

kick cancer

**DON'T
SKIP
KIDS**

**ALL YOU NEED TO KNOW
ABOUT 2025 IN LESS
THAN 200 WORDS**

RESEARCH

- 8 FIGHT KIDS CANCER projects for €13.1M
Funding by KickCancer: €2.5M
- 5 BSPHO projects for €350K
- 19 countries supported through our research projects

PATIENTS EMPOWERMENT & ADVOCACY

- 2 additional booklets for My Companion on the verge of completion
- €193K invested in advocacy work to represent the voice of patients in Europe and Belgium

PEOPLE'S POWER

- 4 700 runners who ran or walked 30 000 kilometres to fund European innovative research projects
- 70 000 eclairs devoured during Eclair Day thanks to 500 kicking bakers!
- 246 post-card sized artworks sold at Art Brussels
- 300 publications in the media
- 15 people contributing to KickCancer's success as employees or freelancers and dozens of fantastic volunteers
- The 2 BEST ambassadors of the world!
(in case you don't remember: Angèle & Niels!)

WORD FROM THE KICKER-IN-CHIEF

My dearest Kickers, My Kicking Friends,

2025 marked my first full year without my son Raphaël by my side. Celebrating the New Year was a bittersweet moment: no more suffering or anxiety, but every day that passed increased the distance from my last conversations with him.

To tame the grief, I undertook several personal projects: a small, discreet tattoo; the creation, with an artist friend, of a poetic tombstone; and the preparation of a memory book.

Life can be ironic: at the same time, KickCancer was planning to draft an extension for My Companion for families confronted with the diagnosis of incurable cancer. Working on the booklet had a quasi-therapeutic effect on me, even though its preparation was extremely challenging. Until then, we had always developed our tools for patients with their direct involvement. But because this booklet is aimed at patients and their families at the end of their life journey, it was not possible to involve them — understandably, as these families did not have the mental space to support our work. As a result, we worked primarily

with parents whose children had already passed away. Collecting their testimonials and insights was as enriching as it was heartbreaking, but our first version lacked the touches of light, hope, and joy that families need to navigate that delicate time when their child is still with them, alive, and when every effort is made to ensure that every day still matters.

Fortunately, the rigorous review work of healthcare professionals allowed us to reorient our project. We are now very proud of the final result. While my first wish is that no family ever has to let their child go, I sincerely hope this booklet will help those still facing this hardship.

For lack of a better transition than the hope to cure every child... in the field of research, FIGHT KIDS CANCER became, in 2025, an international non-profit organisation: living proof that this project will endure and continue to grow. KickCancer also launched a new funding opportunity for Belgian paediatric haemato-oncologists. This new grant aims to free up half of their clinical time so they can dedicate more energy to research.

The grant was partly inspired by a study we conducted on the working conditions



of paediatric haemato-oncologists. It confirmed what we suspected: our doctors are deeply passionate about their work and eager to offer their patients the best possible care. Unfortunately, today, this motivation demands an unsustainable personal sacrifice: most doctors dedicate several hours of their free time each week to reading scientific articles and staying up to date. This situation is unsustainable for the long-term quality of care, which should not rely solely on the goodwill of doctors. KickCancer is determined to advocate to change this reality.

Life can be serendipitous: in 2025, our Minister of Health initiated the preparation of a new Cancer Plan. KickCancer did not miss this opportunity and contributed a position paper to ensure that dedicated measures would be adopted to improve the care pathway for children, adolescents, and young adults with cancer. This was also an opportunity to intensify our collaboration with Kom op tegen Kanker and the Foundation against Cancer in Belgium. Thank you to them for their trust and joyful partnership!

Our team also grew significantly in 2025, with the arrival of Arnaud as Kicker-in-Operations, who now oversees

KickCancer's operations alongside me. Nathalie was promoted and took over the supervision of the entire Marketing and Communication team, which includes Annelies and Tille. We also welcomed Amélie, who is in charge of our events, including RUN TO KICK and Eclair Day. Finally, Ward joined the team to split his time between our patient activities, with Alice, and Belgian politics, with Marine.

And what about the start of 2026? A promising beginning to the year, with a fantastic Eclair Day and record sales at Art Brussels! And what to wish for the rest of the year? New projects to support our patients! We do have a few ideas... and we are looking for donors and sponsors eager to help bring them to life!

Thank you for your support. We are more determined than ever to shake up politics and science so that every child and young patient with cancer can be cured faster and thrive forever!

Delphine Heenen
Kicker-in-Chief and Managing Director.



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1. MISSION & VALUES

1.1. OUR MISSION

We want to cure every child with cancer. Find new treatments, improve existing ones, and kick children's cancer to send it far, far away forever and may it never come back!

1.2. NOT SO FUN FACT: Curing cancer is making progress, except for children

35 000 children are diagnosed with paediatric cancer every year in Europe.

35_K

1st

Paediatric cancer is the 1st cause of death by disease for children over 1 year of age.

2/3 survivors suffer from long-term side effects caused by their disease or the treatments.

Learning impairment, amputation, chronic diseases, post-traumatic stress disorders, secondary cancers...

There are 500 000 paediatric cancer survivors in Europe.

2/3

16

There are 16 types of paediatric cancer, and 100 subtypes: each of them is a rare disease.

Innovation is lagging for children:

In 25 years, the cure rate has increased by just 4%.

4%

Only 16 new drugs were approved for kids vs. more than 200 for adults.

60_K

Each year, 60 000 adolescents and young adults (AYA) are diagnosed with cancer in Europe.

They need a treatment journey tailored to their specific age and life stage.

Research and treatment protocols must be developed specifically for the cancers affecting adolescents and young adults.

1.3. WHAT DEFINES US

1.3.1. OUR FOUR KEY CHARACTERISTICS

We like to think of ourselves as independent, collaborative, strategic—and unapologetically European. Naturally, that calls for a few clarifications...

INDEPENDENT

We have no strings attached: KickCancer operates free from any institutional allegiance to research centres. When it comes to selecting research projects, we rely on an independent scientific process to ensure we fund only the most promising ones. No favourites. No shortcuts. Just science.

COLLABORATIVE

We don't believe in silos. That's why we team up with everyone who can help improve outcomes for children, adolescents, and young adults with cancer: hospitals, research labs, pharmaceutical companies, other NGOs (whether they focus on research like us or support families during treatment). And yes, even politics and public institutions—we're not afraid of the word "lobby".

STRATEGIC

Since we work with everyone (see above), we have a clear view of the bigger picture—and the bottlenecks. Our approach isn't just to put patches on a broken system; we want to understand and address the structural barriers that slow down access to better treatments. That includes legal, regulatory, cultural or organisational hurdles. We're in this for the long run—even if the structural changes we fight for might one day make us obsolete. That would be our idea of a happy ending.

EUROPEAN

When you work in rare and ultra-rare diseases like paediatric cancers, we just need Europe (and sometimes the whole world) to reach a sufficient scale. That's why research must go cross-border to gather enough patients and expertise—whether for clinical trials or studies on human samples. KickCancer is one of the very few Belgian NGOs that funds research beyond national borders—and the only one doing so specifically in paediatric oncology.

1.3.2. OUR FOUR PILLARS

To achieve our mission, we have organised our activities around four pillars:

FINANCING RESEARCH (AND FUNDRAISING)

Sorry for stating the obvious: if we want to improve treatments and outcomes for children, adolescents, and young adults with cancer, there aren't a thousand ways to get there—we have to fund research. That means finding generous donors, amazing supporters, and rockstar volunteers to keep the engine running.

ADVOCATING A BETTER LEGAL AND CULTURAL FRAMEWORK

We have our own little Belgian team working to push for change at the national level. And at the European level, we collaborate with—and fund—Childhood Cancer International–Europe. Their two lobbyists are even based in our office, which is conveniently located just a stone's throw from the EU institutions. Strategic? Definitely.

EMPOWERING PATIENTS

Being seriously ill often feels like you're losing control over your life. We create tools and organise trainings to support patients and their families during treatment—helping them regain a sense of control. It's our way of reminding them they're not alone.

RAISING AWARENESS

When we say, “Curing cancer is making progress... except for children”, people usually stop in their tracks. Most have never fathomed this sobering truth—which is why we make sure to say it clearly and often. The more people know, the more they care... and the more they donate or get involved in our advocacy work. We like to call that a virtuous circle.



2. ACTIVITIES' REPORT

2.1. RESEARCH

2.1.1. OUR APPROACH

At KickCancer, we fund research that offers better chances to children with cancer: increased odds to cure, and carefree survival when the treatments are completed.

For us, funding research is also an opportunity to help shape the research landscape by ensuring its long-term sustainability and its relevance to the needs of children and young people with cancer.

2.1.2 FIGHT KIDS CANCER

KickCancer funds innovative research projects across Europe. Given that each type of paediatric cancer is, fortunately, very rare, we focus our support on the most promising research projects with a European scope. This approach ensures adequate patient recruitment for clinical trials and the collection of sufficient cancer samples for fundamental research, such as translational studies.

To identify and support the best projects, we have established a rigorous selection process in collaboration with other European organisations: Imagine for Margo (France), the Kriibskrank Kanner Fondatioun (Luxembourg), CRIS Cancer Foundation (Spain), and KiKa (the Netherlands). Together, we launched the FIGHT KIDS CANCER (FKC) initiative, a European call for research projects.

2025: a great milestone for FIGHT KIDS CANCER

In 2025, FIGHT KIDS CANCER's five members took the plunge by founding an international non-profit organisation under Belgian law, thereby structurally anchoring the programme.

This incorporation marks a major step towards improved governance and greater sustainability for the programme. FIGHT KIDS CANCER's first employee, Ellina, a scientific research coordinator, was hired in October 2025 and works from the KickCancer offices.

FKC's added value in research

FKC is a uniquely conceived programme that offers significant advantages to both researchers and patients:

- **For researchers**, FKC simplifies funding applications thanks to its cross-border nature, which enables pan-European collaboration (unlike other funders, which are purely national), and its annual recurrence, giving researchers time to refine their ideas.
- **For patients**, the programme focuses on their needs by prioritising patient impact over pure scientific challenge and promoting broader goals such as data sharing and quality of life.

Putting unmet needs at the core of FKC's priorities

After three years of existence, the FKC programme noted a concerning underrepresentation of research targeting paediatric cancers with the highest unmet medical needs—specifically, brain tumours and sarcomas.

To address this gap, FKC launched two dedicated calls for proposals focusing exclusively on these critical areas. The first, centred on paediatric brain tumours, concluded in 2024 and resulted in the selection of eight innovative research projects. The second, focusing on sarcomas, was initiated in 2025 and is scheduled for completion in 2026.

Developing a tool to support talent in research

In 2023, we introduced a new funding opportunity to further support the research community: the Innovation Award.

Unlike traditional research grants, which require a detailed budget and a clearly defined research plan, the Innovation Award offers researchers the freedom to explore bold ideas, foster creativity, and pursue genuine innovation with potential clinical impact.

On 14 May 2025, the second Innovation Award worth one million euros, split over the course of 4 years, was granted to Joshua Waterfall (PhD). He is an INSERM researcher at the Institut Curie (Paris).

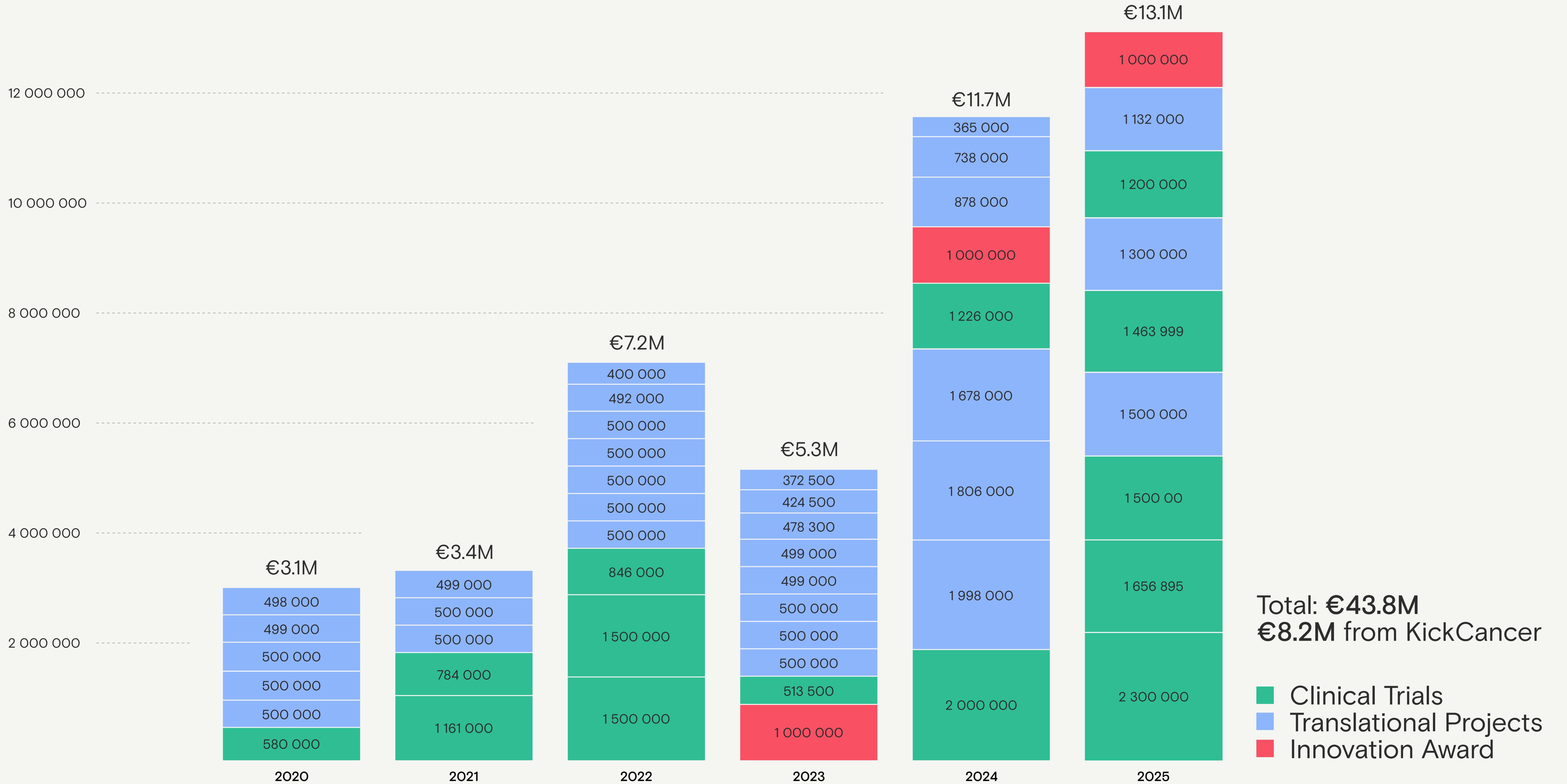
Joshua Waterfall and his team study how the immune system recognises and responds to cancer. They work closely with experts in genetics, immunology, and medicine to develop new tools that help them understand these processes. Starting from real patient cases, their aim is to discover new insights that can quickly lead to better therapies.

End of 2025, a new call for applicants was initiated. The latest winner of the Innovation Award was revealed in May 2026.

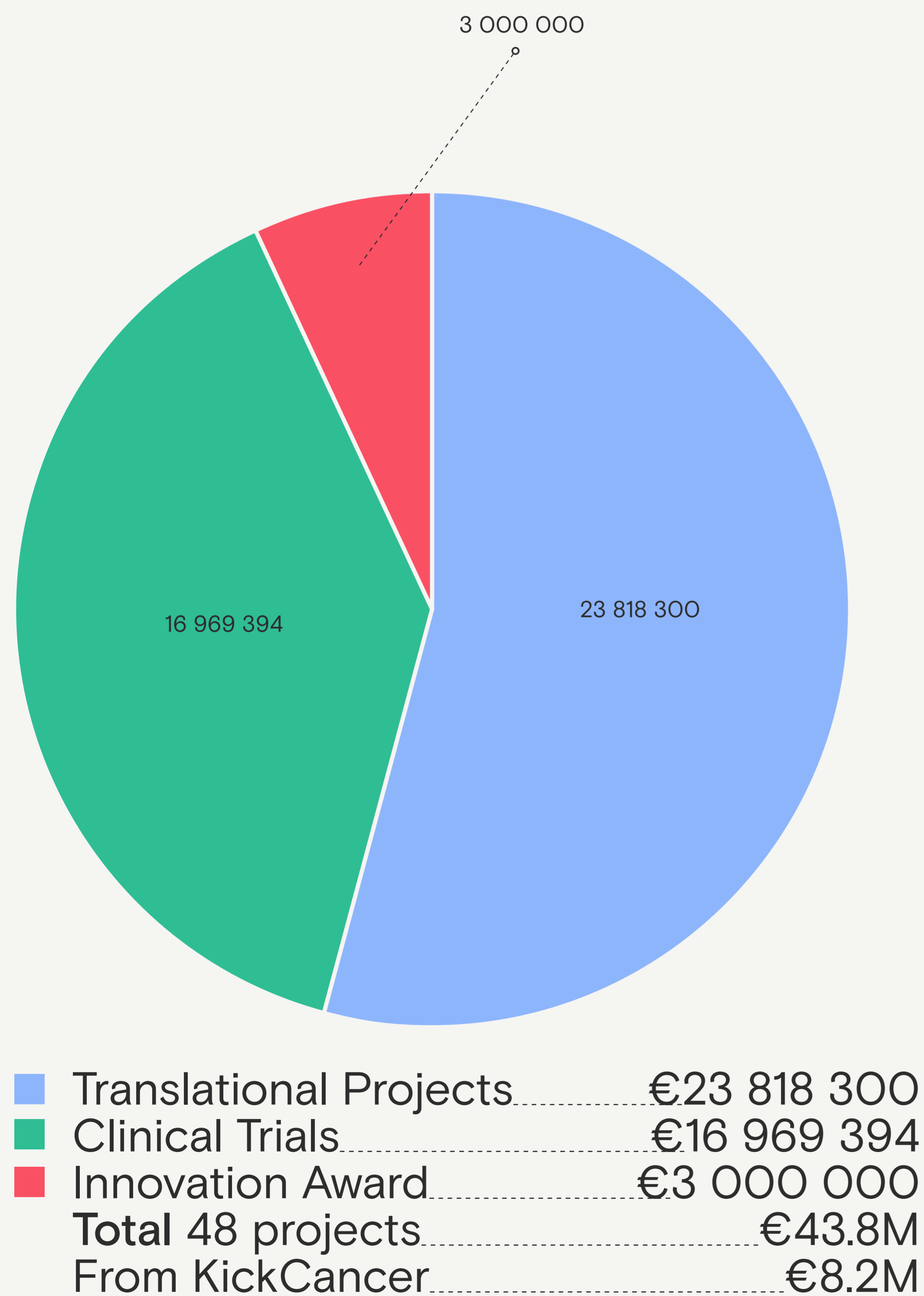


FKC's growth over time.

Between 2020 and 2025, KickCancer has contributed over €8.2 million to the FIGHT KIDS CANCER research projects.

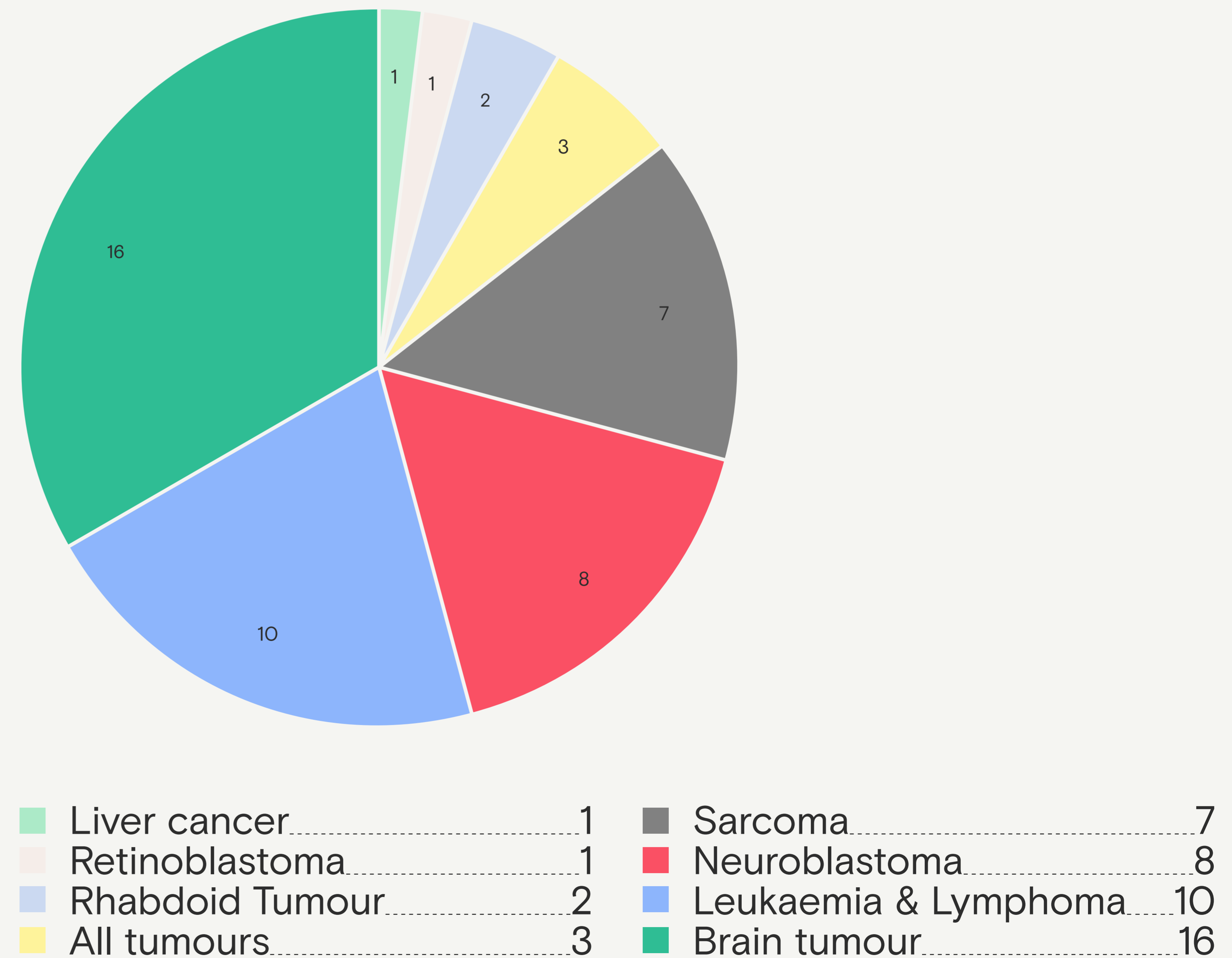


Funding per type of project:



Here are the diseases funded by FIGHT KIDS CANCER since its inception:

Brain tumours are proportionally over-represented in our portfolio of projects due to the brain tumours exclusive call for projects completed in 2024. 2025 was open to all types of cancer again, and 2026 will focus exclusively on sarcomas, the second deadliest type of cancer in young patients.



2.1.3. **BSPHO**

In Belgium, most young patients are treated in the framework of a clinical trial and this as from the diagnosis. These are in most instances late-phase clinical trials.

The clinical trials' protocols are defined at the European level, but the financing of the projects often must be sought by each participating country or site.

In Belgium, the Belgian Society for Paediatric Haemato-Oncology (BSPHO) coordinates and initiates the participation of the Belgian centres in international academic clinical trials. These trials ensure access to the best care for young patients treated in Belgium and a sustained participation of our oncology centres in the European research effort.

Funding the BSPHO's structure

Since 2020, KickCancer has been proudly supporting the BSPHO's effort to bring those crucial clinical trials in Belgium.

Every year, we finance the operational costs of the BSPHO for approximately €130k. This support is in constant evolution to follow inflation.

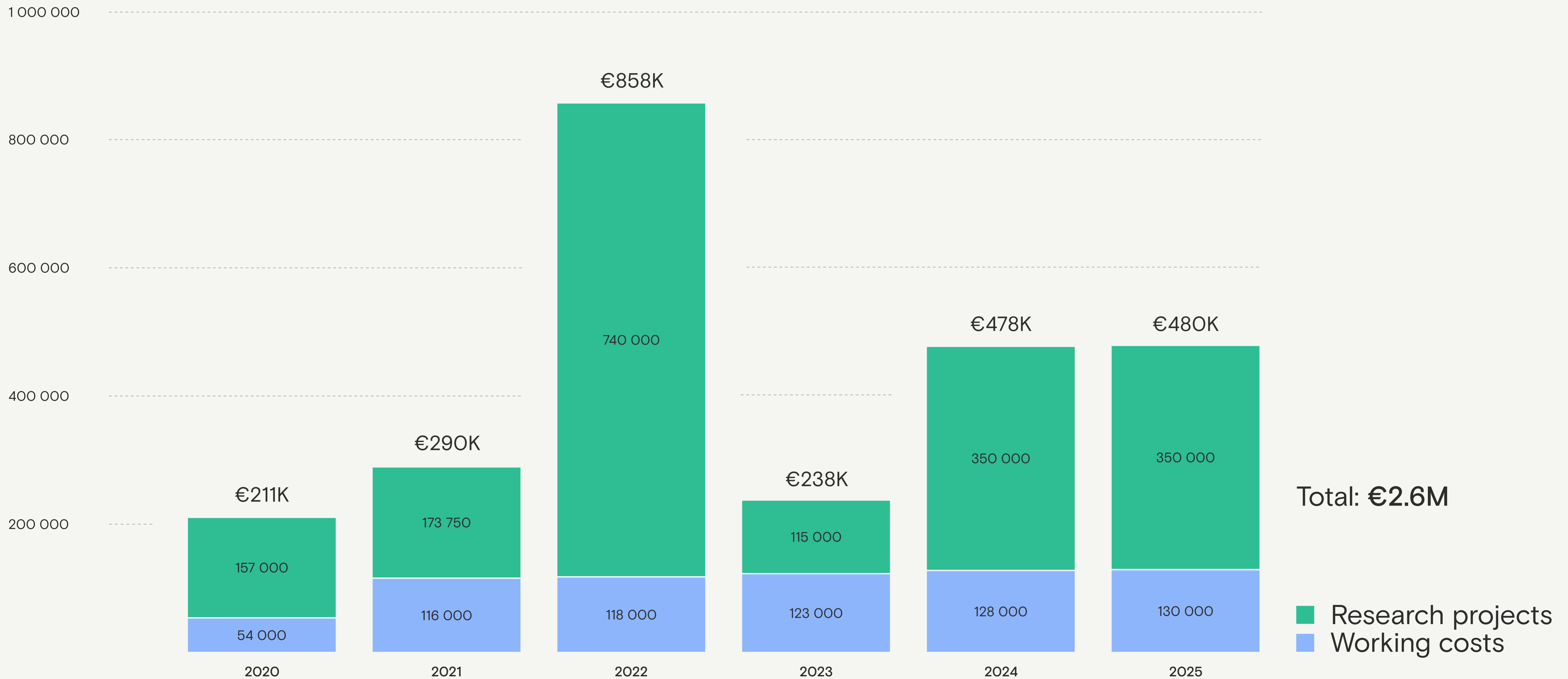
Financing clinical trials

KickCancer finances the clinical projects coordinated by the BSPHO on an annual basis. Given that these projects often span multiple years and their start and end dates can be unpredictable, we have agreed to fund them on a "bucket basis." This means we commit to a fixed annual amount, which can be allocated across several projects listed in our agreement. Additionally, in order to support the BSPHO where funding is most challenging to secure, we also agree to finance smaller components of larger projects that have not received funding from other sources.

Support to the BSPHO in numbers

Our support to the BSPHO has evolved over time; it is likely to stabilise at an amount of €0.5M per year.

Between 2020 and 2024, KickCancer has invested €0.7 million in supporting the BSPHO's operations and over €1.9 million in research projects.



2.1.4. **COLLABORATION WITH FNRS AND FWO**

In 2025, KickCancer signed a collaboration agreement with the Fonds National de la Recherche Scientifique (FNRS) and the Fonds voor Wetenschappelijk Onderzoek (FWO) to establish a new funding opportunity for Belgian paediatric haemato-oncologists. The FNRS and FWO will contribute their expertise for the organisation of an independent selection process.

These grants will free them from 50% of their clinical duties at the bedside of patients to collaborate with their European colleagues on clinical trials and translational projects. These renewable 2-year grants will first be awarded in the summer of 2026 and will take effect in October.

In rare disease areas like paediatric haemato-oncology, enabling doctors to combine clinical and scientific work is crucial for improving both quality of care and clinical expertise.

To ensure continuity of patient care, hospitals receive €70,000 annually to cover the salary of a qualified clinician who will assume the grant holder's clinical duties.

In addition, grant recipients receive an annual €10,000 research stipend to support project-related expenses and travel to conferences or scientific meetings.

These grants are awarded for two years at a time and can be renewed up to four times, provided the grantee's scientific work receives a satisfactory evaluation.

In total, these grants represented a €320,000 commitment from KickCancer in 2025.

2.1.5. THE RESEARCH PROJECTS FUNDED IN 2025

FIGHT KIDS CANCER Projects

CARINA

Develop a CAR-T therapy for acute myeloid leukaemia (AML)

PROGRAMME:	Fight Kids Cancer
TYPE:	Clinical trial
DISEASE:	Acute myeloblastic leukaemia (AML)
LOCATION:	📍UK, IT, ES
AMOUNT:	€2 300 000
START DATE:	2026
DURATION:	2 years

INTER-EWING-1

A clinical trial to improve treatments for children with Ewing Sarcoma and improve our understanding of the disease.

PROGRAMME:	Fight Kids Cancer
TYPE:	Clinical trial
DISEASE:	Ewing Sarcoma
LOCATION:	📍UK, DK, FR, IE, IT, PO, SP, CH
AMOUNT:	€1 463 999
START DATE:	2026
DURATION:	5 years

The CARINA project is the first step toward a clinical trial designed to improve outcomes for children with relapsed Acute Myeloid Leukaemia (AML). Initially, the project will focus on developing a new CAR-T cell treatment that clears the cancer, making a stem cell transplant possible. Unlike traditional CAR-T cells (made from the patient’s own white blood cells), this new therapy will be produced “off the shelf” — a single batch for multiple patients — to save precious time. If this new method works, it can lead to quicker access to treatment, and this could be lifesaving for such an aggressive disease.

INTER-EWING 1 is a clinical trial aimed at improving the survival chances of children and teens with metastatic Ewing sarcoma. It tests a new strategy: adding a new treatment called regorafenib (a form of targeted therapy) right from the moment of diagnosis, without waiting for relapse. The study will also collect biological data to better understand the disease and why some patients respond to treatment and others don’t. And it includes a quality-of-life evaluation to assess how well young patients tolerate this treatment.

GD2-CART01_EU

A clinical trial with CAR-T cells for children with high-risk neuroblastoma in relapse

PROGRAMME: Fight Kids Cancer

TYPE: Clinical trial

DISEASE: Neuroblastoma

LOCATION: IT, FR, DE, IL, NL, ES, SW, CH, UK

AMOUNT: €1 500 000

START DATE: 2026

DURATION: 2 years

GD2-CART01_EU is a phase II clinical trial that aims to develop a new CAR-T cell therapy for children and teenagers with high-risk neuroblastoma. The study builds on a promising phase I trial. It will be rolled out in several centres across Europe with three key goals: improve survival, reduce the toxicity of existing treatments (such as stem cell transplant), and test early use of GD2-CART01 to pave the way for European approval and wider – and thus easier – access for children in Europe.

ACHILLES/HR-NBL2

A clinical trial to test two new treatments for children with neuroblastoma

PROGRAMME: Fight Kids Cancer

TYPE: Clinical trial

DISEASE: Neuroblastoma

LOCATION: FR, AU, DE, EL, IL, IT, NO, PO, SI, SP, SW, CH, UK

AMOUNT: €1 656 895

START DATE: 2026

DURATION: 5 years

The ACHILLES/HR-NBL 2 project is a clinical trial testing two new treatments for children with high-risk neuroblastoma: a combination of chemo and immunotherapy (with Dinutuximab) and a targeted treatment (Lorlatinib) for patients with an “ALK” mutation. The trial aims to improve survival, personalise treatment, and evaluate the cognitive side effects (such as memory and attention issues) in young patients.

INTER-B-NHL 2025

A clinical trial to test a less toxic treatment for children with B-cell non-Hodgkin lymphoma

PROGRAMME :	Fight Kids Cancer
TYPE :	Clinical trial
DISEASE :	B-cell non-Hodgkin lymphoma
LOCATION :	📍FR, BE, CY, HU, IE, IL, NL, PT, UK
AMOUNT :	€1 200 000
START DATE :	2026
DURATION :	5 years

INTER-B-NHL 2025 is a clinical trial aimed at reducing the treatment toxicity for children with B-cell non-Hodgkin lymphoma. The study will test whether some patients can safely receive a lower dose of chemotherapy, which is very aggressive, by replacing it with immunotherapy (rituximab), in order to lessen both short- and long-term side effects while maintaining therapeutic effectiveness. B-cell lymphomas already have high survival rates, but the price is a harsh and toxic treatment. The focus is now on improving quality of life.

CRYSTAL-Immune

Make immunotherapy more efficient to treat leukaemia that spread to the brain

PROGRAMME :	Fight Kids Cancer
TYPE :	Translational Research Project
DISEASE :	Acute lymphoblastic leukaemia (ALL)
LOCATION :	📍UK, DK, FR, IL, NL, SP
AMOUNT :	€1 500 000
START DATE :	2026
DURATION :	4 years

Crystal-Immune is a translational project aimed at improving immunotherapy for children with acute lymphoblastic leukaemia (ALL) that has spread to the cerebrospinal fluid — the protective fluid surrounding the brain. Immunotherapy and CAR-T cells (our white blood cells and our immune defence) have shown strong results against leukaemia, but they struggle to reach the cerebrospinal fluid effectively, which prevents patients from being cured. Crystal-Immune seeks to understand why, and to develop ways to help immunotherapy break through this barrier, so harsh chemotherapy can be replaced with a gentler, more effective treatment.

SIGBMRRI

Discover new therapies for gliomas and ependymomas (brain tumours)

PROGRAMME: Fight Kids Cancer

TYPE: Translational Research Project

DISEASE: Glioma

LOCATION: 📍 UK, IT

AMOUNT: €1 132 000

START DATE: 2026

DURATION: 4 years

SIGBMRRI is a translational research project aiming to improve treatment for gliomas and ependymomas, two types of very aggressive brain tumours in children. By studying the micro-environment that surrounds the tumour, researchers hope to better understand how these cancers resist current therapies. This knowledge will help pave the way for the development of new treatments and boost survival for these young patients.

EurATRT

Improve our understanding of Atypical Teratoid Rhabdoid Tumour (ATRT) in children

PROGRAMME: Fight Kids Cancer

TYPE: Translational Research Project

DISEASE: Rhabdoid Tumour

LOCATION: 📍 DE, FR, NL, UK

AMOUNT: €1 300 000

START DATE: 2026

DURATION: 4 years

Children diagnosed with ATRT (Atypical Teratoid Rhabdoid Tumours) at a very young age have a poor prognosis: only 40% respond to current treatment. Today, we still don't understand why some children respond and others don't. EURATRT is a translational project linked to the largest clinical trial for ATRT to date, giving researchers access to 300 tumour samples. The goal is to better understand the biology of these tumours and adapt treatments to each child. The team combines expertise in paediatric oncology, neuropathology, molecular biology, genomics, and data science. These experts will be working together to: predict treatment response, detect relapse earlier, and explore new therapeutic options. The aim is to personalise treatments and reduce side effects.

BSPHO Projects

In 2025, we funded 5 projects for a total amount of €350 000:

Enhancing Long-Term Care for Childhood Cancer Survivors	Type: Registry project Patients: All Belgian patients since 2006 (registry of clinical and long-term follow-up data)
iNFORM	Type: Diagnosis project (molecular analysis) Patients: Children with refractory or relapsed cancer
HEM-iSmart	Type: Clinical trial Patients: Children with relapsed or refractory leukaemia or lymphoma
LCH IV	Type: Clinical trial Patients: Children with Langerhans Cell Histiocytosis
Forum II	Type: Clinical trial Patients: Children with acute lymphoblastic leukaemia

2.2. ADVOCACY

2.2.1. ADVOCACY IN EUROPE

KickCancer's central role in European advocacy

Thanks to KickCancer's strategic location in Brussels, we are positioned at the heart of European health policymaking.

Delphine, who leads the policy activities of Childhood Cancer International – Europe (CCI Europe), works closely with the two CCI Europe policy employees working from KickCancer's office. Besides, within the KickCancer team, Marine contributes 50% of her time to European policy work.

Keeping childhood cancer on the EU agenda, and budget

In 2025, CCI Europe intensified its advocacy at EU level with one clear objective: ensuring that childhood cancer remains a priority when European institutions define the budget for the years ahead.

The upcoming EU long-term budget – known as the Multiannual Financial Framework (MFF) 2028–2034 – represents a critical juncture: every seven years, the European Union determines how much it will invest across all policy areas, including health. For children with cancer, this process matters enormously because paediatric cancers are part of an under-invested medical field by industry and public funding for research and care is critical. At the European level, we advocate the need for equal access to care, the development of more efficient and kinder treatments specifically developed for children, as well as survivorship care and support.

A joint position paper to anchor our advocacy

To formalise these priorities, CCI Europe and SIOPE (the European organisation representing doctors specialised in childhood cancer) developed a joint position paper setting out the childhood cancer community's expectations for the next EU budget. The document makes the case that targeted, sustained investments at European level can generate significant impact for children with cancer and their families across the continent. This position paper served as the foundation for all subsequent advocacy actions throughout 2025.

Launching the message at the European Parliament

The position paper was officially presented at the Gold September Policy Event held at the European Parliament: “No Child Left Behind: Prioritising Childhood Cancer in the Next EU Budget.” The event brought together policymakers, clinicians, researchers, survivors and patient advocates to make a collective case for long-term EU health funding.

As Head of European Affairs, Delphine represented the patient and family perspective, emphasising that paediatric oncology expertise must be fully integrated into Europe's cancer policy architecture.



Our advocacy work is bearing fruit

At the time of the event, the European Parliament had not yet defined its position on the next EU long-term budget. Since then, we made progress: in early 2026, the Parliament adopted a position that clearly calls for the continuation and reinforcement of the existing European programmes and funds dedicated to healthcare. This is particularly significant as the Commission's initial budget proposal had removed health as a standalone priority, folding it into a broader fund alongside defence, digital and climate policy priorities.

Now, the final word lies with the Council of the European Union, where Member States will negotiate the budget's final shape. This is why, in 2026, we will be focusing our advocacy efforts in the months ahead with the permanent representations of each European Member State.

Regulations on drug development

The EU pharma package: a great achievement for children with cancer

For CCI Europe, 2025 marked a significant milestone in a long-standing advocacy effort. After years of negotiations, the revised EU pharmaceutical legislation — covering medicines for children and rare diseases — reached its final stage, with the last technical details being ironed out ahead of its official adoption in 2026. Critically, the final text secured both of the key measures we had been advocating for:

1. A requirement for pharmaceutical companies to open a clinical trial (a “paediatric investigation plan”) when the mechanism of action of a new adult drug seems relevant for a paediatric cancer type. This provision is aimed at new drugs that are about to reach the market.
2. A new pathway allowing academic research data to be reviewed by the European Medicines Agency and, if validated, used to extend a drug’s official label by imposing an obligation on the company that owns the drug. This procedure improves patients’ access to drugs already on the market.

These are concrete wins for children with cancer across Europe. However, one significant gap remains: **there is still no dedicated framework for first-in-child drug development.** A first-in-child drug can be defined as a treatment specifically designed on the basis of the biology of a paediatric disease from the outset, rather than adapted from adult medicines.

This is a gap we continue to flag with urgency. To ensure all children and young patients can be cured from cancer, they need drugs that are developed specifically based on the biology of their disease. This would simultaneously increase the efficacy of these drugs for each specific disease and reduce their “off target” toxicity.

The Biotech Act: an opportunity, but a complex one

2025 also saw the publication of the first part of the European Biotech Act, a wide-ranging piece of legislation designed to make Europe a more attractive environment for health innovation. The Act is an exceptionally broad file — covering the entire lifecycle of a medicine, from early drug development and clinical trials all the way through to market launch and patient access. Its sheer scope makes it both a significant opportunity and a complex landscape to navigate.

For CCI Europe, the Biotech Act represents an opportunity to push for changes that could directly benefit children with cancer. The cost of developing new treatments remains prohibitively high, and one of our core messages throughout the legislative process is straightforward: wherever (administrative) simplification is possible (which should lead to cost reduction), it should happen, without putting the safety of patients at risk.

Concretely, we are advocating for more favourable rules for paediatric drug development, simplified clinical trial administrative requirements and more flexible design, and clearer frameworks for the use of existing patient data for research purposes. Reducing development costs and removing regulatory barriers are not technical details; they are preconditions to the accelerated development of better treatments for children.

2.2.1. **ADVOCACY IN BELGIUM**

Our Belgian advocacy team

Belgian political topics are handled by our Belgian advocacy team, led by Delphine.

Marine has been involved on most topics since her first day at KickCancer in June 2022. She was recently joined by Ward in November 2025.

National Cancer Plan

In 2025, the Belgian authorities initiated the drafting process of the new National Cancer Plan. Naturally, this was seen by KickCancer as a prime opportunity to ensure that the specificities of paediatric cancer were put under the spotlight and the needs of children with cancer were properly addressed.

The last plan dated from 2008–2010: a time when genomic sequencing was expensive and exceptional, while coordination and collaboration among Belgian hospitals were still in their infancy and the European clinical trial landscape was still unclear. Some scientific findings were also at an early stage, such as the need to properly monitor the long-term side effects of the treatments administered to treat cancer. The system had changed, but the policy framework had not (yet).

Together with the Belgian Society of Paediatric Haemato-Oncology (BSPHO), we drafted a joint position paper to describe the specific needs of children and young people with cancer, from diagnosis to long-term survival, and to propose what would, in our shared view, constitute the best approach to meet those needs.

Our mission to cure every child with cancer (to cure them all) and to offer them a future where they can thrive (by preventing or treating early long-term side effects caused by toxic treatments) is reflected in each of our proposals.

Our paper focuses on a few concrete, high-impact priorities:

- The establishment of a national multidisciplinary oncological consultation (MOC), to ensure that every child benefits from collective expertise from diagnosis,
- the development of a national network of long-term follow-up clinics, to better support survivors and treat late effects,
- and the implementation of a genomic sequencing programme from diagnosis, to enable more targeted, personalised treatments.

Our 12-page paper is naturally much more thorough and covers other topics — if you are burning to read it, you can read it in English [here](#).

These priorities have been presented to the Cabinet of the Minister of Health, and we are now awaiting the publication of a first draft of the plan, expected by summer 2026.

Study on working condition of Belgian paediatric haemato-oncologists

In 2025, KickCancer launched a comprehensive study on the working conditions of Belgian paediatric haemato-oncologists, with the support of the consulting firm Atanor.

Our aims were threefold:

- To understand the working conditions of the doctors caring for children with cancer.
- To explore their career aspirations: Are they satisfied with the status quo, and if not, what changes would they like to see?
- To compare the Belgian situation with that of our neighbouring countries. How are career tracks structured, and what are the different professional profiles in the most successful research centres?

Indeed, if we want to improve care and treatments for children with cancer, research must be at the heart of care. And research is not an activity that doctors should conduct “on the side”, after their clinical hours at the bedside of patients.

Unfortunately, this is precisely what our study highlighted: more than 80% of paediatric haemato-oncologists in Belgium carry out research in their own time, often several hours per week, in addition to an already demanding clinical workload.

In practice, this means that innovation and quality of care still depend heavily on personal commitment, which is not sustainable in the long term. We included the findings from this study in our recommendations for the Belgian National Cancer Plan.

To go one step further and faster, we worked on a concrete solution: in partnership with the FNRS and FWO, we also developed a dedicated grant allowing clinicians to devote up to 50% of their time to research (see [page 25](#)).

Access to clinical trials & innovative treatments outside of Belgium

For many young patients with cancer, especially with a refractory, relapsed or particularly rare disease, the best — and sometimes the only — treatment option may be abroad.

Clinical trials are the standard of care in paediatric oncology, with around 90% of Belgian patients treated within academic studies. But when these trials are not available in Belgium, access becomes complicated because it is not reimbursed, which creates a lot of friction and uncertainty for the concerned families.

Short reminder from 2024 — the problem we want to tackle

Most innovative clinical trials do not open in Belgium — not by choice, but because paediatric cancers are rare and Belgium is a small country with a limited patient population. As a result, these trials are usually only available in neighbouring countries.

When a young Belgian patient needs to travel abroad to participate in a clinical trial, mutual health insurance funds often refuse to issue the “S2” form, which allows for the reimbursement of healthcare received abroad. This refusal is based on the fact that the hospital’s cost estimate includes treatments that NIHDI (RIZIV/INAMI) considers should be funded by the clinical trial itself. In other cases, access to treatment abroad is denied because the proposed therapies — administered outside clinical trials — are considered too innovative or lacking sufficient scientific evidence.

What we asked

We called for easier access to clinical trials and innovative treatments abroad for young Belgian cancer patients, along with the establishment of a clear, transparent and evidence-based reimbursement process, covering both medical and travel expenses.

Access to the best available treatments should neither depend on a child’s country of residence, nor on the success of a crowdfunding campaign.

In 2025, we continued to push this topic forward. Several meetings and exchanges were held with the cabinet to highlight the very concrete barriers families face: administrative complexity, reimbursement challenges, and lack of clear pathways for accessing treatment abroad.

These discussions have led to a constructive step forward: the Cabinet has acknowledged these challenges and is currently working on the development of guidelines to clarify and facilitate the reimbursement of access to academic clinical trials and innovative treatments abroad for all patients with a rare disease. These guidelines are expected by the end of 2026.

It is a great example of the fact that children (with cancer) can lead the way to better care for many patients in Belgium!

Adolescents and Young Adults (AYA) advocacy

In November 2023, a convention was established between the six Belgian university hospitals and the NIHDI (RIZIV/INAMI), allocating dedicated budgets for AYA teams in each reference centre and funding for specialised AYA care training. KickCancer collaborated closely with AYA patients, Kom op Tegen Kanker, and the Foundation Against Cancer to shape and implement this agreement.

Mid-2025, however, the Council of State declared the legal framework of the AYA convention insufficient, leading to its annulment and an abrupt halt to the measures in place.

In response, the cabinet and the NIHDI immediately began developing a new legal framework. Through our continued partnership with Kom op Tegen Kanker and the Foundation Against Cancer, we are actively advocating for a new, more ambitious, patient-centred version of the convention. Together, we coordinate the BelAYA patient group to ensure that patient needs remain at the heart of this process.

We are proud of the dedication and engagement shown by the AYA survivors we work with. Maintaining these close relationships is a priority, so that when new legislation takes shape, genuine patient voices are ready to inform it. In the meantime, we have adopted a bottom-up approach: supporting AYAs in developing their own peer-support initiatives. Two projects have already been selected and will continue to be developed in 2026.



2.3. PATIENTS' EMPOWERMENT

Supporting patients means working hand in hand with those who know the journey best: parents of a child who has had cancer or young cancer survivors who want to be involved.

At KickCancer, we turn their experience into impact for future patients by involving them in advocacy projects, research design, peer-to-peer support, and the creation of new tools to improve care and quality of life.

We support present and future patients by transforming the treatment maze into a smoother journey and by ensuring that research projects and the organisation of care truly meet patients' needs. When advocating for new policies in Europe or Belgium, we also involve patients directly, using live testimonials and surveys to illustrate the real-world impact of the status quo (i.e., the current policies) on their lives.

2.3.1. EMPOWERING THE PATIENTS' VOICE

The voice of young patients and their parents' matters. Patients know firsthand what it feels like to receive a cancer diagnosis. Their experience of the treatment journey gives them unique insight into where we fall short today — and how we can do better.

Our Patient Committee, which has been active for 5 years, brings together patients with varying levels of involvement: some wish to receive specific updates on our patient-related activities, others want to contribute their own experiences, while others follow dedicated training and volunteer for research projects, peer-to-peer support, or the development of tools for future patients.

In 2025, the Patients' Committee welcomed 11 newly trained patient advocates, joining the 59 members already certified. All are committed to contributing to KickCancer's internal and external initiatives, based on their interests and areas of expertise.

Besides, in 2025, a new peer-to-peer simulation-based training module was introduced in collaboration with the SimLabs of the HUB and the PEC. This additional module is specifically designed for expert patients who wish to provide peer support. The first edition, held in French, enabled 7 of our expert patients to further strengthen their practical skills in supporting fellow patients and families through realistic, scenario-based learning.

Last year, the Committee also led and supported several initiatives. Below are a few examples that illustrate their hands-on involvement.

Participation of Belgian patients in European conferences

In 2025, thanks to KickCancer, six expert patients attended two conferences jointly organised by Childhood Cancer International Europe (CCI-E) in Budapest and Childhood Cancer International (CCI), in Amsterdam. CCI and CCI-E are umbrella organisations for patient organisations from, respectively, around the world and Europe.

During the conferences, they had the opportunity to attend sessions on various European and international initiatives for children, adolescents, and young adults with cancer. Their participation inspired them to join European working groups organised by theme or topic, and allowed them to connect with other European parents, survivors, and healthcare professionals. One of our patient advocates, Sabine Verschueren, even took the stage to speak about the parents' perspective on physical activity during the treatment journey. This active involvement strengthens the Belgian patient perspective at the European and international levels.



Launch of a Schoolkit to support students with cancer in school

In 2025, KickCancer pursued the development of a new toolkit for schools. This project aims to help schools better support students with cancer, maintain connections during treatment, and ease their return to class.

Thanks to funding from De Warmste Week, the project kicked off with two focus groups and the involvement of seven expert patients. A multidisciplinary steering committee of 26 professionals, ranging from teachers, school staff, hospital school teams, social workers to psychologists, was also formed to co-develop the content. The toolkit will be finalised in 2026.



MY COMPANION Support kit

MY COMPANION is a practical toolbox created by patients for patients to help families navigate the cancer storm by providing accessible medical information, organisational tools, and practical tips from diagnosis through treatment.

Creation of two additional booklets to the MY COMPANION toolkit: one for babies and one for children with incurable cancer

In 2025, KickCancer launched the development of two new extensions to the MY COMPANION toolkit, tailored to the distinct needs of two underserved patient groups: babies, and children who can no longer be cured of cancer.

My Little Companion, the baby extension, was designed to interpret and address the complex needs of the youngest patients, those unable to articulate what they need or feel, ensuring they receive the support they deserve. Developed through patient focus groups, it united patient experts and healthcare professionals to create a resource that reflects the realities faced by families of the smallest patients.

The extension for incurable patients, titled *Finding Hope, Comfort, and Joy in Uncertain Times*, was created to guide families through one of life's most challenging chapters: navigating a diagnosis of incurable disease. It is grounded in in-depth interviews with patient experts and desktop research, supplemented by input from healthcare professionals.

Both extensions were completed in early 2026 and will be distributed in hospitals after the summer 2026.

Evaluation of the real-world use and relevance of MY COMPANION Support kit

In 2025, KickCancer launched a collaboration with the Catholic University of Louvain to evaluate the use and relevance of the “MY COMPANION – Support kit” for children with cancer and their families across paediatric haemato-oncology services in Belgium. The study will first assess how the toolkit is disseminated and used in clinical practice. It will then explore the needs and satisfaction of children, parents, and healthcare professionals, and gather suggestions for improvement, with the aim to further improve and strengthen the next developments and editions of the toolkit.

In 2025, the project focused on preparing the study and developing questionnaires, with a first phase dedicated to healthcare professionals to assess dissemination, use, and satisfaction. In 2026, the study will expand to children and parents, with a specific focus on families' experiences and needs.

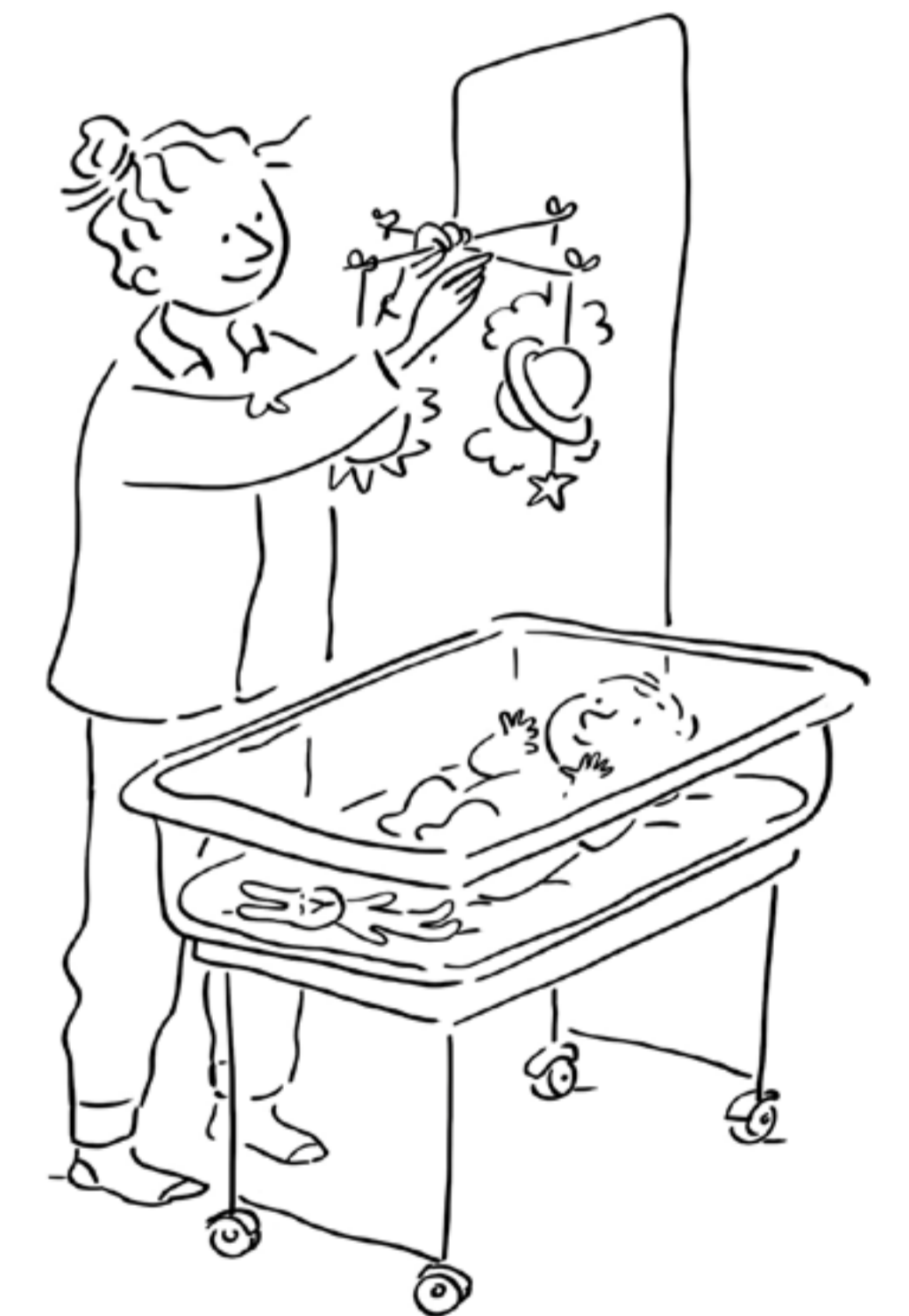
No one understands the daily challenges of caring for a baby with cancer better than parents who have walked this path. Here you'll find tips on feeding, sleep, care, and development – practical ideas other families have found helpful. These are not rules to follow but suggestions to inspire you. Every baby is unique, so use what works for you and leave the rest. And remember: small changes can make a big difference to your baby's comfort and your peace of mind.

Making the hospital a friendlier place

Longer hospital stays

16 When days stretch into weeks, comfort and connection matter even more. Small rituals, decorations, and moments of play can make the room feel less clinical and more like your baby's own safe corner.

- **Connect with other parents.** If you manage to leave your baby's room from time to time, it can be uplifting to meet other parents. Sharing experiences can bring support, recognition, and practical tips. You can ask staff whether other parents of babies are open to talking.
- **Personalise the room.** Decorate the room to make it more child-friendly. Soft toys (if allowed under hospital hygiene rules), drawings or removable stickers on the wall, charms or baby toys on the IV stand, or a lamp with warm light can create a familiar atmosphere – these small touches can really help.





3. AWARENESS – EVENTS AND FUNDRAISING

3.1. INTERNATIONAL CHILDHOOD CANCER DAY

Equal access to treatment should not depend on a family's ability to raise funds.

Every year, between World Cancer Day (February 4th) and International Childhood Cancer Day (February 15th), we raise awareness on some harsh realities. In 2025, we spoke about the Belgian families that are forced to raise hundreds of thousands of euros to access innovative treatments in a neighbouring European country.

Together with concerned families, we brought this issue to the European Parliament and to the Belgian policymakers. Our message was clear: sharing your child's cancer story (including the medical details!) should never be a mandatory step in a child's cancer journey towards a promising cure. Fundraising should not be required to access proper care.

In February 2025, KickCancer called for structural solutions: hospital invoices relating to clinical trials and innovative treatments abroad must be reimbursed for children with cancer in Belgium when their doctors recommend those trials or treatments.

This message resonated widely, with nine major national media articles.

We are now working constructively with the Belgian government towards the set-up of a long-term solution that will benefit all patients with a rare disease.



3.2. ECLAIR DAY

Every March we use a magic formula to turn Belgium into the land of eclairs! Eclair Day celebrated its 5th birthday with the help of over 500 participating bakeries in every corner of the country and our chocolate-famous godfather Pierre Marcolini.

Many incredible biscuit and food brands joined our «Sweet Coalition» campaign (thanks for this very cool idea by Air Brussels) and called out to eat eclairs instead of cookies on March 15th.

We are very grateful for the generosity of all the warm-hearted bakers who donated their craftsmanship, time and ingredients. A record edition? Yes, with 70 000 eclairs sold and a total fundraising of 200 000 euros! On top of that, we reached many people and created public awareness about childhood cancer.

Good news, you can already pencil the next edition in your agenda on 13 March 2027.



© Ralfagram



3.3. ART BRUSSELS

In 2025, the third edition of The KickCancer Collection became a well-established part of Art Brussels.

We were incredibly grateful to more than 80 galleries and 200 artists whose generosity and talent brought our collection to life. Zoë Gray came on board as the first-ever curator of our collection.

The fun twist? At KickCancer's booth all artworks remain anonymous until they are sold for a flat rate of €400.

Thanks to the support of artists, galleries, team Art Brussels and art collectors, this edition raised €98,400.

This is what **Small Art with a Big Heart** means!



3.4. RUN TO KICK

On 28 September 2025, KickCancer organised RUN TO KICK, its family charity race in Bois de la Cambre in Brussels. A total of 4,700 runners gathered at the starting line, to run (or walk) 2, 5 or 10 km. More than 31,000 people donated to support the fundraising of these incredible kickers.

A wonderful new record!

Our ambition to cure every child with cancer? Always sky-high. On D-day, we broke our existing record, with €2,258,356 on the meter. By the end of October, we reached over €2,330,000. Imagine how happy, excited and proud we were!

100% of the funds raised were invested in 8 innovative FIGHT KIDS CANCER research projects.

RUN TO KICK is a day filled with positive, light and moving moments. It offers a sheer dose of hope and solidarity to families who are affected by childhood cancer.

The full-day programme includes a warm-up, the run, great animation for kids, games, food trucks, bars and a KickCancer Shop. The cherry on the cake was the NRJ concert!

The event generated media coverage across 80 articles, helping raise awareness about childhood cancer along the running tracks.

Are you ready to RUN TO KICK?

Join us on Sunday 27 September 2026. We are prepared to welcome 5 000 dedicated runners to accelerate research and push innovation for children with cancer.

Register now (it only takes 2 minutes):
runtokick.be





© Vincent Duterne

“Iedereen kwam afgepeigerd met een grote glimlach over de streep. Onderzoek is zo broodnodig dat we zeker terugkomen.”

“Notre fils a eu une leucémie rare et est en rémission, mais cela n’empêche qu’il y a encore tellement d’enfants et leurs familles qui ont besoin d’aide.”



© Ivaylo Kenarov

“The moments on the podium, the results and the concert were, for me, the emotional highlight of the day.”



© Vincent Duterne

“Het gevoel dat je kinderen en families een hart onder de riem kan steken en een steentje bijdraagt!”



© Ivaylo Kenarov

“C’était juste génial, super familial, sans pression de chrono. Un vrai moment de partage en famille et entre amis.”



© Nicolas Poirier

“The warm atmosphere, enthusiasm and dedication of everyone gave us great comfort. It reminded us that we are not alone in our grief.”



© Vincent Duterne

3.5. AMBASSADORS

When we say: “Very talented singers and top entertainers, born and raised in Belgium”, “With a heart of gold, beating for the kids”, who comes to mind? Angèle and Niels!

We have had the privilege to count on their support for many years. In 2025 Angèle and Niels proudly continued to embrace their roles as KickCancer ambassadors.

Thank you for running with us, for visiting young patients, generating incredible buzz about our biggest fundraising events, and for encouraging everyone to join in!



© Yves Bourgeois



© Xavier Lejeune

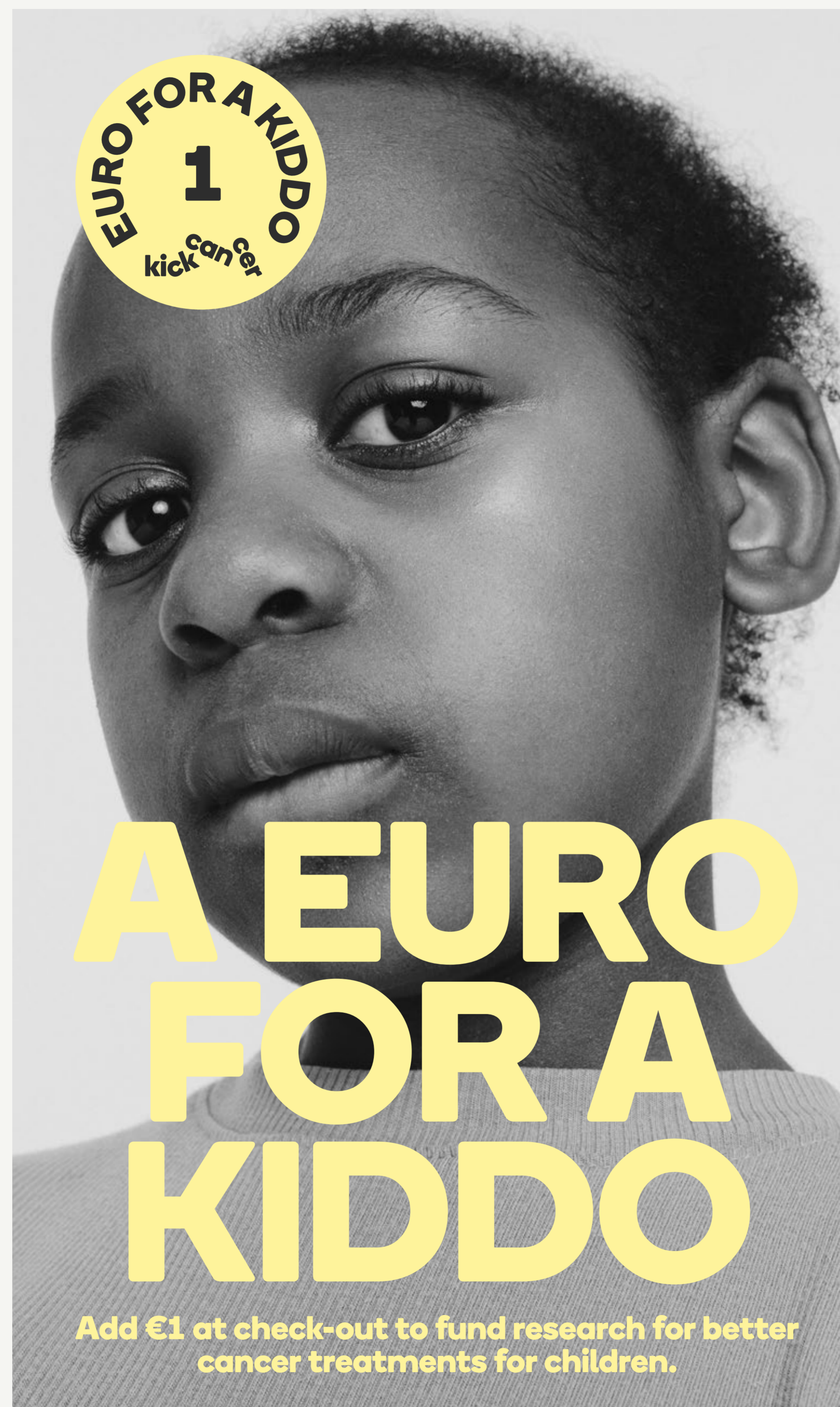
3.6. OUR COLLABS

3.6.1. ADYEN

Between September and December, our incredible collaboration with payment platform Adyen went live once again. Under the slogan “1 euro for a kiddo”, customers could support KickCancer’s work with just one extra click on the payment terminal.

People who took a trip to Plopsaland, bought self-care products at Aroma-Zone, outfits at Buissonnière, delicious cookies at Maison Dandoy and world-famous chocolates at Pierre Marcolini contributed generously. The increased visibility of our foundation in their stores was a bonus we truly loved!

A special thank you to our incredible retail partners, and to Adyen, who matched the donations again. Together, we proved that many small donations can quickly add up to something big: more than €60,000 raised for children with cancer. Ready to do it all again in autumn 2026?



3.6.2. DELHAIZE — SUPERPLUS, SUPERKICK!

In 2025, we continued our partnership with Delhaize as a charity featured in the SuperPlus loyalty programme. Through the app and delhaize.be, customers can easily convert their points into donations to KickCancer.

Starting from just 50 points (€0.50), every contribution helps fund better treatments for children with cancer.

We are deeply grateful to Delhaize for giving KickCancer a structural place within the SuperPlus ecosystem, and to all customers who chose to support us.

Together, these small acts of generosity raised more than €15,000 for KickCancer. Next time you shop at Delhaize, why not turn a few SuperPlus points into better treatments and more hope for children with cancer?

3.6.3. MAJOR SPONSORS

KickCancer is fortunate to rely on the continued commitment of outstanding sponsors, who deserve a heartfelt thank you.

A special word of gratitude goes to our long-term partner, the **National Lottery**, for championing our awareness campaigns throughout the year.

Together with **Delhaize**, the National Lottery also sponsors the organisational costs of RUN TO KICK. Thanks to their contribution and the support of our other sponsors, we can guarantee that 100% of all donations raised by runners go directly to the selected **FIGHT KIDS CANCER PROJECTS**. On top of that, they add extra flair to the event village with lounge chairs and a selection of (comforting and healthy) snacks.

Radio station **NRJ Belgique** also earns a big shout-out for turning up the volume with a live concert full of energy and feel-good vibes, featuring their artists: with Helena, Mentissa, Berre, Puggy and Linh.



© Gaëlle Usai



© Nicolas Poirier



© Gaëlle Usai

3.7. YOUR CONTRIBUTION

There are many ways to support KickCancer, and we are thrilled to see people organising their own fundraising initiatives to support our mission.

Our supporters threw festive parties and celebrated special moments in favour of KickCancer. Thank you: newlyweds, adorable newborns, and b-day bashers!

There were some truly brilliant fundraising initiatives and crazy sporting challenges: from swimming across the Channel, to celebrating a 60th wedding anniversary, to cycling team Shifting Gear Strategica, launching an exclusive KickCancer cycling jersey to raise funds and awareness for our foundation, or even completing the Diagonale des Fous, a 175 km ultra-trail race on Réunion Island. And just so you know: we'd love to welcome more spaghetti soirées in the future too.

On a sadder note, but still incredibly meaningful, many people chose to honour the memory of a loved one by requesting donations for KickCancer. We feel privileged and honoured to be associated with these people.

Thank you to everyone who kicked by our side during these special moments.

- 149 events
- €290k fundraised





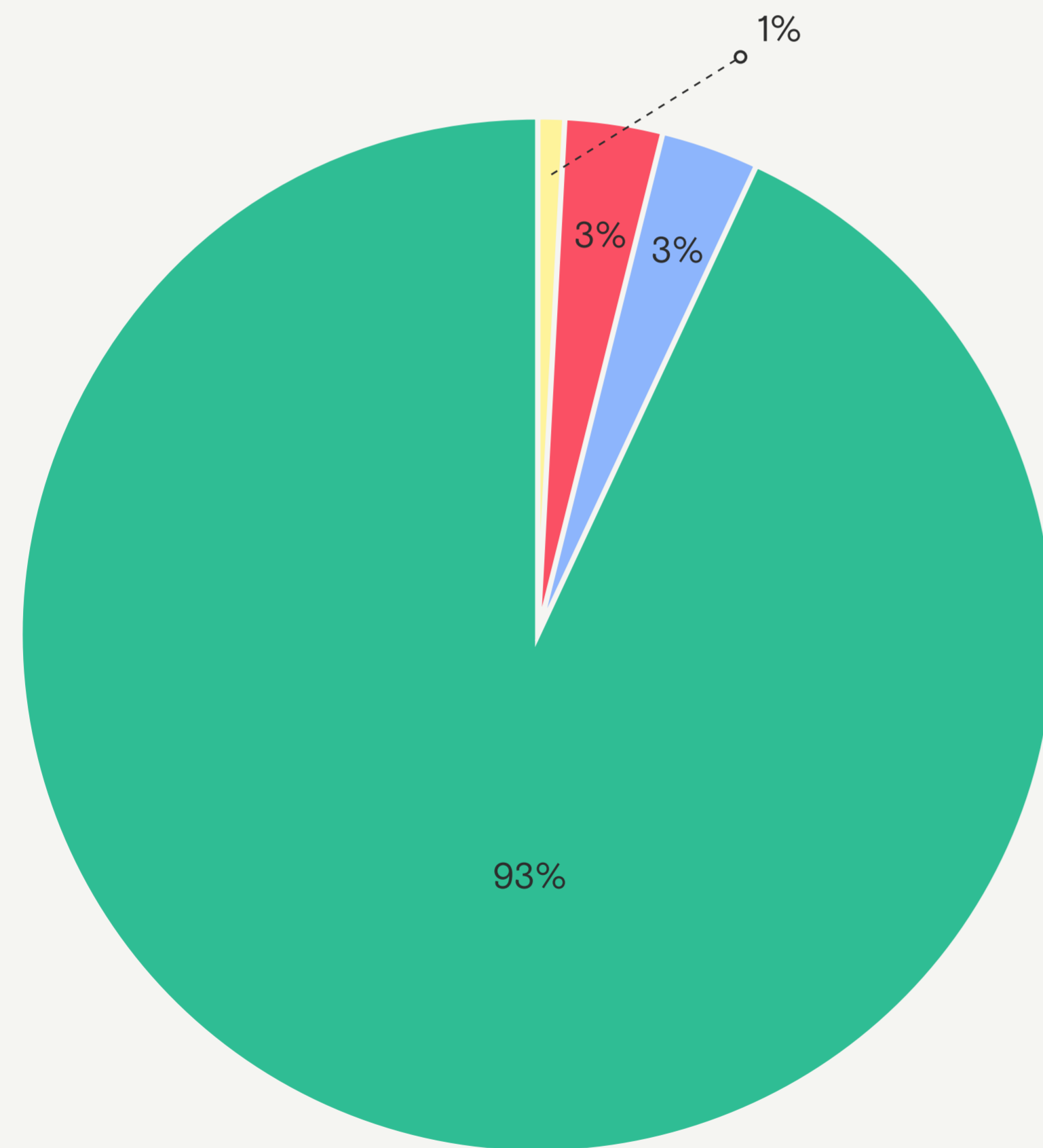
4. FINANCIAL REPORT

4.1. SOURCES OF FUNDS

4.1.1. GENERAL OVERVIEW

Total 2024 – KickCancer + Friends of the KickCancer Foundation Fund (FRB) **€4 177 252**

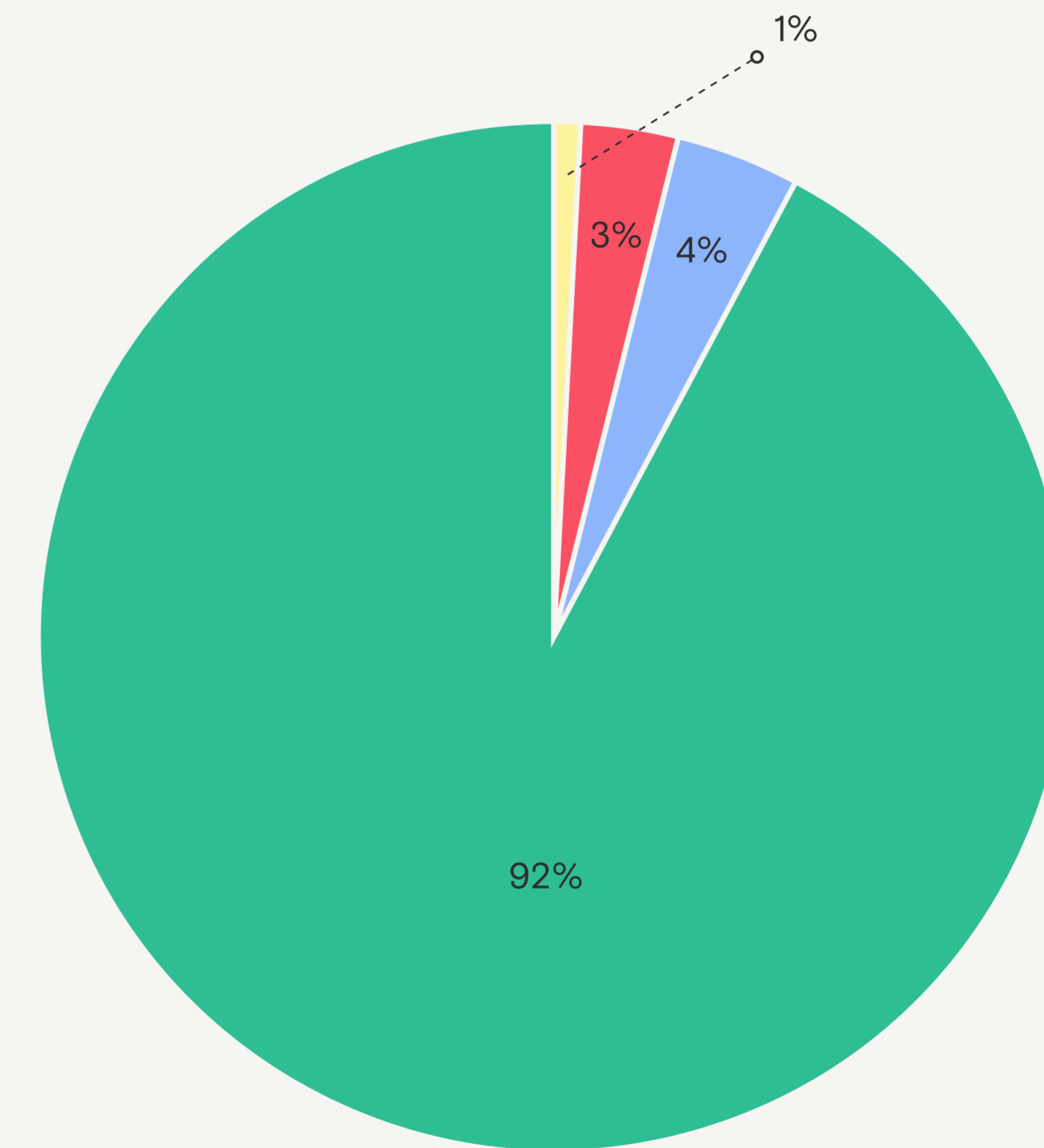
Total 2024 – KickCancer BNB Accounts (incl. Reassignment from FRB) **€3 482 708**



■ Registrations	1%
■ Sponsoring	3%
■ Sales	3%
■ Gifts	93%

Total 2025 – KickCancer + Friends of the KickCancer Foundation Fund (FRB) **€4 333 196**

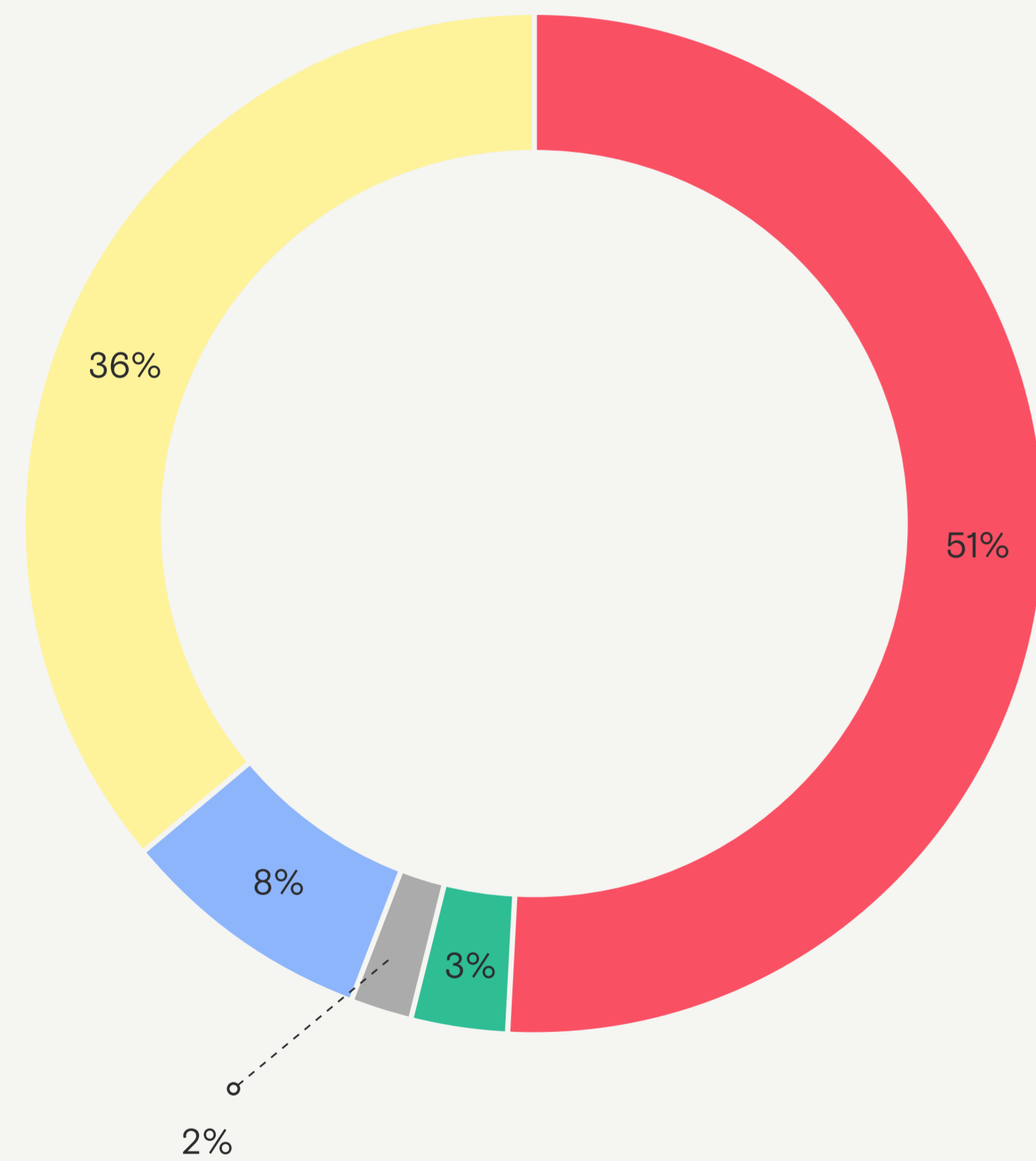
Total 2025 – KickCancer BNB Accounts (incl. Reassignment from FRB) **€4 879 710**



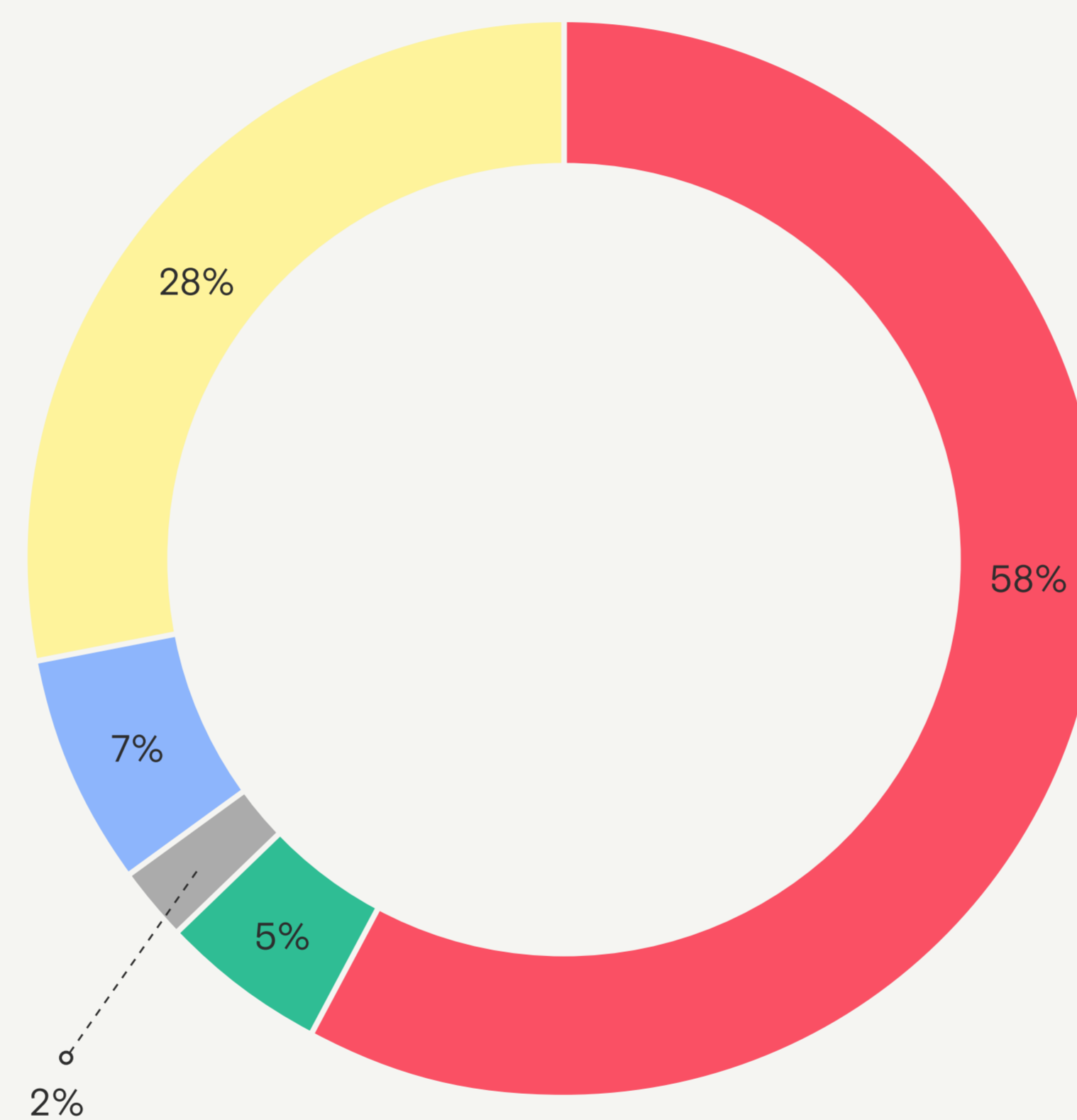
■ Registrations	1%
■ Sponsoring	3%
■ Sales	4%
■ Gifts	92%

4.1.2. FOCUS ON EVENTS

2024



2025



■ RUN TO KICK	51%
■ Eclair Day	3%
■ Art Brussels	2%
■ Events organized by our fans	8%
■ Spontaneous donations	36%

■ RUN TO KICK	58%
■ Eclair Day	5%
■ Art Brussels	2%
■ Events organized by our fans	7%
■ Spontaneous donations	28%

Most donations to KickCancer are received through the “Friends of the KickCancer Foundation Fund”, which is hosted by the King Baudouin Foundation (FRB). The King Baudouin Foundation issues tax certificates to our donors.

At the start of 2024, we received substantial donations earmarked for funding the My Companion and Schoolkit projects. In accordance with the matching accounting principle, the unused portion of these donations has been carried forward to 2025.

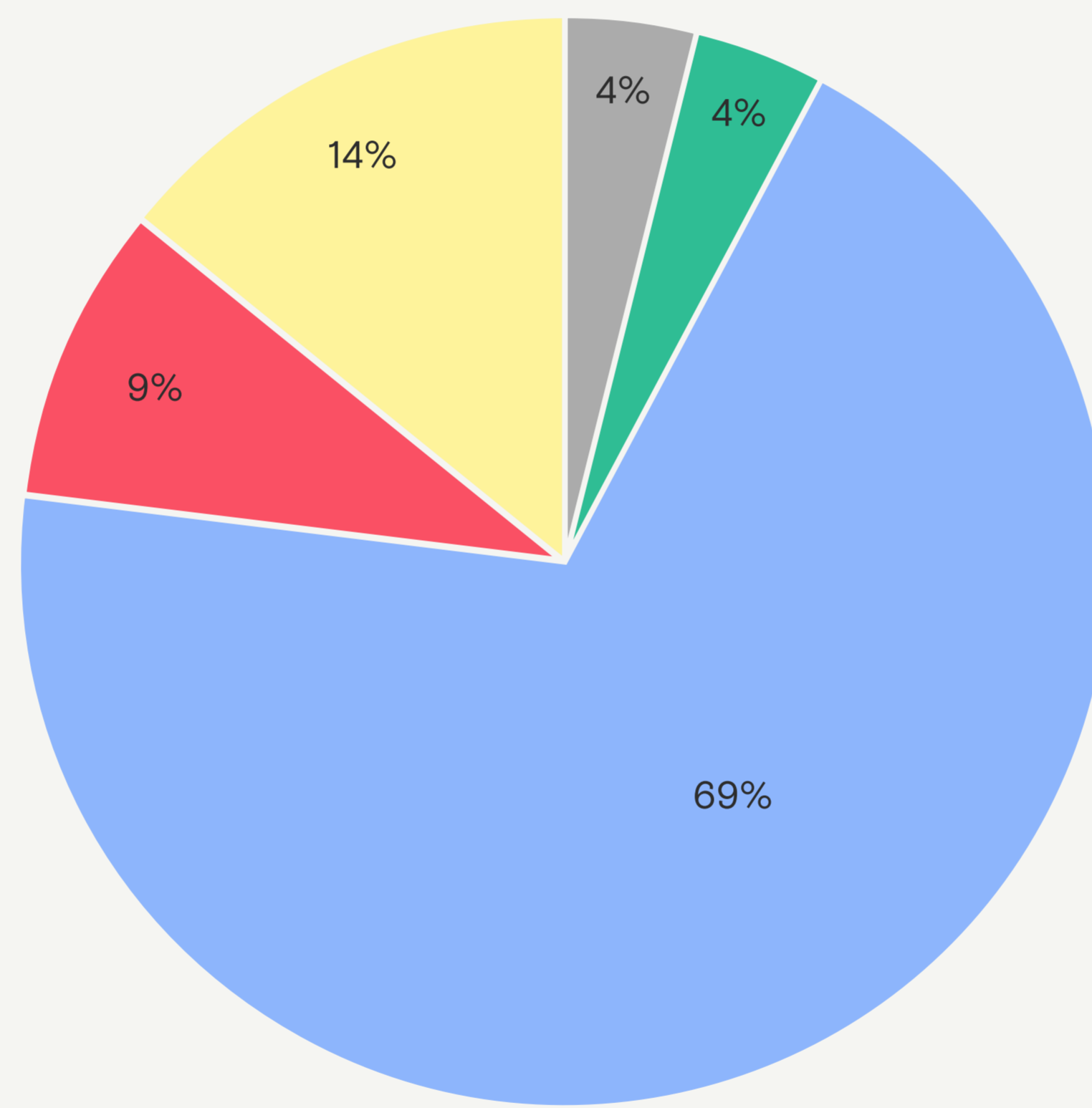
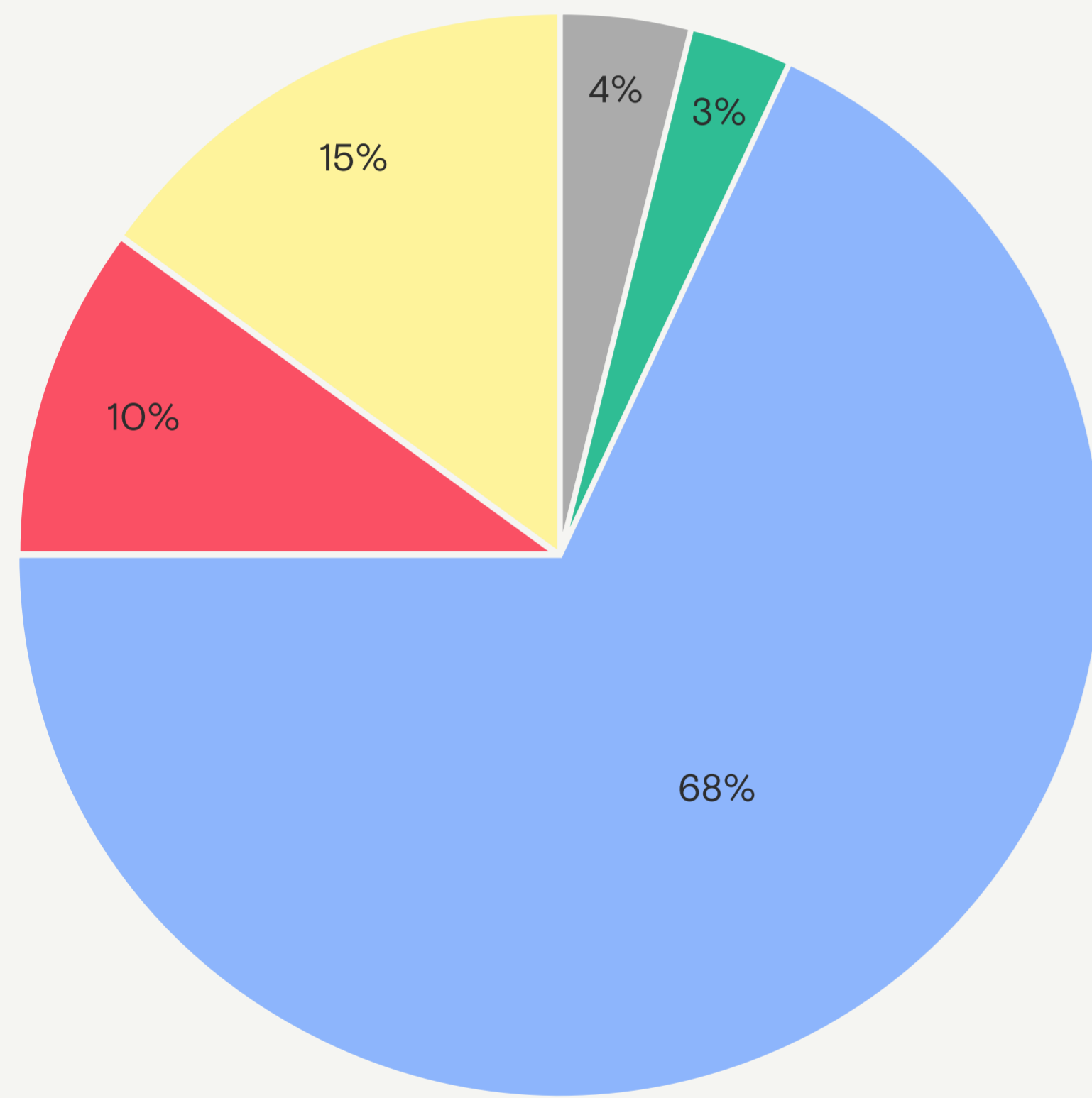
4.2. USAGE OF FUNDS

4.2.1. GENERAL OVERVIEW

Total 2024.....**€3 471 521**

Total 2025.....**€4 908 413**

KickCancer’s work is structured around four pillars to achieve its mission: financing research, advocacy, patient empowerment and raising awareness. More than 85% of our expenditure goes towards KickCancer’s mission. Our administrative and operational costs account for less than 15% of our total expenditure.



█ Advocacy.....	4%
█ Patients Empowerment.....	3%
█ Research Projects.....	68%
█ Awareness.....	10%
█ Administrative & Operational costs.....	15%

█ Advocacy.....	4%
█ Patients Empowerment.....	4%
█ Research Projects.....	69%
█ Awareness.....	9%
█ Administrative & Operational costs.....	14%

5. KICKCANCER TEAM

5.1. KICKING TEAM

5.1.1. PERMANENT TEAM

The permanent team consists of 10 people, Delphine and nine other kickers with superpowers.



From left to right:

Tille Geerkens
Kicker-in-Digital

Nathalie De Clercq
Kicker-in-Marketing

Laura Grisez
Kicker-in-Administration

Alice Gerbaux
Kicker-in-Empowerment

Annelies Boddez
Kicker-in-Communication

Delphine Heenen
Kicker-in-Chief

Amélie Geubel
Kicker-in-Projects

Ward Wuyts
Kicker-in-Empowerment

Arnaud Van der Putten
Chief-Kicker-in-Operations

Marine Gouders
Kicker-in-Advocacy

5.1.2. FREELANCERS

Grégoire Vanderheyden



Justyna Gajko Berckmans



5.2. BOARD OF DIRECTORS

5.2.1. FOUNDERS & FAMILY REPRESENTATIVES



From left to right:

Delphine Heenen
Managing Director and Founder

Gilles Dal
Director and Founder

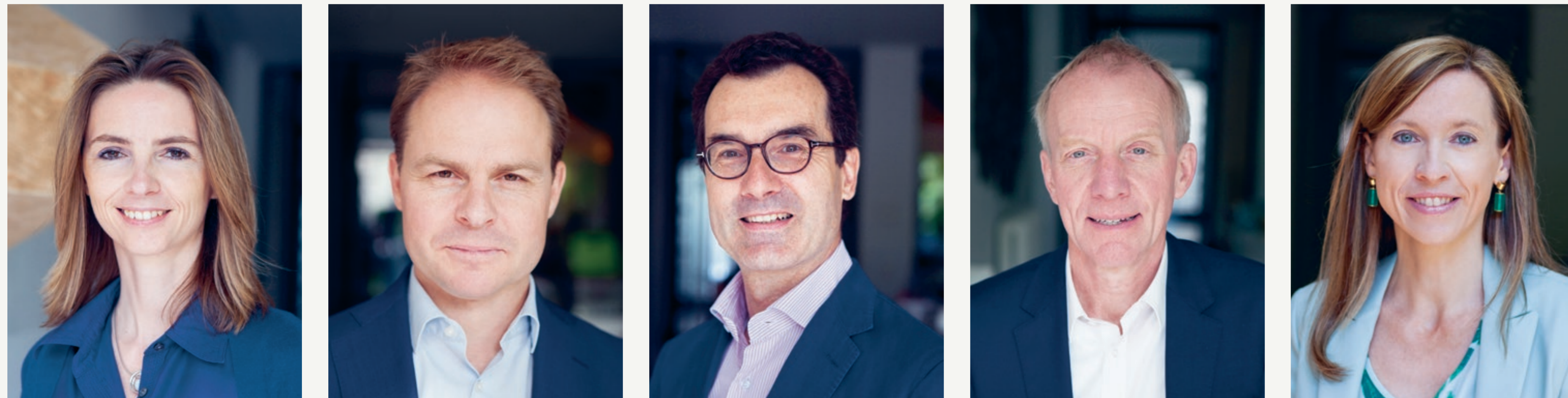
Jean-Charles van den Branden
Director and Founder

Marc Dal
Director and Founder

Céline Ghins
Director

Hélène d'Udekem d'Acoz
Director

5.2.2. PROFESSIONAL DIRECTORS



From left to right:

Deborah Janssens
Lawyer partner at Freshfields
Bruckhaus Deringer

Christophe De Vusser
Director and CEO at Bain & Company

Frédéric Rouvez
Founder of Exki

Jo Van Biesbroeck
Director at Telenet, SFI (Lux) and Matexi

An Winters
Senior Client partner at Korn Ferry

5.3. EACH AND EVERY ONE OF YOU!



Thank you to our fantastic donors, our kicking fundraisers, our sweet volunteers, and each and every one of you who kicked by our side.



**LET'S KICK
TOGETHER FOR
KIDS WITH CANCER:
DONATE NOW AND
FUND RESEARCH OR
AMPLIFY OUR VOICE
ON SOCIAL MEDIA.**

TO MAKE A DONATION

You can make an [online donation](#) or you can make a donation via bank transfer.

King Baudouin Foundation — KickCancer Fund
BE10 0000 0000 0404
Communication: 016/1960/00070

Any donation of €40 or more, made in one or several payments over the course of one tax year, is tax deductible up to 30% in Belgium.

The Foundation accepts legacies and dual legacies (Brussels & Wallonia) and can help you put them in place.

Contact us: info@kickcancer.org
www.kickcancer.org

RECURRING DONATIONS

It is possible to support KickCancer in the long run. All you have to do is make a recurring donation through your online banking platform or app.

KickCancer loves long-term supporters: they offer us the comfort of a long-term perspective. We can count on their support without spending a minute on fundraising or a dime on marketing—it is the safest way to make sure that we focus on our core mission: cure every child with cancer.

If you donate €40 or more over the course of one tax year, you will receive a tax certificate that will entitle you to a tax saving of 30% of the amount you donated (e.g for €40 donated, the final cost is only €28).

Start your monthly donation on KickCancer's webpage in two clicks: [here](#). Or use our banking coordinates to set up a recurring donation:

Beneficiary: King Baudouin Foundation
Bank account: BE10 0000 0000 0404
BIC: GEBABEBB
Communication: 016/1960/00070

KickCancer Public Interest Foundation
50 avenue des Arts 1000 Brussels

Contact
info@kickcancer.org
www.kickcancer.org

kick cancer

**JOIN
THE
FIGHT.**