THE MISSION of St. Jude Children’s Research Hospital® is to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment. Consistent with the vision of our founder, Danny Thomas, no child is denied treatment based on race, religion or a family’s ability to pay.

ALSAC — American Lebanese Syrian Associated Charities — is the fundraising and awareness organization for St. Jude. ALSAC is dedicated solely to raising the funds and awareness necessary to operate and maintain St. Jude, now and in the future.

Eli’s mom was in total disbelief. As a healthcare professional, she couldn’t believe what she saw in her son’s X-ray—the bone in her son’s leg appeared to be dissolving. Diagnosed with bone cancer, Eli was referred to St. Jude for world-class care and treatment. “They told us as long as we are here, we are covered,” said Eli’s mom. “In between his regular checkups at St. Jude, Eli likes solving math problems, and he wants to be an astronaut when he grows up.”
On February 24, when Russia began its invasion of Ukraine, some families found themselves fighting a war on two fronts — bombs and bullets splitting the air and a sudden stop to lifesaving cancer treatment for their children.

Within hours, the call came in: Could St. Jude help?

What happened next was an extraordinary effort on the parts of healthcare institutions and foundations from around the world. With the help of St. Jude Global and its partners, more than 1,000 children were ensured a continuance of cancer treatment.

A month after the start of the invasion, eight such patients and 21 family members arrived at St. Jude Children’s Research Hospital in Memphis.

In Ukraine, doctors had moved patients to damp hospital basements without the ability to power necessary medical equipment. Huddled beneath exposed pipes and peeling paint, they slept side by side in makeshift beds on the floors.

“One of your kids may die because of cancer,” said Olga Kudinenko, founder of Tabletochki Foundation in Ukraine. “And other parts of your family may die because of the war. So, I cannot imagine how hard (it is) for those families in hospitals to be separated right now — to fight for their lives on two fronts.”

Because of years of networking and build-up, St. Jude, the only World Health Organization Collaborating Centre for Childhood Cancer, was in a unique position when that initial call came. A command center was quickly set up and the unified effort to evacuate and place children

Left: After a 5,200-mile journey from Ukraine, childhood cancer patients are greeted by St. Jude and ALSAC personnel in Memphis.
with cancer in oncology clinics throughout Europe and North America became known as SAFER Ukraine. It all began with Tabletochki. But Olga was out of the country, on vacation with her family. And her colleague, Svitlana Pugach, had left home with only a backpack, passport and a pair of t-shirts when the bombing started. She spent more than a week sleeping on a basement floor, going days without seeing daylight. And yet, this foundation, which supplies medicine not available through public resources to 21 oncology units throughout Ukraine, treating 500 children with cancer each month, began coordinating the delivery of extension cords, batteries, lights and food to hospitals. These provisions might get them through a day or two, but she knew real safety could only be found outside of Ukraine.

The long-established partnerships that make up St. Jude Global—more than 200 institutions in 65 countries—worked toward one end: Poland. And safety. The linchpin in the SAFER Ukraine effort, a 5,000-mile chain that wrapped its way from Kyiv, Ukraine, throughout Europe and North America, was a vacant 190-room hotel in Poland, newly named the Unicorn Marian Wilemski Clinic. It was operated by the two employees of St. Jude Global partner Herosi Foundation. The English translation of Herosi is telling—Heroes. Malgorzata Dutkiewicz and Karolina Bauer worked around the clock armed, much like Olga Karolina Bauer worked around the clock armed, much like Olga, with only cell phones and contacts list, began coordinating the delivery of extension cords, batteries, lights and food to the Unicorn Center to better aid the effort.

And her colleague, Svitlana Pugach, had left home with only a backpack, passport and a pair of t-shirts when the bombing started. She spent more than a week sleeping on a basement floor, going days without seeing daylight.

The patients ranged in age from 9 months to 9 years old. They and their 10 family members followed the links of chain from uncertainty of hundreds of critically ill children from the border of Poland to their makeshift clinic-command center-transportation hub in Bocheniec.

“The more patients arrived, the less space and place we had in our Polish clinics,” Malgorzata said. “So, thanks to (the) Global Alliance and St. Jude Global, and the connections and the openness and the willingness of other European clinics we were able to very quickly find support in western Europe.” Jared Isaacman, founder of St. Jude partner Shift4Payments and commander of the Inspiration4 and Polaris Dawn space missions benefiting St. Jude, personally delivered donated SpaceX Starlink communications equipment and medical supplies to the Unicorn Center to better support the effort.

The English translation of Herosi is telling—Heroes. Malgorzata Dutkiewicz and Karolina Bauer worked around the clock armed, much like Olga, with only cell phones and an urgent sense of purpose to coordinate the safe passage of hundreds of critically ill children from the border of Poland to their makeshift clinic-command center-transportation hub in Bocheniec.

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After triage, Ukrainian families were sent to waiting oncology centers with capacity for new patients in Moldova, Germany, Italy, Spain, United Kingdom, the Netherlands, Canada and the U.S.

Among the team waiting at Memphis International Airport for the U.S. Government-operated medical transport aircraft was Yuri Yanishevski, an IT Director with ALSAC, the fundraising and awareness organization for St. Jude. He and his wife had immigrated from Ukraine to the U.S. in 1991 and would act as translator. For most, it was their first time on a plane, this 5,200-mile intercontinental trip and, Yuri said, “Their faces lit up as they heard me speak in the language of their homeland.”

The patients ranged in age from 9 months to 9 years old. They and their 10 family members followed the links of chain from uncertainty of hundreds of critically ill children from the border of Poland to their makeshift clinic-command center-transportation hub in Bocheniec.

“The biggest thing is the trust they are placing in us to literally pass their patients over into this system and then trust that they would be well taken care of, as if they were our patients,” said Asya Agulnik, M.D., MPH, Director of the Global Critical Care Program for St. Jude Global. “I think that’s a big thing. It’s a big step to say, ‘We can no longer take care of these patients locally,’ and to ask for help, especially in a time of crisis like this.”

Finding cures. Saving children.® 7

Their faces lit up as they heard me speak in the language of their homeland.

— Yuri Yanishevski

By the end of the week, she and the others were visited by First Lady Jill Biden, who also toured labs and spoke to an audience of St. Jude and ALSAC staff and former patients. “You offer healing and hope, care and community, a place of refuge for those facing the worst,” she said.

One week after the first arrival, a second group of four patients—ages 6 to 17 years old—and 11 family members followed the links of chain from uncertainty to arrive in Memphis on a plane chartered by St. Jude.

“Like this.”

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Left: At St. Jude Children’s Research Hospital, Ukrainian patients are registered and assessed by doctors and caregivers before checking into patient family housing on campus.
Genetic variants linked to heart health in African American childhood cancer survivors

Scientists at St. Jude identified genetic variants in childhood cancer survivors of African ancestry that increase their risk of treatment-related heart problems. Cardiomyopathy occurs at significantly higher rates in survivors of childhood cancer than the general population. However, research into the effect of genetic variants on patients’ health among racial and ethnic groups is lacking, often because of the rarity of patient data. The findings have implications for how the health of these survivors is monitored.

December 2020 | Cancer Research

Discovery offers potential for stripping tumors of T cell protection

Immunologists at St. Jude have discovered that tumors use a unique mechanism to switch on regulatory T cells to protect themselves from attack by the immune system. Surprisingly, the mechanism does not affect regulatory T cell function outside the tumor and may therefore limit the immune-associated toxicities of targeting regulatory T cells. The finding offers the promise of drug treatment to selectively shut down regulatory T cells in a tumor, rendering the tumor vulnerable to cancer immunotherapies that activate the immune system to kill the tumor.

February 2021 | Nature

Risk-directed childhood leukemia treatment takes a step forward

Comprehensive genomic analyses have helped researchers identify more than 20 subtypes of acute lymphoblastic leukemia based on the genetic mutations that drive the disease. Research led by St. Jude scientists showed that combining these data with leukemia response measurements improves prediction of relapse risk.

April 2021 | Blood Cancer Discovery

Structure of enzyme that causes Parkinson’s promises pathways to new drugs

Structural biologists at St. Jude have determined the detailed structure of an enzyme whose mutated forms are known to cause Parkinson’s disease. The achievement opens a research pathway to develop new drugs that can specifically target the aberrant form of a protein enzyme called LRRK2.

June 2021 | Cell

Inherited genetic variant influences response to leukemia treatment for some children

Scientists at St. Jude Children’s Research Hospital are investigating the inherited genetics of childhood leukemia and how particular gene variations can affect treatment outcomes. The research showed that an inherited variation in the GATA3 gene strongly influences early response to chemotherapy and is linked to relapse in children with acute lymphoblastic leukemia.

September 2020 | Journal of the National Cancer Institute

St. Jude recognized as clinical care center for rare von Hippel-Lindau syndrome

St. Jude Children’s Research Hospital has been designated as a von Hippel-Lindau Clinical Care Center by the VHL Alliance. Von Hippel-Lindau (VHL) syndrome is a rare genetic condition that can cause tumors in areas of the body that contain blood vessels, including the brain, spinal cord, eye and inner ear. These tumors can be benign or cancerous and can cause serious complications, such as blindness, hearing loss and even loss of life. St. Jude is the first and only VHL Alliance-recognized Clinical Care Center dedicated solely to children.

September 2020

Researchers mine data and connect the dots about processes driving neuroblastoma

St. Jude researchers led a study using insight from a comprehensive genomic analysis of neuroblastoma to learn about the process driving one of the most common childhood solid tumors. The findings revealed possible approaches for developing precision medicines to improve patient outcomes.

October 2020 | Nature Communications

Metabolic signaling plays a crucial role in regulating specialized T cells

Effector regulatory T cells (eTreg cells) are a specialized subset of white blood cells that keep the immune system in check. St. Jude scientists have revealed the metabolic signaling mechanisms that regulate function of eTreg cells. The work may aid efforts to better understand and treat inflammatory diseases.

November 2020 | Cell Metabolism

St. Jude shares the breakthroughs it makes, and every child saved at St. Jude means doctors and scientists worldwide can use that knowledge to save thousands more children.

St. Jude Children’s Research Hospital

Metafora featured here by St. Jude

Maelin-Kate was diagnosed with a rare blood disease at age 5, but her mom says, “Every day, she finds a reason why it’s the best day ever.” View more of Maelin-Kate’s story at stjude.org/meet-maelin-kate

Art featured here by St. Jude

patient Maelin-Kate
A therapy developed at St. Jude Children’s Research Hospital has increased survival rates by more than 20 percentage points for children with high-risk neuroblastoma. The treatment includes a novel monoclonal antibody manufactured on the St. Jude campus.

Neuroblastoma is a cancer of immature nerve cells in the sympathetic nervous system. Survival rates for the high-risk form of neuroblastoma had been at 51 percent for a decade. But the chemoimmunotherapy developed in the labs and clinics at St. Jude bumped three-year survival to 74 percent. That’s encouraging news for the roughly 700 children diagnosed with neuroblastoma each year in the U.S., many of them under 5 years old.

“This is really exciting for me as an oncologist,” said Sara M. Federico, M.D., a St. Jude faculty member and senior author of the study. “When I came to St. Jude to do my fellowship... if a new patient came in with high-risk neuroblastoma and they asked what the cure rate was, the answer was about 30 percent, and that of course was unacceptable.”

“By the time my fellowship ended (in 2011) it was 51 percent, but here we are 10 years after my fellowship and we are seeing a big jump, where we have a three-year event-free survival rate of 74 percent. It’s remarkable,” she said.

The study findings were published in the Journal of Clinical Oncology.

“I have never seen results like this in high-risk patients,” said Wayne Furman, M.D., a St. Jude faculty member who led the study and has cared for patients with neuroblastoma for more than 30 years. “This is the best result published to date for patients with high-risk neuroblastoma, period.”

The chemoimmunotherapy described in the study could become standard treatment for patients with high-risk disease. Furman said, if the findings are confirmed in a larger, multi-center clinical trial.

Neuroblastoma commonly grows on young adrenal glands over the kidneys, dodging recognition by the immune system and growing unchecked. But the monoclonal antibody manufactured on the St. Jude campus and used in a clinical trial serving 64 patients was designed to seek out an antigen called GD2 found on neuroblastoma cells.

The antibody binds to GD2 and flags neuroblastoma cells so the immune system can find and destroy them.

Treatment for neuroblastoma is grueling with high-dose chemotherapy, radiation, surgery and bone marrow transplants—and even that’s not enough to wipe it out for patients with a high-risk form that has spread. But the new monoclonal antibody therapy given at the beginning and end of treatment along with other medicines is showing hopeful improvement for these patients.

This therapy could also show promise in treatment of osteosarcoma, Ewing sarcoma and in adult malignancies like melanoma and certain lung cancers, whose cells also present with GD2.

The encouraging results of the trials remind Federico of a picture she saw of a neuroblastoma patient of hers, Slater.

“It’s one of him standing next to his big brother on a street in front of their Florida home watching the Inspiration4 space mission launch into orbit. Three years ago, Slater had been too weak to walk when he and his family first sought help from St. Jude in 2018 after he was diagnosed with Stage IV neuroblastoma. And three years later, there he was, standing strong and dreaming of space travel after receiving the monoclonal antibody treatment Federico and her colleagues had been developing and studying.

“What is the limit? There are no limits. Just seeing him standing in the street watching a cancer survivor blast off into space. It just shows you there are no limits to what we can achieve,” Federico said. “That photo just sums up my motivation.”

St. Jude patient Slater watches the Inspiration4 launch.

After a referral to St. Jude, Aspen’s family traveled to the United States for the first time, where she received life-saving treatment. “It changed my perspective about life. There is so much kindness in the world. It’s inspiring in a way that it challenges us, the recipients of this kindness, to give back,” says Aspen’s mother. Learn more about Aspen’s journey at stjude.org/meet-aspen.
Tina Marshall was put on the path to service by parents who went into the community to give back with their eight children in tow. Service was already part of her life when a chance meeting with a grieving father at St. Jude Children’s Research Hospital truly connected her to the mission.

“He began to speak about the difference that St. Jude had made in his life,” she said. “One of the things he said to us was St. Jude and the staff of St. Jude had made it the most memorable experience for him and his family and his child.”

This is the kind of deeply personal touchstone so many supporters have with the St. Jude mission. For Marshall, it was a connection like no other. To this day she can summon it, lean on it for inspiration and strength.

“We were in the hallway crying with him. It was heartbreaking. I believe he just needed to talk with someone, and we were there. We heard his story, we encouraged him, we cried with him. That was the most memorable moment for me.”

She took that inspiration back to Sayreville, New Jersey, where she helps coordinate St. Jude Sunday of Hope programs across the state. Sunday of Hope is a weeks-long program raising awareness among congregations and earmarking a specific Sunday when parishioners are given the opportunity to donate. Marshall sat on the National Advisory Board of the Sunday of Hope Program and has been Volunteer Coordinator for the New York and New Jersey region. In working with churches throughout New Jersey, she has helped raise more than $500,000.

“The secret to the success,” Tina shares with volunteers and coordinators, “is understanding the faith-based sector. It is a sector that is very personable, very friendly and very giving.”

Nationwide, the Sunday of Hope program has united more than 600 congregations behind the St. Jude mission since 2008, raising millions for the cause of finding cures and saving children.

St. Jude was built upon the ideal behind the Parable of the Good Samaritan: “to love and care for our neighbor, regardless of color or creed.”

Marshall, raised to give back, has spent a lifetime in the service of her neighbors, finding them in church pews and fellowship halls. He was in the hallway of St. Jude that day, looking for comfort and a sympathetic ear. Through it all, her heart has been filled to overflowing, and she’s poured it back into her community where hope, faith and healing have bloomed.
FY21 ALSAC/St. Jude Boards of Directors and Governors

The members of the ALSAC/St. Jude Boards of Directors and Governors are volunteers who serve without compensation. They come from across the country to support the lifesaving work of St. Jude, and many represent the second and third generations of their families to serve on the Boards. An honorary body of emeritus members recognizes the distinguished service on the Boards by those unable to continue to actively participate.

ALSAC Board of Directors

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Chief Governance Officer/Corporate Secretary

LeAnn Tigrett
(Non-elected member)

Epsilon Sigma Alpha Representative

LeAnn Wray
(Non-elected member)

St. Jude National Outreach Director

Marlo Thomas

St. Jude National Outreach Director

Marlo Thomas

In Memoriam

Joseph G. Cory, Ph.D.
George M. Maloof
David B. Nimer

For the current list of officers and members of the ALSAC/St. Jude Boards of Directors and Governors, please visit stjude.org.
When Eduardo was only 6 months old, his belly became noticeably swollen. Eduardo’s parents took him to his local pediatrician in Dominican Republic, who performed an X-ray that revealed a mass the size of a pineapple. Eduardo’s family was devastated.

“My baby was very sick. He was refusing to eat and he stopped moving his arms and legs,” said his mom. “There just seemed to be no hope.” Eduardo and his family were referred to St. Jude Children’s Research Hospital where he was diagnosed with liver cancer. Eduardo’s treatment plan included surgery to remove the mass and chemotherapy.

“Eduardo’s outcome. “St. Jude is a piece of heaven on earth. It’s great to come to St. Jude and feel among family,” said Eduardo’s mom.
## Financial Highlights

**Years ended June 30 (in thousands)**

### Revenues

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<thead>
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<th>2021</th>
<th>2020</th>
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<tr>
<td>Total Support</td>
<td>2,073,494</td>
<td>1,786,051</td>
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<tr>
<td>Net Patient Service Revenue (Insurance Recoveries)</td>
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<td>Research Grants</td>
<td>133,767</td>
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<td>Net Investment Income</td>
<td>1,864,093</td>
<td>158,856</td>
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<tr>
<td>Other</td>
<td>16,002</td>
<td>20,307</td>
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<td><strong>Total Revenues</strong></td>
<td><strong>$4,215,077</strong></td>
<td><strong>$2,210,507</strong></td>
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### Expenses

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<tr>
<td>Program Expenses</td>
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<tr>
<td>Patient Care Services</td>
<td>524,965</td>
<td>517,969</td>
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<tr>
<td>Research</td>
<td>520,687</td>
<td>477,973</td>
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<tr>
<td>Education, Training and Community Support</td>
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<td><strong>Total Program Expenses</strong></td>
<td><strong>1,256,921</strong></td>
<td><strong>1,190,178</strong></td>
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<td>Fundraising</td>
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<td>Administrative and General</td>
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<td>227,734</td>
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<td><strong>Total Expenses</strong></td>
<td><strong>$1,805,132</strong></td>
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### Loss on Disposal of Property and Equipment

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### Change in Net Assets

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<tr>
<th></th>
<th>2021</th>
<th>2020</th>
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<tbody>
<tr>
<td>Beginning Net Assets</td>
<td>6,564,224</td>
<td>6,059,689</td>
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<tr>
<td><strong>Ending Net Assets</strong></td>
<td><strong>8,973,553</strong></td>
<td><strong>$6,564,224</strong></td>
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To view the 2021 St. Jude Annual Report online, visit stjude.org/financials
To read more inspiring St. Jude stories, visit stjude.org/inspire

Cover: St. Jude patient Ay’Den, acute myeloid leukemia, pictured with his mom.
This page: St. Jude patient Ava, diagnosed with medulloblastoma, pictured with her mom.

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