

2025 ANNUAL REPORT



Lola, Leukemia Warrior



The
National
Children's
Cancer
Society

MEET LOLA, LEUKEMIA WARRIOR



Lola's journey with B-cell acute lymphoblastic leukemia began in March of 2024, just months after her 4th birthday. Living in a rural area meant the nearest children's hospital was more than two hours away, but distance never stood in the way of her care. What began as a few unexplained bruises sparked a mother's instinct and ultimately saved her life. Maria trusted her gut and took Lola to the pediatrician, setting off a whirlwind of tests and an urgent drive to the hospital that felt like an eternity.

Lola was diagnosed with leukemia and admitted that same night, spending more than two weeks in the hospital. In those early days, Child Life Specialists helped Lola and her brothers understand what was happening in a way that felt they could understand. They explained that her blood was "sick" and the medicine would help her get better.

Because Lola's cancer was found early, she was considered low risk and began treatment right away, enduring chemotherapy, lumbar punctures, and oral medication. After 18 days in the hospital, she was so weak she had to relearn how to walk. With the help of her family and two active brothers, she soon found her strength again. Six months into treatment, a more intense phase weakened her immune system and forced her to miss a major milestone, starting preschool. Though heartbroken, Lola found joy in simple moments like evening bike rides, refusing to stop pedaling even when she was exhausted.

Treatment brought many challenges. Lola lost her blonde curls, which was especially hard emotionally. Her family made it easier by turning it into a game with hats, wigs, and even a "hair fairy." Some chemotherapy cycles meant frequent hospital trips, but now most of her treatment happens at home.

Lola is a true daddy's girl who loves the outdoors, from biking and fishing to playing with her animals. She enjoys crafts, climbing trees, singing, swimming, and roasting marshmallows. She loves dressing up and painting her nails just as much as getting muddy. Full of life and always thinking about her next snack, her determination is impossible to miss.

Lola and her family have faced fear, heartache, and uncertainty, but they have also found strength and grace. Support from their community and from The National Children's Cancer Society (NCCS) has helped carry them through. Through the Transportation Assistance Fund and Emergency Assistance Fund, the NCCS helped ease the burden of travel and keep healthy food on the table. Their dedicated case manager, Angie, has been a steady source of support.

"This assistance has helped us care for our family during an overwhelming time. Thank you from the bottom of our hearts," Maria shared.

A WORD FROM OUR BOARD CHAIRMAN AND PRESIDENT & CEO



Dear friends,

On behalf of The National Children's Cancer Society (NCCS), we are honored to share our 2025 Annual Report with you. As we reflect on a year marked by both profound challenges and powerful moments of hope, one truth stands above all others: **none of this would be possible without you.**

Every day, families facing childhood cancer are thrust into a world of uncertainty, emotionally, medically, and financially. In FY 2025, the NCCS remained unwavering in our commitment to stand beside them. Through direct financial assistance, emotional support, and access to educational resources, we helped ease the overwhelming burden that accompanies a diagnosis no family is ever prepared to face.

Because of your generosity, families did not have to navigate this journey alone. Your support helped keep lights on, food on tables, and children connected to the care they need. More than that, it delivered something just as vital: **hope.** Within these pages, you will find the stories behind the impact: real families, real children, and real lives changed because you chose to care. These stories reflect the extraordinary power of compassion in action and the life-changing difference we are making together.

Looking ahead, the NCCS remains committed to growing our reach, strengthening our programs, and responding to the evolving needs of families facing childhood cancer. The challenges are great, but so is our resolve and the community that makes this work possible. **Thank you for believing in our mission and for being a vital part of supporting every family we serve.** We invite you to explore this report and celebrate what your partnership has made possible. We are not only easing the burden of childhood cancer, but we are also delivering hope when it feels impossible to find.

With sincerest gratitude,

A handwritten signature in black ink, appearing to read "Scott A. Stringer".

Scott Stringer
Chairman of the Board

A handwritten signature in black ink, appearing to read "Mark Stolze".

Mark Stolze
President & CEO

A WORD FROM OUR DIRECTOR OF PHILANTHROPY



To the generous donors who make our mission possible,

Every child deserves the chance to focus on being a child, even in the face of cancer. At The National Children's Cancer Society (NCCS), that belief is at the heart of everything we do. None of it would be possible without you.

Your generosity is the driving force behind our mission. **Because of you, families who are navigating a childhood cancer diagnosis are not alone.** Your support helps ease financial burdens, provides critical resources, and offers hope at a time when families are facing some of the most difficult moments of their lives. You make it possible for us to stand beside them, not just with compassion, but with tangible help when it truly matters.

Each family's journey is unique, but the impact of your giving is constant. Whether it's assisting with travel for lifesaving treatment, helping cover everyday expenses, or offering educational and emotional support, your partnership allows us to meet families where they are and walk with them throughout their journey. Time and again, we hear from parents who tell us that the support they received through our programs made an overwhelming situation feel manageable and reminded them that others truly care.

We often say that our donors are not just supporters of our work; they are an essential part of it. Your belief in our mission fuels every program we offer and every family we support. The progress we make, the relief we provide, and the hope we help restore are all direct results of your generosity.

On behalf of the children and families who turn to us, thank you for your compassion, your trust, and your commitment. Together, we are making a meaningful difference in the lives of families facing childhood cancer, and that impact will be felt for years to come.

With deepest gratitude,

A handwritten signature in black ink that reads "Jamie Butler". The signature is written in a cursive, flowing style.

Jamie Butler
Director of Philanthropy

MISSION

The National Children's Cancer Society (NCCS) provides vital and unique services for children with cancer, their families, and survivors. Our comprehensive programs support children and their families at every stage of their journey, addressing immediate and long-term needs, from diagnosis and treatment to survivorship and beyond.

How we support children with cancer, their families, and survivors:

- **Transportation Assistance Fund:** Provides financial support to families so their children have consistent access to care, covering travel expenses to help ease the burden
- **Emergency Assistance Fund:** A special fund available to families whose children have been inpatient or relocated for an extended period of time, it offers help with essential daily needs, including mortgage payments, prescriptions, car repairs, copays, and more
- **Family Support Program:** Connects families with highly trained case managers who provide one-on-one emotional support, advocacy tips, and personalized guidance throughout their journey
- **Beyond the Cure Program:** Empowers childhood cancer survivors with educational resources, a Late Effects After Treatment Tool (LEATT), long-term care referrals, and a scholarship fund to help them achieve their academic goals
- **Global Outreach Program:** Partners with pharmaceutical companies in the United States to distribute lifesaving medications to hospitals in developing countries, giving children worldwide access to lifesaving cancer treatment

VISION

We believe in a world in which all children with cancer survive and thrive.

ABOUT US

We do more than help children with cancer survive. We empower them to thrive! The National Children's Cancer Society (NCCS) supports children battling cancer through every step of their journey, from diagnosis and treatment to survivorship and beyond, ensuring their families have the support, resources, and guidance they need to overcome. Our team tirelessly supports families impacted by a childhood cancer diagnosis, keeping families strong, hopeful, and together. We bring light to the darkest moments, proving that compassion and support can make all the difference.

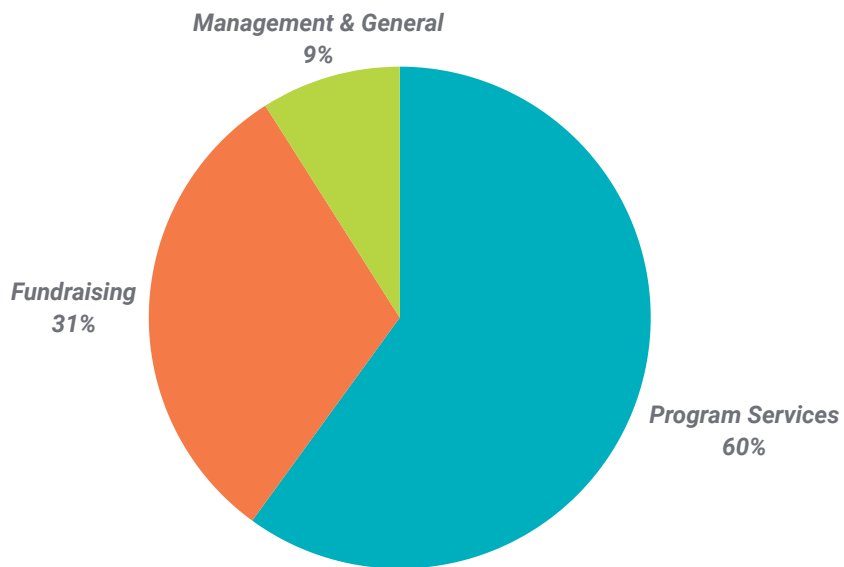
OUR REACH

In the United States: Since 1987, the NCCS has distinguished itself by meeting the immediate and long-term needs of nearly **52,000 children with cancer** and their families. While other groups may focus on a single aspect of support, we take a comprehensive approach to address each family's unique challenges. From direct financial assistance for gas, flights, and lodging to covering daily essentials like mortgage payments, prescriptions, car repairs, and more, we work to ease the financial burden so families can focus on their children's health. With over **\$73 million** in direct financial assistance provided to families facing childhood cancer across the United States, the NCCS is committed to making a lasting impact where it matters most.

Our compassionate case managers provide personalized guidance and emotional support, offering hope and practical advocacy tips to families navigating their cancer journey. Our educational resources also empower parents, friends, and survivors with valuable knowledge. To further support survivors, we offer a scholarship program that helps them achieve their academic goals and build a brighter future.

Worldwide: Globally, the NCCS has supported more than **216,000 children** with cancer in **53 countries**, supporting **119 medical facilities** to deliver lifesaving pharmaceuticals and medical supplies valued at over **\$477 million**. This international reach reflects our unwavering commitment to ensuring every child receives the care they deserve, regardless of where they live.

FY 2025 REVENUE ALLOCATION



HOW WE HELP DURING TREATMENT

A childhood cancer diagnosis turns a family's world upside down emotionally, physically, and financially. At The National Children's Cancer Society (NCCS), we exist to ensure families do not face this journey alone. Through our comprehensive support programs, we aim to alleviate the financial and emotional burdens of childhood cancer so families can focus on what truly matters: their children's health and well-being.

In FY 2025, the NCCS served **1,635 families** referred from **211 treatment centers** nationwide, reflecting both the growing need and the trust placed in our mission.



TRANSPORTATION ASSISTANCE FUND

The NCCS provides two vital programs to help ease the financial burden of a childhood cancer diagnosis. Through our **Transportation Assistance Fund**, we help families manage the costs of travel required to get their child to lifesaving treatment. This includes support for expenses like mileage, airfare, and lodging when specialized care is located far from home.



EMERGENCY ASSISTANCE FUND

When a child is hospitalized for an extended period, the financial strain can be overwhelming. Our **Emergency Assistance Fund** provides critical aid for everyday living expenses, including rent/mortgage, utilities, meals, and more. This support gives families peace of mind, allowing them to remain by their child's side without the added worry of making ends meet.



FAMILY SUPPORT PROGRAM

Beyond financial challenges, the emotional toll of childhood cancer can be devastating. Our **Family Support Program** pairs every family with a dedicated NCCS case manager who provides practical and emotional support from the moment of diagnosis through survivorship. These compassionate individuals help families navigate treatment, advocate for their children's needs, and access additional resources, all while offering the emotional support that is so essential during this journey.

THE NCCS ASSISTED FAMILIES IMPACTED BY CHILDHOOD CANCER AT THE FOLLOWING PEDIATRIC ONCOLOGY FACILITIES ACROSS THE UNITED STATES:

ALABAMA

Alabama Pediatric Therapy Services, *Rainbow City*
 Children's of Alabama, *Birmingham*
 Huntsville Hospital for Women & Children, *Huntsville*
 UAB Hospital, *Birmingham*
 USA Health Children's & Women's Hospital, *Mobile*

ALASKA

Alaska Pediatric Specialties, *Anchorage*
 Providence Alaska Medical Center, *Anchorage*

ARIZONA

Banner - University Medical Center Tucson, *Tucson*
 Banner - University Medicine North, *Tucson*
 Banner Children's at Desert, *Mesa*
 Banner Thunderbird Medical Center, *Glendale*
 Ironwood Cancer & Research Centers, *Mesa*
 Mayo Clinic Building – Scottsdale, *Scottsdale*
 Mayo Clinic Radiation Oncology, *Phoenix*
 Parkview Medical Plaza, *Yuma*
 Phoenix Children's, *Phoenix*

ARKANSAS

Arkansas Children's, *Little Rock*
 Arkansas Children's Northwest, *Springdale*
 UAMS, *Little Rock*

CALIFORNIA

Bass Center for Childhood Cancer & Blood Diseases, *Palo Alto*
 Bryers Eye Institute, *Palo Alto*
 Children's Hospital Los Angeles, *Los Angeles*
 CHOC Hospital, *Orange*
 City of Hope, *Duarte*
 Clovis Community Medical Center, *Clovis*
 Kaiser Permanente East Bay - Oakland Medical Center, *Oakland*
 Kaiser Permanente Fontana Medical Center, *Fontana*
 Kaiser Permanente Roseville Medical Center, *Roseville*
 Kaiser Permanente San Diego Medical Center, *San Diego*
 Kaiser Permanente San Francisco Medical Center, *San Francisco*
 Kaiser Permanente Santa Clara Medical Center, *Santa Clara*
 Kaiser Permanente Walnut Creek Medical Center, *Walnut Creek*
 Loma Linda University Children's Hospital, *Loma Linda*
 Loma Linda University Children's Hospital, *San Bernardino*
 Miller Children's & Women's Hospital Long Beach, *Long Beach*
 Rady Children's Health, *San Diego*
 Rady's Proton Therapy, *San Diego*
 San Joaquin General Hospital, *French Camp*
 Stanford Children's Health at CA Pacific Medical Center, *San Francisco*
 Stanford Medicine Children's Health-Lucile Packard Children's Hospital, *Palo Alto*

CALIFORNIA (cont.)

Sutter Health, *Stockton*
 Sutter Medical Center, *Sacramento*
 UC Davis Medical Center, *Sacramento*
 UCLA Mattel Children's Hospital, *Los Angeles*
 UCSF Benioff Children's Hospital, *Oakland*
 UCSF Benioff Children's Hospital, *San Francisco*
 Valley Children's Healthcare, *Madera*
 Ventura County Medical Center, *Ventura*

COLORADO

Children's Hospital Colorado, *Aurora*
 Children's Hospital Colorado, *Colorado Springs*

CONNECTICUT

Connecticut Children's, *Hartford*
 Yale New Haven Hospital, *New Haven*

DELAWARE

Nemours Children's Hospital, *Wilmington*

DISTRICT OF COLUMBIA

Children's National, *Washington DC*

FLORIDA

AdventHealth for Children, *Orlando*
 Golisano Children's Hospital, *Fort Myers*
 Jackson Health System, *Miami*
 Joe DiMaggio Children's Hospital, *Hollywood*
 Johns Hopkins All Children's Hospital, *St. Petersburg*
 Kids Cancer Foundation, *Loxahatchee*
 Kids Cancer Foundation, *Royal Palm Beach*
 Miami Cancer Institute, *Miami*
 Nemours Children's Hospital, *Orlando*
 Nicklaus Children's Hospital, *Miami*
 Orlando Health Arnold Palmer Hospital for Children, *Orlando*
 Salah Foundation Children's Hospital at Broward Health, *Fort Lauderdale*
 St. Joseph's Children's Hospital, *Tampa*
 St. Mary's Medical Center, *West Palm Beach*
 Studer Family Children's Hospital at Ascension Sacred Heart, *Pensacola*
 Sylvester Comprehensive Cancer Center, *Miami*
 Tampa General Hospital, *Tampa*
 UF Health Proton Therapy Institute, *Jacksonville*
 UF Health Shands Children's Hospital, *Gainesville*
 Wolfson and Nemours Children's, *Jacksonville*
 Wolfson Children's, *Jacksonville*

GEORGIA

Arthur M. Blank Hospital, *Atlanta*
 Atrium Health Navicent, *Macon*
 Augusta University Medical Center, *Augusta*
 Children's at Town Center, *Kennesaw*
 Children's Healthcare of Atlanta, *Atlanta*
 Emory-Children's Center, *Atlanta*
 Georgia Cancer Center, *Augusta*
 Georgia Urology, *Roswell*
 Hope for Kids Atrium Health Navicent, *Macon*
 Memorial Health Dwaine & Cynthia Willett Children's Hospital, *Savannah*
 Scottish Rite Hospital, *Atlanta*

IDAHO

St. Luke's Children's Cancer Institute, *Boise*

ILLINOIS

Advocate Children's Hospital, *Oak Lawn*
 Advocate Children's Hospital, *Park Ridge*
 Ann & Robert H. Lurie Children's Hospital of Chicago, *Chicago*
 OSF HealthCare Children's Hospital of Illinois, *Peoria*
 The Jim and Trudy Maloof St. Jude Affiliate Clinic, *Peoria*
 UChicago Medicine Comer Children's, *Chicago*

INDIANA

Beacon Children's Hospital, *South Bend*
 Franciscan Health Crown Point, *Crown Point*
 Indiana University Health North Hospital, *Carmel*
 IU Health Methodist Hospital, *Indianapolis*
 Parkview Physicians Group - Family Medicine, *Fort Wayne*
 Peyton Manning Children's Hospital at Ascension St. Vincent, *Indianapolis*
 Riley Hospital for Children at IU Health, *Indianapolis*

IOWA

University of Iowa Health Care Stead Family Children's Hospital, *Iowa City*

KANSAS

KU Medical Center, *Kansas City*
 Wesley Children's Hospital, *Wichita*

KENTUCKY

Advanced Center for Orthopedics & Sports Medicine, *Owensboro*
 Golisano Children's at UK, *Lexington*
 Norton Children's Cancer Institute, *Louisville*
 Owensboro Health, *Owensboro*

LOUISIANA

Manning Family Children's, *New Orleans*
 Ochsner Medical Center, *New Orleans*
 St. Jude Baton Rouge Affiliate Clinic at Our Lady of the Lake Children's Hospital, *Baton Rouge*

MARYLAND

Johns Hopkins Children's Center, *Baltimore*
 The Herman & Walter Samuelson Children's Hospital at Sinai, *Baltimore*
 University of Maryland Medical Center, *Baltimore*

MASSACHUSETTS

Boston Children's Hospital, *Boston*
 Dana-Farber Cancer Institute, *Boston*
 UMass Memorial Health, *Worcester*

MICHIGAN

Beaumont Hospital, *Royal Oak*
 C.S. Mott Children's Hospital, *Ann Arbor*
 Children's Hospital of Michigan, *Detroit*

THE NCCS ASSISTED FAMILIES BATTLING CHILDHOOD CANCER AT THE FOLLOWING PEDIATRIC ONCOLOGY FACILITIES ACROSS THE UNITED STATES:

MINNESOTA

Children's Minnesota, *Minneapolis*
 Mayo Clinic Hospital, St. Marys, *Rochester*
 Mayo Eugenio Litta Children's Hospital,
Rochester

MISSISSIPPI

Children's of Mississippi, *Jackson*
 The University of Mississippi Medical
 Center, *Jackson*

MISSOURI

Children's Mercy, *Kansas City*
 SSM Health Cardinal Glennon Children's
 Hospital, *St. Louis*
 St. Louis Children's Hospital, *St. Louis*
 University Hospital, *Columbia*

NEBRASKA

Children's Nebraska, *Omaha*

NEVADA

Cure 4 the Kids Foundation, *Las Vegas*
 Summerlin Hospital Medical Center, *Las Vegas*

NEW JERSEY

Bristol-Myers Squibb Children's Hospital, *New Brunswick*
 Children's Hospital of New Jersey, *Newark*
 Children's Hospital of Philadelphia, *Voorhees*
 CHOP Specialty Care, *Virtua, Voorhees Township*
 Emmanuel Cancer Foundation, *Clark*
 Hanger Clinic: Prosthetics and Orthotics,
Cedar Knolls
 MD Anderson Cancer Center at Cooper,
Camden
 Pediatric Orthopedic Associates, *East Brunswick*
 Rutgers Cancer Institute, *New Brunswick*
 St. Peter's University Hospital, *New Brunswick*

NEW MEXICO

Presbyterian Hospital, *Albuquerque*

NEW YORK

Children's Hospital at Montefiore Einstein,
Bronx
 Golisano Children's Hospital Upstate, *Syracuse*
 Maria Fareri Children's Hospital, *Valhalla*
 Memorial Sloan Kettering Cancer Center, *New York*
 Montefiore Einstein Medical Center, *Bronx*
 New York-Presbyterian Morgan Stanley
 Children's Hospital, *New York*
 NYU Langone Health, *New York*
 NYU Langone Medical Center, *New York*
 Upstate Golisano Children's Hospital, *Syracuse*

NORTH CAROLINA

Atrium Health Levine Children's, *Charlotte*
 Duke University Hospital, *Durham*
 East Carolina University, *Greenville*
 ECU Health Maynard Children's Hospital, *Greenville*
 Mission Hospital, *Asheville*
 Novant Health, *Charlotte*
 UNC Medical Center, *Chapel Hill*

NORTH DAKOTA

Sanford Roger Maris Cancer Center, *Fargo*

OHIO

Akron Children's, *Akron*
 Cincinnati Children's, *Cincinnati*
 Cleveland Clinic Children's, *Cleveland*
 Dayton Children's, *Dayton*
 Nationwide Children's Hospital, *Columbus*
 ProMedica Russell J. Ebeid Children's Hospital,
Toledo
 The James Cancer Hospital and Solove
 Research Institute, *Columbus*
 UH Rainbow Babies & Children's, *Cleveland*

OKLAHOMA

Bethany Children's Health Center, *Bethany*
 Oklahoma Children's OU Health, *Oklahoma City*
 OU Health Stephenson Cancer Center,
Oklahoma City
 St. Francis Health System, *Tulsa*

OREGON

Doernbecher Children's Hospital, *Portland*
 Randall Children's Hospital at Legacy Emanuel,
Portland

PENNSYLVANIA

Children's Hospital of Philadelphia, *Philadelphia*
 CHOP Middleman Family Pavilion, *King of Prussia*
 Janet Weis Children's Hospital at Geisinger,
Danville
 St. Christopher's Hospital for Children,
Philadelphia
 UPMC Children's Hospital of Pittsburgh,
Pittsburgh

SOUTH CAROLINA

MUSC Children's Health, *Charleston*
 Prisma Health Children's Hospital – Midlands,
Columbia
 Prisma Health Greenville Memorial Hospital,
Greenville
 Prisma Health Richland Hospital, *Columbia*

SOUTH DAKOTA

Sanford Children's Hospital, *Sioux Falls*

TENNESSEE

Children's Hospital at Erlanger, *Chattanooga*
 East Tennessee Children's Hospital, *Knoxville*
 Monroe Carell Jr. Children's Hospital at
 Vanderbilt, *Nashville*
 Niswonger Children's Hospital, *Johnson City*
 St. Jude Affiliate, *Johnson City*
 St. Jude Children's Research Hospital, *Memphis*
 The Children's Hospital at TriStar Centennial,
Nashville

TEXAS

Children's Medical Center, *Plano*
 Children's Medical Center Dallas, *Dallas*
 CHRISTUS Children's, *San Antonio*
 Cook Children's, *Ft. Worth*
 DHR Health, *Edinburg*
 Driscoll Children's Hospital, *Corpus Christi*
 Driscoll Children's Quick Care – Edinburg, *Edinburg*
 Methodist Children's Hospital, *San Antonio*
 Texas Children's Hospital, *Houston*
 The University of Texas MD Anderson Cancer
 Center, *Houston*
 Vannie Cook Children's Clinic, *McAllen*

UTAH

Primary Children's Hospital, *Salt Lake City*

VIRGINIA

Children's Hospital of Richmond at VCU, *Midlothian*
 Children's Hospital of The King's Daughters, *Norfolk*
 Inova Fairfax Hospital, *Falls Church*
 Inova Schar Cancer, *Fairfax*
 UVA Health Children's, *Charlottesville*

WASHINGTON

MultiCare Mary Bridge Children's Hospital, *Tacoma*
 Sacred Heart Children's Hospital, *Spokane*
 Seattle Children's Hospital, *Seattle*

WEST VIRGINIA

Cabell Huntington Hospital, *Huntington*
 CAMC Women and Children's Hospital, *Charleston*
 WVU Medicine Golisano Children's, *Morgantown*

WISCONSIN

Aurora Sports Health & Mobility Center, *Marinette*
 Children's Wisconsin, *Milwaukee*
 HSHS St. Vincent Children's Hospital, *Green Bay*

BEYOND THE CURE SURVIVORSHIP PROGRAM



The NCCS **Beyond the Cure Survivorship Program** empowers childhood cancer survivors and their families with the knowledge and resources they need to thrive long after treatment ends. While survival is a remarkable victory, many survivors face lasting physical, cognitive, and emotional challenges known as late effects.

These complications, often resulting from treatment rather than the disease itself, impact the majority of survivors at some point in their lives. To help survivors navigate this, the NCCS offers a **Late Effects After Treatment Tool (LEATT)**, a secure, personalized online assessment that identifies potential long-term effects based on a survivor's diagnosis and treatment history. LEATT equips survivors and caregivers with critical, lifelong information to share with their healthcare teams, supporting earlier intervention and more informed care. Developed in collaboration with NCCS Board member *Robert Hayashi, MD, Professor of Pediatrics at Washington University School of Medicine and Director of the Late Effects Clinic at St. Louis Children's Hospital*, LEATT stands as a cornerstone of our survivorship resources.

The NCCS is also committed to helping survivors pursue their future goals. The **Beyond the Cure Ambassador Scholarship Program** supports college-bound survivors as they take the next step toward their dreams. In FY 2025, **50 childhood cancer survivors** nationwide received scholarships totaling **\$175,000**. Applicants shared powerful personal essays describing how cancer shaped their lives, their goals, and their desire to give back. Scholarship recipients also complete 15 hours of service benefiting the childhood cancer community, turning gratitude into meaningful action.

Since the program's launch in 2008, the NCCS has awarded more than **\$2.7 million in scholarships to 257 survivors**, helping transform resiliency into opportunity. We are deeply grateful to the *Engelhardt Family Foundation* and *The Spencer Foundation* for their generous support in making these life-changing opportunities possible.

SURVIVORSHIP CONFERENCES

To further support survivors, the Beyond the Cure Program co-hosts survivorship conferences with long-term follow-up clinics nationwide. In FY 2025, we supported **one** conference that provided educational and emotional support to **257 survivors and their families**, offering invaluable guidance for navigating life after cancer.

EDUCATIONAL PUBLICATIONS

The NCCS also offers an extensive library of free educational materials to support survivors and their families. In FY 2025, **1,962 publications** were distributed, including creative activity books to help young patients understand their treatment, coloring books for children, guides for college-bound survivors, and comprehensive resources for parents and/or caregivers.

GLOBAL OUTREACH PROGRAM



Each year, more than 400,000 children and adolescents worldwide are diagnosed with cancer. Yet for those living in developing countries, access to consistent and effective treatment remains devastatingly limited. Fewer than 20% of these children receive the care they need to survive.

Established in 1993 to address the lack of adequate medical care for children with cancer in low- and middle-income countries, the Global Outreach Program has grown into a critical lifeline. Since its inception, more than **\$477 million in donated pharmaceuticals** and supportive care products have been distributed to **119 pediatric oncology facilities** across **53 countries**. Physicians and partner hospitals estimate that more than **216,000 children** have directly benefited from this support. This lifesaving work is made possible through the extraordinary generosity of our corporate donors.

During FY 2025, pharmaceutical donations totaling more than **\$1.5 million** were delivered to **15 hospitals** and associated clinics in eight countries, providing essential treatment and supportive care to more than **2,976 children** with cancer. Our partnered facilities are committed to providing high-quality, lifesaving care at no cost to the children or their families.



Our work in countries like Lebanon shows just how vital access to care truly is. For **Karim**, it's everything. Since December 26, 2023, he has faced retinoblastoma, a rare eye cancer, with the same magic he brings into every room. He hides his face, ducks under a table, then pops back out with a giggle that softens even the hardest days. Some days, his eyes struggle to find the shapes and smiles around him, but his heart never misses. Without support from programs like ours, effective treatment would not be possible.

WORLDWIDE FACILITY PARTNERS

EL SALVADOR | Centro Médico Fundación Ayúdame A Vivir, *San Salvador*
GUATEMALA | Fundación Ayúdame a Vivir, Unidad Nacional de Oncología Pediátrica, *Guatemala City*
HAITI | Nos Petits Freres et Soeurs - Hospital St. Damien, *Port-au-Prince*
HONDURAS | Fundación Hondureña para el Niño con Cáncer, *Tegucigalpa*
LEBANON | Children's Cancer Center of Lebanon (CCCL), *Beirut*
MALI | CHU Gabriel Touré, *Bamako*
NICARAGUA | Hospital Infantil Manuel de Jesús Rivera "La Mascota," *Managua*
ZIMBABWE | KidsCan Zimbabwe, *Harare*

MICHELE'S LEGACY

The program continues to honor the life and legacy of Michele Hertlein, who dedicated 24 years to improving outcomes for children worldwide. After a courageous ten-year battle with cancer, Michele passed away, leaving behind a legacy defined by compassion, perseverance, and an unwavering commitment to children in need.





INDEPENDENT AUDITORS' REPORT

Board of Directors
The National Children's Cancer Society, Inc.
St. Louis, Missouri

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of The National Children's Cancer Society, Inc., which comprise the statement of financial position as of September 30, 2025, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of The National Children's Cancer Society, Inc. as of September 30, 2025, and the changes in net assets, and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of The National Children's Cancer Society, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about The National Children's Cancer Society, Inc.'s ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of The National Children's Cancer Society, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about The National Children's Cancer Society, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.



CliftonLarsonAllen LLP

St. Louis, Missouri
February 9, 2026

STATEMENT OF FINANCIAL POSITION

YEAR ENDED SEPTEMBER 30, 2025

| | | ASSETS | |
|-----------------------------------|--|--------|---------------------|
| CURRENT ASSETS | | | |
| Cash | | | \$ 839,895 |
| Accounts Receivable, Net | | | 220,243 |
| Inventory | | | 22,238 |
| Prepaid Expenses and Other Assets | | | 141,654 |
| Total Current Assets | | | <u>1,224,030</u> |
| NONCURRENT ASSETS | | | |
| Investments | | | 5,220,584 |
| Property and Equipment, Net | | | 358,935 |
| Total Noncurrent Assets | | | <u>5,579,519</u> |
| Total Assets | | | <u>\$ 6,803,549</u> |
| LIABILITIES AND NET ASSETS | | | |
| CURRENT LIABILITIES | | | |
| Accounts Payable | | | \$ 641,307 |
| Annuities Payable | | | 22,189 |
| Accrued Expenses | | | 117,642 |
| Unearned Revenue | | | 11,440 |
| Line of Credit | | | 147,888 |
| Total Current Liabilities | | | <u>940,466</u> |
| LONG-TERM LIABILITIES | | | |
| Annuities Payable | | | 169,747 |
| Total Long-Term Liabilities | | | <u>169,747</u> |
| NET ASSETS | | | |
| Without Donor Restrictions | | | 4,973,865 |
| With Donor Restrictions | | | 719,471 |
| Total Net Assets | | | <u>5,693,336</u> |
| Total Liabilities and Net Assets | | | <u>\$ 6,803,549</u> |

STATEMENT OF ACTIVITIES

YEAR ENDED SEPTEMBER 30, 2025

| | Without Donor Restrictions | With Donor Restrictions | Total |
|--|----------------------------|-------------------------|---------------------|
| PUBLIC SUPPORT AND REVENUE | | | |
| | \$ 6,084,973 | \$ - | \$ 6,084,973 |
| Contributions | 55,411 | - | 55,411 |
| List Rental Income | 397,910 | - | 397,910 |
| Event Revenue | (175,643) | - | (175,643) |
| Less Direct Costs of Events | 1,515,630 | - | 1,515,630 |
| In-Kind Contributions | 1,101,798 | - | 1,228,990 |
| Investment Income | 507,223 | 37,588 | 544,811 |
| Net Assets Released from Restrictions - Satisfaction of Program Restrictions | 1,009,911 | (1,009,911) | - |
| Total Public Support and Revenue | <u>9,395,415</u> | <u>(972,323)</u> | <u>8,423,092</u> |
| EXPENSES | | | |
| Program Services | | | |
| Division of Patient and Family Services | 3,568,875 | - | 3,568,875 |
| Supplemental Family Support | 1,222,722 | - | 1,222,722 |
| Public Information and Education | 274,389 | - | 274,389 |
| Total Program Services | <u>5,065,986</u> | - | <u>5,065,986</u> |
| Supporting Services | | | |
| Management and General | 772,483 | - | 772,483 |
| Fundraising | 2,602,791 | - | 2,602,791 |
| Total Supporting Services | <u>3,375,274</u> | - | <u>3,375,274</u> |
| Total Expenses | 8,441,260 | - | 8,441,260 |
| OTHER INCOME (EXPENSE) | | | |
| Change in Value of Annuities | (19,928) | - | (19,928) |
| NET CHANGE IN NET ASSETS | 934,227 | (972,323) | (38,096) |
| Net Assets - Beginning of Year | <u>4,039,638</u> | <u>1,691,794</u> | <u>5,731,432</u> |
| NET ASSETS - END OF YEAR | <u>\$ 4,973,865</u> | <u>\$ 719,471</u> | <u>\$ 5,693,336</u> |

STATEMENT OF FUNCTIONAL EXPENSES

YEAR ENDED SEPTEMBER 30, 2025

| | Program Services | | | Supporting Services | | Total |
|---------------------------------|---|-----------------------------|----------------------------------|------------------------|---------------------|---------------------|
| | Division of Patient and Family Services | Supplemental Family Support | Public Information and Education | Management and General | Fundraising | |
| Aid Grants | \$ 1,515,630 | \$ 1,076,162 | \$ - | \$ - | \$ - | \$ 2,591,792 |
| Production Services | - | - | - | 332,614 | 2,229,425 | 2,562,039 |
| Salary Expense | 483,054 | 83,297 | 155,948 | 250,010 | 197,598 | 1,169,907 |
| Family Services and Education | 1,096,228 | 1,369 | 2,563 | - | - | 1,100,160 |
| Insurance | 92,162 | 15,894 | 29,754 | 47,700 | 37,700 | 223,210 |
| Professional Services | 87,438 | 15,077 | 28,228 | 45,254 | 35,767 | 211,764 |
| Other Expenses | 78,116 | 13,470 | 25,219 | 40,421 | 31,954 | 189,180 |
| Direct Costs of Events | - | - | - | - | 175,643 | 175,643 |
| Payroll Taxes | 34,909 | 6,020 | 11,269 | 18,068 | 14,280 | 84,546 |
| In-Kind Program Shipping | 60,586 | - | - | - | - | 60,586 |
| UPS Donation Processing Center | 53,866 | - | - | - | - | 53,866 |
| Retirement | 18,883 | 3,256 | 6,096 | 9,773 | 7,724 | 45,732 |
| Meetings and Travel | 12,698 | 2,190 | 4,099 | 6,572 | 5,194 | 30,753 |
| Cause-Related Marketing | - | - | - | - | 28,947 | 28,947 |
| Telephone | 8,597 | 1,482 | 2,775 | 4,449 | 3,517 | 20,820 |
| Depreciation Expense | 7,808 | 1,346 | 2,520 | 4,040 | 3,193 | 18,907 |
| Rent and Utilities | 6,372 | 1,099 | 2,057 | 3,298 | 2,607 | 15,433 |
| Postage, Shipping, and Handling | 6,231 | 1,075 | 2,012 | 3,225 | 2,549 | 15,092 |
| Office Supplies and Services | 2,318 | 400 | 748 | 5,309 | 948 | 9,723 |
| Equipment Rental | 3,370 | 581 | 1,088 | 1,744 | 1,379 | 8,162 |
| Shipping and Procurement | 603 | - | - | - | - | 603 |
| Public Relations | 6 | 4 | 13 | 6 | 9 | 38 |
| Total | 3,568,875 | 1,222,722 | 274,389 | 772,483 | 2,778,434 | 8,616,903 |
| Less: Direct Costs of Events | - | - | - | - | (175,643) | (175,643) |
| Total Expenses | \$ 3,568,875 | \$ 1,222,722 | \$ 274,389 | \$ 772,483 | \$ 2,602,791 | \$ 8,441,260 |

STATEMENT OF CASH FLOWS

YEAR ENDED SEPTEMBER 30, 2025

CASH FLOWS FROM OPERATING ACTIVITIES

| | |
|--|-------------|
| Net Change in Net Assets | \$ (38,096) |
| Adjustments to Reconcile Net Change in Net Assets to | |
| Net Cash Used by Operating Activities | |
| Proceeds from Sales of Contributed Investments | 47,406 |
| Depreciation | 18,907 |
| Change in Value of Annuities | 19,928 |
| Unrealized Loss on Investments | (128,390) |
| Realized Gain on Investments | (250,863) |
| (Increase) Decrease In: | |
| Accounts Receivable | (40,101) |
| Inventory | (1,854) |
| Prepaid Expenses and Other Assets | (12,595) |
| Increase (Decrease) In: | |
| Accounts Payable | (250,683) |
| Annuity Payable | 2,832 |
| Accrued Expenses | 4,460 |
| Unearned Revenue | 881 |
| Net Cash Used by Operating Activities | (628,168) |

CASH FLOWS FROM INVESTING ACTIVITIES

| | |
|---|-------------|
| Purchase of Property and Equipment | - |
| Proceeds from Sale of Investments | 2,441,952 |
| Purchases of Investments | (1,580,681) |
| Net Cash Provided by Investing Activities | 861,271 |

CASH FLOWS FROM FINANCING ACTIVITIES

| | |
|--------------------------------|----------|
| Net Payments on Line of Credit | (98,890) |
|--------------------------------|----------|

NET CHANCE IN CASH

134,213

Cash - Beginning of Year

705,682

CASH - END OF YEAR

\$ 839,895

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

The National Children's Cancer Society, Inc. (the Organization) was incorporated in November 1987 to serve children with cancer and their families. Program services are categorized as follows: Division of Patient and Family Services, Supplemental Family Support, and Public Information and Education. The Organization provides a Family Support Program, Transportation Assistance Fund, and Emergency Assistance Fund for families with children in treatment, a Beyond the Cure Program for cancer survivors, and a Global Outreach Program.

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB). The Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. As of September 30, 2025, the Organization had \$719,471 in net assets with donor restrictions.

Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

Concentration of Credit Risk

The majority of the Organization's cash and cash equivalents are maintained at three banks. The bank provides a maximum protection under regulations issued by the Federal Deposit Insurance Corporation. At September 30, 2025, deposits at the bank were in excess of federally insured limits were \$335,936.

Cash and Cash Equivalents

Cash includes demand deposits and highly liquid financial instruments purchased with original maturities of three months or less. The carrying amount of cash equivalents approximates fair value.

Certain cash balances are required to be held in separate bank accounts in accordance with contractual arrangements.

Accounts Receivable

Receivables consist of amounts due to the Organization related to the direct mail and royalty programs. Management writes off receivables when it determines that an amount will not be collected and considers all receivables at September 30, 2025, to be collectible. Therefore, no allowance for doubtful accounts is recorded at September 30, 2025. All receivables are considered current at September 30, 2025; therefore, no discount has been recorded. Accounts receivables at October 1, 2024, totaled \$180,142.

Investments

In accordance with accounting standards, investments in marketable securities with readily determinable fair values are reported at fair value in the statement of financial position. Unrealized gains and losses are included in the statement of activities.

Inventory

Inventory consists of pharmaceutical and medical supplies, program literature, and patient and family service items and is stated at the lower of cost or net realizable value, determined on the first-in, first-out method.

Property and Equipment

Furniture and equipment is recorded at cost. Maintenance and repairs are charged to operations when incurred. Betterments and renewals in excess of \$500 are reviewed individually by management and are capitalized. Donations of furniture and equipment are recorded as support at their estimated fair value. Such donations are reported as without donor-restricted support unless the donor has restricted the donated asset to a specific purpose.

Depreciation and amortization are provided on a straight-line basis over the following periods:

| | |
|------------------------|--------------|
| Buildings | 39 Years |
| Furniture and Fixtures | 7 Years |
| Equipment | 3 to 7 Years |
| Software | 3 Years |
| Leasehold Improvements | 7 Years |

Compensated Absences

Employees of the Organization are entitled to paid vacation days depending on length of service. Amounts accrued for compensated absences are included in accounts payable and accrued expenses in the accompanying statement of financial position.

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Contributions

In accordance with accounting standards, contributions received by the Organization are recorded as with donor restriction or without donor restriction support, depending on the existence and nature of any donor restrictions. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. Contributions that are restricted by the donor are reported as increases in net assets without donor restrictions if the restrictions expire within the fiscal year the contributions are recognized.

In-Kind Nonfinancial Contributions

Contributed nonfinancial assets are recognized within the financial statements of activities as follows for the year end September 30, 2025:

| Nonfinancial Asset | 2025 Revenue Recognition | Monetized or Utilized | Utilization Function | Donor Restrictions | Valuation Technique |
|----------------------------|--------------------------|-----------------------|--|--------------------|--|
| Basic Pharmaceutical Drugs | \$ 1,515,630 | Utilized | Distributed to Medical Providers and Hospitals for Use With Children | None | Value Based on Wholesale Price in a National Pharmaceutical Database |

Annuities Payable

Annuities payable represents an annuity obligation for gift annuities received by the Organization. Gift annuities provide for payment to named annuitants over their lifetimes. The payment is guaranteed by the Organization through an agreement. An annuities payable liability is recorded until the projected termination of the annuity payment obligation based upon the present value of the expected payments over the life expectancy of the annuitants. The current annuity values are valued at fair value. The Organization reviews AFR in determining the discount rate to apply for the present value calculation. A discount rate of 4.80 % was applied to determine the liability at September 30, 2025. Fair value at September 30, 2025, is \$450,675, while the recorded liability is \$191,936.

Event Revenue

Event revenue consists of money raised from fundraising events to support mission goals and is consistent and anticipated in future periods.

List Rental Income

Rental Income received from consistent payments on a monthly basis. The amount recorded aligns with prior amounts recorded and these payments are expected to continue.

Unearned Revenue

Unearned revenue consists of payments received in advance that relate to donated items to be sold by a third party in a future period and are deferred and recognized as revenue in the period earned.

Use of Estimates

The preparation of the financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of support, revenues, and expenses during the reporting period, including grant and contract revenues subject to review by applicable funding agencies. Accordingly, actual results could differ from those estimates.

Fair Value Measurements

The Organization measures fair value using a three-level hierarchy for fair value measurements based upon the transparency of inputs to the valuation of an asset or liability. Inputs may be observable or unobservable and refer broadly to the assumptions that market participants would use in pricing the asset or liability. Observable inputs reflect the assumptions market participants would use in pricing the asset or liability based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability developed based on the best information available in the circumstances.

The objective of a fair value measurement is to determine the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). Accordingly, the fair value hierarchy gives the highest priority to quoted prices (unadjusted) in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The Organization may use valuation techniques consistent with the market, income, and cost approaches to measure fair value.

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Fair Value Measurements (continued)

The inputs used to measure fair value are categorized into the following three categories:

Level 1: Inputs that reflect unadjusted quoted prices in active markets for identical investments, such as stocks, corporate, and government bonds that the Organization has the ability to access as of the measurement date.

Level 2: Inputs, other than quoted prices, that are observable for the asset or liability either directly or indirectly, including inputs from markets that are not considered to be active.

Level 3: Inputs that are unobservable. Unobservable inputs reflect the Organization's own assumptions about the factors market participants would use in pricing an investment, and are based on the best information available in the circumstances.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of financial position, as well as the general classification of such assets and liabilities pursuant to the valuation hierarchy.

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. Level 1 securities include money market mutual funds, certain mutual funds, and equities. If quoted market prices are not available, then fair values are estimated by using pricing models or quoted prices of securities with similar characteristics. These Level 2 securities include mortgaged and asset-backed securities, corporate and municipal bonds, U.S. government agencies, hedge funds, and managed futures. Inputs used to value Level 3 securities include interest rates for similar debt securities, Treasury obligations with similar maturities and net asset values provided by funds is utilized as a practical expedient.

In certain cases where Level 1 or Level 2 inputs are unavailable, securities are classified in Level 3 of the hierarchy and include hedge funds. These Level 3 securities include alternative investments in business development companies. The net asset value (or its equivalent) provided by the fund is utilized, as a practical expedient, to determine the fair value of these Level 3 investments. The funds are classified as Level 3 if they may not be redeemable in the short-term.

Any transfers in and out of Level 1 (quoted market prices), Level 2 (other significant observable inputs), and Level 3 (significant unobservable inputs) are recognized on the period ending date.

Development Costs

The Organization periodically incurs substantial costs for the continued development of a contributor list. In accordance with GAAP, the Organization recognizes these costs as they are incurred against operations, even though the contributor lists are expected to provide significant benefit to future periods.

Functional Expense Allocation

The costs of providing various program and other activities of the Organization have been summarized on a functional basis in the statement of functional expenses. Expenses are charged to program services, fundraising, or management and general based on actual costs incurred by the program or supportive service, as well as on management's best estimate of time spent in the functional expense categories. Management and general expenses include those expenses that are not directly identifiable with any other specific section but provide for the overall support and direction of the Organization.

Tax Status

The Organization qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code. However, the Organization is liable for federal income taxes on certain unrelated business income.

Management analyzed the tax positions taken by the Organization and concluded that, as of September 30, 2025, there were no uncertain tax positions taken or are expected to be taken. Accordingly, no interest or penalties related to uncertain tax positions have been accrued in the accompanying financial statements.

Subsequent Events

In preparing these financial statements, the Organization has evaluated events and transactions for potential recognition or disclosure through February 9, 2026, the date the financial statements were available to be issued.

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 2 LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure, this is, without donor or other restrictions limiting their use, within one year of the statement of financial position date, comprise the following at September 30, 2025:

| | |
|--|----------------------------|
| Cash and Cash Equivalents | \$ 839,895 |
| Accounts Receivable | 220,243 |
| Investments | <u>5,220,584</u> |
| Total Current Financial Assets | 6,280,722 |
| Less: Net Assets With Donor Restrictions Relating to Current Financial Assets | <u>(719,471)</u> |
| Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year | <u><u>\$ 5,561,251</u></u> |

The Organization classifies investments as noncurrent assets due to the intended purpose of holding them long-term but could be used as a source of current liquidity. The Organization receives significant contributions without donor restrictions, and is considered for programs which are ongoing, major, and central to its annual operations. Contributions without donor restrictions are to be available to meet cash needs for general expenditures, which include administrative and general expenses, fundraising expenses, and grant commitments expected to be paid in the subsequent year. Annual operations are defined as activities occurring during the Organization's fiscal year. The Organization also has a line of credit with available credit of \$2,265,108 that could be used if needed.

NOTE 3 INVESTMENTS

Investments consist of the following at September 30, 2025:

| | |
|----------------------------------|----------------------------|
| Government and Agency Securities | \$ 509,855 |
| Corporate Bonds | 378,299 |
| Equity Securities | 3,377,851 |
| Mutual Funds | 757,293 |
| Alternative Investments | <u>197,286</u> |
| Total Investments | <u><u>\$ 5,220,584</u></u> |

Investment return for the year ended September 30, 2025 is summarized as follows:

| | |
|--------------------------------------|--------------------------|
| Interest and Dividend Income | \$ 165,550 |
| Unrealized Gain on Equity Securities | 128,390 |
| Realized Loss on Sale of Investments | <u>250,863</u> |
| Total Investment Income | <u><u>\$ 544,811</u></u> |

NOTE 4 FAIR VALUE MEASUREMENTS

The Organization uses fair value measurements to record fair value adjustments to certain assets and liabilities and to determine fair value disclosures. For additional information on how the Organization values all other assets and liabilities, refer to Note 1 – Organization and Summary of Significant Accounting Policies.

The following table presents the fair value hierarchy for the balances of the assets of the Organization measured at fair value on a recurring basis as of September 30, 2025:

| | Total | Level 1 | Level 2 | Level 3 |
|----------------------------------|----------------------------|----------------------------|--------------------------|--------------------------|
| Government and Agency Securities | \$ 509,855 | \$ - | \$ 509,855 | \$ - |
| Corporate Bonds | 378,299 | - | 378,299 | - |
| Equity Securities | 3,377,851 | 3,377,851 | - | - |
| Mutual Funds | 757,293 | 757,239 | - | - |
| Alternative Investments | 197,286 | - | - | 197,286 |
| Total Investments | <u><u>\$ 5,220,584</u></u> | <u><u>\$ 4,135,144</u></u> | <u><u>\$ 888,154</u></u> | <u><u>\$ 197,286</u></u> |

The table below presents information about recurring fair value measurements that use significant unobservable inputs (Level 3 measurements):

| | 2025 |
|---|--------------------------|
| Private Equity Investment - Beginning of Year | \$ 200,000 |
| Total Losses | (2,173) |
| Transfers | - |
| Purchases, sales, and settlements: | |
| Purchases | - |
| Sales | <u>-</u> |
| Private Equity Investment - End of Year | <u><u>\$ 197,287</u></u> |

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 5 NET ASSESSTS WITH DONOR RESTRICTIONS

Net assets with donor restrictions at September 30, 2025, consist of:

| | |
|---|------------|
| Purpose Restriction for RCCJ Grant | \$ - |
| Purpose Restriction for Cancer Treatment in Minnesota | 719,471 |
| Total Net Assets with Donor Restrictions | \$ 719,471 |

Assets released from restrictions for the year ended September 30, 2025, are as follows:

| | |
|-------------------------------------|--------------|
| Satisfaction of Purpose Restriction | \$ 1,009,911 |
|-------------------------------------|--------------|

NOTE 6 PROPERTY AND EQUIPMENT

Property and equipment consists of the following at September 30, 2025:

| | |
|--------------------------------|------------|
| Equipment | \$ 29,516 |
| Software | 308,792 |
| Buildings | 380,020 |
| Total | 734,931 |
| Less: Accumulated Depreciation | (375,996) |
| Property and Equipment | \$ 358,935 |

Depreciation expense was \$18,907 for the year ended September 30, 2025.

NOTE 7 ALLOCATION OF JOINT COSTS

The Organization combines the costs of its joint activities that combine fundraising appeals with other functions and allocates those costs to their functional classifications. Such costs include printing, caging, donor search, public information, computer expenses, list development, direct mail expense, postage, and production fees. The physical units method is used to allocate these costs. This allocation process is based on lines of print from the documents and scripts used in the joint activities. Each line of print is analyzed, and a determination is made as to its purpose. The number of lines for each objective is totaled and weighed against the total number of lines in the document, as well as the frequency of use of the document.

The Organization's total joint costs incurred and functional classifications for the year ended September 30, 2025, are as follows:

| | |
|---------------------------|--------------|
| Functional Classification | |
| Program Services | \$ 1,100,160 |
| Management and General | 332,614 |
| Fundraising | 2,229,425 |
| Total Joint Costs | \$ 3,662,199 |
| Type of Activity | \$ 3,662,199 |
| Direct Mail | \$ 3,662,199 |
| Total Joint Costs | \$ 3,662,199 |

The Organization follows standards for accounting and reporting costs of joint activities that combine fundraising appeals with other functions including definitions for the criteria of purpose, audience, and content. In accordance with the standard, the compensation structure of the joint activity is considered, as well as the target audience of the activity and the content of the information conveyed. If any of the criteria of purpose, audience, and content is not met, all costs of the joint activity are considered fundraising.

NOTE 8 RETIREMENT PLAN

The Organization has a defined contribution retirement plan covering substantially all of its employees. Contributions to the plan and related expenses were \$45,732 for the year ended September 30, 2025.

NOTES TO FINANCIAL STATEMENTS

YEAR ENDED SEPTEMBER 30, 2025

NOTE 9 AID GRANTS

The Organization receives and disburses both cash and in-kind grants to individuals and organizations. During the year ended September 30, 2025, the Organization received \$1,515,630 and disbursed \$1,515,630 of in-kind contributions, consisting primarily of pharmaceuticals and medical supplies. The grants were recorded at their estimated fair value in the financial statements based on valuations provided by the donors, primarily manufacturers or distributors, and comparison with other industry sources.

NOTE 10 LINE OF CREDIT

The Organization has a Loan Management Account Agreement with a bank which allows the Organization to borrow under a revolving line of credit arrangement. Available credit is subject to borrowing base limitations determined by the bank based upon the market value of pledged securities. Advances under the agreement can be made under variable rate, fixed rate and term advances agreed upon at the time of the advance. Advances are due upon demand. Investments held by Merrill Lynch are pledged as collateral. Available credit under the agreement at September 30, 2025, was \$2,265,108. At September 30, 2025, borrowings under the agreement were \$147,888, all in principal. The balance is subject to interest at a variable rate of LIBOR plus the spread. The interest rate as of September 30, 2025, is 6.28%. Cash paid for interest on the line of credit was \$13,642 for the year ended September 30, 2025.

NOTE 11 RELATED PARTY TRANSACTIONS

During the year ended September 30, 2025, the Organization received \$75,810 in contributions from various members of the board of directors (Directors). In addition, during the year ended September 30, 2025, the Organization received \$105,500 from companies in which Directors serve as a director or officer. The Organization also received \$26,836 in in-kind gifts from various board members of the board of directors during the year ended September 30, 2025.

One of the asset custodians is a financial institution for which a member of the board of The National Children's Cancer Society is an officer. The amount paid to the asset custodian during the year ended September 30, 2025, totaled \$52,696. The board member was not directly compensated for services provided

NOTE 12 RISK AND UNCERTAINTIES

The Organization's assets include investments in various securities which, in general, are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is reasonably possible that changes in risks in the near term would materially affect the amounts reported in the balance sheets and the statements of activities.

BOARD OF DIRECTORS

FY 2025

Scott Stringer

Chairman

Brad Hermann

Vice Chairman

Sue Engelhardt

Secretary & Treasurer

Mark Stolze

President & CEO

Kevin Bouse

Dr. Timothy Dilg

Tom Guebert

Robert Hayashi, MD

Randy McDowell

Jeff Michalski, MD

Harry Mueller

Mark Slocomb

Eric Stange

Tamara Walls, MD



"I have come far by surviving cancer twice. Such an experience would make anyone realize the value of taking hold of your dreams and pursuing them as vigorously as possible. I started to dive deeper into some of my passions and the things I liked to do, such as writing, drawing, building, animation, and playing video games."

-Alejandrina

*Hodgkin's Lymphoma Warrior &
Beyond the Cure Ambassador Scholarship Recipient*

Read Alejandrina's
award-winning essay:

