

2020

25TH

ANNIVERSARY
ANNUAL REPORT

The reader is requested to note that this
is an English translation of our Danish
annual report

børne cancer fonden

En styrke for børnene i 25 år

FOUNDATION INFORMATION

THE FOUNDATION

Børnecancerfonden
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DK-1606 Copenhagen V
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Bank: Danske bank
Account No.: 4183-4300891543

CVR No.: 18 40 34 98
Established: 27 December 1994
Head office: Copenhagen
Financial year: 1 January - 31 December

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Ghita Nørby, Actress, The Royal Danish Theatre

CEO

Marianne Benzon Nielsen

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Read more at: bornecancerfonden.dk



We are a member of:



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25 YEARS FIGHTING CHILD CANCER

We celebrated our 25th anniversary in 2020, collecting an impressive DKKm 402



Over the years, we have been 'midwives' for many important, groundbreaking research projects which have made a substantial difference to children with cancer. We are proud of this role. Children are subject to other and more aggressive

cancer types than adults, which requires a special child cancer research focus. Luckily, child cancer is subject to significantly more research than 25 years ago. And we are not afraid of saying that we have played a vital role, being the organisation providing the most child cancer research support – DKKm 321 in total.

We are very aware that our work is based on collected funds, and it is our goal to always be able to distribute as much as possible directly to the purpose. It pleases me, therefore, that Børnecancerfonden can present a result for 2020 with an income increase from DKKm 57.4 in 2019 to DKKm 59.3 in 2020.

Today, six out of seven children survive their diagnosis – 50 years ago, it was only half. There are still, however, far too many children who suffer severe late effects and recurrences. So we are not yet at the goal line.

We know that a big challenge lies ahead of us. Børnecancerfonden is convinced that the key to higher survival rates and better quality of life for survivors is and remains research. Research is becoming increasingly complex, thus requiring even greater future investment. This is another reason why we are grateful for the many supporters – companies as well as private individuals and foundations – that remain loyal and wish to support our vision that no child should die of cancer and that all must survive to live a life without late effects.

Child cancer is increasing treated in accordance with Nordic and international protocols. It is through these that we ensure that the latest research benefits the individual child directly via treatment. We wish to continue to support international collaboration in order that Danish children will continue to receive the best treatment, building on the very latest research available.

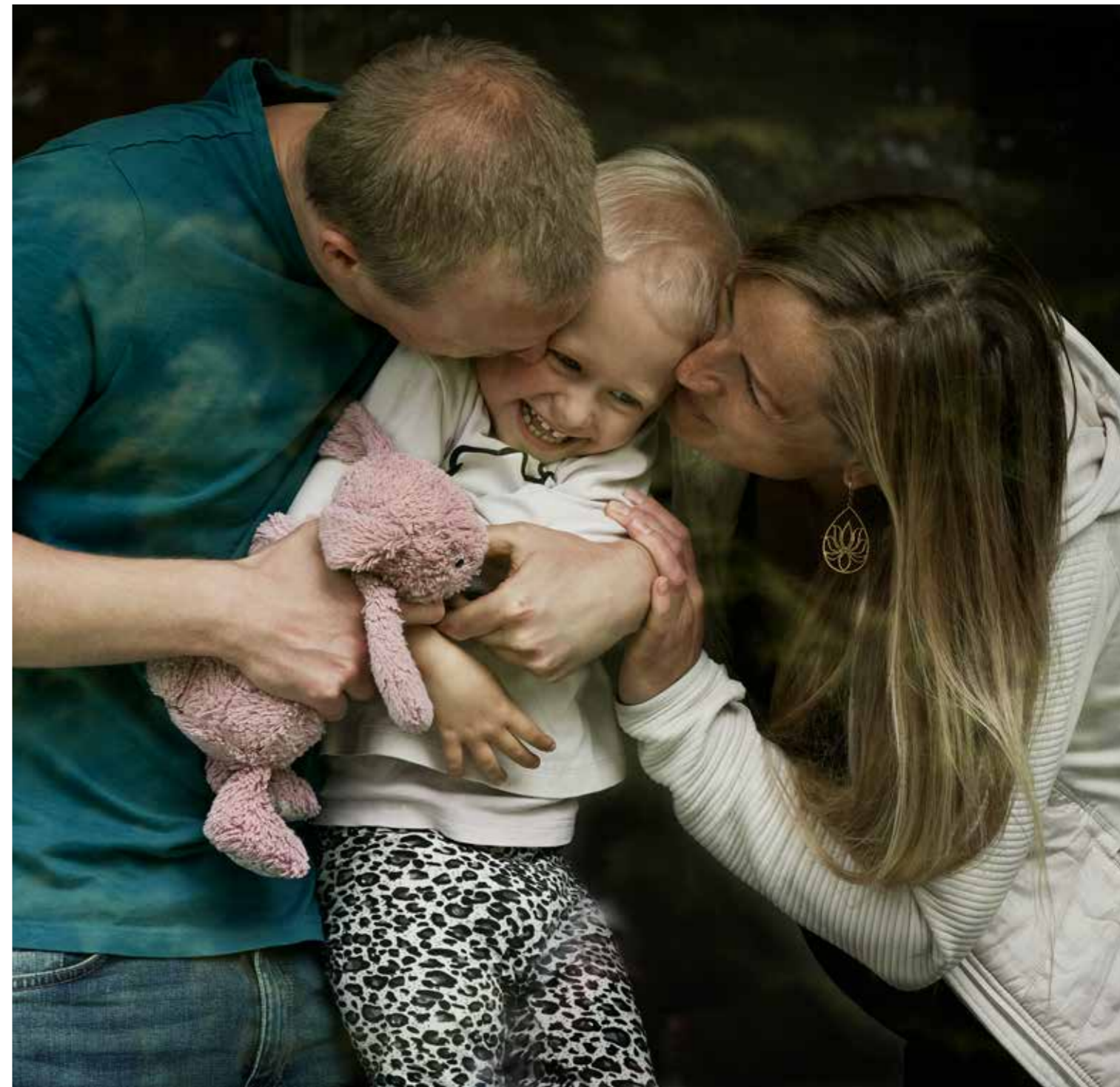
The Foundation has supported five professorships in order to strengthen the child cancer research area. Strong research environments can attract talented younger researchers and give Danish child oncology research a solid standing in the Nordic and international work. This is essential to ensure that Danish children can benefit from the latest knowledge today. But it is also essential in the long-term perspective for children with cancer.

The Corona pandemic made 2020 a special year. Support events were cancelled and donations adjusted, causing great uncertainty regarding the Foundation's income. This makes us incredibly grateful to still be able to support research with almost DKKm 26, and projects that assist families directly with more than DKKm 11. This is especially the result of the extraordinary, loyal and tireless effort of a lot of people – for which we wish to express a big and heartfelt THANK YOU.

Children with cancer and their families are used to living with great uncertainty and limited contact with the outside world. Corona has not made things any easier, and has also affected the offers that Børnecancerfonden could make available to families. We have, for example, had to cancel recreational stays and youth evenings, and we have also had to adjust our psychologist offers. We look forward to being able to reopen these offerings – we know how much it means.

We are proud of our work over the past 25 years, and our vision remains clear. We work determinedly to realise it, and we are well on the way.

*Christina Høi-Hansen
Chairman of the Board, Professor, Dr. Med.*



JENS BJØRN ANDERSEN, MANAGING DIRECTOR, DSV, IS A PART OF THE FORCE FOR CHILDREN WITH CANCER

Jens Bjørn Andersen has been a member of the Board of Børnecancerfonden since 2012 – as an unpaid volunteer – to help support the important work of the Foundation. This applies both to child cancer research and the assistance to vulnerable families whose lives are derailed when a cancer diagnosis is presented.

"A cancer diagnosis is among the worst things that can strike us, and it unfortunately also strikes what is most precious to us – our children. Research is needed for us to be able to prevent child cancer, plus we need to support families already affected by cancer. The vital effort supported by Børnecancerfonden is something that I am happy to be a part of via my work on the Board of Directors of the Foundation," Jens Bjørn Andersen says.



KEY FIGURES

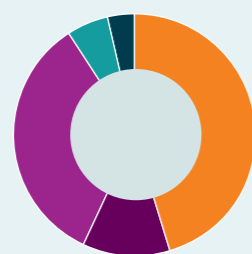
FOUNDATION OBJECTIVES

The objectives of Børnecancerfonden are to support medical science and other research, educational and meeting activities, information activities related to child cancer, and to support measures for the benefit of children with cancer and their relatives.

FUNDS RECEIVED AND ALLOCATED

Funds received and allocated by Børnecancerfondens in 2020 in comparison with the two previous years are outlined below:

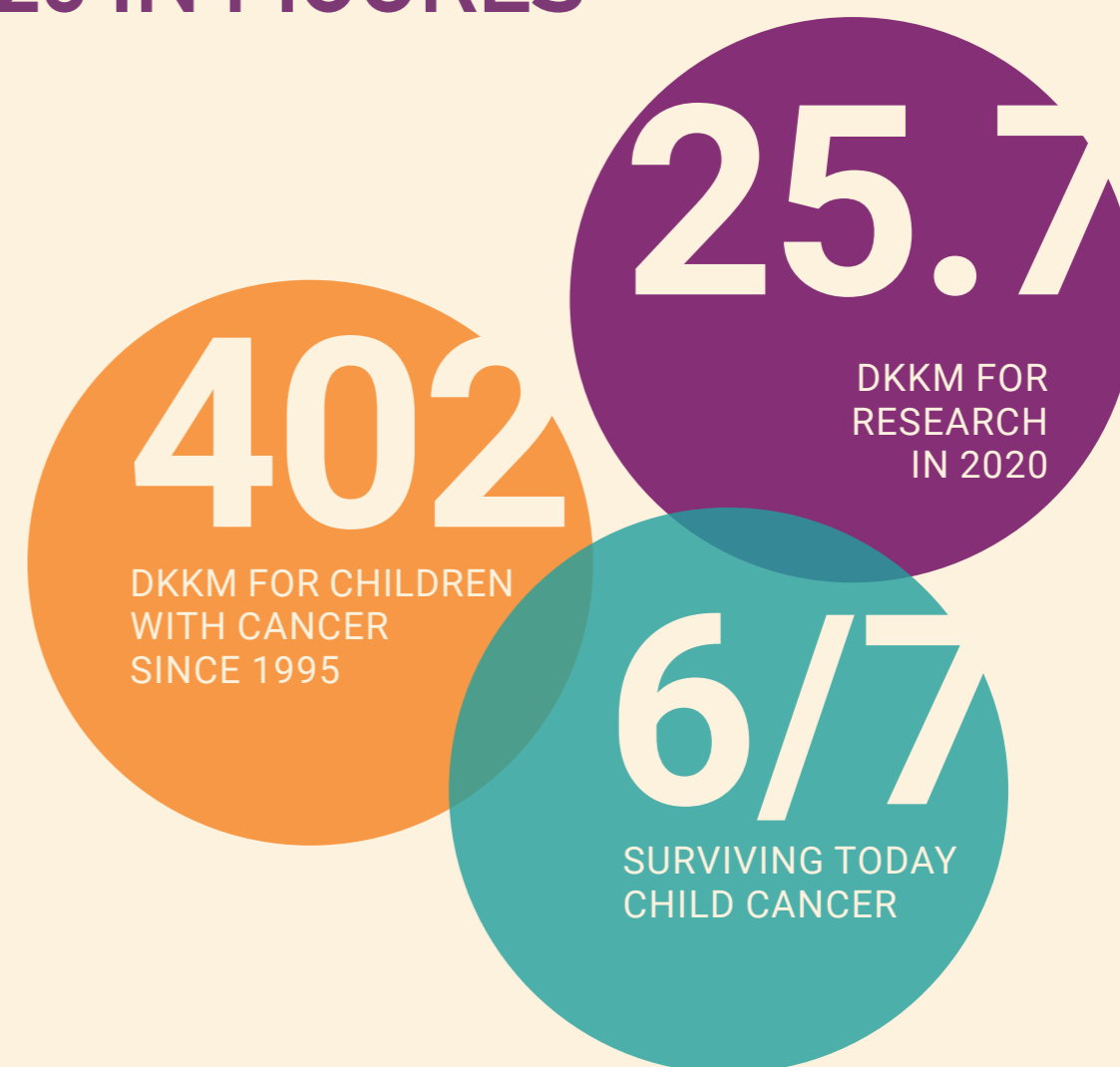
KEY FIGURES, LAST 3 YEARS	2020	2019	2018
Amounts in thousands	DKK	DKK	DKK
Donations, legacies, contributions and collections	28,471	21,918	16,453
Income from events	28,564	33,592	32,427
Contribution from public allocation funds to cover costs	1,679	1,507	1,533
VAT compensation	600	384	359
Return on Foundation holdings (net)	3,431	6,067	-901
Total income	62,745	63,468	49,871
Legacies reserved for nominal capital	7,248	6,355	3,698
Costs from income-generating activities	11,055	9,895	5,656
Profit for operational purposes	44,442	47,218	40,517
Administration costs	2,705	2,648	2,714
Expenses for objective-related activities	3,413	4,955	4,938
Profit for the year	38,324	39,615	32,865
Allocations/grants for the year	33,776	39,540	33,511
Reserved for later allocation	11,547	6,611	5,486
KEY FIGURES			
Profit margin	69	72	82
Administration percentage	4.6	4.6	5.4
Objective percentage	6	9	10
Solvency ratio	71	69	67



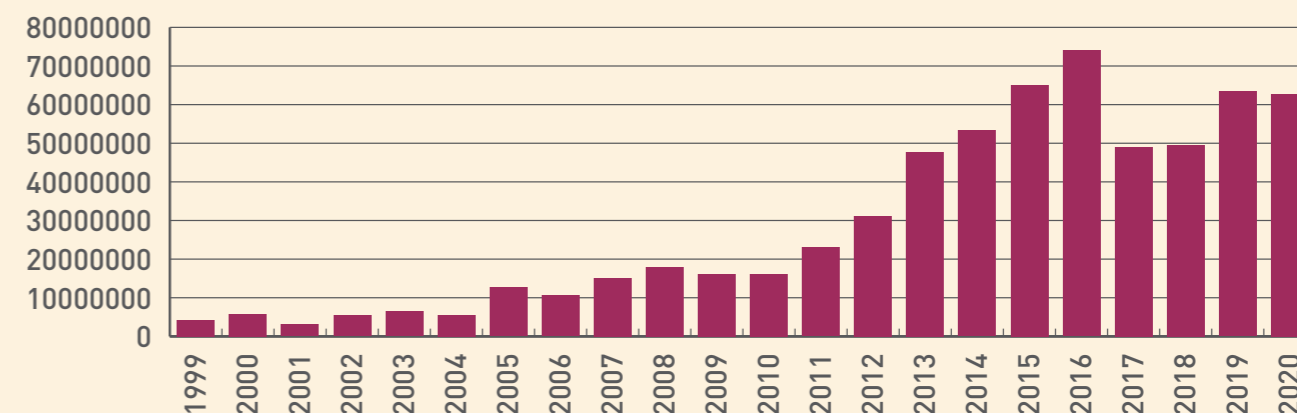
2020 INCOME

Events/collections	45.5%
Legacies reserved for nominal capital	11.6%
Donations/contributions	33.8%
Return on Foundation holdings	5.5%
Public allocation funds and VAT comp	3.6%

BØRNECANCERFONDEN 2020 IN FIGURES



INCOME DEVELOPMENT (DKKM)



MORE AND MORE ORGANISATIONS ARE CLIMBING ON BOARD!

Børnecancerfonden has its roots in the medical profession, a fact that continues to influence our work and self-awareness. At the same time, however, it is important to us to maintain close contact with the families, since we are working for children with cancer.

It is crucial that we always support the most ambitious and robust projects that ensure the greatest possible return for the families, both in the short and the long term. And we focus exclusively on child cancer.

The Foundation is under development and has always grown in step with the need to do so. In recent years, we have worked with the target of becoming less vulnerable in a competitive collections market. This is evident in our "collected private funds", which has increased substantially, from DKKm 21.9 in 2019 to DKKm 28.5 in 2020, thanks to a stronger focus on attracting more generous donors.

Increasingly many support our work, and in 2020 many applied new ways of thinking and collected a substantial amount of money. Both new and old partners go a long way for Børnecancerfonden, and I cannot thank them enough for it.

Despite the income increase, "allocations for the year" for 2020 have been lower than for 2019. The reason is that we received more donations after the allocation in November, and saw more positive returns on the Foundation's investments than expected towards the end of the year. It is also an expression of our normal principle of caution. All taken together, this means that DKKm 11 has been

reserved for allocation in 2021. Due to cancellations, we also had lower costs than expected for direct foundation activities such as recreational stays, and we also downwards adjusted investments in income-generating activities. The cost level has, however, been increased in relation to a few partners, which has an effect on our total costs.

Given the special circumstances in 2020, we are very grateful for quite a presentable result.

There is still a need to ensure that all children survive this terrible illness. I hope that you will continue to support Børnecancerfonden for the next 25 years as we work together for a future free from child cancer.

Marianne Benzon Nielsen
Director, Børnecancerfonden



SCIENTIFIC ALLOCATIONS

2020 was another year in which Børnecancerfonden was able to allocate a double-digit million amount to Danish child cancer research. The Foundation received many solid and qualified applications which our scientific committee evaluated with great interest. The projects selected were those which, in their professional opinion, would have the greatest effect for children with cancer. You can read about some selected research projects in these pages.

Nordic/European Study of Cerebellar Mutism Syndrome
Cerebellar Mutism Syndrome (CMS) is a complication occurring in upwards of 25% of children with cerebellar tumours. The study examines, i.a., whether issues related to surgical method and genetics influence the

development of CMS. The objective is to reduce the prevalence of CMS and to adapt the treatment of children with cerebellar tumours.
Marianne Juhler, Professor, Rigshospitalet – allocated DKK 540,000

Side effects and late effects of ALL

The project aims to quantify the scope of side effects and late effects in children with the leukemia type ALL. The objective is to obtain more precise knowledge of early risk factors so that more children with ALL survive to lead a life without late effects. The project is a part of the so-called ALL-STAR programme which is now being expanded to include the remaining Nordic countries.

Thomas Leth, Chief Physician, Rigshospitalet – allocated DKK 2,000,000

National child cancer centre

Cancer is the cause of approx. 20% of all deaths in children aged 1 and over, and the surviving children often have severe late effects. "CONTROL" is a national research programme which, i.a., aims to develop new treatment plans and establish screening strategies to enable early cancer detection. The objective is to minimise late effects and increase the average 5 year survival rate to at least 90%.

Kjeld Schmiegelow, Professor, Rigshospitalet – allocated DKK 5,000,000

The cancer riddle – is the answer in the genes?

15-30% of children with cancer present inborn mutations as the cause of cancer. These mutations also affect drug absorption, treatment efficacy, and the risk of side effects. The cancer cells also contain mutations which play a role in treatment efficacy. The project aims to map the entire genetic material in children with cancer, both that of the children and the cancer cells, with a view to individual and targeted treatment.

Kjeld Schmiegelow, Professor, Rigshospitalet – allocated DKK 2,500,000

Late effects from chemotherapy – "chemo brain"

A common late effect of chemo therapy is difficulty remembering and concentrating – sometimes called "chemo brain". The "MyBrain" study aims to examine the direct and indirect chemical effects on the brain in relation to issues such as memory, attentiveness, and changes in the effects manifesting in the brain. The objective is to increase the biological understanding of "chemo brain" with a view to reducing the severity and duration of the condition.

Lisa Lyngsie Hjalgrim, Chief Physician, Rigshospitalet – allocated DKK 1,300,000

Prevention of spreading via risk profile

In children with ALL leukemia and aggressive lymphoma, the illness tends to spread to the brain. For this reason, all children with these conditions receive preventive chemotherapy. The study aims to improve the methods of identifying those children at greatest risk for recurrence in the brain in order that the preventive treatment can be intensified and minimised, respectively, depending on the children's risk profile.

Maria, Thastrup, MSc, Postdoc – allocated DKK 550,000

Symptoms, joints and leukemia

Muscle and joint symptoms are often prevalent in children with leukemia. The project aims to examine the frequency of joint involvement in the children and the effect of the condition on the time until diagnosis and the children's survival odds. The study will also identify blood samples and biomarkers that will be able to separate juvenile leukemia from juvenile arthritis.

Ninna Brix Uggerby, Physician and PhD candidate, Aarhus University Hospital – allocated DKK 400,000

Circulating DNA fragments in brain tumours

In patients with brain tumours it has in recent years become possible to trace fragments of cancer cell DNA in blood samples and the fluid surrounding the brain. The study will examine whether a new method of tracing circulating fragments of cancer cell DNA can be used to diagnose children with brain tumours, reduce the time from first symptom to treatment and predict the development of the condition.

Henrik Hasle, Professor, Aarhus University Hospital – allocated DKK 900,000

Robot technology will maintain skill levels and social contact

50% of children with cancer experience psycho-social and skill-related challenges when returning to school. The objective of the project is to examine how robot technology can help children maintain social and skill-related contact with their school grade during the year-long treatment. The technology aims to support children's natural development and reduce the number of children forced to re-take a year.

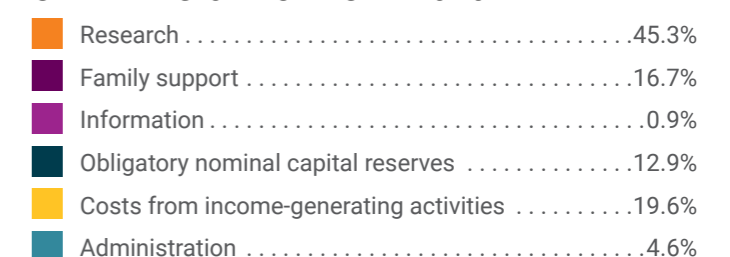
Hanne Bækgaard Larsen, Nurse, Ph.D. Research Coordinator and Lecturer, Rigshospitalet – allocated DKK 550,000

Scholarship grants

Børnecancerfonden has a strong focus on supporting new, promising child cancer research talents. This has motivated the Foundation Board of Directors to allocate DKK 400,000 to scholarship grants to be allocated on an on-going basis. So far, DKK 60,000 has been allocated to research in primary eye symptoms in children with brain cancer.



SPENDING OF FUNDS IN 2020





Jesper Bjerg, Country Manager Denmark, Team Rynkeby

18.1
DKKM COLLECTED
BY TEAM RYNKEBY FOR
BØRNECANCERFONDEN
IN 2020

DANISH CHILD CANCER IN THE YELLOW JERSEY

Team Rynkeby has been working on behalf of children with cancer since 2002. With their donations of more than DKKm 230 to Børnecancerfonden, they have been vitally important for ensuring that Danish child cancer treatment is today among the best in the world.

80% of the funds donated every year by Team Rynkeby goes to research, and their great effort has given Børnecancerfonden the strength to help contribution to improved survival rates, reducing the children's late effects and improving the quality of life.

Team Rynkeby has crossed the finish line in Paris 18 times (19, but for Corona), and we are very grateful to see how the many riders, assistants and service personnel work tirelessly, year after year, for the benefit of children with cancer. It is not least thanks to them that we are getting ever closer to the target.

Corona put a spoke in the wheel

In the spring of 2020, the world was paralysed by the Corona pandemic. It put the stoppers on Team Rynkeby's ride to Paris, but it did not stop the thousands of ardent supporters. Creativity was unchecked, resulting in strong solutions to activate all of Denmark. Team Rynkeby once more demonstrated its strength and willingness to be there for the children. Despite unfavourable odds, they still managed to donate DKKm 18.1 to Børnecancerfonden in 2020, a donation that will make a concrete and tangible difference to children with cancer.

"It fills me with pride and optimism when in the Team Rynkeby organisation we can observe the development and the progress made in the child cancer area year after year – even in a Corona year where everything has been

less certain. This tells me that our collaboration with Børnecancerfonden, and the contributions that we continue to make to the Foundation, actually help make a difference for the children and families that it is all about. This is what makes us pedal a bit harder and approach another potential sponsor in our networks," says Jesper Bjerg, Country Manager for Denmark, of the Team Rynkeby Foundation.

In 2020, Team Rynkeby and Børnecancerfonden could look back on almost 20 years of collaboration. This is a very special partnership which has made a great difference over time. Many THANKS to our, without comparison, largest partner. We are proud to stand with you.

Team Rynkeby

Every year, Team Rynkeby rides their bicycles the 1,200 km to Paris. One of the reasons is to further the focus on children with cancer.

The cycling team, operated by Team Rynkeby Fonden, was officially established in 2002. The first ride included 11 riders who originally rode to Paris to view the conclusion to the Tour de France. When the riders returned to Denmark nearly a week later, they had signed on enough sponsorships to create a DKK 38,000 surplus. The amount was donated to the child oncology department at Odense University Hospital, and things have gained pace since then. Today, Team Rynkeby can be found in eight different countries and consists of more than 2,000 riders and 500 assistants.

WHEN FOOTBALL RHYMES WITH CHARITY

#Gribbolden once more exceeded a million

In 2020, the media group Nordic Entertainment Group (NENT Group) repeated their successful ball donation to Børnecancerfonden in collaboration with the manufacturer Select and Fagforbundet 3F. With just a basic football, TV3 hosts and Super League players managed to activate many Danish sports enthusiasts. A donation of DKK 200 to Børnecancerfonden kicked off a Thank You ball. Luckily, thousands of Danish citizens and companies wanted to donate, generating more than DKK 1 million for children with cancer.

"Children should not have cancer. It is completely unfair and something we should solve together. This is why at NENT Group we have a strong desire to contribute to the solid work carried out by Børnecancerfonden. We are proud of the collaboration and of the support that we can add to the vision that in future no child will die of cancer," says Jakob Frimann Sørensen, Nordic Head of Sport Ad Sales, NENT Group.

Every year, some 5-600 children are in active treatment for cancer. The ball donation enables Børnecancerfonden to strengthen research in child cancer to ensure better treatment, higher survival rates and fewer late effects for the children. The donation also enables Børnecancerfonden to help families which are right now in what could be their greatest ever life crisis.

THANK YOU to NENT Group, Select and 3F for preparing the field once more and for using the ball in connection with Super League matches. This has been of vital importance, and we look forward to continuing the valuable collaboration.

#FodboldtrøjeFredag went viral

Danske Spil joined the game and supported Børnecancerfonden with #Fodboldtrøjefredag to bring the entire Danish football family together – on the pitches, in the bleachers and at home on the couches.

The collection was easy to take part in – anyone could participate. All you had to do was donate DKK 50 to Børnecancerfonden, wear your favourite football jersey to work and share an image with #Fodboldtrøjefredag. The Danes supported the colourful day, resulting in more than DKK one million for the Foundation's three objectives: research, family support, and information.

Nobody could know what the Corona pandemic would mean, and a 100% Corona-proof collection was a welcome event, in addition to which Danske Spil has imbued the Foundation with additional strength. THANK YOU to all those who put on a jersey. We look forward to the annual #Fodboldtrøjefredag.



WHEN THE PASSIONATE PEOPLE GET TO WORK

As a small, private foundation, we depend 100% of imaginative people with a big heart who want to make a difference to our cause.

Every year – for almost 20 years – Sportscar Event has been lining up exotic sports cars for the benefit of Børnecancerfonden. This event is aimed at petrolheads who can get an unforgettable spin in a dream car while supporting a worthy cause. Special days are also arranged for the affected children and their families to give them a brief moment to think of something other than the illness. Over the years, Sportscar Event has donated double-digit million amounts, and despite the Corona pandemic they still managed to present a handsome donation of DKK 650,000 in 2020.

Since 2015, Danmark Rundt Team Bodenhoff has jumped on the saddle in support of children with cancer. It started with Claus Bodenhoff who – out on the roads on his own – collected donations from his strong network, and each year has attracted new riders. Local events are prepared along the route, and the tally over time amounts to almost DKKm 4.5. We are time and again impressed by the many people in the various local areas who come out in force to support the events.

"If you want to do it – you can find that little extra effort that lets you help others", says Claus Bodenhoff.

The amalgamation of golf, music and love created the charity event GolfRock. Kim Mikkelsen, promoter of GolfRock, knows what it means to lose a child to cancer – and this motivated him to make a difference for those in a similar situation by supporting Børnecancerfonden. With local area support, a golf tournament was combined with a music experience – an important collection event which has contributed almost DKK 4 million over time.

The 2020 event was cancelled due to Corona. Even though participants did not get to play golf, the vast majority still chose to support the collection. We can feel the authentic spark of passion of the people in North Zealand, and we are very touched by the enthusiastic and loyal support for Børnecancerfonden this past almost 10 years.

615

DKKT COLLECTED BY TEAM BODENHOFF IN 2020

650

DKKT COLLECTED BY SPORTSCAR EVENT IN 2020

220

DKKT COLLECTED BY GOLFRÖCK IN 2020

Associations, companies, collections and funds that have supported Børnecancerfonden in 2020 by DKK 100,000 or more



Danske Spil



Sparinvest



AVEVA



Springstorie

TIL MINDE OM ERIK MØLLER | INGER GAUGUIN FØDT DOLMER'S FOND HOLSTEINBORG
 EDITH OG SØREN KIILERICH HANSENS FAMILIEFOND | MICA FONDEN | GANGSTEDFONDEN
 HEINRICH OG LAURINE JESSENS FOND | STØTTEFORENINGEN BINGO BANKO FREDERICIA
 SPORTGOODSFONDEN | RAGNHILD BRUUNS FOND | JOHN OG BIRTHE MEYER FONDEN
 ØSTIFTERNE | DIREKTØR J.P.A. ESPERSEN OG HUSTRU, FRU DAGNY ESPERSENS FOND
 ARVID NILSSONS FOND | DET OBELSKE FAMILIEFOND | HENRIK HENRIKSENS FOND
 OLE FREDERIKSENS FAMILIEFOND | THOMAS BANKE | DANMARK FOR BØRNECANCERFONDEN

25 YEARS OF RESEARCH AND DEVELOPMENT

By Kjeld Schmiegelow, Professor of Pediatrics and Pediatric Oncology – one of the leading researchers in the evolution of the battle against child cancer.

The survival rate for children with cancer has improved significantly this past 25 years. This shows how far we have come on the back of targeted research. We are still, however, faced with great challenges. This is why in future years child cancer research will especially focus on four main themes:

1. Why did the condition develop? And is there an increased risk that relatives also develop cancer?
2. How can we cure even more people?
3. How can we avoid serious and lifelong side effects from treatment?
4. How do we ensure that the children are not just cured, but also have as normal a life as possible during and after treatment?

Danish child cancer research has come a long way in all these four areas in recent decades. This is not least due to financial support from Børnecancerfonden which has helped foster many research projects. But we are not there yet.

Why do children develop cancer?

Environmental factors which can cause cancer in grown-ups, such as smoking or sunlight exposure, do not play a part in the development of child cancer. On the other hand, many children with cancer have genetic changes that may explain the condition. Some of the changes are new while others are inherited from the parents. This means that both parents and siblings are at risk of developing cancer.

Since 2017, Rigshospitalet has been working on project STAGING, mapping the complete genetic material of children with cancer. STAGING shows that at least 10% of children with cancer have serious genetic mutations which could

explain the development of cancer. In addition, approx. 50% of the children feature genetic variations which in combination may have caused the development of cancer.

Thanks to the infrastructure created in connection with the STAGING project, children with cancer have been selected as one of the patient groups to have their DNA mapped in the coming years at the new Danish National Genome Center (NGC). This will give us even more knowledge about which changes are linked with child cancer – and in the long term it will pave the way for closely following those children, and perhaps family members, at particular risk of developing cancer.

It is hoped that with this approach the condition can be detected at an early stage with better survival chances than are currently the case. We expect that inside a 10 year period select inherited cancer dispositions in children will be able to be included in the Danish screening programme for neonates.

How can we cure even more people?

Although child cancer treatment has improved significantly this past 25 year, treatment still fails in approx. 25% of the children. A few children are unable to tolerate intensive cancer treatment and die from treatment side effects. For the remaining group, however, the issue is

either that the condition progresses in spite of treatment or that the condition returns after having been initially brought under control. Developing new and better treatment for this group of children is very difficult, as it accounts for less than three Danish children per year for each cancer type. This means that survival for children with recurrent or progressed illness is only 50% – and even worse for many cancer types. This is why these children are a special focus for researchers, in order to increase the overall survival rate for children with cancer.



Kjeld Schmiegelow, Professor, Rigshospitalet

Three important research areas:

- Mapping damage to cancer cell genetic material: This damage is the reason why cancer cells do not behave normally, but instead display more or less wild growth. Knowledge about what went wrong in the cancer cells enables us to offer some patients more intensive treatment to increase their chance of being cured, while others can have less intensive treatment with fewer side effects.
- "New drugs for children with cancer": A national unit for experimental treatment of child cancer was created almost 10 years ago. The trial unit works with so-called Phase 1 and Phase 2 treatment, in which new drugs are offered to children with active, incurable cancer. "New drugs for children with cancer" is one of the most successful departments of its kind in a European context. This means that Denmark can often offer new treatments as one of the first places in Europe. The goal is that promising trial treatments inside a short number of years will be offered to at least half of all Danish children with cancer for whom the current treatment is failing.
- International collaboration: Development of new and better cancer treatment takes place in the shape of research collaboration with other countries. This strengthens the sharing of new knowledge and means that researchers can compare large groups of patients receiving the same treatment.

One example is the new European collaboration regarding children with acute lymphoblastic leukemia (ALL), the project: ALLtogether. In the years to come, Denmark and 13 other European countries will offer the same treatment to more than 7,000 children and young people with ALL in order to improve their chance of being cured and at the same reducing the prevalence of side effects.

Danish child oncology specialists have been elected to the international steering groups for a number of similar networks for other child cancer conditions. The research taking place in Denmark is thus also valuable to children with cancer in other countries.

How can we avoid serious side effects from treatment?

It is not only the cancer cells, but also the children that are different. Just as children differ in terms of, say, height or blood type, they also differ in terms of how they process and tolerate drugs.

Danish child oncology specialists have collaborated with groups of researchers worldwide to initiate a range of studies with the purpose of mapping how differences between the children affect their risk of side effects. The

most serious side effects are individually rare, but a large proportion of patients (for example, half the children with leukemia) develop at least one of them.

The side effects subject to particular interest in recent years are fungal infections, blood clots and damages to the pancreas, liver, bones, and brain. To begin with we collect detailed information about each individual side effect from hundreds of children with cancer worldwide. Then the children's genetic material is mapped to identify those genetic changes that lead to a particularly high or low risk of the side effect considered. This will pave the way for a more individualised cancer treatment for the individual child in future.

How do we ensure that the children have a normal life during and after treatment?

As important as it is to ensure that the children are cured, it is also important to follow their prevalence of physical, mental and social late effects, and therefore the children's quality of life. Danish child oncology specialists have, in collaboration with colleagues in the Nordic countries, started a number of studies aimed at mapping more precisely the scope of late effects in children and how their quality of life is affected by them.

During the past 10 years, the research-based rehabilitation programme "RESPECT" has examined how children's contact with their school class can be maintained by nominating ambassadors from among classmates. The ambassadors support the children both during hospitalisation and in school.

Danish researchers are also working on illuminating how children's school contact can be improved via the use of robots, giving the individual child a robot in class during periods where the child is unable to attend school physically.

It seemed unrealistic 25 years ago, but as a result of extensive Danish and international research, we expect the child cancer survival rate to increase to more than 90% inside 5-10 years. This is based, however, on the presumption of substantial research efforts, and this makes Børnecancerfonden as important today as it was when established, 25 years ago.

TOTAL SUPPORT

STAGING.....	DKKm 16
New drugs for children with cancer	DKKm 6
ALLtogether.....	DKKm 6
RESPECT.....	DKKm 11.5

RESEARCH PROFESSORSHIP TO REDUCE SIDE EFFECTS AND LATE EFFECTS

As an increasing proportion of children survive cancer, there is an increased need to focus on the life that they will lead after being cured. In 2015, Børnecancerfonden created a five-year research professorship for this purpose, which, among other things, has examined how individually targeted treatment can reduce side effects and late effects in children with cancer. The research has shown promising results, for which reason the professorship has been extended by three years at the 2020 allocation.

The collaboration between Professor Klaus Müller and Børnecancerfonden has, among other things, paved the way for a national Danish centre for child immunotherapy. Immunotherapy represents a major treatment breakthrough, and solid results have been obtained relative to improved survival rates where the standard treatment efficacy has been insufficient. At the same time, immunotherapy causes less physical damage to the children than chemotherapy.

Children must survive cancer and live without late effects

The child cancer survival rate has increased significantly this last 25 years. Today, some 85% survive, compared with 50% 50 years ago. The strong increase is primarily a result of intensive chemotherapy. But the price for this is acute side effects and severe late effects. This makes research into side effects, late effects and rehabilitation important areas of initiative in order to cure children to live a life with the same possibilities as their peers.

The purpose of extending Klaus Müller's professorship is to continue to develop and implement far more individualised and less toxic treatments that are still sufficiently efficacious to cure children with different cancer types and a variety of genetic profiles.

"Research shows that it is not random who develops side effects, as we have different levels of sensitivity. This means that our healthy tissue reacts differently to chemotherapy. What we seek is a greater understanding of the biological mechanisms behind the side effects that manifest, so that we can better predict which patients will have the side effects. This will enable individualised drug dosage based on the patient's risk profile. At the same time, our research can form the basis, in the longer term, for developing preventive treatments which can specifically block the harmful processes," says Professor Klaus Müller.

Groundbreaking results

The professorship extension is based on a number of important findings over the past five years. The themes are centred on:

- Implementation and further development of immunotherapy
- Individualised treatment with the use of biomarkers to prevent acute side effects such as intestinal damage
- Late effects following cancer treatment and the risk factors associated with the development of, e.g., metabolic disturbances and cardiovascular diseases
- Development of dietary therapy to reduce lasting damage resulting from treatment

One of the great promises of cancer treatment is immunotherapy, which utilises the immune system's ability to recognise and kill cancer cells. In children with Acute Lymphoblastic Leukemia (ALL), immunotherapy with so-called CAR T cells has brought the condition under control in more than 50% of the children who do not respond to the standard treatment or have recurrences.

Klaus Müller, together with Professor Inge Marie Svane, is the primary driving force behind establishing the Danish Centre for Pediatric Cancer Immunotherapy (CIRCUIT). In 2018, Børnecancerfonden donated DKKm 6 to creating the centre, which is a collaboration between Rigshospitalet and Herlev Hospital. The centre is also anchored in international collaboration with immunotherapy centres in Canada, Italy and the USA.

Over the next three years, researchers will continue to develop the production of CAR T cells in Denmark for the use in treatment of more child cancer conditions. Another important focus area for the researchers will be to examine which patients have the greatest chance of efficacy from the treatment and how to best manage side effects.

Increased understanding of intestinal damage as a result of chemotherapy

Intestinal inflammation, one of the most common side effects of chemotherapy, does not only increase the level of pain and infection suffered, but also the risk of death. There are significant differences, however, in the children's sensitivity to side effects such as intestinal damage. Interim results suggest that these differences can be predicted via the use of so-called biomarkers.

Over the next three years, the researchers will test the results on several primary child cancer groups and across age groups. The goal is to implement early individual treatment of each child in order that children with a high risk of intestinal damage may for example receive preventive antibiotics while a potentially damaging overuse of antibiotics can be reduced in children with low risk.

Metabolic disturbances after stem cell transplant in children

The researchers have demonstrated that up to 50% of younger male survivors of childhood stem cell transplants experience late effects in the shape of metabolic disturbances, reduced skeletal muscle mass and reduced bone calcium levels. This increases the risk of diabetes, cardiovascular diseases and premature function level reduction, among other things. The changes are most pronounced in patients who have received radiation treatment prior to the stem cell transplant and is related, i.a., to chronic inflammation and hormonal disturbances.

Over the coming years, the researchers will examine, among other things, the timing of metabolic disturbance onset in the patients and whether the degree of, e.g., inflammation and intestinal damage in the early treatment phase is significant to the scope of late effects. They will also examine the biology behind the substantial loss of skeletal muscle mass in survivors, including whether their musculature is permanently reduced or can be regenerated via exercise. This aims to provide increased insight into causes of these late effects and to open the door to preventive treatment for both recently treated children and long-term survivors.

Dietary therapy and lactic acid bacteria

Changes in the gut bacteria composition as a result of chemotherapy treatment plays an important role in the degree of inflammation in children with cancer. This is demonstrated by the results of another research project under the professorship. The results suggest a potential significance of changing the children's diet in order to reduce treatment-related side effects and late effects.

On this basis, the researchers have now implemented a national study to examine whether a changed gut flora can explain why some child cancer patients respond to the treatment with damaging inflammation – and whether targeted treatment with specific bacteria strains can stabilise the children's gut flora during chemotherapy. An additional goal is to develop evidence-based dietary therapy for child cancer patients based on an examination of how the dietary composition relates to treatment-related damage.



HOPE FOR CHILDREN WITH BRAIN TUMOURS

20% of children with brain and spinal cord cancer do not survive, and the surviving children have the highest risk of severe late effects.

Brain cancer is a complex diagnosis with more than 100 subdiagnoses. It takes significant resources for researchers to learn more about the condition. With a double-digit million contribution to the international research consortium 5C, Børnecancerfonden furthers research into better treatment of children with brain tumours.

Central Nervous System (CNS) tumours are cancers in the brain and spinal cord. It is the second-most prevalent cancer type in children and accounts for approx. a quarter of all child cancer cases. However, the many different brain tumour subtypes are rare, and this is the great challenge in relation to improving treatment and survival rates. Only a multidisciplinary and long-term effort enables sufficient knowledge-sharing and data acquisition.

FIVE-YEAR SURVIVAL

Avg. across diagnoses.....	85%
Leukemia type ALL.....	92%
Brain tumours.....	81%

LATE EFFECTS

More than 50% of children with brain tumours also experience severe late effects such as learning difficulties, motor skill challenges or vision and hearing issues as a result of the intensive treatment.

Complex diagnosis

Brain tumours are very difficult to treat, particularly due to the many subtypes and the location of tumours. They are located close to our central nervous system which controls all bodily functions. Brain and spinal cord tumours are typically treated with a combination of surgery, chemotherapy and radiation treatment. It is very individual what each patient needs, and the aggressiveness of the tumour growth also plays a role.

5C – a strong consortium working on brain tumours in children and young people

For many years, Børnecancerfonden has wanted to do something significant for children with brain tumours. In 2016, the Foundation received a record donation from

Team Rynkeby which made it possible to create the necessary basis for raising the child brain tumour area. The first ideas for the national child brain tumour consortium, 5C, were therefore formulated almost five years ago.

5C (Danish Collaborative Comprehensive Childhood CNS-tumor Consortium) was established to improve prognoses and to ensure that Denmark is at the forefront of international research collaboration.

In 2019, Chief Physician René Mathiasen was engaged as General Manager, after which work could start in earnest. 5C includes chief physicians and professors from both Aarhus University Hospital and Rigshospitalet. There is also a number of other researchers from various areas of specialisation. The consortium is also associated with a strong, international advisory board.

The following five main themes form the framework for 5C's research projects:

- Brain tumour causes, including the significance of inborn mutations
- Earlier, better and more precise diagnostics
- Better biologic mapping
- Developing laboratory models for the detailed study of new treatment strategies
- Mapping late effects and the development of new strategies for reducing permanent damage

The future is here

With the five main themes as the framework, the consortium has so far performed a number of relevant register extracts and pilot trials for the various research areas. In addition, a biobank of biological samples has been established. This makes it possible to conduct genetic studies of the children's DNA and biological models for each individual brain tumour for which the biology can be examined and treatment methods tested.

The focus of the researchers is to give the patients the best possible support. This is why the consortium has established a youth panel and a parent panel to ensure that the work addresses the actual issues experienced by families. The parent panel has been subsequently represented in a European parent panel.

As 5C's work moves forward, it will naturally branch out into new projects in which the researchers will always navigate on the basis of the five main themes.

The consortium has defined a number of specific projects of which several are financed by Børnecancerfonden. This applies, e.g., to the national campaign HjerneTegn and a new scanning method that improves the diagnosis of brain tumours.

One of the problems faced is that the illness is difficult to diagnose due to diffuse and variable symptoms. HjerneTegn aims to reduce the children's diagnosis period which is essential for their survival and the extent of late effects.

Ph.D candidate Kathrine Weile from Aarhus University Hospital will initially collect data to map the time from first symptom to diagnosis for all children diagnosed with a brain tumour in Denmark 2015-2018. This will be done via questionnaires to be completed by families and their physicians. The PhD study is expected to support the hypothesis that the rare illness and the diffuse symptoms characterising brain cancer delays the time it takes until the children are diagnosed.



The campaign objective is to increase awareness of symptoms in the wider population as well as among physicians and other healthcare professionals. This will involve the setting up of a website, publishing information materials and preparing guidelines to be used in evaluation. The campaign impact will be followed closely and two years after the campaign implementation, Kathrine Weile, PhD, will draw up conclusions on the changes relative to child diagnoses.

The United Kingdom launched a similar campaign in 2011, called HeadSmart. The campaign reduced the time from

first symptom to diagnosis from an average of 9.1 weeks to 6.7 weeks. In addition, the time from first contact with a physician to scanning reduced from an average of 3.3 weeks to 1.4 weeks. Professor David Walker, primary initiator of HeadSmart, is part of the Ph.D. project advisory group.

Earlier diagnosis of children with brain tumours is therefore highly likely to result in a better process and at the same time reduce the children's risk of severe late effects. The physicians additionally hope that this can result in better survival chances.

New scanning method improves the diagnosis of brain and spinal cord tumours.

A new combination of scannings in connection with diagnosis and control of children with brain tumours is the first major study of its kind in the child cancer field and involves more than 100 children. The objective is to be able to identify recurrences sooner, reduce the number of unnecessary surgical procedures and inefficacious chemotherapy treatment, reduce severe side effects and improve survival figures.

The first part of the study compares the use of MRI scanning alone with "combined diagnostics" using both

MRI and PET scanning with a special tracer. This combined diagnostic method is already used consistently in adult cancer, but only in cases of doubt for children. Interim study results show, i.a., that the combination of the two scans – compared with MRI alone – provides a far more precise image of the condition of children with cancer after a surgical procedure. The combination is able, for example, to determine if there is a residual tumour or merely lesions resulting from surgery. This makes the method particularly relevant in cases where physicians are considering follow-on surgery to remove a potential residual tumour.

The other part of the study implements, among other things,

the latest methods of analysis in the PET/MRI scanning. This has the potential to be able to predict the children's brain tumour variant without risky biopsy and at the same time improve diagnostics on which the treatment is based.

In the longer term, a more precise diagnosis of the children could contribute to the development of new treatment methods such that more children can survive brain and spinal cord cancer with fewer and less severe late effects.

Read more at 5C.nu

FAVN – A NATIONAL PSYCHOLOGY SERVICE

An offer for children with cancer, their siblings and parents during and after treatment. FAVN was started together with Foreningen Cancerramte Børn in 2016.

Child cancer can create a crisis situation for the whole family

Up to 50% of children with cancer experience learning-related or social problems when returning to school. Up to 44% of parents experience post-traumatic stress responses after their child's cancer process and up to 50% of healthy siblings feel lonely and that they have nobody to confide in.

When a child gets cancer, the whole family enters one of the most vulnerable periods of their lives. Feelings such as fear, anger or jealousy may manifest both in the sick child, siblings and parents. For some, it may be difficult to verbalise or find the courage to express things and working on the situation.

Every year, we help around 300 people in crisis and grief, and the Foundation experiences substantial demand for psychologist's assistance. In the latest impact measurement, 80% of the children, both children with cancer and healthy siblings, respond that the psychologist support offer has helped them "to a high degree" or "to a very high degree". When looking only at siblings of children with cancer, the share is 91.7%.

"The illness changes everyday life dramatically for all family members in every way: mentally, physically, socially, and financially. This is why I am very concerned about helping and alleviating throughout the family and trying to get them to handle their lives to the best of their ability while it is all going on. This way, hopefully, they will be better prepared to return when the storm settles and a new normality returns," says Ane Christensen, evaluator and psychologist at Børnecancerfonden.

There are three different group categories. One for sick children, one for siblings aged six to nine, and one for siblings aged nine and above. Additionally, there are grief groups for parents who have lost a child to cancer. Everybody, children as well as adults, are also offered 1:1 psychologist consultations.

Cancer, emotions, and community

Children and young people who have cancer or have survived cancer experience adult life concerns far too early. This means that it may be difficult for them to discuss their feelings with their friends. This is why a community of others who have experienced a similar situation can provide the space they need to feel that they are seen, heard, and understood. This is why in 2017 we created conversation groups for children who have or have had cancer.

Siblings as shadow children

When a child in a family gets cancer, it is natural that the child receives a lot of attention, which may easily cause siblings to feel overlooked and missing the parents. We saw a need here to create a space for siblings of children with cancer where they could meet and talk with others in a similar situation. This resulted in the creation of two groups for siblings: one for the younger group and one for young teenagers.

In the group of younger siblings, from six to nine years old, there is a greater focus on play, drawing and small exercises, as the children are not able to express themselves verbally in the same way as older children. When they meet others in a similar situation, they often meet acknowledgement and are better able to recognise their own feelings in those of others. This may assist in normalising their thoughts and feelings. In such settings, there will also be space for themes that the children would otherwise rarely discuss with their parents.

In the group for young teenagers, aged nine and above, there is a stronger focus on conversations and confidence and visualisation exercises. The young people are better able to verbalise their feelings, but they often miss talking with others who have experienced a similar situation.

Sandplay – when feelings are hidden in the sand

There is also a special therapy type called Sandplay. It is our experience that shy children and those who find it difficult to verbalise their feelings benefit from this type, as it is performed largely without words. Instead, figures representing emotions are used. The method provides an access to the subconscious that the child is unable to verbalise. It is up to the psychologist to read the various feelings while the child is playing.

Parents may also need help

We have 1:1 psychologist consultations and grief groups for bereaved parents. The grief group allows the time and space to share thoughts and feelings with others who know what it is like to lose a child to cancer. It is a place for parents to "unload", listen to other people's memories, learn of their grief and feel recognised and respected in their grief by others in a similar situation together with a therapist.

In our latest impact measurement, 69.3% of parents say that they "to a high degree" or "to a very high degree" have benefited from the assistance received via FAVN.

AN IMPORTANT SERVICE FOR CHILDREN WITH CANCER AND THEIR FAMILIES

"It was fantastic to have people who were able to embrace us during that difficult time. We have not all been ready at the same time, and it has been wonderful to be able to take advantage of the offer when we were ready," says Anita, mother of Vanessa.

Vanessa was diagnosed with Hodgkin's Lymphoma when she was nine. This turned the whole family's world upside down. The new situation was difficult to navigate. Now what do we do? How do we handle this?

A nurse told the family about the Børnecancerfonden psychologist offer, FAVN. They took advantage of it and it has made a big difference for them and helped them gain a foothold.

Both Vanessa and her younger sister, Emilia, participate in Sandplay therapy. Vanessa is also part of one of the children's groups, which she very much enjoys and benefits from a great deal. Her mother says that it has been good for

her to meet peers with whom she can share her thoughts and feelings. Little sister Emilia did not want to join a group to begin with, but when she saw, what it did for big sister Vanessa, she was keen on trying, too. Emilia is very much looking forward to starting in one of the groups in 2021.

Today, Vanessa is out of treatment. Although this is absolutely wonderful, it does mean that the family is no longer involved with the healthcare system, and this can leave a kind of void: The family still needs to talk about what they have been through, and Vanessa's mother therefore also uses one of the offers from FAVN and sees a psychologist. Vanessa's father will soon take up the same offer, as they both need help to process their experiences and get into their new life routines.

"In the beginning, the focus is survival. Now, our lives are completely different from what they were, and that is why we are so grateful for Børnecancerfonden and the various offers," says Anita.



Private photo, Vanessa & Emilia

LIFE WITH A CHILD WITH CANCER REQUIRES SUPPORT AND CARE

Most of the 2020 allocations went to research, but family support is also an important area for Børnecancerfonden. Over 25 years of experience in having close contact with the families has shown us precisely what types of support and care families of a child with cancer actually need.

In 2020, the Foundation supported projects aimed at supporting children with cancer and their families directly with more than DKKm 11. We would have liked to provide even greater support, but Corona meant that we had to cancel a number of initiatives, such as recreational stays. Below, you can read about some of the projects supported by Børnecancerfonden via the 2020 allocation funds.

Life as a young person after cancer

The pilot project "Unge-tjek" run by Rigshospitalet provides healthcare support to young people with cancer about topics such as body image, education and anxiety. The young people receive relevant support offers based on a personal interview and in alignment with the medical environment. "Unge-tjek" is now going to be evaluated, developed and implemented to become a fixed offer – in all of Denmark in the longer term. **DKK 250,000**

"RESPECT" – a national development and implementation project

"RESPECT" is a special ambassador scheme under which hospitalised children with cancer receive regular visits from two healthy class-mates. The project also educates the children's school class and teachers on child cancer. During the Corona period, the ambassador visits and education have been virtual. The interim analyses of "RESPECT" are so convincing that the project is now made permanent throughout Denmark. **DKK 1,697,000**

When illness gives strength

"Cool Camp" is a rehabilitation offer for young people with cancer, their siblings and families with children with cancer. Camp participants are equipped with tools to maintain their normal lives both during and after the treatment process and learn to view their experience of serious illness as a strength. Camp activities are theoretically based on the Therapeutic Recreation model and have been compiled with a view to strengthening the self-confidence, self-worth, independence and not least hope and belief in the future in the children and young people with cancer. **DKK 2,300,000**

Activity coordinators in all four child cancer departments

Activity coordinators ensure that both outpatient and hospitalised child cancer patients are aware of the

support offers available for children with cancer and their families. Activity coordinators are responsible, among other things, for the daily coordination of the story string, "SuperSnøren (SuperString)", and for visitation of families and children for Børnecancerfonden recreational stays, youth camps and psycho-social offers. **DKK 240,768**

Professional development

Financial support for half day symposium at Skejby Hospital with a presentation of the latest research and care projects. **DKK 15,000**

International knowledge-sharing

Covering travel costs of Danish child oncology specialists' participation in international protocol and workgroup meetings and the like **DKK 100,000**

Music as psychological therapy

The music therapy project "MusikBeRiget" offers hospitalised children with cancer a break from their illness process and the opportunity to work out strong emotions via classical and rhythmic live music. Musicians visit the Danish child cancer departments every week. **DKK 400,000**



A home away from home

Children with cancer have a greater need for their family while they are sick. TrygFondens Familiehus in Aarhus and Ronald McDonald Hus in Copenhagen provide families with seriously ill children a home away from home. With funds from Børnecancerfonden, two rooms in both houses have been allocated to children with cancer and their parents. This provides the families with privacy, calm surroundings and the opportunity to seek the support and company of the other families in the house. Børnehuset SIV is a daycare institution for seriously ill children and their families. Funding from Børnecancerfonden ensures that there are places for children with cancer and their families. **DKK 600,000**

INDULGENCE AND FAMILY TIME

The Foundation has three holiday cottages that are provided on loan to families with a child with cancer. The families can also apply for an "indulgence grant" which may be used on exactly what the family needs the most – they decide.

Elliot was only two years old when he was diagnosed with leukemia. During the first seven months of the treatment, he was hospitalised without interruption.

This was very hard on the family, which has now endured two and a half years of treatment. Elliot's SuperSnøren (SuperString) bears witness to the intensive and long process – it is now 9.7 metres long and holds 708 beads.

During the treatment, the family applied to Børnecancerfonden for an indulgence grant. An indulgence grant is something that all children with cancer under 18 years of age can apply for, and they can spend the money freely. A grant can help to fulfil a wish that the parents might otherwise not be able to fulfil.

"We applied for an indulgence grant to spend on an iPad, since Elliot was mostly bedridden. It was a wonderful gift to receive. The time did not feel so long, as he was able to access entertainment even when he had no energy for anything. When he felt better, he could use it to play games and talk on FaceTime with his dad and siblings at home. It was worth its weight in gold, and we just don't know what we would have done without that iPad," says Elliott's mother, Nanna.

The family has also been able to get away from home to one of Børnecancerfonden's holiday cottages in Blokhus, surrounded by wonderful nature. Elliot and his family went to the cottage after eighteen months' intensive treatment with long hospitalisation spells. The family especially enjoyed the summer cottage, as it meant that they could all finally be together as a family.

"It was really important to be able to get away from home with Elliot and his siblings and to focus on having a pleasant time together rather than on illness," says Nanna.

BØRNECANCERFONDEN HOLIDAY COTTAGES

The Foundation's holiday cottages are made available on loan to families with a child with cancer who is associated with one of the country's four child cancer departments. We know that the options for holiday travel are limited in every way when you have a child with cancer. It is free to borrow the holiday cottages – only consumption costs need to be paid for. The three holiday cottages are in Dronningmølle and Blokhus – in pleasant, relaxing natural surroundings close to a beach and child-friendly activities.

ABOUT SUPERSNØREN

SuperSnøren (SuperString) is the world's most important string. In reality, it is just small, colourful beads put on a string. But SuperSnøren helps the child with cancer to verbalise and understand what is going on during the treatment. Each bead represents different parts of the treatment and the process. There is a bead for chemotherapy, for example, one for surgery, one for a really good day and one for a really bad day. This lets the child create their own story, their own story. The beads also help the parents and department staff prepare the child for what is coming in the process, such as the following day. Together with the parents, the child can "read" and retell their story with SuperSnøren.



Private photo, Elliot's family

OTHER INITIATIVES THAT MAKE A DIFFERENCE

When your own cancer motivates you to act

This happens to Thomas Stampe who has collected DKK 107,832.

Thomas Stampe is IT Director at Maersk Supply Service. In the summer of 2017, Møller Mærsk experienced a hacker attack, and Thomas was responsible for the subsequent clearing work. Only a month and a half later, he was given the bad news that he had Stage 4 cancer. He has since had nine operations and 30 rounds of chemo. The two crises that he suddenly found himself in and had to manage inspired him to write the book "Before I count to five".

The book is about how to navigate through chaos and crisis, both in your work life and your private life. Sales of the book and talks have generated DKK 107,832 for Børnecancerfonden.

"I have chosen to support Børnecancerfonden after experiencing what it is like to have cancer – and seeing children and families affected by cancer. Cancer is a dreadful illness and nobody deserves having it – least of all children," says Thomas Stampe.



Jewellery celebrating children with cancer generated more than DKK 100,000.

Anne Bertram was struck by cancer and finished her process in 2019. She subsequently decided to follow her passion for fashion and opened the online shop Springstorie. She wanted it to do more than selling clothes, and she needed it to be something that made a difference.

So in January of 2020, she contacted Camilla Julie and Trine, who run Sorelle Jewellery, in the hope that they would be interested in a jewellery collaboration where all proceeds would be donated to Børnecancerfonden. They were, and a beautiful jewellery collection resulted. The collection consisted of four pieces, each of which was named after – and celebrated – a child battling cancer or a child who had lost their life to cancer.

The process was long and arduous for the two small companies, but they were determined to make it. The sale of the lovely jewellery generated a collection of more than DKK 100,000.

"It did not take us long to decide, that it had to be Børnecancerfonden. The thought that one's children should have to endure what I went through was incredibly difficult. Children are supposed to play, to muck about, to be with their friends. They're not supposed to be in hospital," says Anne Bertram.

"Refoodme" – a pop-up shop that changed a focus

The Herringe family knows how hard it is for a family to have child with cancer. Their daughter, Catharina Olivia, has been battling a brain tumour for seven years and has been through surgery three times, most recently in January 2020. She is still to go through almost a year of chemotherapy. The tumour is located by the optic nerve and cannot be removed, but it can be kept at bay until she is grown up, at which time hopefully it can be removed with radiation.

It was a hard time for the family, and they wanted to return to their normal lives and to focus on something positive. A friend of the family had some empty premises that they could use. So the family decided to set up a pop up shop in the premises, which they opened in November 2020. The shop sold snacks and Christmas cookies, but their work also consisted in spreading the message about what Børnecancerfonden does for families with children with cancer and what it is like for a child to have cancer. The shop was managed by the Herringe family and a number of volunteers, and they collected a total of DKK 17,622 for Børnecancerfonden.

"We just wanted to focus on something positive during that difficult time and at the same to highlight how much of a difference Børnecancerfonden has made for us. It was also important to my daughter to share her story about what it has meant for her to live with cancer for seven years. That is why she has set up a blog where she tells her story, hoping to be able to support other children and teenagers in the same situation so they know they're not alone," says Pernille Herringe, who is the mother of Catharina Olivia.



1.350 Danes ran for Alexander's best friend – Frederik

The "Danmark for Børnecancerfonden – Motion sammen hver for sig" run was held in the summer of 2020. A special run created by then 15-year-old Alexander Nielsen. Anyone could devise their own route in their own town and run, cycle, or use roller skates. 1,350 Danes chose to do this, with a starting number price of DKK 50. Alexander sold medals and T-shirts, too – and the result was a donation of DKK 104,571.

Alexander's motivation for arranging the run was that his childhood friend Frederik died of soft tissue cancer at the age of 13 in 2018 – two days before his confirmation. Alexander remained close with Frederik throughout the treatment process and saw how great a strain child cancer is on the family.

"I want to help children diagnosed with cancer. Because I have seen the difference that the support makes for them and their families," says Alexander.

This motivated him to doing something and to remember his friend by making a collection for Børnecancerfonden. That was when the idea for the run came to him. The two had been companions in nursery care, daycare, and at school and they also tried to keep close contact during Frederik's period of illness. Among other things, they used Børnecancerfonden's SuperSnøren (SuperString) to talk about the illness.

"I hope he's up there, following what's going on – and is proud of what I've set up. I hope he knows that I am doing it to remember him," Alexander said, before starting his collection run.



MANAGEMENT STATEMENT

The Board of Directors and the Executive Management have today approved the annual accounts for the financial year 1 January - 31 December 2020 for Børnecancerfonden.

The annual accounts are submitted in accordance with the requirements of the Articles of Association regarding the submission of accounts in accordance with the Danish Financial Statements Act for Account Class A with those adjustments arising from the Foundation's special circumstances and the ISOBRO guidelines for accounts submission by fundraising organisations.

It is our view that the annual accounts provide a true and fair view of the Foundation's assets and liabilities and financial position as of 31 December 2020 and of the result of the Foundation's activities for the financial year 1 January - 31 December 2020 and the allocation of the funds raised. It is our opinion that the Management Report contains a true and fair description of the issues discussed in the Statement.

No events have occurred after the end of the financial year which could substantially affect the financial position of the Foundation.

Copenhagen, 7 June 2021

Direktør

Marianne Benzon Nielsen

Bestyrelse

Christina E. Høj-Hansen
(formand)

Jens Bjørn Andersen

Karen Vitting Andersen

Morten Stadil

Søren Rittig

Michael Reker Schiøth

Anja Bisgaard Pinborg

INDEPENDENT AUDITOR'S AUDIT STATEMENT

To the Board of Directors of Børnecancerfonden

Opinion

It is our opinion that the annual accounts provide a true and fair view of the Foundation's assets, liabilities and financial position as of 31 December 2020 and of the result of the Foundation's activities for the financial year 1 January - 31 December 2020 in accordance with the Act on Foundations and Certain Associations, the Articles of Association and the Danish Financial Statements Act for Accounting Class A adapted to the subsidy conditions of the Ministry of Health, including "Auditing instructions for auditing subsidies" and the accounting instructions for project subsidies in excess of DKK 500,000, the "Subsidy provisions".

We have audited the annual accounts for Børnecancerfonden for the financial year 1 January - 31 December 2020, which includes profit and loss account, balance and notes, including accounting policies ("the accounts").

Basis of opinion

We have carried out our audit in accordance with international auditing standards and those additional requirements that apply in Denmark as well as good public auditing practice, and the audit is performed on the basis of the requirements of the subsidy provisions. Our responsibilities in accordance with these standards and requirements are described in detail in the audit statement section "Auditor's responsibilities for auditing the annual accounts". We are independent of the Foundation in accordance with international ethical rules for auditors (IESBA rules of ethics) and the additional requirements which apply in Denmark, and we have complied with our additional ethical obligations in accordance with these regulations and requirements. It is our opinion that the evidence obtained is sufficient and suitable as the basis for our opinion.

Statement on the Management Report

The management is responsible for the Management Report. Our opinion on the annual accounts do not include the Management Report, and we express no firm opinion regarding the Management Report.

In connection with our audit of the annual accounts, it is our responsibility to read the Management Report and in this connection to consider whether the Management Report is

substantially inconsistent with the annual accounts or the knowledge obtained by us during the audit or in any other way appears to contain material misinformation.

Our responsibility additionally includes to consider whether the Management Report contains the information required by the Danish Financial Statements Act.

On the basis of the work carried out, it is our opinion that the Management Report is in accordance with the annual accounts and has been prepared in accordance with the requirements of the Danish Financial Statements Act and the Articles of Association. We have not identified material misinformation in the Management Report.

Management's responsibility for the annual accounts

Management is responsible for preparing annual accounts that provide a true and fair view in accordance with the Act on Foundations and Certain Associations, the Articles of Association, and the provisions of the Danish Financial Statements Act for Accounting Class A with the required adaptations and the subsidy provisions. Management is further responsible for the internal controls which Management consider necessary to be able to prepare annual accounts without material misinformation, regardless of whether this is due to fraud or error.

When preparing the annual Accounts, it is the responsible of Management to assess the Foundation's ability to continue as a going concern; to inform about issues regarding going concern where relevant, and; to prepare the annual accounts on the basis of the accounting principles for going concern, unless Management intends to liquidate the Foundation, cease operations, or has no other realistic alternative than to do this.

The Auditor's responsibilities for auditing the annual accounts

Our goal is to obtain a high degree of certainty as to whether the annual accounts overall are without material misinformation, regardless of whether this is due to fraud or error, and to provide an Audit Statement with an opinion. A high degree of certainty is a high level of certainty, but not a guarantee that an audit carried out in accordance with international auditing standards and the additional requirements applying in Denmark and good public auditing practice, cf. the subsidy provisions, will always uncover

material misinformation where such exists. Misinformation may occur as the result of fraud or error, and can be considered material if it can be reasonably expected, individually or in combination, to influence the financial decisions made by users on the basis of the annual accounts.

As part of an audit carried out in accordance with internal auditing standards and those additional requirements that apply in Denmark as well as good public auditing practice, cf. the subsidy provisions, we make professional assessments and maintain professional scepticism during the audit.

In addition:

- We identify and assess the risk of material misinformation in the annual accounts, regardless of whether this is due to fraud or error, prepare and perform audit actions in response to these risks and obtain evidence which is sufficient and suitable for forming the basis for our opinion. The risk of not detecting material misinformation due to fraud is higher than for material misinformation due to error, as fraud may involve conspiracies, use of forged documents, deliberate omissions, deception, or failing to perform internal controls.
- We obtain an understanding of the internal control where relevant to the audit in order to be able to prepare auditing actions relevant to conditions, but not in order to express an opinion on the efficiency of the Foundation's internal control.
- We consider whether the accounting practice used by Management is appropriate and whether the accounting estimates and associated information prepared by management are reasonable.
- We form an opinion as to whether Management's preparation of the annual accounts based on accounting principles for a going concern are appropriate and whether on the basis of the obtained evidence there is significant uncertainty associated with events or issues that may create substantial doubt about the Foundation's ability to carry on as going concern. If it is our opinion that a significant uncertainty exists, our Audit Statement must point to relevant information in the annual accounts or, if such information is insufficient, we must modify our opinion. Our opinion is based on the evidence obtained until the date of our Audit Statement. Future events or circumstances may, however, result in the Foundation being unable to keep operating.
- We consider the overall presentation, structure, and contents of the annual accounts, including information in notes, and whether the annual accounts reflect the underlying transactions and events in such a way as to provide a true and fair view of them.

We communicate with senior management about, i.a., the planned scope and timing of the audit and material audit-related observations, including any material internal control shortcomings that we may identify during the audit.

Statement in accordance with other legislation and regulation – Statement regarding legality audit and financial management audit

Management is responsible for actions covered by the financial reporting being in accordance with allocations, legislation, and other regulations as well as with concluded agreements and standard practice, and; that appropriate financial measures have been taken in managing the funds and activities covered by the accounts.

In connection with our audit of the accounts, it is, in accordance with good public auditing practice and the subsidy provisions, our responsibility to select relevant elements for legality audit and financial management audit. In a legality audit, we test with a high degree of certainty for the elements selected whether the actions covered by the financial reporting are in accordance with the allocations, legislation and other regulations and with concluded agreements and standard practice. In a financial management audit we assess with a high degree of certainty whether the systems, processes, or actions examined support relevant financial considerations to the management of the funds and operation of activities covered by the accounts.

If, on the basis of the work carried out, we are of the opinion that there is cause for material critical comment, we must report this.

We have no material critical comments to report in this connection.

Copenhagen, 7 June 2021
PricewaterhouseCoopers
Statsautoriseret Revisionspartnerselskab
CVR No. 33 77 12 31



Henrik Aslund Pedersen
Certified Public Accountant
mne17120

PROFIT AND LOSS ACCOUNT

	Note	2020 DKK	2019 DKK
Public funds (public allocation funds and VAT compensation)	1	2,278,346	1,890,518
Collected private funds	2	28,471,260	21,918,288
Income from events	3	28,564,428	33,591,909
Income from income-generating activities		59,314,034	57,400,715
Legacies reserved for nominal capital		-7,248,306	-6,354,619
Costs from income-generating activities	4	-11,055,056	-9,895,298
Result from income-generating activities	5	41,010,672	41,150,798
Administration costs	6	-2,704,743	-2,647,999
Earnings before financials		38,305,929	38,502,799
Financial income	7	3,521,264	6,175,136
Financial costs	8	-90,624	-107,845
Earnings before objective-related activities		41,736,569	44,570,090
Family support (La Vida, holiday cottages, children and youth)		-2,222,335	-4,020,916
Research		-851,186	-602,681
Information activities		-339,422	-331,904
Costs from objective-related activities	9	-3,412,943	-4,955,500
Profit for the year		38,323,626	39,614,590
<i>Proposed profit allocation</i>			
Profit for the year		38,323,626	39,614,590
Refunded and lapsed previous allocations		388,990	1,049,675
Reserves for allocation from previous year		6,610,700	5,485,964
Available for allocation		45,323,316	46,150,229
Approved/allocated during the financial year		33,775,884	39,539,529
Reserved for later allocation		11,547,432	6,610,700

BALANCE AS OF 31 DECEMBER

		45,323,316	46,150,229
	Note	2020 DKK	2019 DKK
Total allocated		45,323,316	46,150,229
Assets			
Holiday cottages, Blokhuis and Dronningmølle	12	2,890,511	2,890,511
Furniture, equipment and IT	12	78,250	95,491
CRM system	12	1,306,982	68,174
Tangible fixed assets		4,275,743	3,054,176
Securities, tied	13	117,675,835	114,333,492
Cash and cash equivalents, tied		250,290	379,898
Deposits		215,953	210,947
Financial fixed assets		118,142,078	114,924,337
Total fixed assets		122,417,821	117,978,513
Receivables		1,858,457	3,271,445
Receivable tax on dividends		195,062	105,470
Prepaid expenses and accrued income		37,500	262,500
Deposits with financial institutions		66,614,604	55,955,559
Total current assets		68,705,623	59,594,974
Total fixed assets		191,123,444	177,573,487

BALANCE AS OF 31 DECEMBER

	Note	2020 DKK	2019 DKK
Liabilities			
Nominal capital	14	123,578,925	116,330,619
Tied funds		123,578,925	116,330,619
Reserved for later allocation	15	11,547,432	6,610,700
Result carried forward	16	0	0
Available funds		11,547,432	6,610,700
Total equity		135,126,357	122,941,319
Other debts		1,274,385	1,057,058
Outstanding expenses		528,848	435,753
Approved outstanding allocations		54,193,854	53,139,357
Debts		55,997,087	54,632,168
Total commitments		55,997,087	54,632,168
Total liabilities		191,123,444	177,573,487
Contingent liabilities, security, etc.	17		
Collection accounts	18		
Accounting policies	19		

NOTES

	2020 DKK	2019 DKK
NOTE 1 – PUBLIC FUNDS (PUBLIC ALLOCATION FUNDS AND VAT COMPENSATION)		
VAT compensation	599,757	383,479
Operating subsidy from public allocation funds 2020	1,678,589	1,507,039
	2,278,346	1,890,518
	2020 DKK	2019 DKK
NOTE 2 – COLLECTED PRIVATE FUNDS		
Non-earmarked donations and gifts	7,362,809	6,444,343
Earmarked donations and gifts	6,216,496	1,398,960
Legacies	13,240,838	12,834,372
External collections	1,651,117	1,240,613
	28,471,260	21,918,288
External collections		
Facebook fundraising	719,209	336,245
Betternow	931,908	641,303
Online City Keyword	0	263,065
	1,651,117	1,240,613
	2020 DKK	2019 DKK
NOTE 3 – INCOME FROM EVENTS		
Team Rynkeby	18,163,853	23,112,871
Knæk Cancer	6,000,000	6,000,000
FodboldtrøjeFredag	1,320,054	0
Gribbolden	1,064,107	1,057,796
Sportscar Event	650,000	1,100,000
Danmark Rundt, Team Bodenhoff	615,120	593,198
Støtteforeningen Bingo/Banko	279,094	312,187
Team Ringe	252,000	230,478
GolfRock	220,200	500,000
Eniig ForeningsEl	0	320,090
Grindstedløbet	0	181,491
Fundracers	0	120,000
Kagens Dag	0	63,798
	28,564,428	33,591,909

	2020 DKK	2019 DKK
NOTE 4 – COSTS FROM INCOME-GENERATING ACTIVITIES		
Direct costs, cf. Note 5	7,408,274	6,358,569
Other external costs	938,620	1,047,090
Staff costs, cf. Note 10	2,708,162	2,489,639
	<u>11,055,056</u>	<u>9,895,298</u>

NOTE 5 – RESULT FROM INCOME-GENERATING ACTIVITIES

	Income	Of which legacies reserved for nominal capital	Direct costs	Distributed costs	Result
2020					
Public funds	2,278,346	0	0	0	2,278,346
Collected private funds	28,471,260	7,248,306	5,512,713	1,815,809	13,894,432
Income from events	28,564,428	0	1,895,561	1,830,973	24,837,894
	<u>59,314,034</u>	<u>7,248,306</u>	<u>7,408,274</u>	<u>3,646,782</u>	<u>41,010,672</u>
2019					
Public funds	1,890,518	0	0	0	1,890,518
Collected private funds	21,918,288	6,354,619	5,559,948	1,396,483	8,607,238
Income from events	33,591,909	0	798,621	2,140,246	30,653,042
	<u>57,400,715</u>	<u>6,354,619</u>	<u>6,358,569</u>	<u>3,536,729</u>	<u>41,150,798</u>

NOTE 6 – ADMINISTRATION COSTS

	2020 DKK	2019 DKK
Other external costs	1,482,329	1,634,565
Staff costs, cf. Note 10	1,222,414	1,013,434
	<u>2,704,743</u>	<u>2,647,999</u>

NOTE 7 – FINANCIAL INCOME

	2020 DKK	2019 DKK
Income from tied assets	1,925,759	1,437,277
Realised profit margin on sale of securities	44,612	428,735
Market value adjustment of securities	1,550,893	4,308,655
Interest income	0	469
	<u>3,521,264</u>	<u>6,175,136</u>

NOTE 8 – FINANCIAL COSTS

	2020 DKK	2019 DKK
Market value adjustment of securities	0	0
Realised losses on sale of securities	0	0
Management fees, Danske Bank	62,358	57,416
Value adjustments	9,246	50,370
Index adjustment, frozen holiday allowance	10,304	0
Interest SKAT	8,503	0
Interest costs	213	59
	<u>90,624</u>	<u>107,845</u>

NOTE 9 – COSTS FROM OBJECTIVE-RELATED ACTIVITIES

	Family support	Research	Information activities
2020			
Direct support	433,069	0	10,600
Other external costs	321,188	150,453	95,244
Staff costs, cf. Note 10	1,468,078	700,733	233,578
	<u>2,222,335</u>	<u>851,186</u>	<u>339,422</u>
2019			
Direct support	2,049,037	0	3,306
Other external costs	353,956	130,098	66,215
Staff costs, cf. Note 10	1,617,923	472,583	262,382
	<u>4,020,916</u>	<u>602,681</u>	<u>331,903</u>

	2020 DKK	2019 DKK
NOTE 10 – STAFF COSTS		
Salaries and wages	6,079,001	5,602,036
Pension contributions ATP	28,590	28,969
Other social costs	66,253	58,720
Education, staff and other staff costs	159,121	166,236
	<u>6,332,965</u>	<u>5,855,961</u>
Average number of employees	8,4	8,5
<i>Staff costs are distributed as follows</i>		
Costs from collections	2,708,162	2,489,639
Family support (La Vida, holiday cottages, children and youth)	1,468,078	1,617,923
Research	700,733	472,583
Information activities	233,578	262,382
Administration costs	1,222,414	1,013,434
	<u>6,332,965</u>	<u>5,855,961</u>

No fees have been paid to the Board of Directors, Science Committee, or the volunteers supporting the Foundation.

Staff costs are distributed across respective activities based on assessments of the time spent by individual employees.

NOTE 11 – TAX

The Foundation does not expect to be assessed for tax on the year's result as all collected and allocatable funds are expected to be allocated inside a 5 year period.

No tax has been paid in the financial year other than retained dividend taxes.

NOTE 12 – TANGIBLE FIXED ASSETS

	Holiday cottages Blokhus DKK	Holiday cottage Dronningmølle DKK	Furniture, equipment and IT DKK	CRM system DKK
Purchase sum, 1 January	4,991,809	2,304,667	207,549	68,174
Donations received 1 January	-2,458,050	-2,047,339	0	0
Increase	0	0	21,079	1,357,625
Decrease	0	0	0	0
Purchase sum, 31 December	<u>2,633,183</u>	<u>257,328</u>	<u>228,628</u>	<u>1,425,799</u>
Cumulative depreciation 1 January	0	0	112,058	0
Depreciation for the year	0	0	38,320	118,817
Cumulative depreciation 31 December	0	0	150,378	0
Book value 31 December	<u>2,633,183</u>	<u>257,328</u>	<u>78,250</u>	<u>1,306,982</u>
Public property valuation 1 October 2020	<u>3,950,000</u>	<u>1,400,000</u>		

	2020 DKK	2019 DKK
NOTE 13 – SECURITIES		
Balance 1 January	114,333,492	102,027,188
Increase	7,229,433	14,077,973
Decrease	-5,482,595	-6,509,059
Realised price profit posted under financial income	44,612	428,735
Un-realised price adjustments posted under financial income	1,550,893	4,308,655
Balance 31 December	<u>117,675,835</u>	<u>114,333,492</u>

Securities are measured at market value on the balance sheet date. Daily market value adjustments for the year are included in financial income in the profit and loss account.

	2020 DKK	2019 DKK
NOTE 14 – TIED EQUITY		
<i>Nominal capital</i>		
Nominal capital at financial year start	116,330,619	109,976,000
Nominal capital increase	7,248,306	6,354,619
Nominal capital at financial year end	<u>123,578,925</u>	<u>116,330,619</u>

	2020 DKK	2019 DKK
NOTE 15 – RESERVED FOR LATER ALLOCATION		
Balance 1 January	6,610,700	5,485,964
Applied during the year	-6,610,700	-5,485,964
Reserved during the year	11,547,432	6,610,700
Balance 31 December	11,547,432	6,610,700

	2020 DKK	2019 DKK
NOTE 16 – DISPOSABLE EQUITY		
Balance 1 January	0	0
Profit for the year	38,323,626	39,614,590
Carried from reserved to later allocation	6,610,700	5,485,964
Allocations/grants for the year	-33,775,884	-39,539,529
Refunded and lapsed previous allocations	388,990	1,049,675
Reserved for later allocation	-11,547,432	-6,610,700
Balance 31 December	0	0

NOTE 17 – CONTINGENT LIABILITIES, SECURITY, ETC.

The lease is non-cancellable by the lessee for 3 years and 6 months from 1 January 2019.

The rent obligation, calculated as DKK 957,360, is distributed as follows:

	2020 DKK
1 year	634,546
2-5 years	322,814
More than 5 years	0

NOTE 18 – COLLECTION ACCOUNTS

In 2020, Børnecancerfonden has collected funds by encouraging donations to be made for the Foundation's work via collection boxes and events and via website/donation module, online collection platform, social media, sales/auction, merchandise, mail distribution, text messages, TV, radio, advertising in daily/weekly publications, direct mail, telemarketing, and local collections by volunteers and companies. The funds collected are received via mobile payment solutions and bank transfers.

Børnecancerfonden does not carry out door-to-door collections.

The funds collected are spent on research, information, and direct support for children with cancer and their families.

Børnecancerfonden is approved by Indsamplingsnævnet (permit IN No. 00053).

Børnecancerfonden is approved in accordance with Sections 8A and 12(3) of the Danish Tax Assessment Act, and therefore covered by Section 4 of the Collections Act.

Collections are performed in accordance with the Collections Act No. 511 dated 26 May 2014 and Executive Order No. 160 dated 26 February 2020 and the funds collected are spent on the objectives of the Foundation.

NOTE 19 – ACCOUNTING POLICIES

The annual accounts for Børnecancerfonden are submitted in accordance with the Act on Foundations and Certain Associations provisions on non-commercial charitable foundations and the Articles of Association and the Danish Financial Statements Act provisions for Account Class A with the those adjustments arising from the Foundation's special circumstances and the ISOBRO guidelines for accounts submission by fundraising organisations. The annual accounts are presented on the basis of the same policies as last year.

General note about recognition and measuring

Assets and liabilities

Assets are valuables owned by the Foundation or monies due the Foundation. Monies due the Foundation are typically accounts receivable where the payment will not be received until after the balance sheet date. Monies due the Foundation also consists of binding undertakings regarding subsidies, legacies or gifts received from third parties before the balance sheet date which will only be paid after the balance sheet date. It can also include costs which have been paid before the balance sheet date which relate to the period after the balance sheet date.

Assets are recognised in the balance sheet when it is likely that future financial benefits will accrue to the Foundation and the value of the assets can be reliably measured.

Liabilities are amounts owed by the Foundation to others, e.g. approved allocations, holiday pay allowance, outstanding A-level taxes, etc., and outstanding expenses.

Liabilities are recognised in the balance sheet when the Foundation has a legal or actual obligation and it is likely that future financial benefits will leave the Foundation and the value of the obligation can be reliably measured.

On first recognition, assets and liabilities are measured at cost price. Measuring after first recognition will be carried out as described for each accounting entry below.

Recognition and measuring considers predictable risks and losses which might occur until the presentation of the annual accounts and which can confirm or refute circumstances that existed on the balance sheet date.

Income and costs

Income is amounts which have increased the Foundation's equity, i.e. the value of transactions, events, and the like, which have increased the Foundation's net assets.

Costs is amounts which have been used by the Foundation and therefore have decreased the Foundation's equity, i.e. the value of transactions, events, and the like, which have decreased the Foundation's net assets.

The profit and loss account recognises income as a general rule as it is earned, while costs are recognised by those amounts that relate to the financial year. Recognition is carried out as described for each accounting entry below.

Profit and loss account

Income

Foundation income includes donations in the shape of legacy and gift amounts, collections and the like and income from events.

Legacies and willed gifts

Legacies and willed gifts are recognised when final estate inventory is available and the legacy has been received.

Membership contributions, contributions from foundations and gifts and subsidies

Contributions from foundations, gifts and subsidies are recognised at the time of receipt.

Subsidies and income from event collections

Subsidies from public allocation funds and income from event collections are recognised when the Foundation acquires the right to the amounts.

VAT compensation

VAT compensation income relates to VAT refunds on shared costs from the previous year and is recognised in the profit and loss account at the time of receipt.

Financial entries

Financial entries include interest income and costs, share dividends, realised and unrealised price gains and losses related to tied assets and are recognised at the time of receipt.

Costs applied to income-generating activities.

Costs related to income-generating activities are recognised in the profit and loss account when they are paid. Usual accrual of costs is performed so as to include the relevant financial years. Costs related to income-generating activities include direct and indirect costs and are assigned to the individual activities based on consumption. Costs consist of costs that are a direct consequence of the activities performed and a distribution of shared costs such as salaries, staff costs, and administration costs following an assessment of the employees' time consumption for the individual activities.

Costs from objective-related activities

Costs spent on objective-related activities are recognised in the profit and loss account when paid and include direct and indirect costs for carrying out objective-related activities such as collection, family support, research, information, and administration. Costs consist of costs that are a direct consequence of the activities performed and a distribution of shared costs such as salaries, staff costs, and administration costs following an assessment of the employees' time consumption for the individual activities.

Approved allocations

Approved allocations for Børnecancerfonden's objectives decrease the Foundation's disposable funds during the allocation year. Allocations which have not been paid out on the balance sheet date are recognised as debts under the account entry outstanding allocations.

Taxes

The Foundation's taxable income is calculated as the accounting result less allocations and adjusted for non-taxable income and costs.

The Foundation aims to allocate each year's collected and allocatable funds no later than inside a 5 year period. The Foundation therefore does not expect to have any tax liability.

Securities

Listed securities are valued at official stock market value on the balance sheet date. Realised and un-realised value adjustments are recognised in the profit and loss account.

Furniture, equipment, IT, and fitting out of leased premises

Costs for furniture, equipment, IT, and fitting out of leased premises which present a utility value to the Foundation across a period of several years are depreciated across the utility period as follows:

Office furniture, equipment and IT – 3-5 years

Fitting out of leased premises – 5 years

Holiday cottages

Holiday cottages are recognised in the balance sheet at cost price with a deduction of donations received to purchase the summer cottages and subsequent improvements. The scrap value of the summer cottages is expected to exceed the value recognised in the balance sheet, after which they are not depreciated.

Receivables

Receivables are donations where undertakings have been received before the balance sheet date, but the amount is not received until after the balance sheet date. Receivables are measured at amortised cost price which usually equates to nominal value.

Prepaid expenses and accrued income

Prepaid expenses and accrued income covers costs that have been paid before the balance sheet date, but which relate to the following year.

Reserved for later allocation

Reserved for later allocation decreases the Foundation's disposable fund in the reservation year and are spent on allocation in the following year.

Outstanding allocations

Outstanding allocations include amounts approved but not yet paid.

Other debts

Other debts are outstanding A-level tax, labour market (AM) contributions, ATP, and outstanding holiday allowance.

Key figures

Key figures are calculated in accordance with ISOBRO's recommendations. Key figures presented in the Management Report have been calculated as follows:

Key figures	Calculation formula	Key figures express
Profit margin	Result from income-generating activities/ Income from income-generating activities*100	The net profit ratio shows the share of the funds recognised as income that remains after deduction of directly attributable costs for producing the result
Administration percentage	Administration costs/Income from income-generating activities*100	The administration percentage shows the share of the Foundation's total income that was spent, respectively, on administration etc. and non-distributable costs
Objective percentage	Costs from objective-related activities/ Income from income-generating activities*100	The objective percentage shows the share of the total income that was spent on objective-related activities
Solvency ratio	Equity/total liabilities*100	The solvency ratio expresses the financial strength of the Foundation



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