

2023 ANNUAL REPORT



Because no family should go through childhood cancer alone.™

MEET ISAIAH, ONE OF OUR BRAVE WARRIORS!



Isaiah, Wilms Tumor Warrior

Isaiah had been undergoing screening, ultrasounds, and lab work for a year and a half to test for a possible genetic/epigenetic syndrome. Just when Jillian, Isaiah's mom, thought it might be safe to end the testing, she received an unexpected call.

"Our pediatrician called to tell me the results of the ultrasound came back, and there was a new 2.2cm mass on Isaiah's right kidney," Jillian shared. That phone call was the beginning of Isaiah and Jillian's "new normal." As things began to move very quickly from that point, Jillian recalled, "We saw urology the very next week, had an MRI under sedation to confirm, and wound up having surgery five days after he turned 2 years old."

"Our surgical team was meticulous and wonderful, and they got the entire tumor," said Jillian. "When the pathology came back, we found that Isaiah had a Wilms Tumor. Isaiah started chemo shortly after and is currently still in treatment."

Jillian is a single mom caring for Isaiah and his two older brothers. Caring for a child during treatment is a full-time job in itself, so Jillian went on medical leave from her work. "I am an adult oncology nurse by profession, so I had a good understanding of what chemotherapy meant. I was blessed to have an amazing social worker with Isaiah's oncology clinic who suggested NCCS as a foundation that could help out while I am unable to work," said Jillian.

"Isaiah's cancer has affected our entire family, and stress over finances is the last thing a cancer family should be thinking about. Thanks to NCCS, some of those financial anxieties have been lifted, and I am able to be physically and emotionally present during this difficult time. Isaiah does not know that what he is going through is not normal, and his loving spirit is beautiful to watch."



Dear friends,

We trust this letter finds you in good health and high spirits. On behalf of The National Children's Cancer Society (NCCS), we are honored to present our Annual Report for the fiscal year 2023. As we reflect on the past year's endeavors, achievements, and challenges, we are reminded of the collective commitment to our mission and the unwavering support we receive from compassionate individuals and friends of the NCCS.

In 2023, we continued our relentless pursuit of providing critical assistance to children battling cancer and their families. The NCCS remains steadfast in its dedication to alleviating the financial and emotional burdens associated with childhood cancer, ensuring that families feel supported as they navigate the arduous world of childhood cancer.

Our Annual Report serves as a testament to the impact of our programs and initiatives throughout the year. Inside, you will find comprehensive insights into the strides we have made in supporting our families. The data and stories contained within these pages reflect the heart of our organization and the profound difference we collectively make in the lives of those affected by childhood cancer.

We invite you to delve into the pages of our Annual Report, celebrating the victories and acknowledging the areas where work remains. The continued support of our benefactors is integral to our ability to make a meaningful impact on the lives of children and families affected by cancer.

As we look toward the future, the NCCS remains committed to advancing our mission and finding innovative ways to enhance the quality of life for pediatric cancer patients. We are immensely grateful for your unwavering support and look forward to your continued partnership in the years to come.

If you have any questions or would like additional information, please do not hesitate to contact us. Together, we can make a difference in the lives of children battling cancer. Because no family should go through childhood cancer alone.™

Thank you for your compassion, dedication, and commitment to our shared cause.

Sincerely,

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

Mark Slocomb
Chairman of the Board

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

Mark Stolze
President and CEO



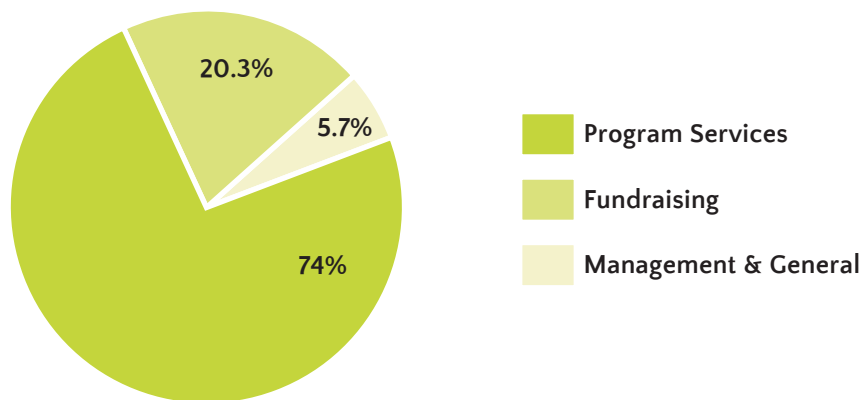
MISSION

The National Children's Cancer Society (NCCS) provides emotional, financial, and educational support to children with cancer, their families, and survivors.

OVERVIEW

Since its inception, the NCCS **has helped over 49,000 children** with cancer and their families by **providing over \$71 million** in program distributions. The NCCS is a 501(c)3 non-profit organization that is proud to meet all of the Better Business Bureau's "Standards of Charity Accountability," which includes a comprehensive, in-depth evaluation of charity governance, fundraising practices, solicitations, and informational materials. The organization is also a Platinum Participant on GuideStar Exchange, the world's largest source of information on nonprofit organizations.

FY2023 REVENUE ALLOCATION

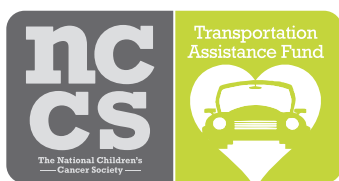


BECAUSE NO FAMILY SHOULD GO THROUGH CHILDHOOD CANCER ALONE™

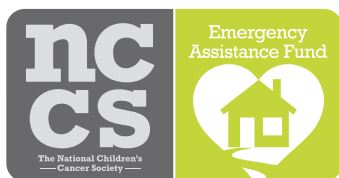
Pediatric oncology nurses and social workers at treatment centers across the country refer families to the NCCS. **Two hundred and six (206) treatment centers** referred families to the NCCS. **One thousand, eight hundred and sixty-four (1,864)** families in need of assistance were helped this fiscal year.

HOW WE HELP DURING TREATMENT

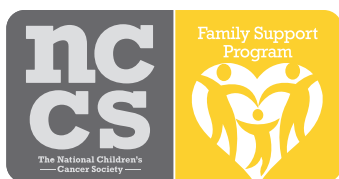
When a family is facing the tragedy of childhood cancer, the only thing they should have to focus on is getting their child well again. They shouldn't be overwhelmed with the costs of getting their child to treatment. But how many of us have a savings plan in place for childhood cancer?



The NCCS offers two programs to ease the financial strain of a childhood cancer diagnosis. Our **Transportation Assistance Fund** alleviates some of the travel expenses incurred to get a child to treatment, such as mileage, airfare, and lodging when the best place for treatment is away from home.



The **Emergency Assistance Fund** provides an annual stipend to families who have a child who has been inpatient or away from home for an extended period of time. Assistance may be used for many daily expenses families face, including mortgage payments, rent, utility bills and other treatment-related costs such as prescriptions and parking.



In addition to the financial impact of childhood cancer, the emotional toll can be devastating. Our **Family Support Program** helps to ease the emotional strain that accompanies a childhood cancer diagnosis by providing an NCCS case manager who stands by a family's side from diagnosis through survivorship. These dedicated individuals are specially trained to offer practical and emotional support during difficult times; educate parents and caregivers on how to best advocate for their child; and provide referrals when needed.

THE NCCS ASSISTED FAMILIES BATTLING CHILDHOOD CANCER AT THE FOLLOWING PEDIATRIC ONCOLOGY FACILITIES ACROSS THE U.S.

ALABAMA

Children's of Alabama, Birmingham

ALASKA

Providence Alaska Medical Center, Anchorage

ARIZONA

Banner - University Medical Center, Tucson
Banner Children's at Desert, Mesa
Phoenix Children's, Phoenix

ARKANSAS

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

CALIFORNIA

Bass Center for Childhood Cancer & Blood Diseases, Palo Alto
Children's Hospital Los Angeles, Los Angeles
CHOC, Orange
City of Hope, Duarte
Cottage Children's Medical Center, Santa Barbara
Kaiser Permanente, Fontana
Kaiser Permanente, Los Angeles
Kaiser Permanente, Oakland
Kaiser Permanente, Roseville
Kaiser Permanente, San Diego
Kaiser Permanente, San Francisco
Loma Linda University Children's Health, Loma Linda
Loma Linda University Children's Health, San Bernardino
Miller Children's & Women's Hospital, Long Beach
Rady Children's Hospital, San Diego
Rady Proton Center, San Diego
San Joaquin General Hospital, French Camp
Stanford Children's Health at California Pacific Medical Center, San Francisco
Stanford Medicine Children's Health-Lucile Packard Children's Hospital, Palo Alto
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
Rocky Mountain Cancer Center, Denver
Rocky Mountain Hospital for Children, Denver

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
Ascension Sacred Heart Pensacola Hospital, Pensacola
Bascom Palmer Eye Institute, Miami
Golisano Children's Hospital of Southwest Florida, Ft. Myers
Jackson Health System, Miami
Joe DiMaggio Children's Hospital, Hollywood
Johns Hopkins All Children's Hospital, St. Petersburg
Johns Hopkins All Children's Hospital, Tampa
Kids Cancer Foundation, Loxahatchee
Kids Cancer Foundation, Royal Palm Beach
Nemours Children's Hospital, Orlando
Nicklaus Children's Hospital, Miami
Orlando Health Arnold Palmer Hospital for Children, Orlando
Spence and Becky Wilson Baptist Children's Hospital, Miami
St. Joseph's Children's Hospital, Tampa
St. Mary's Medical Center, West Palm Beach
Sylvester Comprehensive Cancer Center, Miami
Tampa General Hospital, Tampa
UF Health Shands Children's Hospital, Gainesville
Wolfson and Nemours Children's, Jacksonville

GEORGIA

Atrium Health Navicent, Macon
Beverly Knight Olson Children's Hospital Navicent Health, Macon
Children's Egleston Hospital, Atlanta
Children's Hospital of Georgia, Augusta
Children's Scottish Rite Hospital, Atlanta
Emory Children's Center, Atlanta
Memorial Health Dwaine & Cynthia Willett Children's Hospital, Savannah

HAWAII

Kapiolani Medical Center for Women & Children, Honolulu

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

Northwestern Medicine Cancer Center, Warrenville
OSF HealthCare Children's Hospital of Illinois, Peoria
ProCure Proton Therapy Center, Warrenville
SIU School of Medicine, Springfield
The Jim & Trudy Maloof St. Jude Midwest Affiliate Clinic, Peoria
UChicago Medicine Comer Children's, Chicago
UI Health, Chicago

INDIANA

Beacon Children's Hospital, South Bend
Peyton Manning Children's Hospital at Ascension St. Vincent, Indianapolis
Riley Hospital for Children at IU Health, Indianapolis

IOWA

University of Iowa Stead Family Children's Hospital, Iowa City

KANSAS

Cancer Center of Kansas, Manhattan
Wesley Children's Hospital, Wichita

KENTUCKY

Kentucky Children's Hospital, Lexington
Norton Children's Cancer Institute, Louisville

LOUISIANA

Children's Hospital, New Orleans
LSU Health, Shreveport
Ochsner Medical Center, New Orleans
Our Lady of Lourdes Women's & Children's Hospital, Lafayette
St. Jude Baton Rouge Affiliate Clinic, Baton Rouge

MARYLAND

Johns Hopkins Children's Center, Baltimore
Kennedy Krieger Institute, Baltimore

MASSACHUSETTS

Baystate Medical Center, Springfield
Dana-Farber Cancer Institute, Boston

MICHIGAN

Beaumont Hospital, Royal Oak
C.S. Mott Children's Hospital, Ann Arbor
Children's Hospital of Michigan, Detroit
Helen DeVos Children's Hospital, Grand Rapids

MINNESOTA

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

MISSISSIPPI

The University of Mississippi Medical Center,
Jackson

MISSOURI

Children's Mercy, Kansas City
Mercy Clinic Children's Cancer
and Hematology, St. Louis
SSM Health Cardinal Glennon Children's Hospital,
St. Louis
St. Jude Affiliate Clinic at Mercy Children's
Hospital, Springfield
St. Louis Children's Hospital, St. Louis
Washington University School of Medicine, St.
Louis

MONTANA

Billings Clinic, Billings

NEBRASKA

Children's Nebraska, Omaha
Nebraska Medical Center, Omaha

NEW HAMPSHIRE

Dartmouth Health Children's, Lebanon

NEW JERSEY

MD Anderson Cancer Center at Cooper, Camden

NEW MEXICO

Presbyterian Hospital, Albuquerque
UNM Children's Hospital, Albuquerque

NEW YORK

Cohen Children's Medical Center, New Hyde Park
Memorial Sloan Kettering Cancer Center,
New York
Montefiore Medical Center, Bronx
New York University Langone Medical Center,
New York
New York-Presbyterian Morgan Stanley
Children's Hospital, New York
NYU Langone Health, New York
Roswell Park Comprehensive Cancer Center,
Buffalo
Stony Brook Cancer Center, Stony Brook
Stony Brook Children's, Stony Brook
Upstate Golisano Children's Hospital, Syracuse

NORTH CAROLINA

Atrium Health Wake Forest Baptist, Winston-
Salem
Duke University Hospital, Durham
Levine Children's Hospital, Charlotte
UNC Health, Chapel Hill
Vidant Medical Center, Greenville

NORTH DAKOTA

Sanford Health, Bismarck
Sanford Medical Center, Bismarck
Sanford Roger Maris Cancer Center, Fargo

OHIO

Akron Children's, Akron
Cincinnati Children's, Cincinnati
Cincinnati Children's, Liberty Township
Cleveland Clinic Children's, Cleveland
Dayton Children's, Dayton
Nationwide Children's Hospital, Columbus
ProMedica Flower Hospital, Sylvania
ProMedica Russell J. Ebeid Children's Hospital,
Toledo
University Hospitals Rainbow Babies
and Children's, Cleveland

OKLAHOMA

Oklahoma Children's Hospital OU Health,
Oklahoma City
St. Francis Hospital, Tulsa

OREGON

Doernbecher Children's Hospital, Portland
Randall Children's Hospital at Legacy Emanuel
Medical Center, Portland
Samaritan Albany General Hospital, Albany

PENNSYLVANIA

Children's Hospital of Philadelphia, Philadelphia
Geisinger Medical Center, Danville
Janet Weis Children's Hospital, Danville
Penn Medicine, Philadelphia
St. Christopher's Hospital for Children,
Philadelphia
UPMC Children's Hospital of Pittsburgh,
Pittsburgh
UPMC Magee-Womens Hospital, Pittsburgh

RHODE ISLAND

Hasbro Children's Hospital, Providence

SOUTH CAROLINA

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

East Tennessee Children's Hospital, Knoxville
Monroe Carell Jr. Children's Hospital at
Vanderbilt, Nashville
Niswonger Children's Hospital, Johnson City

St. Jude Children's Research Hospital, Memphis
St. Jude Affiliate, Johnson City
TriStar Centennial Children's Hospital, Nashville

TEXAS

Baylor Scott & White McLane Children's, Temple
Children's Medical Center, Dallas
Children's Medical Center, Plano
CHRISTUS Children's, San Antonio
Cook Children's Medical Center, Ft. Worth
Covenant Medical Center, Lubbock
DHR Health, Edinburg
Driscoll Children's Hospital, Corpus Christi
El Paso Children's Hospital, El Paso
Medical City Children's Hospital, Dallas
Methodist Children's Hospital, San Antonio
Texas Children's Hospital, Houston
Texas Children's Hospital - Baylor College of
Medicine, Houston
The University of Texas MD Anderson Cancer
Center, Houston
UMC Health System, Lubbock
University Hospital, San Antonio
Vannie Cook Children's Clinic, McAllen

UTAH

Primary Children's Hospital, Salt Lake City

VERMONT

The University of Vermont Children's Hospital,
Burlington

VIRGINIA

Children's Hospital of Richmond at VCU,
Midlothian
Children's Hospital of The King's Daughters,
Norfolk
Inova Fairfax Hospital, Falls Church
University Hospital, Charlottesville
VCU Medical Center West Hospital, Richmond

WASHINGTON

MultiCare Mary Bridge Children's, 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 Children's, Morgantown

WISCONSIN

Children's Wisconsin, Milwaukee
HSHS St. Vincent Hospital, Green Bay
Ministry St. Joseph's Hospital, Marshfield

BEYOND THE CURE



The NCCS's Beyond the Cure survivorship program prepares survivors and their families for life after cancer.

One of the largest issues survivors face is post-treatment physical and cognitive issues known as "late effects." Most survivors will experience one or more late effects in their lifetime which are caused more by the treatment than the disease itself.

Our **Late Effects After Treatment Tool (LEATT)** is a valuable resource that provides survivors with a private, customized online assessment of potential late effects based on their diagnosis and treatment. The assessment includes important information that can be shared with a survivor's healthcare team throughout their lifetime.

The LEATT was developed in collaboration with NCCS board member, Robert Hayashi, M.D., Professor of Pediatrics, Director, Late Effects Clinic, and St. Louis Children's Hospital/Washington University School of Medicine.

Beyond the Cure also awards college scholarships to childhood cancer survivors through the **Beyond the Cure Ambassador Scholarship Program**. Fifty-eight (58) college-bound childhood cancer survivors around the country received scholarships totaling \$290,000 during FY2023.

First-time applicants are required to submit an essay addressing how cancer has affected their lives and future. Each year, scholarship recipients are required to serve 15 hours of service that benefit the childhood cancer community.

More than \$2 million has been distributed to survivors to help them achieve their educational goals. The NCCS is deeply grateful to the **Engelhardt Family Foundation** and **The Jean and Jeanine Spencer Foundation** for their generous support of the program.

SURVIVORSHIP CONFERENCES

Beyond the Cure co-sponsors survivorship conferences with long-term follow-up clinics across the country. Four conferences were held in FY2023 which provided education and support to 983 survivors and their families.

EDUCATIONAL PUBLICATIONS

The organization distributed 2,684 free publications during FY2023. The NCCS publication library includes an activity book that provides a creative outlet for patients to learn about themselves and their cancer treatment; coloring books for young children; information for college-bound survivors; and in-depth guides for both survivors and their families.

MICHELE HERTLEIN GLOBAL OUTREACH PROGRAM



The fundamental factors of early detection and access to effective treatment significantly influence the survival outcomes for children diagnosed with cancer. In higher-income countries where services are generally accessible, the survival rate stands optimistically at 90%. Conversely, in developing countries, less than 30% of children diagnosed with cancer will survive their condition due to limited access to essential resources.



KidzCan Zimbabwe

To address the inadequate or nonexistent medical care for children with cancer in developing countries, the NCCS introduced the **Michele Hertlein Global Outreach Program**. Since 1993, this niche program has distributed more than **\$471 million** in donated pharmaceuticals and medical supplies to **111 facilities** in **53 countries**, helping to save the lives of an estimated **204,000 children** with cancer worldwide. Children receiving treatment at our partnered facilities are never burdened with a hospital bill, and their families can focus on getting their child healthy again.



Michele Hertlein
July 15, 1968 – August 5, 2020

During FY2023, pharmaceutical donations totaling **\$5 million** were provided to **nine pediatric oncology facilities**, spanning 27 hospitals and their supported clinics in **nine countries**. Our partnered hospitals remain committed to providing quality, lifesaving care for their young patients at absolutely no cost to the child or their families.

The program's namesake, **Michele Hertlein**, dedicated 24 years of her life to making an impact on children battling cancer by securing and shipping donated pharmaceuticals and medical supplies to pediatric treatment centers around the world. After an arduous 10-year battle, she succumbed to her cancer, leaving a void felt by so many. She leaves behind a profound legacy of hope, marked by an unwavering and relentless commitment to supporting children with cancer.

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 Hondurena para el Niño con Cancer Hospital, Tegucigalpa

LEBANON
Children's Cancer Center of Lebanon (CCCL), Beirut

MALI
CHU Gabriel Touré, Bamako

MOROCCO
Service d'Hématologie et Oncologie Pédiatrique, Casablanca

NICARAGUA
MINSA – Hospital Infantil la Mascota, Managua

ZIMBABWE
Children's Cancer Relief – KidzCan Zimbabwe, Harare



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 accompanying financial statements of The National Children's Cancer Society, Inc., which comprise the statement of financial position as of September 30, 2023, 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 financial statements referred to above present fairly, in all material respects, the financial position of The National Children's Cancer Society, Inc. as of September 30, 2023, 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 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.

Other Information Included in the Annual Report

Our responsibility for other information included in your annual report does not extend beyond the financial information identified in our opinion on the financial statements. We have no responsibility for determining whether such other information is properly stated and do not have an obligation to perform any procedures to corroborate other information contained in your annual report. We are required by professional standards to read the other information and consider whether a material inconsistency exists between the other information and the financial statements because the credibility of the financial statements and our auditors' report thereon may be undermined by material inconsistencies between the audited financial statements and other information. If, based on the work performed, we conclude that an uncorrected material misstatement of the other information exists, we are required to describe it in our report.

CliftonLarsonAllen LLP

St. Louis, Missouri
January 16, 2024

STATEMENT OF FINANCIAL POSITION
SEPTEMBER 30, 2023

ASSETS

CURRENT ASSETS	
Cash	\$ 1,069,971
Accounts Receivable, Net	279,071
Inventory	14,002
Prepaid Expenses and Other Assets	34,192
Total Current Assets	<u>1,397,236</u>
NONCURRENT ASSETS	
Investments	6,158,763
Property and Equipment, Net	377,246
Total NonCurrent Assets	<u>6,536,009</u>
Total Assets	<u><u>\$7,933,245</u></u>

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES	
Accounts Payable	\$ 1,834,576
Annuities Payable	12,567
Accrued Expenses	110,185
Unearned Revenue	12,071
Total Current Liabilities	<u>2,296,397</u>
LONG-TERM LIABILITIES	
Annuities Payable	104,555
Total Long-Term Liabilities	<u>104,555</u>
NET ASSETS	
Without Donor Restrictions	2,912,643
With Donor Restrictions	2,619,650
Total Net Assets	<u>5,532,293</u>
Total Liabilities and Net Assets	<u><u>\$ 7,933,245</u></u>

STATEMENT OF ACTIVITIES
YEAR ENDED SEPTEMBER 30, 2023

	Without Donor Restrictions	With Donor Restrictions	Total
PUBLIC SUPPORT AND REVENUE			
Contributions	\$ 6,907,677	-	\$ 6,907,677
List Rental Income	33,099	-	33,099
Event Revenue	327,511	-	327,511
Less Direct Costs of Events	(126,845)	-	(126,845)
In-Kind Contributions	5,161,457	-	5,161,457
Investment Income	642,251	50,490	692,741
Net Assets Released from Restrictions - Satisfaction of Program Restrictions	973,682	(973,682)	-
Total Public Support and Revenue	<u>13,918,832</u>	<u>(923,192)</u>	<u>12,995,640</u>
EXPENSES			
Program Services:			
Division of Patient and Family Services	10,212,228	-	10,212,228
Supplemental Family Support	1,375,525	-	1,375,525
Public Information and Education	297,918	-	297,918
Total Program Services	<u>11,885,671</u>	<u>-</u>	<u>11,885,671</u>
Supporting Services:			
Management and General	920,529	-	920,529
Fundraising	3,261,256	-	3,261,256
Total Supporting Services	<u>4,181,785</u>	<u>-</u>	<u>4,181,785</u>
Total Expenses	16,067,456	-	16,067,456
OTHER INCOME			
Change in Value of Annuities	28,301	-	28,301
NET CHANGE IN NET ASSETS	<u>(2,120,323)</u>	<u>(923,192)</u>	<u>(3,043,515)</u>
Net Assets - Beginning of Year	<u>5,032,966</u>	<u>3,542,842</u>	<u>8,575,808</u>
NET ASSETS - END OF YEAR	<u><u>\$ 2,912,643</u></u>	<u><u>\$ 2,619,650</u></u>	<u><u>\$ 5,532,293</u></u>

See accompanying Notes to Financial Statements.

STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED SEPTEMBER 30, 2023

	Program Services			Supporting Services		
	Division of Patient and Family Services	Supplemental Family Support	Public Information and Education	Management and General	Fundraising	Total
Aid Grants	\$ 7,623,373	\$ 1,214,291	\$ -	\$ -	\$ -	\$ 8,837,664
Production Services	-	-	-	447,750	2,862,685	3,310,435
Family Services and Education	1,615,574	1,538	2,844	-	-	1,619,956
Salary Expense	440,437	85,785	158,509	244,848	177,327	1,106,906
Professional Services	98,535	19,192	35,462	54,777	39,671	247,637
Insurance	82,375	16,046	29,646	45,794	33,166	207,027
In-Kind Program Shipping	83,941	-	-	-	-	83,941
Rent and Utilities	57,510	11,201	20,697	31,971	23,155	144,534
Other Expenses	68,952	13,430	24,815	50,921	27,761	185,879
Payroll Taxes	31,591	6,153	11,368	17,562	12,719	79,393
Cause Related Marketing	-	-	-	-	68,466	68,466
UPS Donation Processing Center	68,845	-	-	-	-	68,845
Retirement	15,015	2,925	5,404	8,347	6,045	37,736
Direct Costs of Events	-	-	-	-	126,845	126,845
Telephone	6,202	1,208	2,232	3,447	2,497	15,586
Office Supplies and Services	3,509	683	1,263	6,343	1,413	13,211
Equipment Rental	2,975	580	1,071	1,654	1,198	7,478
Postage, Shipping, and Handling	5,307	1,034	1,910	2,950	2,137	13,338
Meetings and Travel	2,234	435	804	1,242	899	5,614
Depreciation Expense	5,258	1,024	1,893	2,923	2,117	13,215
Shipping and Procurement	594	-	-	-	-	594
Total	10,212,228	1,375,525	297,918	920,529	3,388,101	16,194,301
Less: Direct Costs of Events	-	-	-	-	(126,845)	(126,845)
Total Expenses	\$ 10,212,228	\$ 1,375,525	\$ 297,918	\$ 920,529	\$ 3,261,256	\$ 16,067,456

STATEMENT OF CASH FLOWS
YEAR ENDED SEPTEMBER 30, 2023

CASH FLOWS FROM OPERATING ACTIVITIES

Net Change in Net Assets	\$ (3,043,515)
Adjustments to Reconcile Net Change in Net Assets to Net Cash Used by Operating Activities	
Proceeds from Sales of Contributed Investments	22,952
Depreciation	13,215
Change in Value of Annuities	(28,301)
Unrealized Loss on Investments	(561,218)
Realized Gain on Investments	47,806
(Increase) Decrease in:	
Accounts Receivable	232,194
Employee Retention Credit Receivable	-
Inventory	2,463,309
Prepaid Expenses and Other Assets	(2,198)
Increase (Decrease) in:	
Accounts Payable	75,590
Annuity Payable	20,673
Accrued Expenses	(6,781)
Unearned Revenue	412
Net Cash Provided by Operating Activities	<u>(765,862)</u>

CASH FLOWS FROM INVESTING ACTIVITIES

Purchases of Property and Equipment	(387,129)
Proceeds from Sale of Investments	3,547,261
Purchases of Investments	(5,332,630)
Net Cash Used by Investing Activities	<u>(2,172,498)</u>

CASH FLOWS FROM FINANCING ACTIVITIES

Net Payments on Line of Credit	<u>326,998</u>
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NET CHANGE IN CASH (2,611,362)

Cash - Beginning of Year 3,681,333

CASH - END OF YEAR \$ 1,069,971

See accompanying Notes to Financial Statements.

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2023

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, 2023, the Organization had \$2,619,650 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, 2023, deposits at the bank were in excess of federally insured limits were \$575,559.

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, 2023 to be collectible. Therefore, no allowance for doubtful accounts is recorded at September 30, 2023. All receivables are considered current at September 30, 2023; therefore, no discount has been recorded. Accounts receivables at October 1, 2022 totaled \$511,265.

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.

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.

NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2023

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

In-Kind Non-Financial Contributions

Contributed nonfinancial assets are recognized within the financial statements of activities are as follows for the year end September 30, 2023:

Non-Financial Asset	2023 Revenue Recognition	Monetized or Utilized	Utilization Function	Donor Restrictions	Valuation Technique
Basic Pharmaceutical Drugs	\$ 5,161,457	Utilized	Distributed to medical providers & 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 5.0 % was applied to determine the liability at September 30, 2023. Fair value at September 30, 2023 is \$240,675, while the recorded liability is \$117,122.

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.

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 is 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 2 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.

NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2023

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

Fair Value Measurements (continued)

In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy and include hedge funds. The net asset value (or its equivalent) provided by the fund is utilized, as a practical expedient, to determine 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 Allocations

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, 2023, 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.

Change in Accounting Pronouncement

In February 2016, the Financial Account Standards Board (FASB) issued Accounting Standards Update 2016-2, Leases (ASC 842). The new standard increases transparency and comparability among organizations by requiring the recognition of right-of-use (ROU) assets and lease liabilities on the balance sheet. Most prominent of the changes in the standard is the recognition of ROU assets and lease liabilities by lessees for those leases classified as operating leases. Under the standard, disclosures are required to meet the objective of enabling users of financial statements to assess the amount, timing, and uncertainty of cash flows arising from leases.

The Organization adopted the requirements of the guidance effective October 1, 2022 and has elected to apply the provisions of this standard to the beginning of the period of adoption, through a cumulative effect adjustment, with certain practical expedients available.

The Organization does not have any operating or finance leases considered to be material, therefore, the standard had no impact on the statements of financial position, nor did it have an impact on the statements of activity or statements of cash flows.

Subsequent Events

In preparing these financial statements, the Organization has evaluated events and transactions for potential recognition or disclosure through January 16, 2024, the date the financial statements were available to be issued.

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, 2023:

Cash and Cash Equivalents	\$ 1,069,971
Accounts Receivable	279,071
Investments	6,158,763
Total Current Financial Assets	<u>7,507,805</u>
Less: Net Assets With Donor Restrictions Relating to Current Financial Assets	<u>(2,619,650)</u>
Financial Assets Available to Meet Cash Needs for General Expenditures Within One Year	<u>\$ 4,888,155</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 are 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, fund raising 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 \$2,172,972 that could be used if needed.

NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2023

NOTE 3 INVESTMENTS

Investments consist of the following at September 30, 2023:

Government and Agency Securities	\$ 2,469,166
Equity Securities	3,324,612
Mutual Funds	364,985
Total Investments	<u>\$ 6,158,763</u>

Investment return for the year ended September 30, 2023 is summarized as follows:

Interest and Dividend Income	\$ 179,329
Unrealized Loss on Equity Securities	561,218
Realized Gain on Sale of Investments	(47,806)
Total Investment Loss	<u>\$ 692,741</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, 2023:

	Total	(Level 1)	(Level 2)	(Level 3)
Government and Agency Bonds	\$ 2,469,166	\$ –	\$ 2,469,166	\$ –
Equity Securities	3,324,612	3,324,612	–	–
Mutual Funds	364,985	364,985	–	–
Total	<u>\$ 6,158,763</u>	<u>\$ 3,689,597</u>	<u>\$ 2,469,166</u>	<u>\$ –</u>

NOTE 5 NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions at September 30, 2023 consist of:

Purpose Restriction For RCCJ Grant	\$ 2,039,512
Purpose Restriction For GP M.A.D.E. Foundation	–
Purpose Restriction For Cancer Treatment in Minnesota	580,138
Total Net Assets with Donor Restrictions	<u>\$ 2,619,650</u>

Assets released from restrictions for the year ended September 30, 2023 are as follows:

Satisfaction of Purpose Restriction	\$ <u>973,682</u>
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NOTE 6 PROPERTY AND EQUIPMENT

Property and equipment consists of the following at September 30, 2023:

Equipment	26,901
Software	298,031
Buildings	380,020
Total	721,555
Less: Accumulated Depreciation	(344,309)
Property and Equipment	<u>\$ 377,246</u>

Depreciation expense was \$13,215 for the year ended September 30, 2023.

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.

NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2023

NOTE 7 ALLOCATION OF JOINT COSTS (CONTINUED)

The Organization's total joint costs incurred and functional classifications for the year ended September 30, 2023 are as follows:

Functional Classification:	
Program Services	\$ 1,619,956
Management and General	447,750
Fundraising	2,862,685
Total Joint Costs	<u>\$ 4,930,391</u>
Type of Activity:	
Direct Mail	\$ 4,930,391
Total Joint Costs	<u>\$ 4,930,391</u>

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 \$37,736 for the year ended September 30, 2023.

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, 2023, the Organization received \$5,161,457 and disbursed \$7,623,373 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, 2023 was \$2,172,972. At September 30, 2023, borrowings under the agreement were \$326,998, 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, 2023 is 7.40%. Cash paid for interest on the line of credit was \$14,723 for the year ended September 30, 2023.

NOTE 11 RELATED PARTY TRANSACTIONS

During the year ended September 30, 2023, the Organization received \$162,783 in contributions from various members of the board of directors (Directors). In addition, during the year ended September 30, 2023, the Organization received \$40,000 from companies in which Directors serve as a director or officer. The Organization also received \$0 in in-kind gifts from various board members of the board of directors during the year ended September 30, 2023.

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, 2023 totaled \$50,647. The board member was not directly compensated for services provided.

NOTE 12 RISKS 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

Mark Slocomb

Chairman / Vice Chairman

Scott Stringer

Vice Chairman

Sue Engelhardt

Secretary/Treasurer

Mark Stolze

President & CEO

Dr. Timothy Dilg

Tom Guebert

Scott Hammack

Robert Hayashi, M.D.

Brad Hermann

Brad Loos

Jeff Michalski, M.D.

Harry Mueller

Eric Stange

Tamara Walls, M.D.



Mikari Tarpley
2023-2024 Scholarship Recipient



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