonga RAAB surveys significantly expand the evidence base for planning and prioritising eye health services across the Pacific.

Recognising that traditional survey approaches do not always suit smaller populations, 2025 also marked the development of the *Small Island State Survey (SISS)* methodology, in partnership with the University of Auckland. Designed for countries with populations under 100,000, SISS will enable small island states to measure the prevalence of blindness and vision impairment, identify unmet need for eye health services, and inform policy, planning and resource allocation.

Complementing this work, Solomon Islands and Vanuatu completed system-wide assessments using the World Health Organization's Eye Care Situation Analysis Tool (ECSAT). These reviews examined governance, service access and quality, workforce, infrastructure, financing, and information systems.


Findings from Solomon Islands, released in 2025, highlighted strong government commitment and investment in eye care, alongside key gaps in workforce capacity, infrastructure and weak health information systems. These insights provide a clear pathway for targeted investment and practical health system strengthening.

Findings from the first three years of the programme will be brought together in a comprehensive regional report in 2026.



An eye examination is carried out during data collection for the Rapid Assessment of Avoidable Blindness (RAAB) Survey in Tonga.

Spotlight on Our Supporters

 Click to read a supporters story.

Key Events

One operation can change a life: together, we've transformed 100,000 lives

Towards the end of 2025, The Foundation reached a landmark achievement: having delivered more than 100,000 sight-restoring surgeries since we began working in the Pacific.

This milestone represents far more than a number as Dr Audrey Aumua, Chief Executive Officer, says: "Reaching 100,000 sight-restoring surgeries is a powerful reminder of what's possible when people work together."

"This milestone reflects the efforts of patients, local eye care teams, our partners, and supporters. We're closing gaps in eye care, reaching underserved communities, and supporting accessible eye care for all – and together, we've transformed 100,000 lives," she says

Behind every procedure is a person whose life is changed, and a local team making high-quality care possible – often in settings where distance, cost, and limited services can make treatment difficult to access.

Restoring sight helps people stay in work, return to school, care for their families, and contribute to their communities. Across the Pacific, this means stronger households and greater independence for individuals who might otherwise be held back by avoidable vision loss.

Importantly, this progress is grounded in long-term, Pacific-led solutions. Our work prioritises strengthening eye health systems that communities can rely on – growing the local workforce, partnering with governments and providers, and building services that remain resilient over time.

The 100,000-surgeries milestone also underscores the value of investing in eye health. Globally, new research shows that every dollar invested in eye health delivers a return of \$28 in low and middle-income countries – and in Pacific contexts, the returns can be even higher¹. That means 100,000 surgeries – delivered for as little as \$25 each in some contexts – represents not just restored sight, but significant value retained through stronger workforce participation, productivity, and improved education outcomes – benefits that flow back into families, schools, and local economies.

While we are incredibly proud to celebrate this achievement, we remain focused on what comes next: reaching people earlier, restoring sight sooner, and preventing avoidable blindness before it begins.



The Pacific Eye Institute and Samoa team at Tupua Tamases Meaole (TTM) Hospital.

¹ Wong B, Hennessy J, Stern J, et al., The Value of Vision: The case for investing in eye health, Seva Foundation, The Fred Hollows Foundation, and IAPB, 2025, <https://visionatlas.iapb.org/>

Key Events

Papua New Guinea Centre for Eye Health gains momentum

In 2025, the Papua New Guinea Centre for Eye Health shifted from a long-awaited vision to a building rapidly taking shape within the grounds of Port Moresby General Hospital – a major step towards reducing avoidable blindness and vision impairment in Papua New Guinea.

After breaking ground in December 2024, our construction partner, Minpac, made steady progress. By May 2025, excavations were complete, and foundations were well underway. By July, foundations were in place, and construction of the superstructure had begun.

A key milestone came in August 2025, when New Zealand Prime Minister Christopher Luxon visited the site during his diplomatic visit, ahead of PNG's 50th Independence Anniversary celebrations.

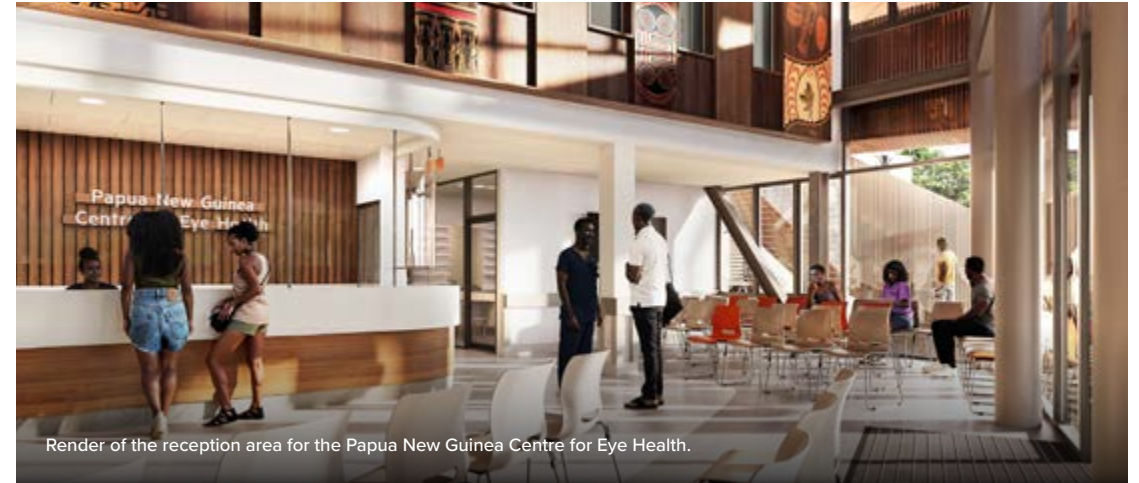


New Zealand Prime Minister Christopher Luxon pictured alongside the Papua New Guinea Centre for Eye Health stakeholders during his visit in August 2025.

His visit highlighted the long-standing partnership between New Zealand and PNG, and recognised New Zealand's \$18.9 million contribution to fund the Centre – its largest health infrastructure investment in PNG to date – alongside support from other donors and local partners.

By October, nearly a full year into construction, significant milestones had been reached: the ground-floor slab was poured, structural steel and precast panels were progressing, roofing and internal works were beginning, and essential site services – including stormwater and sanitation – were underway. Planning also advanced for the installation of equipment and building systems, including extensive engagement with suppliers and logistics providers, supporting completion in late 2026.

Importantly, 2025 progress was not only physical. The Foundation and our partners focused on operational readiness by strengthening the teaching team, developing new training pathways, and establishing how the Centre will be governed, staffed, and resourced once operational. A new Senior Lecturer in Ophthalmology, Dr Mulusew Melesse, began his role, and planning progressed to expand teaching capacity, including recruiting another local Ophthalmologist, developing a new optometry training curriculum, and establishing an eye nurse training course for the Centre. This will enable the Centre to deliver training for eye doctors, eye nurses, and optometrists, the latter marking a first for Papua New Guinea.



Render of the reception area for the Papua New Guinea Centre for Eye Health.

Partnership work also advanced, including new agreements to support provinces to build their eye care workforce and services, and to create a pipeline of trainees for the Centre. Donor partners continued to support Papua New Guinea's wider eye health system and the Centre's long-term sustainability, building on commitments from the New Zealand and Australian Governments, Latter-day Saints Charities, and The Fred Hollows Foundation (Australia).

Once finished, the Centre will be the first purpose-built facility dedicated to both specialist eye care services and training in Papua New Guinea. When the doors open, it will do far more than deliver eye surgeries.

The Centre will:

- help more people access quality eye care closer to home;
- support a new generation of locally trained eye health professionals; and
- reduce avoidable blindness across the country.

The Centre is being delivered through collaboration between The Fred Hollows Foundation NZ, PNG's National Department of Health, Port Moresby General Hospital, the University of Papua New Guinea's School of Medical and Health Sciences, the PNG National Prevention of Blindness Committee, and is a key enabler of Papua New Guinea's National Eye Health Strategic Plan (2025–2029).

Our Sustainability Initiatives

New evidence to build climate-resilient health facilities

We completed the research phase of our *Building Community-level Climate Resilience (BCCR)* project in 2025 and consolidated the findings into the 'Building Climate-Resilient Healthcare Facilities in the Pacific' report, released in November 2025.

The BCCR project aims to ensure Pacific communities and healthcare facilities can adapt to climate change and maintain uninterrupted essential services, including eye care.

Working with Pacific governments, provincial authorities and community stakeholders, we assessed the growing climate threats to health infrastructure — including extreme weather, rising sea-levels, flooding, and disruptions to power and water. Partnering with Edge Impact, we evaluated three Foundation-supported eye clinics in Solomon Islands, Vanuatu and Papua New Guinea, along with rural facilities in Madang Province within Papua New Guinea. Guided by the *World Health Organization's Climate Resilient and Environmentally Sustainable Health Care Facilities* framework, the assessment examined healthcare facility operations, infrastructure, and services in the context of climate vulnerability.

The report sets out practical, scalable actions to keep healthcare services safe, reliable, and sustainable. Recommendations focus on strengthening the health workforce for disaster preparedness, improving water, sanitation and medical waste systems, installing solar power with battery and backup systems, and upgrading buildings with stronger materials and climate-resilient design features such as passive cooling.

The research indicates these measures could add, on average, more than 30 operational days each year across the clinics reviewed and enable an additional 2,500+ medical interventions, a meaningful boost for communities that rely on consistent care.

In 2025, we disseminated the summary report and supporting technical assessments across the three participating countries, sharing findings with

ministries of health, provincial authorities, and community stakeholders to strengthen knowledge, support planning, and inform future investment in resilient, sustainable healthcare facilities.

Work is also underway to apply the research findings to climate resilience upgrades at Foundation-supported eye clinics. Alongside securing new water tanks in Vanuatu and Solomon Islands and delivering solar upgrades for the

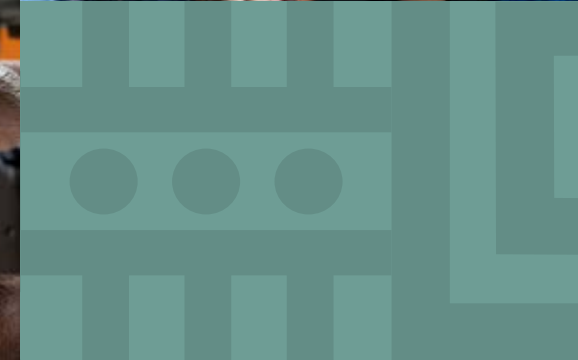
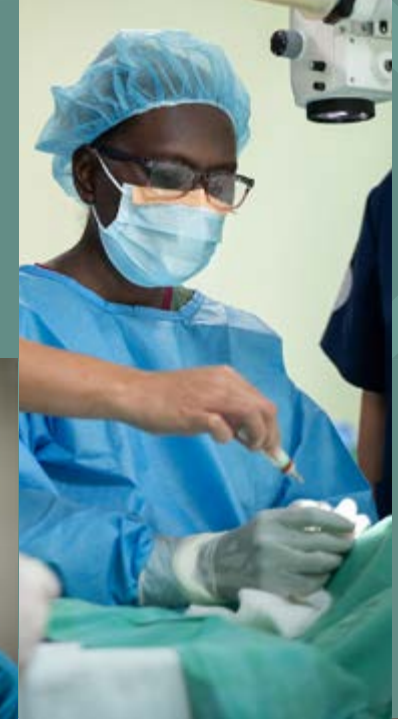
Madang eye clinic, the project is providing climate-smart infrastructure improvements to three rural health facilities in Madang Province.

The report was commissioned by The Foundation, with funding from the NZ Ministry of Foreign Affairs and Trade (MFAT), through its *Climate Finance for Community Resilience* programme.



The 'Building Climate-Resilient Healthcare Facilities in the Pacific' report was released in November 2025. Pictured is the dissemination workshop in Solomon Islands.

2025 Consolidated General Purpose Financial Report



Statement of Compliance and Responsibility

for the year ended 31 December 2025

This Performance Report reflects operations for the year ended 31 December 2025 for the Consolidated Group of The Fred Hollows Foundation NZ ('The Foundation'). The Foundation is required to report under the Public Benefit Entity Standards Reduced Disclosure Regime (PBE Standards RDR) as a Tier 2 entity (having annual operating expenses greater than \$5 million and less than \$33 million), with specific notes and disclosures required.

The Board accepts responsibility for the preparation of the annual Consolidated General Purpose Financial Report and the judgements used therein.

Management (including the Chief Executive Officer and others directed by the Board) accepts responsibility for establishing and maintaining policies and procedures and systems of internal controls designed to provide reasonable assurance as to the integrity and reliability of The Foundation's financial reporting.

It is the opinion of the Board and Management that the annual Consolidated General Purpose Financial Report, which comprises the consolidated statement of financial position as at 31 December 2025, the consolidated statement of service performance, consolidated statement of comprehensive revenue and expenses, consolidated statement of changes in net assets/equity, consolidated statement of cash flows for the year then ended, and notes to the consolidated financial statements, including a summary of significant accounting policies for the financial year ended 31 December 2025 fairly reflect the service performance, financial position, operations and cash flows of The Foundation.

The Foundation's 2025 Performance Report is authorised for issue by the Board.

Craig Fisher
Board Chair



Signature of Board Chair

25 / 05 / 2026

Date



Katieli, a high school teacher from Tokelau, travelled to Samoa for sight-restoring eye surgery

Auditor's Report

Report on the Audit of the Performance Report

Opinion

We have audited the Performance Report of The Fred Hollows Foundation NZ ("The Foundation") and its controlled entities (together, "the Group"), which comprise the consolidated statement of service performance on **pages 27 to 34** and the consolidated financial statements on **pages 37 to 56**. The complete set of consolidated financial statements comprise the consolidated statement of financial position as at 31 December 2025, the consolidated statement of comprehensive revenue and expense, consolidated statement of changes in net assets/equity, consolidated statement of cash flows for the year then ended, and notes to the consolidated financial statements, including a summary of significant accounting policies.

In our opinion the accompanying performance report presents fairly, in all material respects:

- the consolidated financial position of the group as at 31 December 2025, and its consolidated financial performance, and its consolidated cash flows for the year then ended; and
- the consolidated statement of service performance for the year ended 31 December 2025, in that the service performance information is appropriate and meaningful and prepared in accordance with the Group's measurement bases or evaluation methods,

in accordance with Public Benefit Entity Standards Reduced Disclosure Regime ("PBE Standards RDR") issued by the New Zealand Accounting Standards Board.

Basis for Opinion

We conducted our audit of the consolidated financial statements in accordance with International Standards on Auditing (New Zealand) (ISAs (NZ)) and the audit of the consolidated statement of service performance in accordance with the ISAs (NZ) and New Zealand Auditing Standard 1 (NZ AS 1) (Revised) *The Audit of Service Performance Information (NZ)*. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Performance Report section of our report. We are independent of the Group in accordance with Professional and Ethical Standard 1 *International Code of Ethics for Assurance Practitioners (including International Independence Standards) (New Zealand)* issued by the New Zealand Auditing and Assurance Standards Board, 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.

Other than in our capacity as auditor we have no relationship with, or interests in, The Foundation or its controlled entity/any of its controlled entities.

Other Matter

The financial information of The Fred Hollows Foundation NZ SI Trust Board (Incorporated), a component of the Group, was audited by another auditor for the first time in the current year. The component auditor issued a qualified opinion on the financial information of The Fred Hollows Foundation NZ SI Trust Board (Incorporated) for the year ended 31 December 2025 regarding a limitation of scope on unaudited opening balances.

Our opinion on the Group financial statements is not modified in respect of this matter, as it is not considered to be a significant component of the Group and this qualification does not materially impact the overall Group financial statements.

Other Information

The Trustees are responsible for the other information. The other information obtained at the date of this auditor's report is information contained in the general purpose financial report, but does not include the consolidated statement of service performance and the consolidated financial statements and our auditor's report thereon.

Our opinion on the consolidated statement of service performance and consolidated financial statements does not cover the other information and we do not express any form of audit opinion or assurance conclusion thereon.

In connection with our audit of the consolidated statement of service performance and consolidated financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the consolidated statement of service performance and the consolidated financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, 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.

Auditor's Report

Trustees' Responsibilities for the Performance Report

Those charged with governance are responsible on behalf of the Group for:

- a) the preparation and fair presentation of the consolidated financial statements and consolidated statement of service performance in accordance with PBE Standards RDR;
- (b) the selection of elements/aspects of service performance, performance measures and/or descriptions and measurement bases or evaluation methods that present a statement of service performance that is appropriate and meaningful in accordance with PBE Standards RDR;
- (c) the preparation and fair presentation of the statement of service performance in accordance with the Group's measurement bases or evaluation methods, in accordance with PBE Standards RDR;

- (d) the overall presentation, structure and content of the statement of service performance in accordance with PBE Standards RDR; and
- (e) such internal control as those charged with governance determine is necessary to enable the preparation of the consolidated financial statements and consolidated statement of service performance that are free from material misstatement, whether due to fraud or error.

In preparing the Performance report those charged with governance are responsible for assessing the Group'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 those charged with governance either intend to liquidate the Group or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Performance Report

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole, and the consolidated statement of service performance 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 (NZ) and NZ AS 1 (Revised) 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 or collectively, they could reasonably be expected to influence the decisions of users taken on the basis of this Performance report.

A further description of the auditor's responsibilities for the audit of the Performance Report is located at the XRB's website at:

<https://www.xrb.govt.nz/standards/assurancestandards/auditors-responsibilities/auditreport-13/>

This description forms part of our auditor's report.

Who We Report To

This report is made solely to The Foundation's Trustees, as a body. Our audit work has been undertaken so that we might state those matters which we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than The Foundation and The Foundation's Trustees, as a body, for our audit work, for this report or for the opinions we have formed.



BDO Auckland
Auckland
New Zealand

27 May 2026

Consolidated Statement of Service Performance

Our Vision

A world in which no person is needlessly blind or vision impaired.

Our Purpose

We work to end avoidable blindness and vision impairment in the Pacific;

We advocate for the right of all people to high-quality and affordable eye care; and

We strive for eye care to be locally-led and accessible to all.

Our Strategy

Our 10-year strategy guides our ongoing collaborative work with Pacific governments and stakeholders as they continue to determine, lead, and strengthen their own sustainable and resilient quality eye health systems. *Our Strategy* has been developed to chart our voyage with Pacific Island countries. We support our partners' ongoing efforts to strengthen and integrate eye health within overall health systems.

Our Strategy Goal

Pacific people are benefitting from their own sustainable and resilient quality eye health systems.

To enable us to progress *Our Strategy's* goal, four Key Focus Areas (KFAs) have been prioritised, each with a corresponding level of Ambition.

Key Focus Area 1

Support Eye Health System Strengthening

The integration of eye health systems into national health systems is imperative for sustainability. Working in partnership with Pacific Island countries, an eye health system strengthening approach will be at the centre of our efforts.¹

Key Focus Area 2

Support Eye Health Workforce Development

Workforce development has been the cornerstone of our commitment to establish an effective and efficient eye health workforce to deliver quality eye care. In partnership with Pacific Island countries and national and regional training institutions, we will continue to support the development of a representative clinical and allied eye health workforce that meets the eye health needs of Pacific people.

Key Focus Area 3

Strengthen Pacific Eye Health Governance Capacity

The Foundation will support Pacific Island countries and their partners to determine the development of their own eye health governance modality and/or strengthen their governance capability within their overall health systems.

Key Focus Area 4

Evolve The Fred Hollows Foundation NZ

We will continue to develop our organisational capabilities so we can effectively support Pacific Island countries to further strengthen their own eye health systems. We are challenging ourselves to step away from key areas of management and operations when appropriate as our partners strengthen their own capability. We will continue to evolve into an organisation that specialises in targeted workforce support, partnership and collaboration, innovation, research and advocacy, and resource mobilisation.

Our shared Ambitions over the next 10 years:

Pacific Island countries have strong nationally-integrated eye health systems.

Pacific Island countries have a quality, representative, and sustainable eye care workforce.

Eye health systems are determined, governed, and managed by national partners.

The Foundation evolves its capability and capacity as a partner supporting Pacific national and regional partners' aspirations to strengthen sustainable eye health systems.

2025 was the third year of *Our Strategy* implementation. Some key progress highlights towards our Key Focus Areas (KFAs) Ambitions are shown in the following.

Our Progress of our Key Focus Areas

Key Focus Area 1

Support Eye Health System Strengthening

Ambition

Pacific Island countries have strong nationally integrated eye health systems.

Milestone

There is stronger leadership and governance in Pacific Island countries to drive and sustain eye health system strengthening.



What we delivered

In 2025, together with our partners, we delivered **114 outreach programmes**, providing **56,205 eye consultations** and **4,261 sight-restoring surgeries** across the Pacific. These services bringing essential care closer to people who would otherwise go without, particularly those living in remote and underserved communities.

While much of this work takes place in larger countries such as Papua New Guinea and Fiji, reaching smaller and more isolated populations remains a critical priority. This was demonstrated through a specialist outreach in Samoa led by the Pacific Eye Institute (PEI), where **79 patients received surgical care**, including **24 people who travelled from Tokelau** that had been identified through an earlier screening. This outreach highlights the strength of regional partnerships, with ministries of health, PEI and The Foundation working together to ensure no one is left behind.



What changed

Alongside delivering services, we continued to invest in the systems that enable long-term impact. Research and data play a vital role in helping countries plan and prioritise eye care. Through a five-year collaboration with Pacific governments, the New Zealand Government, the University of Auckland and Ian Anderson Economics, we are building the evidence needed to guide sustainable decision-making through the State of Eye Health research programme.

In 2025, Tonga completed its first-ever Rapid Assessment of Avoidable Blindness (RAAB) survey, providing a comprehensive picture of vision loss and eye health needs. Together with the Samoa RAAB completed in 2024, this work is strengthening the region evidence base for planning and investment.

Solomon Islands and Vanuatu also completed national eye health system assessments using the World Health Organization's Eye Care Situation Analysis Tool (ECSAT), providing practical insights to improve service access, workforce capacity, infrastructure and long-term planning.

Papua New Guinea remains a key focus of our systems strengthening work. Construction of the Papua New Guinea Centre for Eye Health continued to progress, alongside agreements to support its governance and long-term sustainability. Partnerships with Provincial Health Authorities are expanding local eye care capacity by developing a pipeline of students who will train at the Centre and return as qualified eye doctors and nurses to serve their communities.

Through our Building Climate-Resilient Healthcare Facilities programme, we supported partners in Papua New Guinea, Solomon Islands and Vanuatu to assess climate risks and implement practical upgrades to strengthen facility resilience. This included improving infrastructure, strengthening service continuity, and supporting local teams to plan for climate-related disruptions.

Key Focus Area 1

Why it matters

Access to eye care in the Pacific remains limited for many people, particularly those living in remote and underserved communities. By combining immediate service delivery with long-term investment in research, infrastructure and system planning, we are helping countries move beyond short-term interventions toward sustainable, locally led eye health systems.

Outreach services restore sight today, while data, infrastructure and workforce planning enable governments to better understand need, prioritise investment, and deliver care more effectively over time. Together, these efforts help ensure that eye care is accessible, equitable, and consistently available for future generations.

As demand for eye care continues to grow, this integrated approach is critical. By supporting resilient systems that can respond to the rising impact of non-communicable diseases, dispersed and remote populations, and increasing climate pressures, we are building a future where no one is needlessly blind or vision impaired.

Indicator	Actual 2025	Target 2025	Actual 2024	Target 2024
Number of eye consultations supported through outreach and main clinic services ⁽¹⁾	56,205	39,575	58,488	⁽⁴⁾ 45,775
Number of eye surgeries supported through outreach and main clinic services ⁽¹⁾	4,261	3,402	3,955	⁽⁴⁾ 3,090
Number of Pacific and national outreach visits supported ⁽¹⁾	114	108	129	109
Number of eye health research and innovation projects that are being conducted with support from The Foundation ⁽²⁾	7	5	8	7
Value of ophthalmic equipment procured through The Foundation and workforce support ⁽³⁾	\$391,619	\$2,008,280	\$326,901	\$339,452
Number of clinical governance audits, workshops and meetings across the Pacific region	14	17	18	10

Notes:

- ⁽¹⁾ These results are reported by eye clinics which are directly supported by The Foundation which comprise the Pacific Eye Institute (Fiji), Madang Eye Clinic (Papua New Guinea) and the Regional Eye Centre (Solomon Islands) and the outreaches delivered by these clinics. 'Directly supported' refers to clinics that include staff employed by The Foundation.
- ⁽²⁾ Includes RAAB surveys, ECSAT assessments, evaluations, innovation projects, and longer-term research programmes.
- ⁽³⁾ The value of ophthalmic equipment purchased varies each year, depending on the level and timing of grant funding allocated for this purpose. The 2025 target included planned procurement for the Papua New Guinea Centre for Eye Health; however, this expenditure has been deferred to 2026.
- ⁽⁴⁾ The prior year target has been corrected to exclude graduate targets, which are not captured in this table. Graduate Impact is reported separately on page 19.

Outreaches

67	Fiji
1	Nauru
22	Papua New Guinea
1	Samoa
10	Solomon Islands
1	Tokelau
7	Tonga
2	Tuvalu
3	Vanuatu
114	Total

Eye Care Services

56,205	Consultations
4,261	Surgeries

Key Focus Area 2

Support Eye Health Workforce Development

Ambition

Pacific Island Countries have a competent, quality and sustainable eye care workforce.

Milestone

National eye health workforce is integrated into national health planning in accordance with Universal Health Coverage. Pacific Island Countries have an increasingly sustainable competent eye health workforce.



What we delivered

In 2025, we continued to invest in building a skilled and confident Pacific eye care workforce. Across the region, **38 eye doctors and nurses were supported in formal training programmes, with 25 graduates completing their qualifications and a further 10 continuing their studies.**

In addition, 233 eye care professionals were trained or upskilled through workshops, mentoring, and continuous professional development activities. These initiatives support clinicians at all stages of their careers, helping them strengthen their skills and deliver high-quality care in their own communities.



What changed

We strengthened our approach to workforce development by focusing on more flexible, locally relevant training models that respond to health system needs. Across the Pacific, many eye care services are delivered by mid-level clinicians, often with limited access to specialist support. Addressing these gaps requires new ways of delivering training and building capability.

A key development has been the design of a **satellite training model**, combining remote learning with supervised, hands-on clinical experience. Supported by regional partners including Fiji National University, the Regional Eye Centre and hospitals across the Pacific, this model will enable trainees to gain more surgical experience and mentorship closer to home. The satellite training model is expected to launch in 2026.

We advanced **digital learning initiatives** to improve access to training. The PEI EYTrain Refraction module, piloted in Papua New Guinea and Solomon Islands, is enabling more flexible learning and continuous professional development. This will form part of a broader digital curriculum, including plans to digitise postgraduate eye care training and develop learning modules for rural health workers.



Why it matters

A strong, locally trained workforce is essential to delivering sustainable eye care. As Pacific populations grow and age, demand for services such as cataract surgery, spectacles and diabetic eye care are increasing. Meeting this need depends on having skilled clinicians who can provide care consistently within their own health systems.

By investing in training, career pathways and ongoing professional development, we are helping build a workforce that is not only technically capable, but also confident and supported to lead services in their own countries.

This approach reduces reliance on external support and ensures that eye care services can continue to grow and adapt over time. It also strengthens local leadership, enabling Pacific countries to take greater ownership of their eye health systems and deliver care that is accessible, equitable and sustainable for future generations.

Key Focus Area 2

Indicator	Actual 2025	Target 2025	Actual 2024	Target 2024
Number of doctors and eye nurses that have graduated with a PGDO/MMed/PGDEC/ADEC qualification ⁽¹⁾	25 (11F, 14M)	29 (14F, 15M)	31 (21F, 10M)	34 (24F, 10M)
Number of eye care workforce attendees receiving training and upskilling support	233	203	270	195
Number of doctors and eye nurses enrolled in PGDO/MMed/PGDEC/ADEC qualifications ⁽¹⁾	38 (19F, 19M)	41 (22F, 19M)	36 (24F, 12M)	38 (26F, 12M)

Notes:

⁽¹⁾ Eye doctor training pathway includes:

- PGDO (Postgraduate Diploma in Ophthalmology): 1 year (Fiji and Papua New Guinea); followed by
- MMed (Master of Medicine - Ophthalmology): 3 years (Fiji and Papua New Guinea).

Eye nurse training pathways include:

- PGDEC (Postgraduate Diploma in Eye Care): 1 year (Fiji); or
- ADEC (Advanced Diploma in Eye Care): 1 year (Papua New Guinea).

F = Female | M = Male

Graduates

11
Females (F) 

14
Males (M) 

25 Total Graduates

Workforce Training Attendees

233 



Eye nurse Asenaca conducts a visual acuity test at the clinic in Tavua, Fiji.

Key Focus Area 3

Strengthen Pacific Eye Health Governance Capacity

Ambition

Eye health systems are determined, governed, and managed by national partners.

Milestone

Papua New Guinea (Madang Eye Clinic; Centre for Eye Health), Fiji (Pacific Eye Institute), and Solomon Islands (Regional Eye Centre), have nationally determined and led governance modalities driving funding and resourcing, advocacy, and strategic dialogue for their national eye health systems.

✓ What we delivered

In 2025, we continued to support Pacific eye health leadership at both national and regional levels. A key milestone was the **Pacific Eye Care Society (PacEYES) conference**, held in Samoa for the first time, bringing together **over 110 eye health professionals** from across the region.

The conference provided a platform for clinical learning, knowledge sharing and professional networking, helping clinicians stay up to date with best practice while strengthening connections across the Pacific workforce. A survey of participants confirmed the value of this engagement, with **96% reporting strong professional development benefits** and **78% highlighting its importance for ongoing learning**.

We supported a **National Eye Health Leaders Workshop**, attended by eye care leaders and coordinators from eight Pacific countries. The workshop focused on building practical skills in data analysis, monitoring and reporting, as well as strengthening understanding of systems leadership and the impacts of climate change on health systems.

↻ What changed

We strengthened the capacity of regional and national leadership structures to support more coordinated and effective eye health systems. This included supporting PacEYES to enhance its operational capacity, expand its role in training and research, and develop a clear strategy for future growth and engagement.

At the national level, we continued to work closely with ministries of health to strengthen leadership and governance. In Vanuatu, this included finalising the Eye Care Situation Analysis Tool (ECSAT) report and supporting the integration of eye health indicators into national health planning. This work contributed to the establishment of a funded **National Eye Care Coordinator role**, embedding leadership within the health system.

Progress was also made on strengthening partnership agreements, including advancing a new agreement with the Vanuatu Ministry of Health to support coordinated, system-level eye health reform.

+ Why it matters

Strong leadership is critical to building sustainable eye health systems. National coordinators, clinical leaders and regional networks play a key role in shaping policy, coordinating services, and advocating for investment in eye care.

By supporting leadership development and regional collaboration, we are helping create the conditions for Pacific-led solutions. This ensures that eye health services are not only technically effective but also aligned with national priorities and responsive to local needs.

Regional platforms like PacEYES also help address the challenges of a small and dispersed workforce, enabling peer learning, shared problem-solving, and a stronger sense of professional identity across the Pacific.

Together, these efforts are building a more connected, capable and confident eye health leadership community; one that can drive long-term, sustainable improvements in eye care across the region.

Key Focus Area 3

Indicator	Actual 2025	Target 2025	Actual 2024	Target 2024
Number of countries that have been supported to establish national eye care coordination and/or planning capacity	6 countries with Eye Care Coordinators (1 commenced in 2025)	7 countries with Eye Care Coordinators	5 countries with Eye Care Coordinators (3 commenced in 2024)	5 countries with Eye Care Coordinators
Number of countries that have been supported with multi-stakeholder eye health country workshops and/or planning activities	7	7	7	7

6

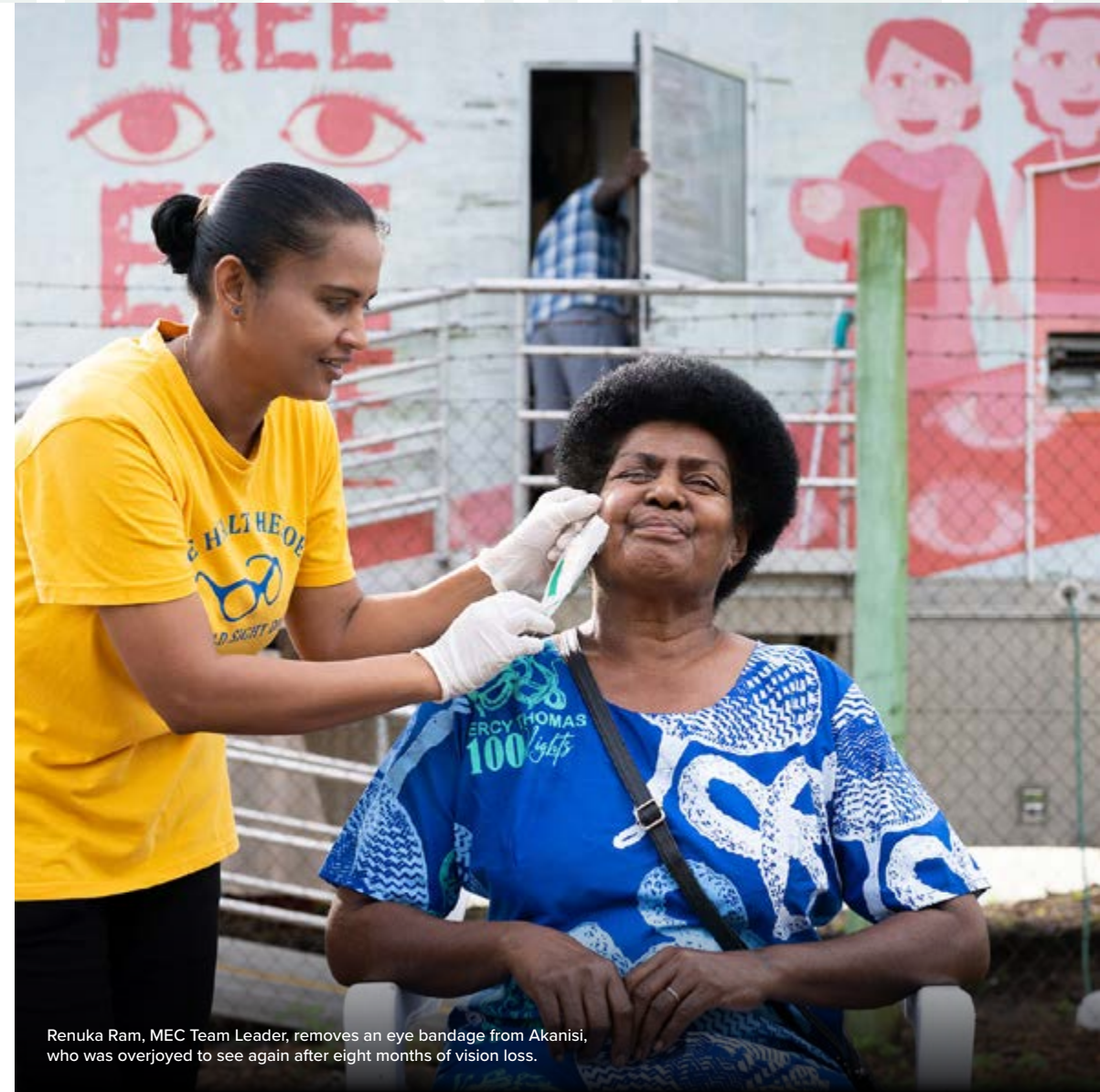


National Eye Care Coordinators supported

7



Countries with National Eye Health Programming



Renuka Ram, MEC Team Leader, removes an eye bandage from Akanisi, who was overjoyed to see again after eight months of vision loss.

Key Focus Area 4

Evolve The Fred Hollows Foundation NZ

Ambition

The Foundation evolves its capability as a partner supporting Pacific national and regional partner's aspirations to strengthen sustainable eye health systems.

Milestone

The Foundation is adapting based on country and regional capabilities and context.



What we delivered

In 2025, we continued to strengthen how we support our Pacific partners by improving systems, processes and organisational capability. A key focus was enhancing how we collect, manage and use data to inform decision-making and improve performance.

We introduced a streamlined system that connects programme data with finance and reporting, providing clearer insights across the region. Through the Pacific EyeTrack system, partner data is now integrated monthly, enabling more consistent reporting and better visibility of progress.

We also strengthened alignment between our planning and Pacific priorities. With most partner countries now having national eye health plans in place, these are increasingly guiding our annual workplans and investment decisions.

Our fundraising and engagement efforts continued to grow, supporting both immediate service delivery and long-term system development. We saw strong performance across multiple fundraising channels, alongside increased digital engagement and expanded media visibility through targeted storytelling.



What changed

We are increasingly shifting toward approaches that strengthen local ownership and long-term sustainability. This includes supporting Pacific teams to use data not only for reporting, but also to guide planning, problem-solving and decision-making.

We also advanced key organisational strategies, including sustainable funding and resourcing, communications and IT. New ambassador initiatives were introduced to broaden our reach and deepen engagement with supporters.

At the same time, we successfully managed leadership and workforce transitions, ensuring continuity across finance, programme delivery and clinical operations.

We also strengthened governance and internal systems, including the introduction of an overarching Policy Framework to guide the development, implementation and review of organisational policies.



Why it matters

Strong systems and organisational capability are essential to delivering lasting impact. By improving how we use data, plan our work and allocate resources, we are ensuring that our support is more effective, responsive and aligned with the priorities of our Pacific partners.

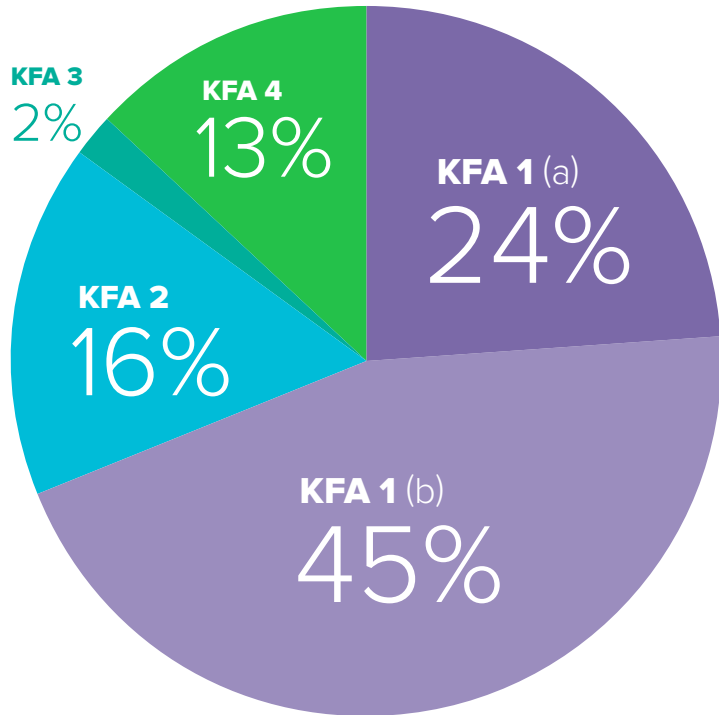
Increasing local ownership of data and decision-making is particularly important. It enables Pacific teams to lead their own planning, respond to challenges in real time, and identify new opportunities to strengthen eye health systems.

At the same time, growing and diversifying our funding base ensures we can continue to invest in both immediate service delivery and long-term system change. Strengthening our internal systems and governance also supports transparency, accountability and trust with our partners and donors.

Together, these improvements ensure that The Foundation remains agile, resilient and well positioned to support Pacific-led eye health systems now and into the future.

Programme Expenses by Key Focus Area

2025 Programme Expenses
\$19,413,349



KFA 1 (a)
 Support Eye Health System Strengthening

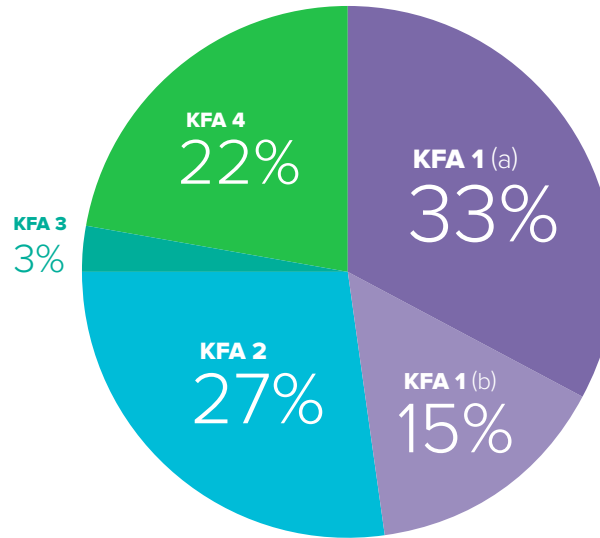
KFA 1 (b)
 Papua New Guinea Centre for Eye Health

KFA 2
 Support Eye Health Workforce Development

KFA 3
 Strengthen Pacific Eye Health Governance Capacity

KFA 4
 Evolve The Fred Hollows Foundation NZ

2024 Programme Expenses
\$12,844,783



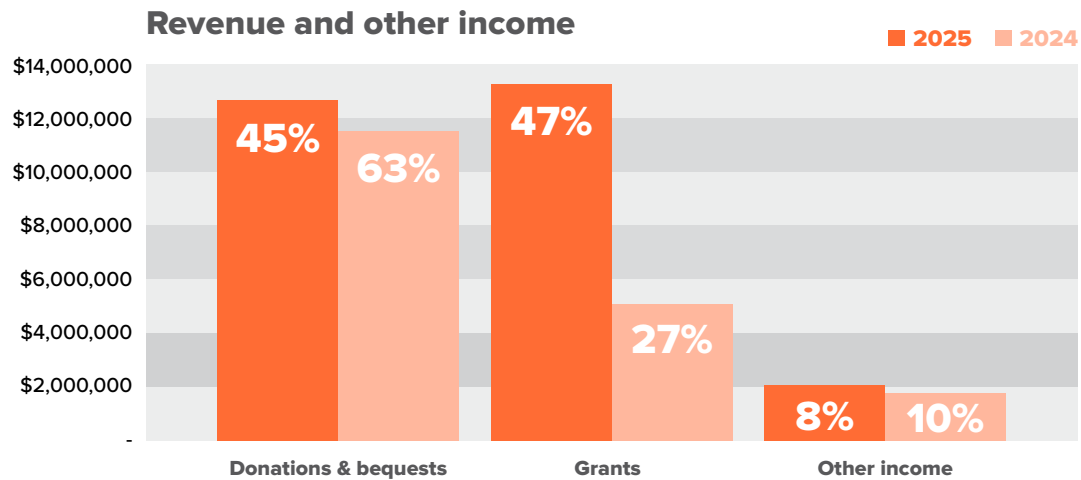
Henry Hua at the Tokelau surgical outreach at TTM Hospital in Apia, Samoa.

Funds Source and Destination

Where the money came from

Total 2025 revenue
and other income
\$27,547,267

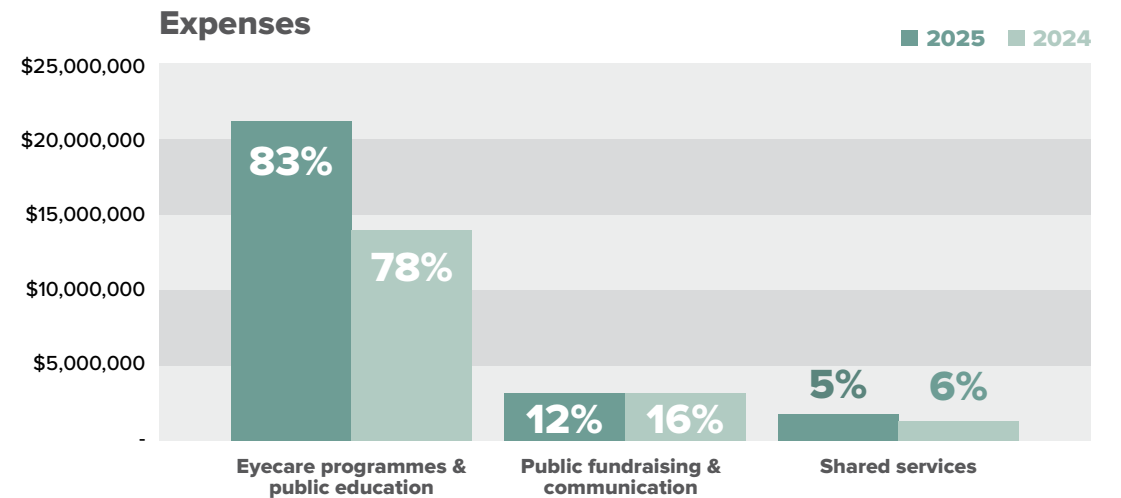
Total 2024 revenue
and other income
\$18,570,482



Where the money was spent

Total 2025 expenses
\$25,271,862

Total 2024 expenses
\$18,206,836



This growth in revenue and expenses reflects strong donor confidence and increased investment in long-term solutions, particularly the Papua New Guinea Centre for Eye Health, a project that will transform access to eye care for generations.

Consolidated Statement of Comprehensive Revenue and Expenses

for the year ended 31 December 2025



Cornelius lived with near-blindness for two years. After travelling a long distance to Alotau for surgery, his sight was restored.

	Note	2025 \$	2024 \$
Revenue			
Revenue from Exchange Transactions		120,386	123,400
Revenue from Non-Exchange Transactions	5.1	25,512,321	16,917,107
Total Revenue		25,632,707	17,040,507
Less Cost of Goods Sold			
Cost of Spectacles, Medical Supplies and Gift of Sight Products - Exchange Transactions		61,403	106,062
Total Cost of Goods Sold		61,403	106,062
Gross Surplus		25,571,304	16,934,445
Less Other Expenses			
Engagement Expenses	6	4,439,727	4,414,894
Programme Expenses	7	19,413,349	12,844,783
Shared Services Expenses	8	1,094,075	979,755
Total Other Expenses		24,947,151	18,239,432
Total Surplus/(Deficit) before Net Finance Income		624,153	(1,304,987)
Net Finance Income			
Finance Income		1,914,560	1,529,975
Less Finance Expenses		174,457	44,562
Total Net Finance Income	10	1,740,103	1,485,413
Total Surplus for the Year		2,364,256	180,426
Other Comprehensive Revenue and Expenses			
Exchange Differences in Translation of Foreign Operations		(88,851)	183,220
Total Comprehensive Revenue and Expenses for the Year		2,275,405	363,646

The above Consolidated Statement of Comprehensive Revenue and Expenses should be read in conjunction with the Notes on [pages 41 to 56](#).

Consolidated Statement of Changes in Net Assets/Equity

for the year ended 31 December 2025



Nurse Asi Sua Mailei at TTM Hospital Eye Clinic in Apia, Samoa

Note	Accumulated Comprehensive Revenue and Expenses \$	Contingency Reserve \$	Foreign Currency Translation Reserve \$	Total Net Assets/Equity \$
Opening Balance 1 January 2024	6,028,000	6,500,000	(11,285)	12,516,715
Total Comprehensive Revenue and Expenses for 2024	180,426	-	183,220	363,646
Closing Net Assets/Equity 31 December 2024	6,208,426	6,500,000	171,935	12,880,361
Opening Balance 1 January 2025	6,208,426	6,500,000	171,935	12,880,361
Total Comprehensive Revenue and Expenses for 2025	2,364,256	-	(88,851)	2,275,405
Closing Net Assets/Equity 31 December 2025	8,572,682	6,500,000	83,084	15,155,766

The above Consolidated Statement of Changes in Net Assets/Equity should be read in conjunction with the Notes on [pages 41 to 56](#).



Dr Manoj Sharma and Dr Nola Pikacha at the Tokelau surgical outreach at TTM Hospital in Apia, Samoa.

Consolidated Statement of Financial Position

as at 31 December 2025



Renuka Ram screening a patients eye at the Pacific Eye Institute

	Note	2025 \$	2024 \$
Current Assets			
Cash and Cash Equivalents	11	15,842,924	6,673,187
Derivative Financial Assets		564,482	-
Goods and Services Tax Receivable		981,450	266,964
Inventory and Goods in Transit	12	944,929	769,871
Prepayments from Exchange Transactions	13	258,371	301,858
Receivables from Exchange Transactions		19,331	48,541
Receivables from Non-Exchange Transactions	14	327,778	265,725
Short-term Investments	15	120,000	1,620,000
Total Current Assets		19,059,265	9,946,146
Non-Current Assets			
Investments at Fair Value	16	8,402,600	8,487,630
Property, Plant and Equipment	17	1,835,731	1,935,791
Total Non-Current Assets		10,238,331	10,423,421
Total Assets		29,297,596	20,369,567
Current Liabilities			
Deferred Revenue from Non-Exchange Transactions	18	12,351,529	5,585,528
Employee Entitlements	19	649,885	648,413
Other Payables and Accruals		704,550	764,532
Trade Payables from Exchange Transactions		435,866	490,733
Total Current Liabilities		14,141,830	7,489,206
Total Liabilities		14,141,830	7,489,206
Net Assets		15,155,766	12,880,361
Equity			
Accumulated Comprehensive Revenue and Expenses	20	8,572,682	6,208,426
Contingency Reserve	21	6,500,000	6,500,000
Foreign Currency Translation Reserve		83,084	171,935
Total Equity		15,155,766	12,880,361

The above Consolidated Statement of Financial Position should be read in conjunction with the Notes on [pages 41 to 56](#).

Consolidated Statement of Cash Flows

for the year ended 31 December 2025



Patients waiting for their cataract surgery at Tupua Tamasese Meaole Hospital in Samoa.

	Note	2025 \$	2024 \$
Cash Flows from Operating Activities			
Inflows from:			
Grants, Donations, and Bequests received		31,791,959	20,995,829
Other Cash received from Operating Activities		409,675	146,823
Interest received		258,151	203,015
Outflows for:			
Payments to Suppliers and Employees		(24,711,808)	(17,142,500)
Net GST paid		(714,486)	(40,721)
Net Cash Inflows from Operating Activities		7,033,491	4,162,446
Cash Flows from Investing Activities			
Inflows from:			
Disposal of Property, Plant and Equipment		-	373
Redemption of Short-term Investments		1,500,000	-
Withdrawal of Investments at fair value		1,000,000	-
Outflows for:			
Purchase of Short-term Investments (net)		-	(500,000)
Purchase of Property, Plant and Equipment		(321,754)	(233,385)
Net Cash Inflows/(Outflows) from Investing Activities		2,178,246	(733,012)
Net Increase in Cash and Cash Equivalents			
Effect of Exchange Rate Fluctuations on Cash Held		(42,000)	41,183
Cash and Cash Equivalents at Beginning of Year		6,673,187	3,202,570
Cash and Cash Equivalents at End of Year	11	15,842,924	6,673,187

The above Consolidated Statement of Cash Flows should be read in conjunction with the Notes on [pages 41 to 56](#).

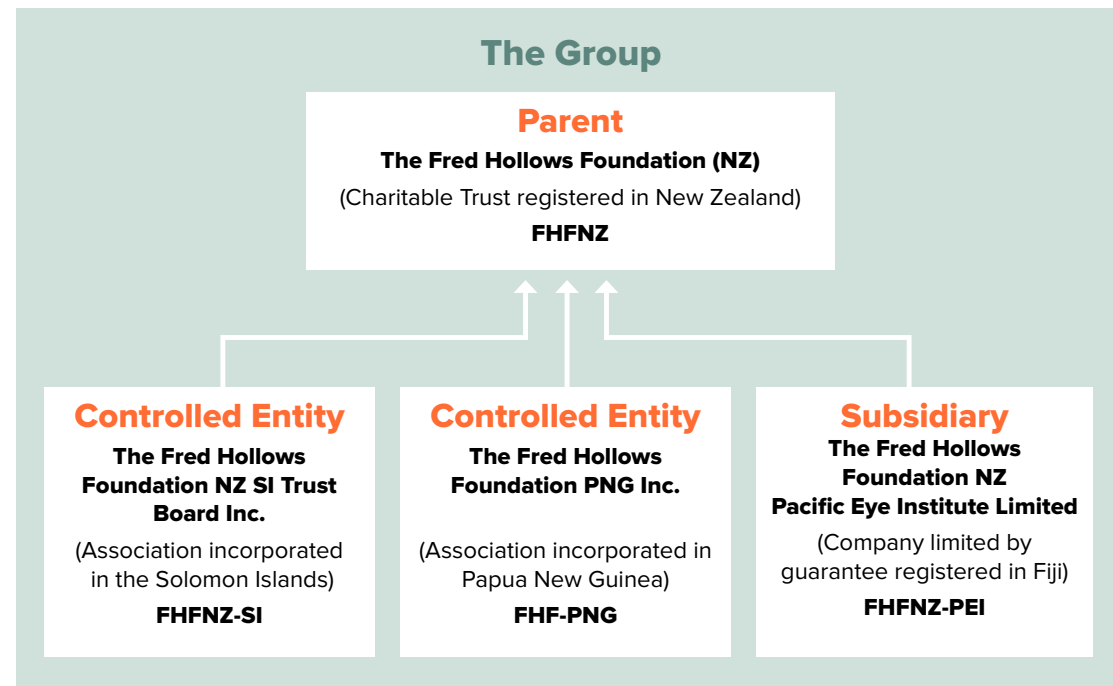
Notes to the Consolidated Financial Statements

for the year ended 31 December 2025



A local Samoan nurse and a visiting nurse from the Pacific Eye Institute in Fiji share a moment during the Tokelau surgical outreach in Samoa, where patients travelled for sight-restoring surgery.

1. Reporting Entity



The Fred Hollows Foundation (NZ) ('FHFNZ') was incorporated as a charitable trust under the Charitable Trusts Act 1957 on 5 November 1992 and registered as a charitable entity under the Charities Act 2005 (CC23722) on 30 April 2008. FHFNZ is incorporated and domiciled in New Zealand and is a Public Benefit Entity ('PBE') for the purpose of financial reporting in accordance with the Financial Reporting Act 2013.

FHFNZ, its subsidiary The Fred Hollows Foundation NZ Pacific Eye Institute Limited ('FHFNZ-PEI') and its controlled entities The Fred Hollows Foundation PNG Inc. ('FHF-PNG') and

The Fred Hollows Foundation NZ SI Trust Board Inc. ('FHFNZ-SI'), comprise 'The Foundation' within these consolidated financial statements.

Certain prior year comparatives have been reclassified to aid comparability with the Consolidated Statement of Service Performance, Consolidated Statement of Comprehensive Revenue and Expenses, Consolidated Statement of Changes in Net Assets/Equity, Consolidated Statement of Financial Position and Consolidated Statement of Cash Flows.

2. Basis of Preparation

2.1 Measurement basis

The consolidated financial statements have been prepared on the historical cost basis except for the following material items in the statement of financial position, which are measured at fair value through surplus or deficit:

- Investments
- Derivative financial instruments

2.2 Statement of compliance

The consolidated financial statements and consolidated statement of service performance have been prepared in accordance with New Zealand Generally Accepted Accounting Practice (NZ GAAP). The Foundation is a public benefit entity for the purpose of financial reporting and complies with the Public Benefit Entity Standards Reduced Disclosure Regime (PBE Standards RDR) as appropriate for Tier 2 not-for-profit public benefit entities as it does not have public accountability and is not large (i.e. does not have total expenses over \$33 million). All reduced disclosure regime exemptions have been adopted.

2.3 Functional and presentation currency

The consolidated financial statements are presented in New Zealand Dollars (\$) which is the controlling entity's functional and The Foundation's presentation currency, rounded to the nearest dollar.

There has been no change in the functional currency of The Foundation or any significant foreign operations of The Foundation during the year.

2.4 Basis of consolidation

Controlled entities

Controlled entities are those entities over which The Foundation has control. Control exists when The Foundation:

- has power over investee;
- is exposed, or has rights, to variable benefits from its involvement with the investee; and
- has the ability to use its power to affect those benefits.

This definition of control is consistent with PBE IPSAS 35 Consolidated Financial Statements.

The Foundation consolidates the financial statements of its controlled entities from the date on which control is obtained until the date control ceases. The operations of controlled entities, namely FHFNZ-PEI, FHF-PNG and FHFNZ-SI, are included in these consolidated financial statements.

Changes in The Foundation's ownership interest in a controlled entity that do not result in a loss of control are accounted for as equity transactions.

Foreign currency

Transactions in foreign currencies are translated into the respective functional currencies of Group entities at the exchange rates at the dates of the transactions.

Monetary assets and liabilities denominated in foreign currencies are translated at the exchange rate at the reporting date. Exchange differences arising are recognised in the Consolidated Statement of Comprehensive Revenue and Expense.

The results and financial position of foreign operations are translated into New Zealand dollars as follows:

- assets and liabilities are translated at the closing rate at the reporting date;
- revenue and expenses are translated at average exchange rates for the period (where this approximates the exchange rates at the dates of the transactions).

Exchange differences arising on translation are recognised in the foreign currency translation reserve within net assets/equity and presented in the Consolidated Statement of Changes in Net Assets/Equity.

Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of GST, except for receivables and payables, which are stated inclusive of GST.

FHFNZ-PEI is not registered for the in-country equivalent of Value Added Tax (VAT), and therefore all revenue, expenses, assets and liabilities are recognised inclusive of VAT.

FHFNZ-SI is not registered for the in-country equivalent of Goods Tax or Sales Tax, and therefore all revenue, expenses, assets and liabilities are recognised inclusive of these taxes where applicable.

Income Tax

The Foundation is exempt from income tax due to its charitable status.

Transactions eliminated on consolidation

Intra-group balances and transactions, including any unrealised income and expenses arising from intra-group transactions, are eliminated in preparing the consolidated financial statements.

2.5 Changes in accounting policies

There have been no changes to accounting policies during the reporting period. Additional disclosures have been included in relation to derivative financial instruments to enhance transparency.

3. Significant Judgements and Estimates

In preparing The Foundation’s consolidated financial statements and Statement of Service Performance, management is required to make judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income, expenses and service performance results.

Actual results may differ from these estimates. Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised prospectively in the period in which the estimates are revised and in any future periods affected.



Suresh from Fiji lost his sight to cataracts and had to give up work, relying on his daughter for support. After surgery, his sight was restored, bringing him independence, joy, and hope to return to work and care for his family again.

Significant judgements

Statement of Service Performance

In preparing the Consolidated Statement of Service Performance, management has exercised judgement in determining which outcomes and outputs best reflect The Foundation’s performance against its vision and *Our Strategy*, in accordance with the Regional Programmes Framework.

The selected performance measures are designed to reflect:

- the effectiveness and efficiency of supporting local teams to deliver eye care services, including surgeries, treatments and spectacles, through partner clinics and outreach programmes;
- the development of a sustainable local workforce through postgraduate training and ongoing professional development for eye doctors and nurses;
- the strengthening of locally led health systems through partnerships with national and local health authorities;
- the generation and use of research to inform current and future eye care needs; and
- the application of innovative, locally appropriate approaches aligned with international best practice.

Performance information is aggregated from data reported across multiple Pacific countries.

Operating Lease Commitments (refer Note 23)

The Foundation has entered into leases for office premises and equipment. Management has assessed these arrangements and determined that they do not transfer substantially all the risks and rewards of ownership to The Foundation. Accordingly, these leases are accounted for as operating leases.

Revenue Recognition – Non-Exchange Revenue (refer Note 5.1)

Judgement is required in determining whether funding arrangements contain conditions or restrictions, and in assessing the impact of these on the timing of revenue recognition.

Classification of Cash within Investment Funds (refer Note 16)

The Foundation holds cash balances within its investment portfolio that would otherwise meet the definition of cash and cash equivalents. Management has exercised judgement to classify these balances as part of investments at fair value through surplus or deficit, as they are managed as an integral component of the investment fund in accordance with The Foundation’s investment strategy and objectives.

4. Significant Accounting Policies

The accounting policies set out below have been applied consistently to all periods presented in these consolidated financial statements and have been consistently applied by The Foundation, except where otherwise stated.



Penetito having his blood pressure checked by a nurse

5. Revenue

Revenue is recognised when it is probable that economic benefits or service potential will flow to The Foundation and the amount can be reliably measured. Revenue is measured at the fair value of consideration received or receivable.

5.1 Revenue from non-exchange transactions

Non-exchange transactions are those in which The Foundation receives resources (such as cash, goods or services) without providing approximately equal value in return.

Inflows of resources from non-exchange transactions are recognised as assets when:

- it is probable that future economic benefits or service potential will flow to The Foundation; and
- the fair value can be reliably measured.

These inflows are recognised as revenue, except where a liability is recognised for conditions attached to the funding.

A liability is recognised when:

- there is a present obligation to return the funds or transfer resources as a result of conditions;
- it is probable that an outflow of resources will be required; and
- the amount can be reliably measured.

Revenue is recognised as the conditions are satisfied and the liability is reduced.

	2025 \$	2024 \$
Engagement		
Bequests	5,094,284	4,619,800
High Value Donations	1,622,991	1,184,636
Individual Giving Donations	5,351,454	5,493,038
Other Donations	366,346	369,452
Total Engagement Revenue	12,435,075	11,666,926
Grants		
Ministry of Foreign Affairs and Trade	7,860,051	2,104,584
The Church of Jesus Christ Latter-day Saints	1,671,500	1,218,111
The Fred Hollows Foundation ⁽¹⁾	3,007,561	1,470,445
Other Grants	512,829	236,885
Total Grants Revenue ⁽²⁾	13,051,941	5,030,025
Other		
Other Non-Exchange Revenue	25,305	220,156
Total Other Non-Exchange Revenue	25,305	220,156
Total Revenue from Non-Exchange Transactions	25,512,321	16,917,107

⁽¹⁾ Refers to The Fred Hollows Foundation as described in **Note 27** below.

⁽²⁾ Of the total grants revenue, \$9,075,758 (70%) (2024: \$589,724, 12%) was funding for the development of the Papua New Guinea Centre for Eye Health.

Bequests

Bequests are recognised as revenue when received, unless they are subject to conditions requiring repayment if those conditions are not met. In such cases, a liability is recognised and revenue is recognised as the conditions are satisfied.

Where a recognised bequest becomes subject to a claim under the Family Protection Act 1955, a liability is recognised until the claim is resolved.

Donations

Donations include one-off and regular contributions from individuals, trusts, foundations and corporate entities. These are recognised as revenue when received.

Donations in-kind, including goods and services, are recognised when received and measured at fair value, based on the cost that would otherwise have been incurred by The Foundation.

Grants

Grants are recognised based on the nature of any stipulations attached:

- **Conditions:** Where grants include conditions that require funds to be returned if not used as specified, a liability is recognised. Revenue is recognised as the conditions are satisfied.
- **Restrictions:** Where grants include restrictions but do not require repayment, revenue is recognised when the funds are received.

6. Engagement Expenses

Engagement expenses are those relating to the fundraising, marketing and communications teams who manage the public fundraising operations within New Zealand.

	2025 \$	2024 \$
Communications	82,763	149,655
Fundraising	2,880,639	2,847,444
Public Education	1,476,325	1,417,795
Total Engagement Expenses	4,439,727	4,414,894



7-year-old Nivaan having his eye examined at the Pacific Eye Institute.

7. Programme Expenses

Programme expenses represent costs incurred in delivering eye health services and programmes across The Foundation, including clinical services, outreach, training, and system strengthening activities.

	2025 \$	2024 \$
FHFNZ (New Zealand and smaller Pacific Island countries)		
Administration	1,540,129	1,600,852
Papua New Guinea Centre for Eye Health ⁽¹⁾	2,034,701	1,349,386
Regional Programmes	1,183,925	1,430,704
Regional Programmes - Kiribati	32,365	69,149
Regional Programmes - Samoa	70,353	352,004
Regional Programmes - Tonga	326,746	145,370
Regional Programmes - Vanuatu	427,587	579,328
Workforce Support	42,019	59,127
Total FHFNZ Programme Expenses	5,657,825	5,585,920
FHFNZ-PEI (Fiji)		
Administration	593,556	607,059
Clinic	1,049,911	1,040,124
Diabetic Retinopathy	146,087	228,191
Mobile Eye Clinic	400,443	432,709
Outreach	97,290	211,291
Regional Programmes	212,474	202,558
Scholarships and Training	664,351	699,824
Workforce Support	93,524	74,558
Total FHFNZ-PEI Programme Expenses	3,257,636	3,496,314

	2025 \$	2024 \$
FHF-PNG (Papua New Guinea)		
Administration	759,633	598,590
Clinic	626,000	502,240
Outreach	236,740	168,058
Papua New Guinea Centre for Eye Health ⁽¹⁾	6,667,468	543,688
Port Moresby Office	87,291	75,242
Regional Programmes	759,939	261,189
Scholarships and Training	482,592	698,234
Workforce Support	194,733	261,066
Total FHF-PNG Programme Expenses	9,814,396	3,108,307
FHFNZ-SI (Solomon Islands)		
Administration	184,751	167,289
Clinic	355,399	302,011
Diabetic Retinopathy	14,431	30,392
Outreach	34,617	26,869
Regional Programmes	69,545	83,669
Scholarships and Training	4,333	2,657
Workforce Support	20,416	41,355
Total FHFNZ-SI Programme Expenses	683,492	654,242
Total Programme Expenses	19,413,349	12,844,783

7. Programme Expenses (Continued)

(1) The Papua New Guinea Centre for Eye Health

The Foundation is leading a major infrastructure initiative to establish the Papua New Guinea Centre for Eye Health, a purpose-built facility for specialist eye care and the training of eye doctors, eye nurses, and optometrists.

Total development costs, including design, construction, equipment fit-out and initial operational support for the first five years, are estimated at \$37,047,317. Funding is provided through a combination of grants from the New Zealand and Australian governments, The Fred Hollows Foundation, The Church of Jesus Christ Latter-day Saints, and public donations. The Foundation's funding commitment is within its available resources.

Design was completed in late 2024, and construction commenced in December 2024 at Port Moresby General Hospital under a fixed-price contract with Minpac Construction Limited. Completion is expected in late 2026, with the Centre scheduled to open in November 2026.

In accordance with the Papua New Guinea Land Act 1996, the hospital retains ownership of the building from the commencement of construction. As a result, construction costs are expensed as incurred rather than capitalised.

Programme expenses related to the Centre are recognised across two entities:

- FHFNZ, for design and technical consultancy costs; and
- FHF-PNG, for local construction and implementation costs.

The Foundation will also procure and install the medical and operational equipment required for the Centre fit-out in 2026, ahead of the planned opening.

In 2025, \$8,702,169 (45%) (2024: \$1,893,074, 15%) of total programme expenses related to the development of the Centre, reflecting the scale of investment in long-term eye health infrastructure in Papua New Guinea.



NZ High Commissioner to Papua New Guinea, Her Excellency Ms Georgina Roberts, tours the PNG Centre for Eye Health.

8. Shared Services Expenses

Shared Services expenses relate to the operation of The Foundation's finance and executive functions based in the New Zealand office. These costs support both programme delivery and engagement activities across The Foundation.

At the end of the reporting period, one-third of the total Shared Services expenses are allocated to each of Programmes and Engagement, reflecting the shared nature of these services. All other operating expenses presented below are shown net of these allocations.

	2025 \$	2024 \$
Depreciation	30,600	75,759
IT Support and PCI compliance ⁽¹⁾	372,726	199,196
Office Rent	187,230	184,530
Other Operating Expenses	503,519	520,270
Total Shared Services Expenses	1,094,075	979,755

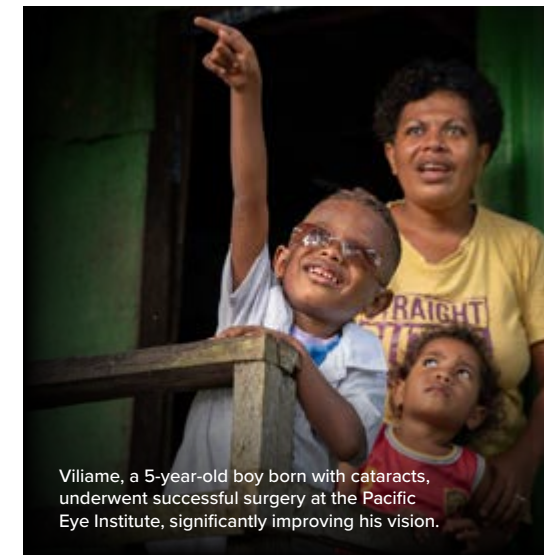
⁽¹⁾ PCI compliance refers to the adherence to the Payment Card Industry Data Security Standard (PCI DSS), which sets requirements for securely handling cardholder data. These costs relate to systems, processes and controls implemented to ensure the secure processing and protection of payment information.

9. Auditors Remuneration

Audit services for The Foundation are provided by BDO Auckland, BDO Fiji, Guinn Accountants (Papua New Guinea), and Morris & Sojnocki Chartered Accountants (Solomon Islands) on a fee basis. Morris & Sojnocki Chartered Accountants were appointed as auditors in 2025. Prior to this, FHFNZ-SI was included within the New Zealand audit.

	2025 \$	2024 \$
Audit Fees ⁽¹⁾	89,124	73,410
Audit Related Expenses	9,027	6,982
Total Auditors Remuneration	98,151	80,392

⁽¹⁾ BDO Audit fees \$62,737 (2024: \$58,258), Other Firms Audit fees \$26,387 (2024: \$15,152)



Viliame, a 5-year-old boy born with cataracts, underwent successful surgery at the Pacific Eye Institute, significantly improving his vision.

10. Finance Net Income

Finance income comprises interest earned on cash and cash equivalents and short-term investments, foreign exchange gains and losses, and returns from investments held at fair value through surplus or deficit (FVTSD).

Interest income is recognised using the effective interest method. Investment income includes distributions received and fair value gains and losses on investments measured at FVTSD.

During the year, The Foundation entered into forward foreign exchange contracts with Kiwibank to manage foreign currency risk associated with construction payments for the Papua New Guinea Centre for Eye Health. Gains on financial derivative instruments represent the net movement between contracted forward rates and observable market rates at balance date for unsettled contracts, together with realised gains on contracts settled during the year.

	2025 \$	2024 \$
Gains on financial derivative instruments	627,112	-
Interest income - cash and cash equivalents	62,511	160,510
Interest income - short-term investments	262,770	49,874
Investment income (FVTSD)	962,167	1,319,591
Total Finance Income	1,914,560	1,529,975

Finance costs comprise fees associated with managing the investment portfolio and realised foreign exchange losses on forward exchange contracts settled during the year.

	2025 \$	2024 \$
Investment portfolio management fees	47,196	44,562
Realised foreign exchange losses on forward exchange contracts	127,261	-
Total Finance Costs	174,457	44,562



Pulari having his eyes checked at the Kerema outreach in Papua New Guinea

11. Cash and Cash Equivalents

Cash and cash equivalents comprise bank balances, funds held at call with financial institutions, and short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and subject to an insignificant risk of changes in value.

	2025 \$	2024 \$
New Zealand foreign currency accounts	6,639,171	3,080,084
New Zealand operating accounts	3,905,711	1,807,271
Pacific operating accounts	273,030	254,833
Short-term deposit accounts	5,025,012	1,530,999
Total Cash and Cash Equivalents	15,842,924	6,673,187

Interest rates on the short-term deposit accounts ranged from 3.00% to 4.3% per annum (2024: 3.05% to 3.60% per annum).

12. Inventory and Goods in Transit

Inventory comprises student equipment and literature, medical supplies and spectacles, and is measured at the lower of cost and net realisable value.

Cost includes expenditure incurred in acquiring inventory, together with any costs of bringing items to their current location and condition.

Goods in Transit represent inventory for which payment has been made and title has passed to The Foundation in accordance with supplier terms.

	2025 \$	2024 \$
Goods in Transit	319,426	154,625
Inventory	625,503	615,246
Total Inventory and Goods in Transit	944,929	769,871

13. Prepayments

Prepayments represent amounts paid in advance for goods or services to be received in future reporting periods.

These are recognised as assets and expensed in the period in which the related goods or services are consumed.

	2025 \$	2024 \$
Prepayments	258,371	301,858
Total Prepayments	258,371	301,858

14. Receivables from Non-Exchange Transactions

Receivables from non-exchange transactions represent amounts due to The Foundation where no direct exchange of goods or services has occurred.

	2025 \$	2024 \$
Receivables from Non-Exchange Transactions	327,778	265,725
Total Receivables from Non-Exchange Transactions	327,778	265,725

15. Short-term Investments

Short-term investments comprise term deposits with original maturities greater than three months and up to one year, and therefore do not meet the definition of cash and cash equivalents.

The Foundation adopts a low-risk investment approach for all short-term investments.

	2025 \$	2024 \$
Term Deposit Accounts	120,000	1,620,000
Total Short-term Investments	120,000	1,620,000

Term deposits are held with Kiwibank. As at balance date, term deposits have maturities of 12 months and earn interest of 3.80% per annum (2024: 4.30% to 6.10% per annum)

16. Investments at Fair Value

Investments are measured at fair value through surplus or deficit (FVTSD), with carrying amounts reflecting fair value at balance date.

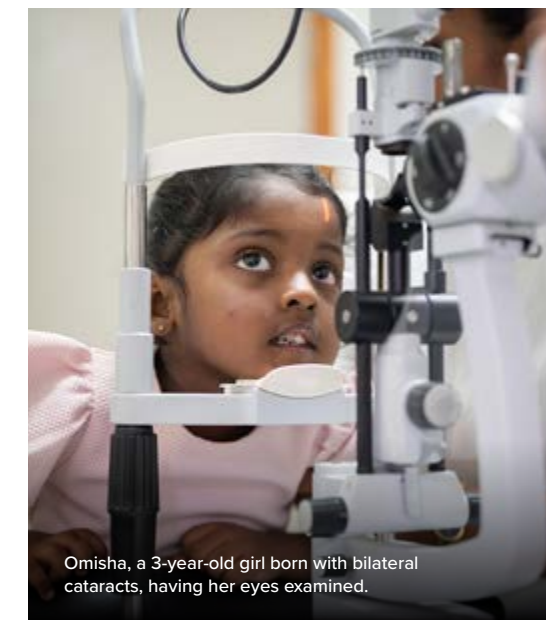
The investment portfolio is managed by JBWere (NZ) Limited under a discretionary investment management mandate. The portfolio is managed in accordance with The Foundation’s Investment Policy and JBWere Investment Mandate, which set parameters for asset allocation, risk exposure and prohibited investments, consistent with The Foundation’s responsible investment framework.

Fair value is determined as follows:

- **Cash funds:** at the face value of amounts held; and
- **Equity and bond funds:** based on quoted market bid prices at balance date.

Investments are managed and evaluated on a fair value basis at a portfolio level. During the reporting period, \$1,000,000 was withdrawn from the investment portfolio for working capital support. No new funds were introduced during the reporting period. Changes in the portfolio value reflect movements in market prices across asset classes.

	2025 \$	2024 \$
Australian Equities	928,112	1,030,953
Cash	456,099	193,983
NZ Bonds	2,138,723	2,228,388
NZ Equities	1,130,762	1,045,021
Offshore Bonds	749,492	929,046
Offshore Equities	2,978,746	3,041,064
Property	20,666	19,175
Total Investments at Fair Value through Surplus or Deficit	8,402,600	8,487,630



Omisha, a 3-year-old girl born with bilateral cataracts, having her eyes examined.

17. Property, Plant and Equipment

Property, plant and equipment are initially recognised at cost and subsequently measured at cost less accumulated depreciation and impairment losses. Where assets are acquired through non-exchange transactions, cost is measured at fair value at the date of acquisition.

Depreciation is calculated on a straight-line basis over the estimated useful life of each asset and commences when the asset is available for use.

Asset Class	Depreciation rate
Capital Work in Progress (WIP)	0%
Computer Equipment	10% - 67%
Furniture and Fittings	7% - 50%
Medical Equipment	6.67% - 50%
Motor Vehicles	10% - 25%
Office Equipment	10% - 67%
Plant	10% - 33.33%
Teaching Equipment	20%

	Capital WIP	Computer Equipment	Furniture & Fittings	Medical Equipment	Motor Vehicles	Office Equipment	Plant	Teaching Equipment	Total
	\$	\$	\$	\$	\$	\$	\$	\$	\$
Cost									
As at 31 Dec 2024	-	314,229	137,132	2,609,769	1,570,057	14,014	365,708	1,658	5,012,567
Foreign Currency Translation (Gain)/Loss	-	(12,589)	(775)	(23,641)	(22,488)	(396)	(29,286)	(4)	(89,180)
Additions – Exchange	45,739	39,455	-	234,018	-	-	-	-	319,212
Additions – Non Exchange	-	-	-	52,542	-	-	-	-	52,542
Disposals	-	(3,518)	-	-	-	-	-	-	(3,518)
As at 31 Dec 2025	45,739	337,577	136,357	2,872,688	1,547,569	13,618	336,422	1,654	5,291,623
Accumulated Depreciation									
As at 31 Dec 2024	-	(154,629)	(69,202)	(1,379,642)	(1,377,657)	(8,684)	(86,142)	(820)	(3,076,776)
Foreign Currency Translation (Gain)/Loss	-	10,028	64	11,230	13,780	328	6,898	2	42,329
Depreciation	-	(67,088)	(11,409)	(269,529)	(41,584)	(1,212)	(33,810)	(331)	(424,963)
Disposals	-	3,518	-	-	-	-	-	-	3,518
As at 31 Dec 2025	-	(208,172)	(80,547)	(1,637,942)	(1,405,461)	(9,568)	(113,053)	(1,149)	(3,455,892)
Net Book Value									
As at 31 Dec 2024	-	159,600	67,930	1,230,127	192,400	5,330	279,566	838	1,935,791
As at 31 Dec 2025	45,739	129,405	55,810	1,234,747	142,108	4,049	223,368	505	1,835,731

Depreciation methods, useful lives and residual values are reviewed at each reporting date and adjusted where appropriate. Assets are derecognised when they no longer provide future economic benefit or service potential. Gains and losses on disposal are recognised in surplus or deficit.

In addition, The Foundation constructs clinic infrastructure and procures medical and other equipment for donation to ministries of health across the Pacific. These items are expensed at the point of transfer. Where buildings are constructed on land owned by local ministries of health, construction costs are expensed as incurred, reflecting that The Foundation does not control the resulting asset. This reflects local land ownership rights.

18. Deferred Revenue from Non-Exchange Transactions

Deferred revenue represents funding received in advance of meeting the associated conditions. Revenue is recognised as these conditions are satisfied.

	2025 \$	2024 \$
Ministry of Foreign Affairs and Trade – Climate Change	485,699	683,330
Ministry of Foreign Affairs and Trade – Other	918,879	1,062,318
Ministry of Foreign Affairs and Trade – Papua New Guinea Centre for Eye Health	8,482,622	-
Other Grant Funds	55,301	-
The Church of Jesus Christ Latter-day Saints – Other	-	171,500
The Church of Jesus Christ Latter-day Saints – Papua New Guinea Centre for Eye Health	-	1,500,000
The Fred Hollows Foundation – Papua New Guinea Centre for Eye Health	2,364,062	2,168,380
The Fred Hollows Foundation - Other	44,966	-
Total Deferred Revenue from Non-Exchange Transactions	12,351,529	5,585,528

19. Employee Entitlements

Liabilities for employee entitlements, including salaries and leave, are recognised in surplus or deficit in the period in which the related services are provided.

Liabilities are measured at the amounts expected to be paid when settled.

The liability for long service leave is recognised as the present value of expected future payments for services provided by employees up to the reporting date.

	2025 \$	2024 \$
Annual Leave	394,844	416,428
Long Service Leave	39,449	27,709
Other Employee Entitlements	215,592	204,276
Total Employee Entitlements	649,885	648,413



20. Equity

Equity represents the residual interest in The Foundation's assets after deducting all liabilities.

Equity comprises:

- accumulated comprehensive revenue and expenses;
- the foreign currency translation reserve; and
- the contingency reserve.

Accumulated comprehensive revenue and expenses reflect The Foundation's cumulative surplus or deficit since formation, and are available to support working capital requirements and strategic priorities, subject to Board oversight.

The Foundation maintains a contingency reserve in accordance with its Reserves Policy. This reserve forms part of equity but is set aside to support financial resilience and continuity of operations. Further details are provided in **Note 21**.

21. Contingency Reserve

The contingency reserve is maintained in accordance with The Foundation's Reserves Policy to support financial stability, resilience and continuity of operations.

The reserve is intended to ensure The Foundation can:

- continue its programmes during periods of financial uncertainty or disruption;
- meet contractual, legal and ethical obligations to partners, suppliers, funders and employees;
- respond to unforeseen events, including funding shortfalls or unexpected expenditure; and
- support an orderly wind-down of operations if required.

The level of the contingency reserve is determined by the Board, considering The Foundation's financial position, risk profile, funding environment and operational commitments. The Board sets both a minimum reserve level and a target reserve level to support financial resilience and strategic flexibility.

The contingency reserve is funded from accumulated surpluses and is held in cash or readily realisable investments in accordance with The Foundation's Investment Policy.

Use of the contingency reserve requires Board approval (or delegated authority), and where utilised, a replenishment plan is developed and monitored to restore reserve levels over time.

22. Impairment of Non-Financial Assets Except Inventory

The carrying amounts of non-financial assets are reviewed at each reporting date for indicators of impairment.

Where an indication of impairment exists, then recoverable amount of the asset is estimated and an impairment loss is recognised in surplus or deficit.

Impairment losses are reversed only to the extent that the asset's carrying amount does not exceed the amount that would have been determined, net of depreciation or amortisation, had no impairment loss been recognised.



Dr Nola Pikacha performing cataract surgery

23. Leases

Payments under operating leases, where the lessor retains substantially all risks and rewards of ownership, are recognised as an expense on a straight-line basis over the lease term.

The Foundation's principal lease relates to office premises at Level 22, 120 Albert Street, Auckland, commencing 1 August 2023 for an initial term of eight years, with two rights of renewal of three years each. Lease payments are recognised within shared services expense - office rent (refer **Note 8**).

The Foundation also leases office equipment, including a printer, with terms extending to April 2026.

Future minimum lease commitments are as follows:

	2025 \$	2024 \$
No longer than one year	197,710	193,705
Longer than one year but not longer than five years	822,873	795,107
Later than five years	143,732	349,740
Total Lease Commitments	1,164,315	1,338,552

24. Financial Instruments

Recognition and initial measurement

Receivables are initially recognised when they are originated. All other financial assets and financial liabilities are initially recognised when The Foundation becomes a party to the contractual provisions of the instrument.

Financial assets and financial liabilities are initially measured at fair value plus, for items not measured at fair value through surplus or deficit, directly attributable costs. Short-term receivables and payables may be measured at the original invoice amount where the effect of discounting is immaterial.

Classification and subsequent measurement

Financial assets

On initial recognition, a financial asset is classified as measured at:

- amortised cost; or
- fair value through surplus or deficit (FVTSD).

A financial asset is measured at amortised cost if it is held within a management model whose objective is to hold assets to collect contractual cash flows, and its contractual terms give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding.

Financial assets that are held for trading or managed on a fair value basis are measured at FVTSD.

The Foundation's cash and cash equivalents, short term investments, and receivables are classified at amortised cost. Investments held at fair value are classified as FVTSD, as they are managed and evaluated on a fair value basis.

Subsequent measurement – financial assets

- FVTSD: Subsequently measured at fair value, with all gains and losses (including interest or dividend income) recognised in surplus or deficit.
- Amortised cost: Subsequently measured using the effective interest method. Interest income, foreign exchange gains and losses, and impairment losses are recognised in surplus or deficit. Gains or losses on derecognition are also recognised in surplus or deficit.

Financial liabilities

All financial liabilities are classified at amortised cost and subsequently measured using the effective interest method. Interest expense, foreign exchange gains and losses, and any gains or losses on derecognition are recognised in surplus or deficit.

The Foundation's financial liabilities primary comprises payables.

Impairment of financial assets

The Foundation recognises loss allowances for expected credit losses (ECLs) on financial assets measured at amortised cost.

Loss allowances for trade receivables are measured at an amount equal to lifetime ECLs.

Derivatives and Forward Foreign Exchange Contracts

The Foundation is exposed to foreign currency risk arising from forecast construction payments denominated in Australian dollars (AUD) for the Papua New Guinea Centre for Eye Health.

24. Financial Instruments (Continued)

To manage this exposure, The Foundation entered into forward foreign exchange contracts with Kiwibank. These contracts were aligned with the original forecast AUD payments over the construction period from December 2024 to April 2026, with a total notional amount of AUD 19,220,000.

Following revisions to the construction timeline, forecast AUD payments now extend through to August 2026. The Foundation has continued to manage its exposure by adjusting settlement timing where appropriate. In some instances, contracts have been extended or settled, with proceeds temporarily held in short-term AUD interest-bearing deposits until required.

Forward foreign exchange contracts meet the definition of derivative financial instruments under PBE IPSAS 41. Derivatives are initially recognised at fair value and subsequently remeasured at each reporting date.

The Foundation has not applied hedge accounting. Accordingly, all gains and losses arising from changes in fair value, including gains and losses on settlement, are recognised in surplus or deficit within foreign exchange gains/(losses).

At 31 December 2025, derivative financial assets recognised were:

	2025 \$	2024 \$
Derivative financial assets	564,482	-
Total Derivative financial assets	564,482	-

At balance date, forward exchange contracts with a total notional amount of AUD 10,910,000 remained outstanding (2024: AUD Nil). These are expected to settle progressively between January 2026 and August 2026.

Fair value is determined using valuations provided by the Reserve Bank of New Zealand, based on observable forward exchange rates and the spot rate at 31 December 2025 of 0.8641. The notional amounts disclosed represent contracted purchase amounts and do not reflect The Foundation's credit risk exposure.

Financial Risk Management – Foreign Currency Risk

The Foundation's functional currency is New Zealand dollars (NZD).

Foreign currency risk arises primarily from contractual construction payments denominated in Australian dollars (AUD) for the Papua New Guinea Centre for Eye Health, while funding is primarily received in NZD. Movements in the AUD/NZD exchange rate may therefore impact the NZD cost of these commitments.

Forward foreign exchange contracts are used to reduce this exposure and provide greater certainty over future construction costs. At balance date, The Foundation had forward foreign exchange contracts in place to hedge a significant portion of its forecast AUD-denominated construction payments.

The Foundation does not hold derivative financial instruments for trading purposes.

25. Commitments

Papua New Guinea Centre for Eye Health

The Foundation is leading the design, construction and commissioning of the Papua New Guinea Centre for Eye Health (Centre), a purpose-built facility to support specialist eye care services and the training of eye health professionals. The Centre is being developed in partnership with the National Department of Health, Port Moresby General Hospital (PMGH) and other key stakeholders, and forms part of a long-term programme to strengthen eye health systems in Papua New Guinea.

The Centre is being constructed on land owned by PMGH, which retains ownership of the building from the commencement of construction in accordance with the Papua New Guinea Land Act 1996. As a result, construction costs are expensed as incurred.

Construction commenced in December 2024 and is expected to be completed in August 2026. Following construction, equipment installation and commissioning activities will be undertaken, with the Centre expected to open in November 2026.

Construction commitments

At 31 December 2025, The Foundation had entered into a fixed lump sum construction contract with Minpac Construction Limited for the development of the Centre. The revised contract value, including approved variations, is approximately \$20.5 million (NZD equivalent) (exclusive of GST).

Construction expenditure incurred to balance date totalled approximately \$6.6 million (NZD equivalent) (2024: \$543,688). The remaining contractual commitment at 31 December 2025 was therefore approximately \$13.9 million (NZD equivalent).

While the contract is denominated in Papua New Guinea kina and Australian dollars, with a fixed foreign exchange conversion rate of PGK to AUD, it was agreed that payments would be made in Australian dollars. Accordingly, while the NZD equivalent values above reflect exchange rates at balance date, The Foundation's commitment is fixed in AUD terms and is subject to foreign exchange movements. This exposure is managed through forward foreign exchange contracts (refer [Note 24](#)).

Outstanding commitments not recognised as liabilities

At balance date, The Foundation had contractual commitments relating to the development of the Centre that had not yet been recognised as liabilities in the Consolidated Statement of Financial Position.

These commitments amounted to \$14,432,037 (2024: \$22,623,423) (NZD equivalent) and primarily relate to construction and associated professional services, including:

- construction contractor services;
- project management and advisory services;
- architectural, engineering and quantity surveying services; and
- specialist infrastructure services, including solar and technical systems.

25. Commitments (Continued)

Additional consultancy costs of approximately \$350,752 associated with the revised construction timeline were under consideration by the Board at reporting date and had not been approved or contractually committed. These costs are therefore not included in the commitments disclosed above.

Funding and investment

Total estimated development costs for the Centre are approximately \$37.5 million. This includes design, construction, equipment fit out and operational support for the first five years.

Funding is being provided through a combination of grants from the New Zealand and Australian governments, The Fred Hollows Foundation Australia, The Church of Jesus Christ of Latter-day Saints, and The Foundation.

The Foundation's remaining funding contribution will be met from existing investment reserves and/or additional funding secured.

GST funding facility

The Foundation has a facility commitment to provide temporary funding of \$2,444,417 (2024: \$2,443,440) to cover the Goods and Services Tax (GST) component of development costs, pending reimbursement by the Papua New Guinea Internal Revenue Commission.

GST refunds are typically received over an extended period. In early 2026, approximately \$400,000 of GST was refunded.

Other Commitments

There are no other material commitments at the reporting date. (2024: \$Nil)



Architectural design render of the Centre for Eye Health.

26. Contingent Assets and Liabilities

Contingent Assets

Contested Bequests

The Foundation is a named beneficiary of several deceased estates, including one estate subject to claims under legislation such as the *Law Reform (Testamentary Promises) Act 1949* and the *Family Protection Act 1955*.

As the outcome of these claims is uncertain, no revenue has been recognised. Any entitlement will be recognised when the claims are resolved and the estate distributions are confirmed.

Papua New Guinea Centre for Eye Health

The Foundation has funding arrangements in place for the development of the Centre, including agreements with the New Zealand Ministry of Foreign Affairs and Trade and The Fred Hollows Foundation (Australia) on behalf of the Australian Government. At balance date, drawdown of funding under these agreements remained subject to the achievement of specified conditions, including construction milestones. Accordingly, the related funding had not been fully recognised at reporting date.

A further funding commitment from The Church of Jesus Christ of Latter-day Saints is expected to be formalised in 2026 and remains subject to agreement.

In addition, The Foundation holds bank guarantees provided by Minpac Construction Limited in relation to the construction contract. These guarantees provide security over advance payments and performance obligations and remain in place until contractual conditions are satisfied.

Other Contingent Assets

There are no other contingent assets at the reporting date.

Contingent Liabilities

Papua New Guinea Centre for Eye Health

The Foundation has contingent liabilities at balance date relating to future obligations associated with the development and establishment of the Centre that do not meet the recognition criteria for liabilities.

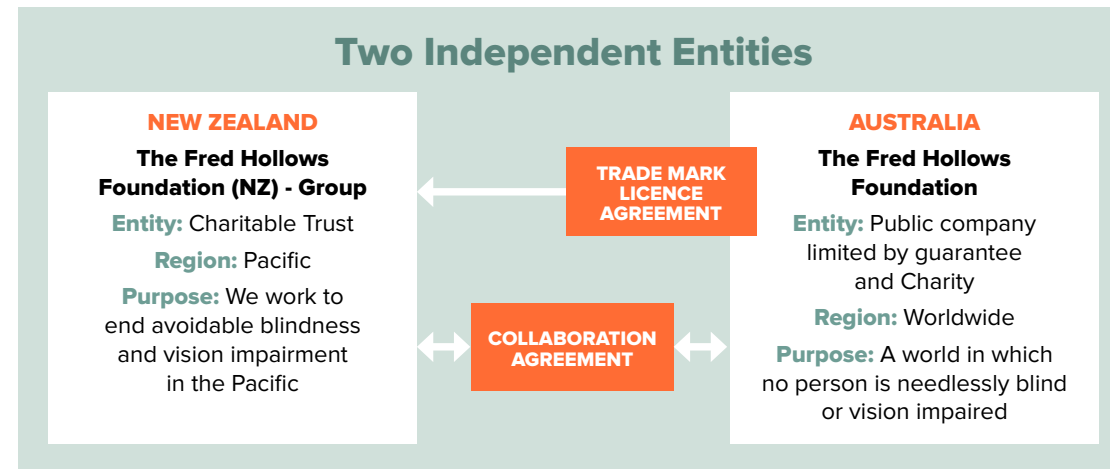
These include:

- commitments to procure and install equipment for the Centre, including medical, information technology and operational infrastructure;
- commitments to provide financial support for the Centre's operations during the initial establishment period (up to five years), to support transition to locally funded operations; and
- a facility commitment to fund the Goods and Services Tax (GST) component of development costs, pending reimbursement from the Papua New Guinea Internal Revenue Commission (refer **Note 25**).

Other Contingent Liabilities

There are no other contingent liabilities at the reporting date.

27. Related Parties



The Fred Hollows Foundation

The Foundation operates under a Trade Mark Licence Agreement with The Fred Hollows Foundation, an independent Australian registered charity with which it shares a common purpose. The agreement, which expires on 31 December 2026, sets out the terms for the consistent use of 'The Fred Hollows Foundation' name and associate trademarks and supports alignment between the organisations in advancing their shared purpose. It is the intention of The Foundation to seek renewal of the agreement for a further five years.

The Foundation is also party to a five-year Collaboration Agreement with The Fred Hollows Foundation, expiring on 23 November 2026.

This agreement provides a framework for coordinated programme delivery, resource sharing, and collaboration across areas of mutual interest. The parties are currently working together

on a new agreement which may replace the current agreement and which better sets out the contributions of each party.

During the reporting period, The Foundation recognised revenue of \$3,007,561 (2024: \$1,470,445) from The Fred Hollows Foundation. This included funding from the Australian NGO Cooperation Program (ANCP) for Pacific programme activities, as well as contributions towards the development of the Papua New Guinea Centre for Eye Health.

Other Related Parties

There were no other material related party transactions recorded (2024: \$Nil).

28. Key Personnel

Key personnel comprise members of the governing body of The Fred Hollows Foundation NZ (Board of Trustees) and Executive Officers of The Foundation who have authority and responsibility for planning, directing and controlling the activities of The Foundation.

The Board of Trustees provides governance services on an honorary basis and receives no remuneration. Travel and meeting-related expenses incurred in the course of their duties are either paid directly or reimbursed.

Executive Officers include the Chief Executive Officer, senior leadership team, and senior medical and administrative personnel. These individuals are employed on standard employment terms.

Remuneration represents the total compensation paid during the reporting period. Full-time equivalent (FTE) reflects the average number of personnel during the period (Executive Officers) and the number of Trustees at balance date (Board of Trustees).

	2025 Remuneration \$	FTE	2024 Remuneration \$	FTE
Board of Trustees	-	10.0	-	8.0
Executive Officers	1,818,323	10.7	1,746,989	10.4
Total Key Personnel	1,818,323	20.7	1,746,989	18.4



A handheld autorefractor tool being used as part of an eye examination.

29. Bank Credit Facility

The Foundation has credit card facilities with Kiwibank with a total approved limit of \$75,000 (2024: \$75,000).

At balance date, four credit cards were in use with a combined limit of \$47,214 (2024: \$46,000). These cards are held by Executive Officers. The outstanding balance at 31 December 2025 was \$27,576 (2024: \$28,061).

The Foundation also maintains a payroll letter of credit with Kiwibank in favour of iPayroll Limited of \$210,000 (2024: \$170,000) to support payroll processing. This facility is supported by a guarantee from The Foundation and is unsecured.

In addition, The Foundation has a bank guarantee of \$120,000 (2024: \$120,000) in favour of Colwall Property Investment Limited, providing security for lease obligations relating to its Auckland office premises.

30. Going Concern

These consolidated financial statements have been prepared on a going concern basis.

The Foundation relies on funding from a range of sources, including public donations, corporates, trusts and foundations, the Ministry of Foreign Affairs and Trade, and other funding partners, to support its charitable activities. The Foundation also maintains long-term partnerships with Pacific ministries of health and academic institutions to deliver training and health system strengthening programmes.

The Foundation's financial position remains sound, with a working capital ratio of 1.3 at 31 December 2025. In addition, The Foundation holds an investment portfolio with a market value of \$8,402,600 (2024: \$8,487,630).

During the year, public fundraising income increased and new multi-year funding agreements were secured with key partners. Investment returns also contributed positively to The Foundation's financial position.

The Board of Trustees has considered The Foundation's financial forecasts and funding arrangements and is satisfied that The Foundation will be able to meet its financial and regulatory obligations for the foreseeable future. Accordingly, the going concern basis of preparation is considered appropriate.

31. Subsequent Events

In February 2026, The Foundation received Goods and Services Tax (GST) refunds totalling approximately \$400,000 in respect of historical claims up to June 2025. A significant portion of these refunds related to the GST component of construction payments for the Papua New Guinea Centre for Eye Health.

During the first quarter of 2026, The Foundation issued purchase orders to suppliers for equipment and installation for the Centre for Eye Health totalling \$2,386,524 (exclusive of GST). The equipment will be collected ex works by The Foundation's freight forwarding agent and shipped to Papua New Guinea by mid-September 2026. Payment terms have been agreed with suppliers, with some providing bank guarantees to support advance payments.

In March 2026, The Foundation entered into a Memorandum of Understanding with the Papua New Guinea National Department of Health, Port Moresby General Hospital, and the University of Papua New Guinea School of Medicine and Health Sciences, establishing the governance, management and operational framework for the Centre.

In March 2026, The Foundation received \$3,757,760 being the final funding tranche under the existing agreement with the New Zealand Ministry of Foreign Affairs and Trade in relation to construction costs for the Papua New Guinea Centre for Eye Health. These funds were received following the achievement of agreed conditions and milestones. As at the date of authorisation of these financial statements, a portion of these funds remains unspent and will be applied to construction costs in future periods in accordance with the terms of the agreement.

In March 2026, The Foundation also signed a grant funding agreement with The Church of Jesus Christ of Latter-day Saints for approximately \$943,000. This funding will support equipment, training and workforce development, service delivery, health promotion, outreach activities, monitoring and evaluation, and programme management across Papua New Guinea, Fiji, Solomon Islands, Kiribati, Samoa, Vanuatu and Tonga.

The Foundation is also in discussions with The Church of Jesus Christ of Latter-day Saints regarding a potential additional grant of \$2.5 million to support construction costs of the Centre. While the agreement is expected to be finalised in 2026, it had not been executed at the reporting date and remains subject to final approval.

Construction of the Papua New Guinea Centre for Eye Health is anticipated to reach practical completion by late 2026.

There are no other matters or circumstances arising since the end of the reporting period that have significantly affected, or may significantly affect, the operations of The Foundation.



After cataract surgery on one eye, Akenese is delighted with her improved vision and looks forward to treatment for her second eye.

Thank you

Pacific Island Government Partners

Cook Islands Ministry of Health

Fiji Ministry of Health and Medical Services

Kiribati Ministry of Health and Medical Services

Nauru Department of Health and Medical Services

Papua New Guinea National Department of Health

Samoa Ministry of Health

Solomon Islands Ministry of Health and Medical Services

Tokelau Department of Health

Tonga Ministry of Health

Tuvalu Department of Health

Vanuatu Ministry of Health

Development Partners

Australian Government Department of Foreign Affairs and Trade



Digicel Foundation PNG



Divine Word University, PNG



Fiji National University



High Commission of Canada in Australia



Lions Clubs International Foundation



The Church of Jesus Christ Latter-day Saints



The Fred Hollows Foundation (Australia)



The New Zealand Government, Ministry of Foreign Affairs & Trade



The University of Papua New Guinea



Corporate Partners

Mercy Hospital Dunedin Limited



Ricoh New Zealand



Specsavers



Trusts and Foundations

JN & HB Williams Foundation



PIF Foundation



Ron and Joan Gillat Charitable Trust

Sir Brian Bell Foundation



Membership Organisations

Council for International Development



Fundraising Institute Australasia

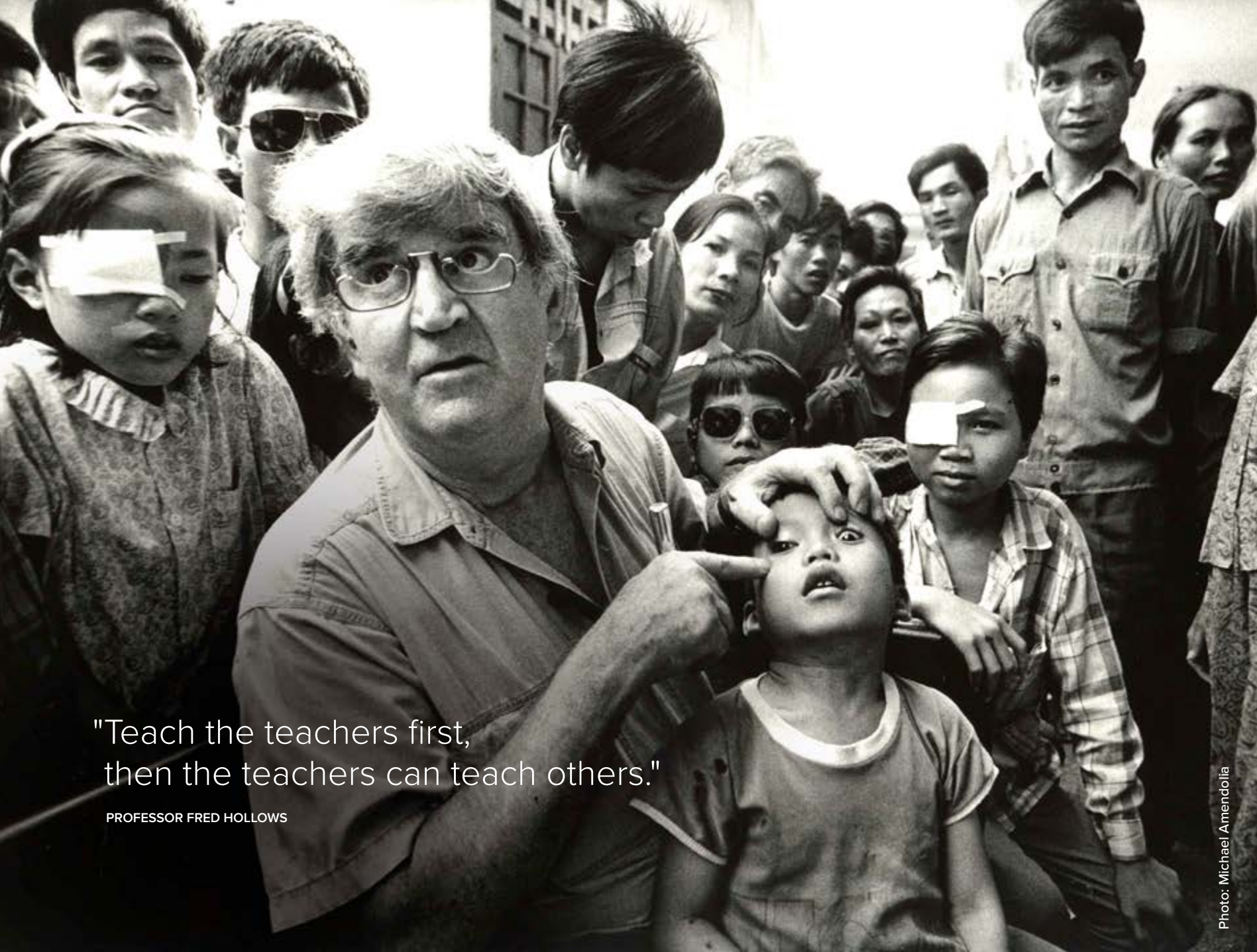


Public Fundraising Regulatory Association



The International Agency for the Prevention of Blindness





"Teach the teachers first,
then the teachers can teach others."

PROFESSOR FRED HOLLOWS

Photo: Michael Amendolia



Email

info@hollows.nz

Phone

NZ 0800 227 229
INTL +64 9 304 0524

Postal Address

Private Bag 99909
Newmarket
Auckland 1149
New Zealand

www.hollows.org.nz