# Report to the management board of

European Society for Blood and Marrow Transplantation, Leiden

on the 2023 financial statements

The management board of European Society for Blood and Marrow Transplantation LEIDEN

Leiden, 11 April 2024 Dealt by: Mr. S. Natkiel

## **Financial statements 2023**

Dear members of the board,

In accordance with our obligation and responsibility to compile the organization's financial statements, we hereby report on the financial statements for 2023. The financial statements are the responsibility of the organization's Management Board. The financial statements, management board report and other information are included in the appendices to this report.

Please do not hesitate to contact us if you require any further information.

Yours faithfully, EBMT

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Mrs. H.M. Steinbuch Mrs. M.D. Hazenberg

Annual reporting

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# **Directors' report 2023**

## 1 General information

Statutory Name
European Society for Blood and Marrow Transplantation
Corporate Seat
Maastricht
Legal form

Association with full legal capacity

The EBMT has defined a clear **mission**: "We are a community of healthcare professionals focused on innovation, research and the advancement of cellular and stem cell-based therapies to save and improve the lives of patients with blood-related disorders."

The EBMT **vision** for the forthcoming year encompasses: As one of the leading medical and scientific organizations for cellular and stem cell-based therapies, we aim to be the connection between patients, scientific community, and other stakeholders to anticipate the future of our field.

Indeed, in the coming years, EBMT should enhance the **scientific output** of the organization by a dedicated support for the WP activities to explore the potential of the registry and continue generating high quality retrospective and non-interventional prospective studies, both in the autologous and allogeneic settings.

During 2023, the society made progress in both our vision and mission through science, education, and advocacy.

The 49th Annual meeting in Paris was successful. It was the first in person Annual meeting since 2019 and we welcomed more than five thousand attendees.

The 8th International Transplant Course as well as the educational meetings of the EBMT were well attended and successful.

Working Parties (WPs) meetings have been very well attended and have represented an excellent opportunity for in-person networking and interaction.

A new working party on haemoglobinopathy has been approved by the General Assembly in 2023.

Another significant part of our activities in 2023 have consisted of the promotion and the development of scientific, educational and partnership opportunities related to the use of CAR T-cells. There has been an exponential increase in reporting CAR T-cell therapies, and we can very proudly say that we have reached almost 6,000 CAR T- cell treated patients within the EBMT Registry (visit our CAR-T Data Collection Initiative webpage for more information).

Also worth mentioning is the fact that EBMT has managed to keep the positive opinion of EMA regarding the cellular therapy module. The PAS studies are actively being conducted by our society with five of them ongoing and four additional ones in the start- up/contracting phase.

Partnerships and collaborations have also represented a major asset for our community. During our regular meetings with the representatives of the National Societies for haematopoietic cell transplantation and cellular therapy, we have fostered a deeper level of interaction and closer communication. The EBMT-EHA GOCART

Coalition consolidated our educational activities and harmonized the accreditation process for CAR T-cell centres together with our industry partners. EBMT and EHA's collaboration have also been crystallized at the 5<sup>th</sup> CART conference in Rotterdam. The Joint Scientific Retreat from EBMT and ASTCT has been one of the best examples of transatlantic collaboration and underpins not only the need to collaborate on clinical science but also translational science. Likewise, the collaboration with China was amplified last year with the 3rd EBMT-China Scientific Forum held in September 2023.

In response to the ongoing Russian invasion of Ukraine and the devastating impact it had on civilians and patients in the affected regions, EBMT maintained the initiative called the EBMT Ukrainian Crisis Assistance Program (UCAP).

JACIE, after the pandemic, had clear challenges to resolve. The JACIE team has been successful in meeting the prepandemic number of inspections in 2023. Preparations for the ISO accreditation have been started to hopefully result in an ISO accreditation in 2024.

The EBMT Registry upgrade project has resulted in a new EBMT Registry which has gone live in August 2023. The EU partly funded this project, the EuroTRACTOR project. The new Registry uses the OMOP common data model which will strengthen the links between EBMT and external data base holders, governments, and National Registries/Societies in terms of data harmonization and sharing.

We have been working according to the EBMT's Strategic Plan for 2023-2026, which will be reviewed and updated end 2024. New developments in the medical and scientific environment of Cell and Gene therapy create new opportunities for EBMT. EBMT is a fast-growing organization in a fast-changing environment. Therefore, we need to be agile and create a sturdy base to further develop our organization to serve our purpose in a sustainable way. Consequently, we must keep developing and upgrading the way EBMT is approaching Science, Education and Quality of Care and Advocacy to make the society more aligned with our partners and stakeholders needs.

## 2 Core and other activities

The European Group for Blood and Marrow Transplantation (EBMT) is a non-profit organization that was established in 1974 to allow scientists and physicians involved in clinical bone marrow transplantation to share their experience and develop co-operative studies. The EBMT is devoted to the promotion of all aspects associated with the transplantation of haematopoietic stem cells from all donor sources and donor types including basic and clinical research, education, standardization, quality control, and accreditation for transplant procedures.

EBMT members – more than 5,000 physicians, nurses, scientists, and other healthcare professionals –participate in a unique collaborative network of peers involved in haematopoietic stem cell transplantation (HSCT) and cellular therapy research. Membership encompasses approximately six hundred centres, from over seventy countries, which perform or participate in HSCT.

The EBMT holds a significant role in performing co-operative studies and disseminating state-of-the-art knowledge: the aim is to increase survival rates and enhance the quality of life of patients with life-threatening blood cancers and diseases.

The EBMT is built on three pillars.

- Science
- Education
- Patient Care

#### 2.1 Studies

The EBMT coordinates its scientific activities through 11 Working Parties and the Nurses Group:

- **Disease-related:** Acute Leukemia, Severe Aplastic Anemia, Autoimmune Diseases, Chronic Malignancies, Inborn Errors, Lymphomas, Haemoglobinopathies
- Transversal: Pediatric Diseases, Cellular Therapy and Immunobiology, Infectious Diseases, Transplant-Related Complications and Quality of Life after Stem Cell Transplantation

The Working Parties use data from the EBMT patient Registry to perform three types of studies:

- 1. **Retrospective data collection studies** using data from the Registry, ad-hoc data collections, and centre-based surveys.
- 2. **Non-interventional cohort studies** based on prospective patients' registration and data collection. Treatments and medical assessments follow standard hospital protocols.
- 3. **Interventional studies** (Prospective Clinical Trials) based on a study protocol which determines treatments and medical assessments, including one or more experimental treatment(s).

## 2.2 The Registry

This is the backbone of the EBMT. The EBMT patient Registry was established in the early 1970's. It is the only data source of its kind in Europe. The data are submitted continuously by approximately six hundred centres, including some from outside Europe.

As of 2023, the Registry has acquired data on over 700,000 patients that received an HCT procedure as well as data on over 4,000 patient that received CAR T-cell therapy. The EBMT Registry contains patient clinical data, including aspects of the diagnosis and disease, first-line treatments, HCT or cell-therapy-associated procedures, transplant type, donor type, stem cell source, complications, and outcome. Patients are followed up indefinitely. Basic donor information is included with these procedures, and donor follow-up data can be entered by the transplant centre (or Donor Registry, for unrelated donors).

The Registry underpins extensive European research that translates into changes in clinical practice and improvements in patient outcome and care.

# 2.3 The Activity Survey

The Activity Survey measuring trends in transplant activity.

In 1990, the EBMT introduced the Activity Survey, a novel tool for assessing the real picture of HSCT in Europe. On an annual basis, all EBMT members and affiliated teams report their number of transplant patients by indication, donor type and stem cell source.

The Activity Survey has evolved into a mandatory self-reporting system, and it forms an integral part of the international quality assurance program JACIE. As of end 2023 EBMT will be the new owner of the activity survey.

A second survey on cellular therapies and tissue engineering introduced in 2008 provides an overview of the latest developments in the field of non-HSCT cellular therapies.

## 2.4 Education and Networking at the Annual Meeting

The EBMT yearly organizes an Annual Meeting attended by more than 5,500 participants, including physicians, nurses, data managers, statisticians, quality managers, cell therapist, pediatricians, pharmacists, psychologists, psychiatrists and psychoanalysts, transplant coordinators, lab scientists, trainees, patients.

This important forum ensures and encourages dialogues and information exchange, education, and scientific productivity.

## 2.5 Patient, Family and Donor Day

The annual Patient, Family and Donor Day provides a forum for meeting professionals, exchanging experiences, and learning from each other. One of the main goals is the improvement of communication between BMT and CT professionals and patients. This is increasingly relevant due to the rapid evolution of technology associated with transplantation and its relationship with the growing field of cellular therapy. The introduction of new drugs and graft manipulation techniques, combined with changes in the clinical pattern of transplantation, particularly in the outpatient setting, has led to remarkable developments in the field over the last few years.

## 2.6 Standards and Accreditation

The standards and accreditations improving safety and quality in transplant and cellular therapy.

The EBMT educational events disseminate new results into the scientific community.

Approximately fifteen conferences, workshops, and courses, including the ESH-EBMT Training Course on HSCT, are organized every year.

The Joint Accreditation Committee ISCT-Europe & EBMT (JACIE), established in 1998, is Europe's only official accreditation body in the field of haematopoietic stem cell transplantation (HSCT) and cellular therapy. It promotes high-quality patient care and medical and laboratory practice through a profession-led, voluntary accreditation scheme.

JACIE develops and maintain global standards for the provision of quality medical and laboratory practice in cellular therapy. Based on these standards, JACIE offers accreditation to transplant programs to encourage health institutions and facilities to establish and maintain quality management systems impacting on all aspects of their activities and to engage in continuous improvement.

JACIE's primary aim is to promote high quality patient care and laboratory performance in collection, processing, and transplantation centres through an internationally recognized system of accreditation.

# 2.7 Hematology and HCT Nursing

The EBMT Nurses Group brings together nurses and allied health professionals working in the field of hematology and HCT. The mission of the Nurses Group is to improve the care of our patients through evidence-based practice and to enhance and value the nursing role worldwide by supporting and sharing knowledge through communication, advocacy, research, training, and education.

# 3 Company legal structure

The European Society for Blood and Marrow Transplantation (EBMT) is a non-profit organization that was established in 1974 in Netherlands in two legal entities:

- Association
- Foundation

The Board is the administrative body of the EBMT responsible for all running operations and decisions. Decisions are made by majority voting. The President has the deciding vote if the vote is otherwise tied.

#### **Board members**

- President: Mrs. A.M. Sureda
- Treasurer: Mrs. M.D. Hazenberg (till 1 May 2023: Harmen Dolstra)
- Secretary: Mr. J.A. Snowden
- Authorized representative and Executive director: Mrs. H.M. Steinbuch (till 1 June 2023: Mr. A. Gusi)

## 4 EBMT Governance Platforms

Currently the EBMT consists of two units; the Association that will run the EBMT via the Foundation.

- **Board of Association (BA)** The Board of Association now consists of 8 voting members plus one non-voting member (EXCOM= three, NG Pres= one, + four members from the new Scientific Council and the forthcoming congress president (non-voting member).
- **Scientific Council (SC)** The Scientific Council consists of the WP Chairs elected by the General Assembly and decides which four members will sit on the Board of Association.

Within the Foundation, the EXCOM (Executive Board) will maintain its current structure and continue to run the EBMT Business.

The BA is the administrative body of the EBMT. It is responsible for all running operations and decisions that are not due to be taken by the General Assembly. The BA consists of the President, the President-Elect, the Secretary, the Treasurer, the President of the EBMT Nurses Group and four members elected by and from the Scientific Council.

The President of the forthcoming annual EBMT meeting is elected to the Board for the year preceding the annual meeting as a non-voting member. Decisions are taken by majority voting. The President has the deciding vote if the vote is otherwise tied. Board members will not receive any remuneration, except in cases mentioned in the statutes.

# 4.1 Working Parties (WP)

The existing Working Parties are divided into two categories.

- **Disease-related:** Acute Leukemia, Severe Aplastic Anemia, Autoimmune Diseases, Chronic Malignancies, Inborn Errors, Lymphomas, Haemoglobinopathy
- **Transversal:** Pediatrics, Cellular Therapy and Immunobiology, Infectious Diseases, Transplant-Related Complications and Quality of Life after Stem Cell Transplantation.

The new Haemoglobinopathy working party has been approved by the General assembly April 2023.

# 4.2 Table Mission, Responsibilities and Members

	Mission	Responsibilities	Members
ВА	The Administrative body responsible for defining the strategic direction of the EBMT and running operations and decisions that are not due to be taken by the General Assembly.	- Define the Strategic Plan of the EBMT for the approval of the GA - Approves the Plan and Annual Budget - Supervise that the Executive Committee implements the decisions regarding Plans, Budget.	<ul> <li>President, President-Elect, Secretary,</li> <li>Treasurer (EXCOM)</li> <li>President of the division EBMT</li> <li>Nurses Group - 4 members elected by and from the Scientific Council.</li> <li>President forthcoming annual EBMT meeting (non-voting member)</li> </ul>
SC	The Scientific body responsible to define the scientific and education policy of the EBMT to be approved by the General Assembly	- Drafts the scientific and educational policy of the EBMT and prepares it for General Assembly approval - Evaluates regularly the scientific and educational activities of the WPs - Advice the Board on scientific and educational issues	- 12 WP Chairs
	Implement the EBMT Scientific and Educational Policy	<ul> <li>Elaborate and manage</li> <li>scientific proposals, supported</li> <li>by the Data Offices and CT</li> <li>Elaborate and organize</li> </ul>	WP Members
WP		educational activities supported by Executive Office - Contribute to the development of definition of guidelines and policies	

# 4.3 Roles and Responsibilities

The four members from the Scientific Council elected to represent the SC within the Board of Association hold different dossiers:

Role	Responsibilities
Scientific	- Coordinates and manages the Scientific Council
Chair	- Represent the Science & Research Portfolio within the Board
	- He / She is a member of the Scientific Annual Congress Local Organizer Committee
Scientific	- Supports the Scientific Chair to coordinate the Scientific Council
Co-Chair	- Represents the Science & Research Portfolio within the Board

Role	Responsibilities
	- He / She is a member of the Scientific Annual Congress Local Organizer Committee
Registry Board Member	<ul><li>Represents the board within the Registry Committee</li><li>Represents Registry Portfolio within the Board</li></ul>
Educational Board Member	<ul> <li>Represents the board within the Educational Committee</li> <li>Represents Education Portfolio within the Board</li> </ul>

## 4.4 Distribution of Areas

This Table represents the areas assigned to each Platform.

BA & SC	1. EBMT Mission	2. EBMT Vision
	1. Strategic Plan	6. Fundraising Policy
	2. Annual Plans	7. HR Policy
ВА	3. Budget Plans	8. Office Issues
	4. Congress Bids	9. Legal Issues
	5. Communication Policy	10. Financial Investments
	1. Scientific Policy	5. WP Structure
SC	2. Educational Policy	6. Registry Policy
30	3. Best & Abstract Process	7. Educational Events

The EBMT has offices in Barcelona, Leiden, and Paris, and currently has 129 members of staff working on behalf of the organization.

# 5 Policies pursued

In the last years EBMT has developed Policies to improve governance and structural stability, to reduce the financial risks. We have gained financial stability and provided assurances that the money is spent and allocated according to our Mission. Today, EBMT has mechanisms of control in place that demonstrate clear lines of accountability through transparency.

The embedded structure of decision making prevents conflicts of interest and provides a clear segregation of responsibilities.

# 5.1 Asset management

arranged in, and according to the EBMT investment policy.

The investments in the portfolio are limited to the available resources. Investments based on debit balances will not take place. The objective is to increase capital and spread risk. The investment horizon is 20 years with a theoretical end date of 31 December 2043. This date is of importance for tuning the risk of the investments. Investments are divided in two asset classes, shares, and bonds. The bandwidths for shares are 20%-40% and for bonds 60%-80%. The mandated asset manager, who is responsible for trading and monitoring the applicable limits, is maintaining the by EBMT chosen defensive risk profile with a downside risk of minus 10%. This is formally

## 5.2 Disposable equity

The organizations' equity is freely disposable as there are currently no legal obligations that would lead to the formation of a legal reserve within the equity of the organization. However, equity can exclusively be used for reaching the goals of the organization. For internal purposes, EBMT does acknowledge earmarked reserves which are not enforceable in case the organization should need it for the continuity of her existence.

# 6 Analysis of developments during the year

Never in the nearly 50 years of EBMT's existence, its financial resilience has been assessed more than in the past couple of years. Major challenges to the Society imposed by the SARS-CoV-2 pandemic and the war in Ukraine were absorbed without significant impact on its financial situation. In the meantime, income continued to increase, creating opportunities for structural investments, the creation of reserves for strategic projects including the new Registry and allowing build-up of a solid buffer.

In 2023 income continued to grow. The first in-person Annual Meeting in 3 years, held in Paris, was not only a scientific success. Other income was generated through the return to pre-COVID19 numbers of JACIE accreditations and through grants for studies, clinical trials, and educational events. At the same time, a number of structural investments and adjustments have been implemented as part of the 2023-2026 Strategic Plan as highlighted below.

## 6.1 The Registry

One of the priorities of the 2023-2026 Strategic Plan was to replace the old IT structure of the Registry. Under the dedicated supervision of the Clinical Research and Registry Department (CRRD) and the Registry Committee a new IT system was built. After years of preparation, the new Registry was launched in August of 2023. Costs of the development and implementation of the new Registry (excluding personnel) has been provided for through the EuroTraCTOR grant (EUR 0.6M) and earmarked reserves (EUR 2.5M). To secure further developments (analytical tool, study modules, data migration and others) EUR 2.0M of the net result of 2023 will be appropriated to the earmarked reserves of the Registry.

# 6.2 The Transplant Activity Survey

In 2023, more than 3 decades after its launch, Dr Jakob Passweg and Dr Helen Baldemero handed over data collection for the Transplant Activity Survey to the Business Unit (BU). Data can now be submitted online through a new tool that was developed by the BU and collection of numbers of stem cell transplants and CAR T cell therapies performed in Europe by member and non-member centres has begun in December of 2023.

# 6.3 Working Parties

In 2023, the fixed budget of the Working Parties (WP) was raised permanently from 16K to 26K. This was necessary to provide for the increased hours of data management support, study coordination and statistical work needed by the WP. In addition, 1 FTE to be spent on data management and statistical support has been made available for the Haemoglobinopathies WP that was established in 2023. All WP contribute to the Harmonization Workshops, organized for the first time in 2023, for which funds were also made available.

# 6.4 Centre Membership fees

Review of the centre membership model made clear that the old model with reporting centres paying membership fees and receiving benefits (discounts on events including the Annual Meeting and JACIE accreditation) was no longer representative of the reciprocal nature of the relationship between reporting centres and EBMT. It is

therefore proposed to the General Assembly to abolish centre membership fees as per 2024. The year 2023 will therefore be the last year that centre membership fees have been collected.

## 6.5 Investing to secure our mission

To allow all educational, accreditation and scientific activities to grow and to increase the efficiency of EBMT and its output in all fields, structural investments have been made. The number of FTE has grown from 101.6 in 2022 to 114.0 in 2023. These regarded positions for the Registry, JACIE, the Clinical Study Units, the Education and Events Unit, and the Executive Office (Human Resources, Finance, Legal Services, management of grants and stakeholders). Some of these positions are covered by grants and earmarked reserves, others are covered by the increased income and free reserves.

## 6.6 Concluding remarks

The structural investments made in the past years are paying off. With more efficient management, better IT, more personnel to manage data, studies, events, management, and finances income has structurally grown. In 2023, operating expenses expanded further to a total of EUR 16.1M. At the same time EBMT net income grew even more, with a non-earmarked income of EUR 9.2M and earmarked income of EUR 12.8M adding up to a total income over 2023 of EUR 22.0M. The year 2023 will be closed with a net result of EUR 5.9M. A total of EUR 2.0M of this net result will be earmarked one-off to further development of the Registry as indicated above, in addition to EUR 255K to IT infrastructure, offices and consultancy. In addition, and in line with the goals of the 2023-2026 Strategic Plan, the Board approved of EUR 1.4M to be spent in 2024 on structural investments including staff, a raise of the JACIE Inspector's per diem allowance, and IT and office infrastructural investments. Importantly, only 13% of EBMT income is spent on governance; 87% of resources is spent on the mission goals of the Society. For reference, overhead ratios of nonprofit organizations are typically around 20%.

In conclusion, with its steady revenue growth, which covers for its steadily growing expenses, and with sufficient reserves to cover for the unexpected, EBMT continues to be a financially healthy organization.

# 7 Analysis of income and results during the year

EBMT has closed the year with a positive result. The improvement of our financial outcome in the last years is due to:

- better net result from the Annual Meeting;
- better net results from the (Clinical) Studies;
- better net results from the Accreditation activities
- better results from Financial activities.

The EBMT continues to develop and build on its strategy for diversification and retention of resources.

EBMT also works hard to assure its 'non-earmarked' income (Membership, Sponsoring, Annual Meeting) covers the structural cost of the Society (Registry and Management) and investment in non-commercial academic retrospective and educational studies and activities through our Working Parties (WPs).

Our 'earmarked' income comes from Pharma grants, which are allocated to specific studies and educational activities for our Clinical Study Office and WPs.

EUR 1,000	20	23	20	22
EBMT Members donations	626	3%	704	6%
Scientific Sponsors donations	543	2%	598	5%
Annual Meeting Financial Result	7,395	34%	4,756	37%
Results from investments	596	3%	(229)	(2)%
Non-earmarked Income	9,160	42%	5,829	46%
Grants for (Clinical) Studies & Education	11,792	53%	6,099	48%
Accreditation (JACIE)	1,056	5%	754	6%
Earmarked Income	12,848	58%	6,853	54%
Total Income	22,008	100%	12,682	100%

## 7.1 Financial position on balance sheet date

The solvency of the organization can be expressed as follows.

#### **Debt ratio**

EUR 1,000	2023	Ratio	2022	Ratio
Liabilities	11,433	= 0.32	8,601	= 0.32
Balance total	35,798	- 0.32	27.072	- 0.32

The debt ratio decreased and meant that the organization's solvency increased, EBMT's solvency becomes stronger. This solvency is qualified as strong as a ratio of 0.70 is considered as common. The organization strives to have as low liabilities as possible.

The liquidity can be calculated as follows.

#### **Current ratio**

EUR 1,000	2023	2022	2021
Gross working capital	29,381	21,148	24,181
Short-term liabilities	11,433	8,601	8,292
Working Capital	17,947	12,547	15,889
Current Ratio	2.6	2.5	2.9

All short-term debts can be paid from the current assets. Management considers a ratio between 1.5 and 2.0 to be a healthy ratio. The ratio of EBMT can be qualified as good.

# 7.2 Analysis of the cash flows and financing needs

The cash flow from operating activities increased with EUR 10.4 M from EUR 4.4 M negative in 2022 to EUR 6.0 M positive in 2023.

The balance sheet items with the highest impact can be identified as follows. The receivables for sponsors and other debtors increased EUR 683 K. Pre-paid costs – i.e. for the congress and other educational events to be held in 2024 – increased EUR 1,637 K. The total movement in receivables is EUR 2,339 K.

Under the liabilities, deferred income (i.e., congress, sponsorship) decreased EUR 388 K, accrued cost (i.e., staff, professional fees) decreased EUR 264 K and other liabilities decreased EUR 121 K. The liabilities Clinical trials and Studies increased EUR 2,583 K due to the phase in which those (clinical) studies currently are and the timing of invoicing. Creditors, pension, and tax accruals increased EUR 1,022 K. The total increase of liabilities is EUR 2,832 K.

## 7.3 Research and development activities

As aforementioned EBMT has in his main pillars Science through Studies and services. EBMT is investing in its main asset, the Registry.

Since 2022, EBMT invested in developing the new Registry which investments will continue in 2024. For these years, funding is coming partly from EU grants and from the (earmarked) reserves. Besides dedication to the registry, EBMT is also investing in other software tools and cloud solutions, which needs are derived from the strategic plan to improve the organizational structure.

## 7.4 Expectations for the coming reporting year

The development of the Registry upgrade will continue in 2024. The investment will be paid for gradually and in line with the various phases of the development of the database. The cost for this investment (developing only) for 2024 is estimated around EUR 1.5 M. Additional investments for new functionalities will be financed by appropriation of the net result.

During the development of the Registry, EBMT is expanding the current registry database software to meet the contract obligations from PAS-studies, to enhance the user experience and to improve the ease of use of reports.

Other investments that are planned for the coming reporting year:

- harmonization and integration IT infrastructure (cloud solution);
- human resources planning system;
- project management system;
- Community and member administration system.

Besides the above mentioned (IT) investments, on its mission to improve professionalization and to meet the growing ambition, EBMT is eager and planning to invest in human resources as well. In 2024 the current level of employees will increase with approximately ten positions.

# **Budget coming reporting year**

The initial budget for the coming reporting year is as follows.

EUR 1,000	2024
Income	17,729
Costs	20,055
Result	(2,326)
Movements earmarked reserves	(1,914)
Result appropriated for reserves	(412)

The Board approved the initial budget for 2024. Management determines if an increase or a decrease in income and costs should be foreseen. This is based on the order book only and estimations of financial results that can be reliably estimated.

To coop with a potential future setback, as income can be disappointed some year(s), EBMT builds a solid reserve. This should prevent the continuity of EBMT's activities from being harmed or compromised. Therefore, EBMT will determine, on a yearly basis, what amount would be necessary to dismantle the organization. To counter this, EBMT monitors the level of the reserves compared to the structural costs of the organization.

Other investments for the coming year will be covered by the reserves. EBMT is expecting to cover the investments from the remainder of the structural innovation reserves. For internal purposes EBMT acknowledges earmarked reserves, there are no legal grounds to report these reserves.

The expected changes and expected levels of these internal reserves by the end of 2024 can be specified as follows:

#### Internal reserves

EUR 1,000	Balance 2023	Forecasted 2024	Projection 2024
Working Parties	2,146	-	2,146
Structural innovation	483	(255)	227
Registry continuous development	2,000	(1,500)	500
e-Learning	159	(159)	-
Scientific fund	455	-	455
Total internal reserves	5,243	(1,914)	3,329

# 7.5 Analysis of the principal risks and uncertainties

### 7.5.1 General principal risks and uncertainties

Of course, catastrophic events are unlikely to happen all at the same time. Nevertheless, negative results could lead to a cascade of problematic events. EBMT recognizes risks and uncertainties in the following areas:

- 1. Uncertain financial results of the Annual Congress;
- 2. Uncertain macro-economic situation: Cancelation of Sponsors and (temporary) stop of Funding;
- 3. Complex contract negotiations: Pre-finance activities while waiting for Funding;
- 4. Damage to the good and independent reputation: loss of potential funded studies;
- 5. Technical ageing: Lacking support for technical innovation.

Although it is expected that the results of the Annual Congress will eventually maintain their current level, EBMT is partly dependent on this result. Facing threats such as terrorist's attacks or war situations can influence these results while contractual obligations are already in place.

Macro-economic changes can affect the willingness of the Pharmaceutical Industry to be a sponsor. As well as changes in financial climate as government interference or scandals can result in declining sponsor income.

Studies of high importance could ask immediate attention from the Clinical Research Department. It is possible in such a case that EBMT pre-finances the activities before contracts are finally signed and funds started to flow. In

the worst-case running projects are cancelled if parties cannot agree on terms and conditions of the contract. The amount of the pre-finance would be the risk.

The EBMT's reputation could be at steek. It would be possible that the reputation is harmed in case of breach of study contracts or in case (co-) authors of scientific publications commit plagiarism or falsify research results. The risk of this could mean a drop in income because it could lead to fewer study applications.

The Registry is the backbone of the organization. Lacking support for technical innovation will mean that the Registry cannot provide adequate data that will harm working processes, breach of contracts, and finally harm our reputation.

It is therefore imperative that we build sufficient reserves to meet these risks and uncertainties, based on a combined number of threats.

## 7.5.2 Specific actual risks, uncertainties, and measures

At this moment, no specific risks, uncertainties, and measures are known that could affect our current activities. Although there is still a war going on, this has a minimum impact on our activities and financial position and brings negligible uncertainties. For the reporting year 2023, the war did not cause uncertainties.

# 7.6 Outline of the willingness to hedge or not hedge risks and uncertainties

EBMT operates according to internal rules regarding financial risks and tries to avoid each risk that could have an negative impact on the equity of the organization.

In general, EBMT's risk appetite can be indicated as low.

# 7.7 Measures taken to control the principal risks and uncertainties

To mitigate aforementioned risks, the organization has taken internal measures.

EBMT operates each year following a budget which is approved by the board. All activities that take place are within the budget. New activities are first submitted to the board for approval. The board does not approve these activities until the funding has been recognized. Periodically, budget monitoring takes place and analyses are performed to see whether business operations are in line with the budget.

The results of the Annual Congress are thoroughly estimated and monitored during the year to keep track of the development of the result. Risks caused by external factors which cannot be influenced by the organization are disregarded. This also applies to the macro-economic changes that can influence decisions from sponsors.

To minimize the risk of pre-financing studies, EBMT intends to get agreements signed first before the start of delivering services. As the contract parties mostly are well known and financial solvent this risk is qualified as low. There is also a risk of loss-making studies. In such unexpected cases, EBMT proactively contacts the contract party to discuss additional funding once a possible loss is detected.

# 7.8 Expected impact if principal risks materialize

As the result of the Annual Congress is an important one for funding EBMT's activities, its impact when materializing the risk would be high. The highest impact would appear if cancellation of the congress happens just

before the event. In that situation all costs have been paid for and/or contractually obliged to pay. Almost no income would exist when sponsors pull back and registration fees would be refunded. At that point, the maximum risk would be, based on a virtual meeting, EUR 1.0 M and an in-person meeting: EUR 3.0 M.

# 7.9 Risks and uncertainties that had a significant impact on the entity during the past financial year

No risks occurred during the past fiscal year that should be qualified as significant. Management qualifies such risks as significant if the impact is higher or equal to 5% of the net result.

# 7.10 Current or planned improvements to the entity's risk management system

If they occur, new activities will be examined for tax issues and if necessary, the current tax control framework will be changed accordingly. During 2023 no new activities occurred.

# 8 Remuneration policy

As a non-profit organization and written in our bylaws the EBMT Board Members are volunteers and cannot get any remuneration for their services and activities. EBMT Board Members expenses for travel meetings (Hotels, Transport) are covered.

# 9 Corporate social responsibility

The organization is organizing its activities in a increasingly digital way. The EBMT Handbook is fully digital, e-learning materials are digital available, the annual congress agenda is offered by an app, entering Medical Data by paper has been limited to a minimum and we are encouraging Centres to enter Medical Data on-line.

EBMT undertakes studies to improve patient care without any commercial interest. The objective is to cover the scope of those diseases in which the industry has non-financial interests.

As a responsible employer, EBMT offers its staff competitive salaries in the non-profit sector with a flexible balance between family and professional activities. Also, EBMT takes care of the training needs of its staff.

# 10 Key figures and ratios

# **10.1 Summary**

The year 2023 was a financially good year that ended with a net result of EUR 5,893 K. The net result increased EUR 4,487 K.

# 10.2 Financial resources

EBMT's income identifies the following types of income.

EUR 1,000	2023		2022	
EBMT Members donations	626	3%	704	6%
Scientific Sponsors donations	543	2%	598	5%
Annual Meeting Financial Result	7,395	34%	4,756	37%
Results from investments	596	3%	(229)	(2)%
Non-earmarked Income	9,160	42%	5,829	46%
Grants for Studies & CT & Education	11,792	53%	6,099	48%
Accreditation (JACIE)	1,056	5%	754	6%
Earmarked Income	12,848	58%	6,853	54%
Total Income	22,008	100%	12,682	100%

## 10.3 Source of income

The source of income is a breakdown of the consolidated income divided into categories Industry-income and non-industry-income. It indicates the importance of the sources.

Source of Income	Industry	Non-industry
Scientific Sponsors donations	2.5%	0.0%
EBMT Members donations	0.0%	3.3%
Annual Meeting	23.1%	10.5%
Grants for Studies, Clinical Trials & Education	47.4%	5.7%
Accreditation	0.0%	4.8%
Results from investments	0.0%	2.7%
Total	73.0%	27.0%

The highest contribution of one single organization is 34.3% of the total income.

# **10.4 Destination of resources**

## **Destination of resources**

EUR 1,000	20	23	20	22
Scientific Studies	5,141	32%	3,323	29%
EBMT Registry	3,213	20%	2,245	20%
Annual Meeting	2,937	18%	1,052	9%
Educational Activities	1,745	11%	1,911	17%
Standards & Accreditation	993	6%	953	9%
<b>Total Mission Cost</b>	14,029	87%	9,484	84%
Management & Administration	2,086	13%	1,791	16%
Total Expenditure	16,115	100%	11,275	100%

Management & Administration decreased.

## **2023** Financial statements

of

European Society for Blood and Marrow Transplantation

Statutory City: Maastricht
Chamber of Commerce: 804217257
Effective place of business: Leiden

Address: Rijnsburgseweg 10 2333 AA LEIDEN

# **Consolidated balance sheet as at 31 December 2023**

(after appropriation of the net result)

Assets

(in euros)	2	2023		022
Fixed assets				
Tangible fixed assets (1)	151,526		134,905	
Financial fixed assets (2)	6,265,725		5,789,056	
		6,417,251		5,923,961
Current assets				
Receivables (3)	7,535,777		5,196,631	
Cash at bank and in hand (4)	21,844,858		15,951,484	
		29,380,635		21,148,115
Total assets		35,797,886		27,072,076
Equity and liabilities				
Group equity (5)		24,364,505		18,471,154
Current liabilities (6)		11,433,381		8,600,922
Total equity and liabilities		35,797,886		27,072,076

# Consolidated profit and loss account for 2023

(in euros)	202	23	Budget'23	20	)22
Revenues					
Corporate Sponsors (7)	542,778		580,800	598,334	
Memberships (8)	626,097		675,000	703,776	
Annual Congress (9)	7,395,455		7,050,000	4,755,521	
Clinical Trials and Studies (10)	9,462,479		5,128,985	4,606,830	
Accreditation fees (11)	1,055,516		1,000,000	753,590	
Grants and Target Sponsoring (12)	1,232,162		887,800	526,559	
Educational Events (13)	1,085,722		900,750	964,417	
Other Revenues (14)	11,752		-	1,228	
Financial Income (15)	596,196		100,000	(179,243)	
Total revenues		22,008,157	16,323,335		12,731,012
Operating expenses					
Direct Cost (16)	4,879,919		5,566,500	2,247,084	
Working Parties (17)	2,089,322		341,000	828,993	
Staff Costs (18)	6,022,828		8,900,255	6,019,970	
Housing Costs(19)	154,749		151,800	143,948	
Professional fees (20)	194,671		543,500	353,818	
General Costs (21)	212,980		130,500	136,062	
Information and Communications					
Technology (22)	2,377,038		768,000	1,447,581	
Governance (23)	108,948		165,000	76,106	
Financial Expenses (24)	74,351		25,000	71,104	
Total operating expenses		16,114,806	16,591,555		11,324,666
Net result		5,893,351	(268,220)		1,406,346
Distribution of the result					
Addition other reserves		5,893,351			1,406,346

# **Consolidated cash flow statement for 2023**

(in euros)	20	23	20	)22
Cash flow from operating activities				
Operating profit/(loss)		5,893,351		1,406,346
Adjustments for:				
depreciation and amortization		58,808		51,202
Changes in working capital:				
movements in receivables	(2,339,146)		(1,414,521)	
movements in current liabilities	2,832,459		308,904	
movements in securities	(476,669)		(4,759,917)	
		16,644		(5,865,534)
Cash flow from operating activities		5,968,803		(4,407,986)
Cash flow from investing activities				
Additions to tangible fixed assets		(75,429)		(38,991)
Net cash flow, Decrease / Increase in cash at bank a	nd in hand	5,893,374		(4,446,977)

# Accounting policies used for the consolidated financial statements

#### General

The organization prepared the consolidated financial statements in accordance with the Dutch Accounting Standard 640 (RJ 640) with the same accounting policies as applied in previous year. The financial statements were prepared on 11 April 2024.

## **Group activities**

The European Society for Blood and Marrow Transplantation (EBMT) is a non-profit organisation that was established in 1974 to allow scientists and physicians involved in clinical bone marrow transplantation to share their experience and develop co-operative studies. The EBMT is devoted to the promotion of all aspects associated with the transplantation of haematopoietic stem cells from all donor sources and donor types including basic and clinical research, education, standardisation, quality control, and accreditation for transplant procedures.

## **Judgements and estimates**

The management of the group makes various judgments and estimates when applying the accounting policies and rules for preparing the financial statements. When applicable, the principal judgments and estimates, including underlying assumptions, are set out in each of the below mentioned accounting policies.

# **Going Concern**

The financial statements are compiled under the going concern assumption. All assets, liabilities, income, and expenses are stated in accordance with its going concern accounting principle as set out in the pages to follow.

# **Equity interests**

## **Ultimate parent company**

The European Society for Blood and Marrow Transplantation, the Association, Maastricht, is the ultimate parent company of Stichting European Society for Blood and Marrow Transplantation and includes the financial data of Stichting European Society for Blood and Marrow Transplantation in its consolidated financial statements.

#### **Basis of consolidation**

The consolidated financial statements include the financial data of the Association (The Society) and Foundation of the European Society for Blood and Marrow Transplantation (EBMT) at 31 December 2023. As head of this group the Society is the entity which exercise control in the foundation. Within the EBMT organization there is an organizational connection, central management, and an economic unit. This financial statement is fully consolidated and are determined in accordance with consistent accounting policies.

# Foreign currency translation

The consolidated financial statements are prepared in euros, the functional and presentation currency of the company. Each entity in the group determines its own functional currency and items included in the financial statements of each entity are measured using that functional currency.

Transactions denominated in foreign currencies are initially carried at the functional exchange rates ruling at the date of transaction. Monetary balance sheet items denominated in foreign currencies are translated at the functional exchange rates ruling at the balance sheet date. Non-monetary balance sheet items that are measured at historical cost in a foreign currency are translated at the functional exchange rates ruling at the date of transaction. Non-monetary balance sheet items that are measured at current value are translated at the functional exchange rates ruling at the date of valuation.

Exchange differences arising on the settlement or translation of monetary items denominated in foreign currencies are taken to the profit and loss account.

## **Offsetting**

Assets and liabilities are only offset in the financial statements if and to the extent that:

- An enforceable legal right exists to offset the assets and liabilities and settle them simultaneously.
   And
- The positive intention is to settle the assets and liabilities on a net basis or simultaneously.

#### **Financial instruments**

Financial instruments include both primary financial instruments, such as receivables, securities and payables, and derivative financial instruments.

All purchases and sales of financial assets made according to standard market conventions are recognized as at the transaction date, being the date on which the group enters into a binding agreement.

# **Tangible fixed assets**

#### Tangible fixed assets in use by the company

Tangible fixed assets in use by the organization are carried at the cost of acquisition or production net of accumulated depreciation and, where applicable, accumulated impairment losses. Tangible fixed assets carried at cost do not include capitalized interest charges. Tangible fixed assets are recognized upon purchasing.

Tangible fixed assets are depreciated on a straight-line basis over their estimated useful economic lives, considering the residual value, as follows:

• Other tangible fixed assets are depreciated in five years.

If the expected depreciation method, useful economic life and/or residual value are subject to changes over time, they are treated as a change in accounting estimate.

Costs of major maintenance are recognized under cost when incurred and if the recognition criteria are met. The carrying amount of the components to be replaced will be regarded as a disposal and taken directly to the profit and loss account. All other repair and maintenance costs are taken directly to the profit and loss account.

Retired tangible fixed assets are carried at the lower of cost and their fair value less costs.

A tangible fixed asset is derecognized upon sale or when no further economic benefits are expected from its continued use or sale. The gain or loss arising on the disposal is taken to the profit and loss account.

## **Impairment of fixed assets**

On each balance sheet date, the organization assesses whether there are any indications that a fixed asset may be subject to impairment. If there are such indications, the realizable value of the asset is determined. If it is not possible to determine the realizable value of the individual asset, the realizable value of the cash-generating unit to which the asset belongs is determined.

An impairment occurs when the carrying amount of an asset is higher than the realizable value; the realizable value is the higher of the net sales value and the value in use. An impairment loss is directly recognized in the income statement while the carrying amount of the asset concerned is concurrently reduced.

If it is established that an impairment that was recognized in the past no longer exists or has reduced, the increased carrying amount of the asset concerned is set no higher than the carrying amount that would have been determined if no impairment value adjustment for the asset concerned had been reported.

#### **Financial fixed assets**

#### **Securities**

Securities are initially recognized at fair value plus directly attributable transaction costs, except for securities carried at fair value with changes recognized through profit or loss.

After initial measurement, securities forming part of the trading portfolio are carried at fair value, without any deduction for transaction costs incurred on disposal. Gains and losses arising from changes in the fair value are taken to the profit and loss account.

After initial measurement, other listed securities (shares and bonds) not forming part of the trading portfolio are carried at fair value. Gains and losses arising from fair value changes are taken to the profit and loss account.

Dividends received are taken to the profit and loss account.

## **Current receivables**

Receivables not forming part of the trading portfolio are initially measured at fair value and subsequently carried at amortized cost less a provision for doubtful debts where necessary.

## Cash at bank and in hand

Cash at bank and in hand includes cash in hand and bank balances and are recognized at nominal value. It also includes deposits if these are effectively at the group's free disposal, even if interest income may be lost.

# Classification of equity and liabilities

A financial instrument or its separate components are classified in the consolidated financial statements as liability or as equity in accordance with the substance of the contractual agreement underlying the financial instrument. In the organization financial statements, a financial instrument is classified in accordance with the legal reality. Interest, dividends, gains, and losses relating to a financial instrument, or part of a financial instrument, are included in the financial statements in accordance with the classification of the financial instrument as liability or equity.

#### **Provisions**

A provision is formed if the group has a legal or constructive obligation as at the balance sheet date if it is probable that an outflow of resources will be required to settle the obligation and the amount of the liability can be reliably estimated. The amount of the provision is determined based on a best estimate of the amounts required to settle the liabilities and losses concerned at the balance sheet date. Provisions are carried at non-discounted value, unless stated otherwise.

If third-party reimbursement of expenses required to settle a provision is probable, the reimbursement is recognized as a separate asset.

## **Pension provisions**

## **Dutch pension plans**

Contributions payable to the pension plan administrator are recognized as an expense in the profit and loss account. Contributions payable or prepaid contributions as at year-end are recognized under accruals and deferred income, and prepayments and accrued income, respectively.

A provision is formed for liabilities other than the contributions payable to the pension plan administrator if, as at the balance sheet date, the group has a legal or constructive obligation towards the pension plan administrator and/or to its own employees, if it is probable that settlement of these liabilities will entail an outflow of resources and if a reliable estimate can be made of the amount of the liabilities. The provision for additional liabilities to the pension plan administrator and/or the employees is based on a best estimate of the amounts required to settle these liabilities concerned at the balance sheet date. The provision is carried at present value if the effect of the time value of money is material (with the discount rate before taxation reflecting the market interest rate for high-quality corporate bonds).

A pension receivable in respect of surpluses available at the pension plan administrator is recognized if the group controls the surplus, if it is probable that it yields future economic benefits for the group and if it can be reliably determined. A pension surplus is calculated using the same method as is used for provisions.

The employment conditions in Spain and France do not offer for a pension plan.

#### **Taxes**

#### **Current taxes**

The activities of EBMT have been investigated on the possibility of tax obligations. The general conclusion is that, due to tax exemptions, no taxation should be applied on the results of EBMT. No taxation is recognized under the current liabilities nor in the profit and loss account.

#### **Current liabilities**

On initial recognition, current liabilities are carried at fair value less directly attributable transaction costs (in the case of financial liabilities not carried at fair value through profit or loss).

# Leasing

Assessing whether an agreement contains a lease is based on the substance at the inception date of the agreement. The agreement is regarded as a lease if the fulfillment of the agreement depends on the use of a specific asset, or on whether the lease contains the right of use of a specific asset.

#### **Income**

#### General

Gross operating income represents net turnover, other operating income, and other external charges. Net turnover represents the proceeds from the supply of services, net of VAT, discounts, et cetera.

#### **Services**

If the result of a transaction relating to a service can be reliably estimated and the income is probable to be received, the income relating to that service is recognized in proportion to the service delivered.

Stage of completion is based on the costs incurred in providing the services up to the balance sheet date in proportion to the estimated costs of the total services to be provided.

## **Royalties**

Royalties are recognized in the profit and loss account according to the accrual principle, provided the income can be measured and the income is probable to be received.

#### **Dividend**

Dividends are recognized in the profit and loss account if the group is entitled to them, and the dividends are probable to be received.

#### **Grants related to income**

Grants related to income are recognized in the profit and loss account in the year in which the granted expenditure is incurred, in which the loss of income is recognized or in which the operating loss is incurred.

## **Expenses**

#### General

Expenses are determined with due observance of the accounting policies and allocated to the fiscal year to which they relate. Foreseeable and other obligations as well as potential losses arising before the financial year-end are recognized if they are known before the financial statements are prepared and provided all other conditions for forming provisions are met.

#### **Interest**

Interest is allocated to successive financial reporting periods in proportion to the outstanding principal. Premiums and discounts are treated as annual interest charges so that the effective interest rate, together with the interest payable on the loan, is recognized in the profit and loss account, with the amortized cost of the liabilities being recognized in the balance sheet. Period interest charges and similar charges are recognized in the year in which they fall due.

## Consolidated cash flow statement

The cash flow statement has been prepared in accordance with the indirect method. Cash and cash equivalents consist of cash at bank and in hand. The securities are non-highly liquid investments.

Interest received and paid, dividends received, and profits tax are included under cash flows from operating activities.

# Notes to the consolidated balance sheet

# Tangible fixed assets (1)

Movements in tangible fixed assets were as follows:

(in euros)	Other
	fixed operating
	assets
Balance on 1 January 2022:	
Cost	329,994
Accumulated depreciation and impairments	(182,878)
Carrying amount at 1 January 2022	147,116
Additions	38,991
Depreciation	(51,202)
Carrying amount at 31 December 2022	134,905
Balance on 31 December 2022:	
Cost	368,985
Accumulated depreciation and impairments	(234,080)
Carrying amount at 31 December 2022	134,905
	Other
	fixed
	operating
	assets ———
Balance on 1 January 2023:	
Cost	368,985
Accumulated depreciation and impairments	(234,080)
Carrying amount at 1 January 2023	134,905
Additions	75,429
Depreciation	(58,808)
Carrying amount at 31 December 2023	151,526 ————————————————————————————————————
Balance on 31 December 2023:	
Cost	444,414
Accumulated depreciation and impairments	(292,888)
Carrying amount at 31 December 2023	151,526
The economic life for other fixed operating assets is five (2022: five) years.	

# Financial fixed assets (2)

## **Other securities**

The securities are stated at market value and can be broken down as follows:

(in euros)	2023	2022
Balance on 1 January	5,789,056	1,029,139
Securities purchased	2,489,260	5,159,780
Securities sold	(2,409,870)	(168,536)
Results from change in market value and securities sold	397,279	(231,327)
Balance at 31 December	6,265,725	5,789,056
Current receivables (3)		
(in euros)	2023	2022
Membership receivables	393,673	309,653
Sponsors and other debtors receivables	4,367,471	3,768,982
Other amounts receivable	134,902	115,463
Prepayments and accrued income	2,639,731	1,002,532
Total	7,535,777	5,196,631
A provision for doubtful membership receivables is included for an amount of € 256,000 (2022: € 126,795).	<del></del>	
The term of the receivables is less than one year.		
Other amounts receivable can be broken down as follows:		
(in euros)	2023	2022
Value Added Tax receivable	107,564	89,428
Pension and Social security contributions receivable	-	2,166
Other receivables	27,338	23,869
Total	134,902	115,463

Prepayments and accrued income can be broken down as follows:

(in euros)	2023	2022
Interest receivable	40,626	995
Income to invoice	1,022,812	235,962
Prepaid Staff expenses	2,983	783
Prepaid ICT expenses	110,267	79,532
Prepaid Professional fees	-	1,500
Prepaid General expenses	1,500	298
Prepaid Accreditation expenses	8,799	1,225
Prepaid Educational Events expenses	86,516	127,919
Prepaid Annual Congress expenses	1,365,244	551,139
Prepaid Other expenses	984	3,179
Total	2,639,731	1,002,532
Cash at bank and in hand (4)		
	2022	2022
(in euros)	2023	2022
Cash in hand		2,539
Cash at bank	21,844,858	15,948,945
Cash at bank	21,044,030	13,340,343
Total	21,844,858	15,951,484
The cash at bank is at the group's free disposal.		
Group equity (5)		
Equity		
(in euros)	2023	2022
Group equity January 1	18,471,154	17,064,808
Appropriation of the net result	5,893,351	1,406,346
Group equity December 31	24,364,505	18,471,154
The group equity can be specified as follows:		
		Othern
		Other reserves
Balance on 1 January 2022		17,064,808
Movements 2022		-
Result appropriation for 2022		1,406,346
Balance on 31 December 2022		18,471,154

		Other reserves
Balance on 1 January 2023 Movements 2023		18,471,154 -
Result appropriation for 2023		5,893,351
Balance on 31 December 2023		24,364,505
There are currently no legal obligations applicable for creating earmarked reserves.		
Current liabilities (6)		
(in euros)	2023	2022
Trade creditors	1,135,565	728,612
Value Added Tax payable	591,621	-
Pension charges	56,064	40,293
Other taxes and social security charges	251,116	243,301
Other liabilities Accruals and deferred income	4,178,561 5,220,454	1,716,059 5,872,657
Total	11,433,381	8,600,922
The term of the current liabilities is less than one year.		
Other liabilities can be broken down as follows:		
(in euros)	2023	2022
Clinical Trials and Studies pre-received funding EU projects liabilities	4,178,561	1,594,981 121,078
Total	4,178,561	1,716,059

Accruals and deferred income can be broken down as follows:

(in euros)	2023	2022
Deferred income Annual Congress	3,313,453	3,001,340
Deferred income Corporate Sponsors	522,500	810,278
Deferred income Educational Events	268,716	188,471
Deferred income Accreditation	201,083	353,056
Deferred income Other	29,929	370,795
Accrued Staff costs	607,035	607,653
Accrued ICT costs	105,263	6,896
Accrued Professional fees	97,875	204,433
Accrued Event costs	38,114	300,381
Accrued General costs	8,503	12,660
Other costs payable	27,983	16,694
Total	5,220,454	5,872,657

### **Financial instruments**

#### **General**

The information included in the notes for financial instruments is useful in estimating the extent of risks relating to both on-balance sheet and off-balance sheet financial instruments.

The group's primary financial instruments, not being derivatives, serve to finance the group's operating activities or directly arise from these activities. The group's policy is not to trade in financial instruments for speculation purposes.

The principal risks arising from the group's financial instruments are credit risks, liquidity risks, cash flow risks and price risks, which comprise foreign exchange, interest rate and market risks.

The group's policy to mitigate these risks is set out below:

#### Foreign exchange risk

The group is exposed to foreign exchange risks arising from purchase and sales transactions denominated in a currency (British pound/ US dollar) other than the group's presentation currency. The group's policy is not to hedge foreign exchange risks.

## **Credit risk**

The group trades only with parties which are commonly know as creditworthy (Industry). The group's credit risk is minimal.

### Liquidity risk

The group manages liquidity risk through the contract policy. Investments in human resources or in the structure of the organization (i.e., ICT-tools, software development, leasing) depends on the direct funding from the contracts related to those items. Close interim monitoring applies to these contracts.

#### Interest rate and cash flow risks

Interest rate risk is the risk of the fair value of future cash flows from financial instruments fluctuating due to changing market interest rates. The risk of market rate fluctuations run by the group is of no significancy as there are no long-term receivables and liabilities which bear such a risk.

## Arrangements and commitments not shown in the balance sheet

## Operating leases- group as lessee

The group has concluded operating leases relating to premises as lessee. The future minimum lease payments can be broken down as follows:

(in euros)	2023	2022
with a term of less than 1 year with a term of 1 to 5 years with a term of more than 5 years	163,788 - -	119,900 - -
Total	163,788	119,900

The premises leased are for the offices in Barcelona and Leiden. Total lease payments of € 147,923 (2022: € 132,384) are included in the profit and loss account for 2023.

### Legal claim

There are no legal claims or awareness of any legal claims coming up against the group at the moment of reporting that are not included in the balance sheet.

#### Other commitments not shown in the balance sheet

The group's contractual commitments for licenses totaled € 67,200 at 31 December 2023 (2022: € 170,010).

The group's contractual commitments for database development totaled € 270,609 at 31 December 2023 (2022: € 1,040,600).

The group's contractual commitments for services totaled € 32,995 at 31 December 2023 (2022: € 65,990).

The group's contractual commitments for cancelation fees for hotels and venue totaled € 352,794 (£ 306,595) at 31 December 2023 (2022: € 198,373).

#### Other arrangements not shown in the balance sheet

The group is pending the outcome of arrangements with one hotel in Spain regarding a cancellation fee dispute. The amount related to the dispute is approximately € 130,000.

The group has filed a claim for expenses incurred (€ 429,000) and lost revenue (€ 690,000) for the congress in Prague. There is no certainty as to the outcome of the claim or the amount of any compensation.

# Notes to the consolidated profit and loss account

## **Corporate Sponsors (7)**

The corporate sponsors income decreased by 9% (2022: increased by 4%) compared to the previous year. The number of corporate sponsors contributing to the income stabilized to 19 (2022: 21).

## Memberships (8)

## **Annual Congress (9)**

The congress took place in April 2023 and was virtual (2022: March, virtual). The in-housing process of the congress will remain at 90% completed. The current strategy is not foreseeing further consolidation of this process.

## **Clinical Trials and Studies (10)**

Clinical Trials and Studies are conducted in the offices Leiden and Paris. During 2023 the number of requests coming from the Industries for short-term studies equaled at the level of 2022 (9). The number of long-term studies expanded during the year with one.

# Accreditation fees (11)

The number of inspections that took place in 2023 was 77 (2022: 68) and the number of accreditations was 69. The backlog of inspections that arose because of the pandemic has not yet been cleared.

# **Grants and Target Sponsoring (12)**

The number of grants increased. Operating EU grants are in place for development of the registry, a harmonization program and a standardization program, in 2023 for € 1,085,663 (2022: € 262,037). The income from these grants is recognized as far as eligible costs occurred. At the end of the grant periods, a certificate on the financial statements (CFS) will be needed for these grants. The grant for development of e-Learning, € 125.000, continued in 2023. The income from this grant is recognized as far as eligible costs occurred. In total € 146.449 was received from sponsors for specific projects.

# **Educational Events (13)**

The number of organized educational events for external participants in 2023 was 10 (2022: 13). No events were cancelled nor postponed.

# **Other Revenues (14)**

Other revenues were realized for non common services provided to third parties.

# Financial Income (15)

The financial income exists of results from financial fixed assets (securities) and bank interest. An amount of € 383,675 is to be considered as unrealized (2022: € 247,410 negative).

## **Direct Cost (16)**

(a)			
(in euros)	2023	Budget'23	2022
Annual Congress	2,937,391	3,341,000	1,051,966
Clinical Trials and Studies	709,858	1,330,500	306,965
Accreditation	282,782	250,000	248,792
Educational Events	949,888	645,000	639,361
Total	4,879,919	5,566,500	2,247,084
Working Parties (17)			
(in euros)	2023	Budget'23	2022
Autoimmune Diseases	93,418	26,000	6,505
Acute Leukemia	357,601	26,000	131,505
Chronic Malignancies	290,772	26,000	237,259
Haemoglobinopathies	7,494	26,000	-
Infectious Diseases	261,679	26,000	77,662
Inborn Errors	158,949	26,000	56,710
Lymphoma	211,249	26,000	148,597
Nurses Group	97,725	55,000	55,048
Pediatric Diseases	166,934	26,000	62,445
Severe Aplastic Anemia	88,528	26,000	(5,900)
Therapy and Immunobiology	164,923	26,000	18,542
Transplant Complications	190,050	26,000	40,620
Total	2,089,322	341,000	828,993

The working parties' expenses include financial support, given for working party studies. The total amount in relation to this support is presented under Staff Costs. Commencing 2023, the working parties have been charged for actual costs.

## Staff Costs (18)

(in euros)	2023	Budget'23	2022
Wages and salaries	5,465,286	6,051,712	4,523,104
Hired staff	459,881	574,700	518,141
Pension Premiums	394,109	510,000	365,815
Social Security charges	1,263,888	1,354,843	1,007,607
Education and Training	51,214	113,100	35,297
Insurances	161,245	137,600	134,845
Commuting	31,297	25,000	21,369
Travel and Accommodation business trips	107,861	82,000	101,565
Other staff costs	28,766	51,300	76,635
Sub Total	7,963,547	8,900,255	6,784,378
Supported by Working Parties	(1,940,719)	-	(764,408)
Total	6,022,828	8,900,255	6,019,970

## Workforce

The average number of staff (in FTEs) employed by the group in 2023 was 114.0 (2022:101.6), broken down by contracts as follows:

	2023	2022
Employees with EBMT contract	107.3	93.7
Employees hired from third parties	6.7	7.9
Total manpower	114.0	101.6

The average number of staff (in FTEs) employed by the group by geographic location can be broken down as follows:

	2023	2022
England	2.0	2.7
France	18.5	17.3
Italy	1.0	1.0
Netherlands	45.3	43.6
Spain	46.2	36.0
South Africa	1.0	1.0
Total manpower	114.0	101.6

The remuneration of the management is not disclosed as it can be traced back to one person.

## Housing Costs (10)

Total

Housing Costs (19)			
(in euros)	2023	Budget'23	2022
Rent offices	147,923	139,800	132,384
Cleaning, insurance, maintenance	6,826	12,000	11,564
Total	154,749	151,800	143,948
Professional fees (20)			
(in euros)	2023	Budget'23	2022
Auditor Services	62,000	60,000	60,000
Advisors and Consultants	40,159	341,000	213,518
Tax Services	2,319	10,000	2,383
Legal Services	31,231	82,500	23,574
Payroll Services	48,962	40,000	44,343
Supporting Services	10,000	10,000	10,000

194,671

543,500

353,818

General Costs (21)			
(in euros)	2023	Budget'23	2022
Office Costs	39,428	24,500	23,161
Marketing and Communication	24,489	5,000	10,429
Meeting arrangements, Representation	68,668	24,500	37,841
Bank charges	12,653	1,000	6,358
Other general costs	8,935	23,000	7,071
	154,173	78,000	84,860
Depreciation tangible fixed assets	58,808	52,500	51,202
Total	212,981	130,500	136,062
<b>Information and Communications Techno</b>	logy (22	)	
(in euros)	2023	Budget'23	2022
Licenses and hosting	377,491	291,000	293,722
Database development Registry	1,987,863	470,000	1,150,472
Website development	10,526	5,000	963
Telecommunications	1,158	2,000	2,424
Total	2,377,038	768,000	1,447,581
The Registry database development is partly funded by an EU grant.			
Governance (23)			
(in euros)	2023	Budget'23	2022
Travel and accommodation Board	29,962	75,000	50,092
Travel and accommodation Committees	46,567	25,000	2,197
Other Governance costs	32,419	65,000	23,817
Total	108,948	165,000	76,106
Financial Expenses (24)			
(in euros)	2023	Budget'23	2022
Management fees bank	73,512	20,000	22,463
Exchange differences	75,512 839	4,000	4,152
Bank interest	-	1,000	44,489
Total	74,351	25,000	71,104

## Notes to the consolidated cash flow statement

## Breakdown of cash and cash equivalents

(in euros)

Cash and cash equivalents of the group at 31 December 2022	15,951,484
Balance sheet movements in cash and cash equivalents in 2023	5,893,374
Cash and cash equivalents of the group at 31 December 2023	21,844,858
The cash and cash equivalents are at the group's free disposal.	
Balance sheet movements in cash and cash equivalents in 2023 can be broken down as follows:	
(in euros)	
Cash flow from operating activities in 2023 Cash flow from investing activities in 2023	5,968,803 (75,429)
Total cash flow movements in 2023	5,893,374

## Notes to cash flows (25)

Additions to tangible fixed assets on the cash flow statement only include additions for which cash payments were made in 2023. There were no additions to tangible fixed assets under finance leases.

## **Company balance sheet as at 31 December 2023**

(after appropriation of the net result)

Assets

(in euros)	2	023	2	022
Fixed assets Tangible fixed assets (26)	-		-	
Financial fixed assets (27)	6,260,916		5,784,097	
		6,260,916		5,784,097
Current assets				
Receivables (28)	3,432,029		5,345,180	
Cash at bank and in hand (29)	9,614,078		9,257,446	
		13,046,107		14,602,626
Total assets		19,307,023		20,386,723
Equity and liabilities				
Equity (30)				
Earmarked reserves	-		-	
Other reserves	19,269,665		20,329,324	
		19,269,665		20,329,324
Current liabilities (31)		37,358		57,399
Total equity and liabilities		19,307,023		20,386,723

## **Company profit and loss account for 2023**

(in euros)	202	23	Budget'23	202	22
Revenues					
Memberships (32)	626,097		675,000	703,776	
Financial Income (33)	596,346		100,000	(179,243)	
Total revenues		1,222,443	775,000		524,533
Operating expenses					
Working Parties (34)	2,089,322		341,000	828,993	
General Costs (35)	10,397		1,000	1,044	
Governance (36)	108,810		110,000	74,749	
Financial Expenses (37)	73,573		21,000	49,832	
Total operating expenses		2,282,102	473,000		954,618
Net result		(1,059,659)	302,000		(430,085)
Distribution of the result					
Withdrawal / Addition other reserves		(1,059,659)		=	(430,085)

# Accounting policies used in preparing the company financial statements

## **Basis of preparation**

The company financial statements have been prepared in accordance with the Dutch Accounting Standard 640 (RJ 640). The financial statements were prepared on 11 April 2024.

For the accounting policies, please refer to the accounting policies of the consolidated financial statements.

## Notes to the company balance sheet

## **Tangible fixed assets (26)**

Movements in tangible fixed assets were as follows:

(in euros)	Other fixed operating assets
Balance on 1 January 2022:	
Cost Accumulated depreciation and impairments	4,534 (4,534)
Carrying amount at 1 January 2022 Additions Depreciation	- - -
Carrying amount at 31 December 2022	
Balance on 31 December 2022: Cost Accumulated depreciation and impairments	4,534 (4,534)
Carrying amount at 31 December 2022	
	Other fixed operating assets
Balance on 1 January 2023:	
Cost Accumulated depreciation and impairments	4,534 (4,534)
Carrying amount at 1 January 2023 Additions Depreciation	- - -
Carrying amount at 31 December 2023	
Balance on 31 December 2023: Cost Accumulated depreciation and impairments	4,534 (4,534)
Carrying amount at 31 December 2023	

## Financial fixed assets (27)

### **Other securities**

Other securities includes listed securities of € 6,260,916 (2022: € 5,784,097). Changes in the value of listed securities included in the profit and loss account amount to € 397,428 (2022: € (231,327)). The securities are stated at market value.

## **Current receivables (28)**

2023	2022
393,673	309,653
2,982,086	5,031,353
41,610	4,174
3,432,029	5,345,180
2023	2022
2,978,375	5,030,925
3,711	428
2,982,086	5,031,353
	393,673 2,982,086 41,610 3,432,029 2023 2,978,375 3,711

No interest (2022: 0%) was charged on the current account balances with the group company.

## Cash at bank and in hand (29)

(in euros)	2023	2022
Cash in hand	-	-
Cash at bank	9,614,078	9,257,446
Total	9,614,078	9,257,446

The total amount in cash at bank is at the entity's free disposal.

## Equity (30)

(in euros)

		Other reserves
Balance on 1 January 2022 Movements 2022		20,759,409
Result appropriation for 2022		(430,085)
Balance on 31 December 2022		20,329,324
Balance on 1 January 2023 Movements 2023		20,329,324
Result appropriation for 2023		(1,059,659)
Balance on 31 December 2023		19,269,665
Current liabilities (31)		
(in euros)	2023	2022
Trade creditors/suppliers Value Added Tax payable	14,776	40,989
Accruals and deferred income	22,582	16,410
Total	37,358	57,399
Accruals and deferred income can be broken down as follows:		
(in euros)	2023	2022
Deferred income Other	3,010	5,490
Other costs payable	19,572	10,920
Total	22,582	16,410

### **Financial instruments**

#### General

The information included in the notes for financial instruments is useful in estimating the extent of risks relating to both on-balance sheet and off-balance sheet financial instruments.

The organization's primary financial instruments, not being derivatives, serve to finance the organization's operating activities or directly arise from these activities. The organization's policy is not to trade in financial instruments for speculation purposes.

The principal risks arising from the organization's financial instruments are credit risks, liquidity risks, cash flow risks and price risks, which comprise foreign exchange, interest rate and market risks.

The organization's policy to mitigate these risks is set out below:

### Foreign exchange risk

The organization is exposed to foreign exchange risks arising from purchase and sales transactions denominated in a currency (British pound/ US dollar) other than the organization's presentation currency. The organization's policy is not to hedge foreign exchange risks.

### **Credit risk**

The organization trades only with parties which are commonly know as creditworthy (Industry). The organization's credit risk is minimal.

### Liquidity risk

The organization manages liquidity risk through the contract policy. Investments in human resources or in the structure of the organization (i.e., ICT-tools, software development, leasing) depends on the direct funding from the contracts related to those items. Close interim monitoring applies to these contracts.

#### Interest rate and cash flow risks

Interest rate risk is the risk of the fair value of future cash flows from financial instruments fluctuating due to changing market interest rates. The risk of market rate fluctuations run by the organization is of no significancy as there are no long-term receivables and liabilities which bear such a risk.

## Arrangements and commitments not shown in the balance sheet

### Legal claim

There are no legal claims or awareness of any legal claims coming up at the moment of reporting.

### Other commitments not shown in the balance sheet

There are no contractual commitments that have not been declared in the balance sheet.

## Notes to the company profit and loss account

## Memberships (32)

The number of centres in 2023 is 678 (2022:644) and individuals in 2023 is 253 (2022: 188). A provision for doubtful debts effected the membership income negatively with an amount of € 105,638 in 2023 (2022: € -)

## Financial Income (33)

The financial income exists of results from financial fixed assets (securities) and bank interest. An amount of € 383,675 is to be considered as unrealized (2022: € 247,410 negative).

## **Working Parties (34)**

(in euros)	2023	Budget'23	2022
Autoimmune Diseases	93,418	26,000	6,505
Acute Leukemia	357,601	26,000	131,505
Chronic Malignancies	290,772	26,000	237,259
Therapy and Immunobiology	164,923	26,000	18,542
Infectious Diseases	261,679	26,000	77,662
Inborn Errors	158,949	26,000	56,710
Lymphoma	211,249	26,000	148,597
Nurses Group	97,725	55,000	55,048
Pediatric Diseases	166,934	26,000	62,445
Severe Aplastic Anemia	88,528	26,000	(5,900)
Transplant Complications	190,050	26,000	40,620
Total	2,089,322	341,000	828,993

The working parties' expenses can include additional support given for working party studies and are only recognized when they occur.

## **General Costs (35)**

(in euros)	2023	Budget'23	2022
Other general costs	10,397	1,000	1,044

## **Governance (36)**

2023	Budget'23	2022
29,962	75,000	50,092
46,567	25,000	2,197
32,281	10,000	22,460
108,810	110,000	74,749
2023	Budget'23	2022
73,512	20,000	22,463
61	-	7
-	1,000	27,362
73,573	21,000	49,832
	29,962 46,567 32,281 108,810 2023 73,512 61	29,962 75,000 46,567 25,000 32,281 10,000  108,810 110,000  2023 Budget'23 73,512 20,000 61 - 1,000

## Signatories to the financial statements

Leiden,

Management board:

was signed Mrs. A.M. Sureda (President)

was signed Mrs. M.D. Hazenberg (Treasurer)

was signed Mr. J.A. Snowden (Secretary)

## Other information

## Proposed appropriation of the positive result for 2023

The Management board proposes to add the positive result for 2023 to the other reserves.

The consolidated net result for 2023 of € 5,893,351 will be appropriated as follows.

(in euros)

Supplement to other reserves 5,893,351
Net positive result 5,893,351

The proposed adjustments for the reserves required to be held by law and under the Articles of Association have already been included in the financial statements in the distributed result.

## **Events after the balance sheet date**

There are no events after the balance sheet date which do provide additional information on the actual situation at the balance sheet.

## **Listing Industry and Non-Industry sponsors**

Industry

AbbVie, Inc

Accord Healthcare

Alexion, AstraZeneca Rare Disease

aps Events & Media Ltd

Artica BV

Astellas Pharmaceuticals AEBE

AstraZeneca Farmacéutica Spain. S.A.

ATERHIT Association (IFM)

**BioARS Therapeutics** 

Biotest AG

Biotest Italia srl

**Blood Cancer UK** 

**Bristol Myers Squibb Business Services** 

Bristol Myers Squibb Company (BMS-US)

**Bristol-Myers Squibb** 

C2events

CareDx AB

Celgene International II SARL

Chiesi Farmaceutici S.p.A.

Consarctic GmbH

CSL Behring LLC

D&P Architecture de Communication

Devvser

DKMS (DE)

ExCellThera Inc.

Excerpta Medica B.V.

Fresenius Kabi Deutschland GmbH

Galapagos B.V.

Gilead Sciences Europe Ltd (Uxbridge)

GlaxoSmithKline Single Member S.A.

Global Business Travel Spain / Pfizer ES

HistoGenetics

IMMY

Janssen Pharmaceutica NV BE

Jazz Healthcare Italy S.r.l.

Jazz Pharmaceuticals Austria GmbH

Jazz Pharmaceuticals UK Ltd (GB)

Kite Pharma, Inc.

MEDAC GmbH

Medac Pharma S.r.l.

Merck Sharp & Dohme Corp (TX&NJ)

Merck Sharp & Dohme Corp (US Kenilworth)

Miltenyi Biomedicine GmbH

Miltenyi Biotec B.V. & Co. KG

Neovii Pharmaceuticals AG

Novartis Pharma AG CH

**Novartis Pharmaceuticals Corporation** 

Octapharma AG

**Omeros Corporation** 

Omeros Corporation (NY)

ORCA BIO, Inc.

OriGen Biomedical

Oxford PharmaGenesis Ltd

Pfizer Inc. NY

Pierre Fabre Médicament FR

QuidelOrtho

Rocket pharmaceuticals Inc.

Sanofi / RC Pulse Ltd
Sanofi Winthrop Industrie

SCT Cell Manufacturing s.r.o.

SMPA Research and Development Trust

SSL Behring GmbH

Stemline Therapeutics Switzerland GmbH

Takeda Oncology

Therakos (UK) Ltd (Mallinckrodt )

Vertex Pharmaceuticals (Europe) Ltd

Vertex Pharmaceuticals Inc.

Non-Industry

A.O. Riunti Marche Nord (AORMN)

A.O. Universitaria di Bologna

A.O.R Villa Sofia-Cervello

A.O.R.N. SAN.G MOSCATI

A.O.U C. della Salute& Scienza di Torino

A.O.U. di Modena Policlino

A.O.U. Senese, Policl.S.Maria alle Scotte

A.R.N.A.S. Civico - Di Cristina

A.Z. Sint-Jan

Aarhus University

Aarhus University Hospital

Aarhus University Hospital, Skejby

Aarhus University Hostital

Acibadem University Atakent Hospital

ACTREC, TATA MEMORIAL CENTRE

Adana Acibadem Hospital

Addenbrookes Hospital

Adnan Menderes University Med. Faculty

Aflac Cancer & Blood Disorders Center

Afyonkarahisar Health Sciences University

Aga Khan University Hospital

Akdeniz University Medical School

Akdeniz University School of Medicine

Al Zahra Hospital

Alberts Cellular Therapy

Alder Hey Children's NHS Found. Trust

Alexandros Rampotas

All India Institute of Medical Sciences, Bhubaneswar

Altinbas U., Özel Medical Park Bahçelievler Hospital

Altunizade Acibadem Hospital

Amedeo Avogadro Unv. of Eastern Piedmont

American Society for Blood and Marrow

Transplatation (ASBMT)

American University of Beirut MC

Amsterdam UMC (Emma kinderziekenhuis)

Amsterdam UMC locatie VUmc

Anadolu Medical Center Hospital

Ankara Bayindir Hospital

Ankara Oncology Hospital

Ankara Oncology Hospital/Merih Kizil Cakar

Ankara University Faculty of Medicine

Ann and Robert H. Lurie Children's Hospital

Antalya Education and Research Hospital

Anthony Nolan

Antoni Van Leeuwenhoek Hospital

Antwerp University Hospital

Antwerp University Hospital (UZA)

AOR VILLA SOFIA CERVELLO

**AOU Careggi Hospital** 

Charles University Prague (FNK Vinohrady)

#### Non-Industry (continuance)

Apollo CBCC Cancer Care Associazione Bambino Emopatico Brescia Centre Hospitalier Henri Duffaut **Apollo Speciality Hospital** Beijing Jishuitan Hospital Centre Hospitalier Lyon Sud (ARCHE) Arcispedale S. Maria Nuova (ASMN) Beilinson Hospital Centre Hospitalier Sud Réunion Armed Forces Bone MarrowTranspl. Cent. **Belfast City Hospital** Centre Hospitalier Univ. de Rennes Centre Hospitalier Universaire Vaudois Ashfield Meetings & Events Belorussian Research Centre (CHUV) Asklepios Klinik Altona Beneficência Portuguesa Hosp. São Paulo Centre Hospitalier Universitaire Vaudois Centre Leon Berard Asklepios Klinik St. Georg Benha University

Centre National de Greffe de Moelle Associazione Bambino Emopatico Brescia Birmingham Children's Hospital

ASST Grande Ospedale Metropolitano Niguarda Birmingham Heartlands Hospital Centre Oscar Lambret Blackpool Teaching Hospital NHS Foundation

ASST Papa Giovanni XXIII Centre Pierre et Marie Curie Trust

AST Pesaro Urbino BMJH - SANKALP Centro di Riferimento Oncologico

Aster CMI hospital Borsod-Abaúj- Zemplén County C. Hospital UTTH Centro Hospitalar e Univ. Coimbra

Ceská lékarská spolecnost Jana Evangelisty

Aster MIMS/Sudeep Vaniyath Brigham and Women's Hospital Purkyne, z.s.

Attikon U.General Hosp.>Hellenic Society Bristol Royal Hospital for Children Chaim Sheba Medical Center

AZ Delta British Bone Marrow Registry (BBMR) Charité - Universitaetsmedizin Berlin **AZ Turnhout** Brüderkrankenhaus St. Josef Paderborn Charité Universitätsmedizin Berlin

Az. OSP di Bologna-P.S.O.Malpighi **Bucharest University Emergency Hospital** Charité-CVK, University Medicine Berlin

C.H. de Troyes - Hôpitaux Champagne Sud

Az. Ospedaliera S. Croce e Carle C.H. de la Côte Basque Charles University Hospital

Azienda Ospedali Riuniti di Ancona Azienda Ospedaliera "SS. Antonio e Biagio e Cesare

C.H. de Versailles **CHIC Hospital** 

Azienda Ospedaliera Brotzu C.H.U. LISBOA NORTE, Santa Maria Children's Cancer Hospital Egypt Azienda Ospedaliera di Padova Cabrini Haematology and Oncology centre Children's University Hospital

Azienda Ospedaliera di Rilievo Nazionale Cancer Institute (WIA) Children's Health Ireland (CHI) Crumlin

Children's Healthcare of Atlanta/Emory

Azienda Ospedaliera Univ. Careggi Canterbury Health Laboratories University

Azienda Ospedaliero Univ. di Udine Cardarelli Hospital Chinese PLA General Hospital Azienda Ospedaliero Universitaria di Ferrara Care Hospitals CHR Orléans, Hôpital de la Source Christie NHS Trust Hospital Carl-Thiem Klinikum Azienda Ospedaliero Universitaria Pisana

Azienda Policlinico Vittorio Emanuele Cell therapy Unit of Inst Curie Hospital **CHRU Angers** Azienda Sanitaria Univ. Giuliano Isontina **CHRU Limoges** Cent. Medyczne Damiana Holding Sp. z o.o

Center of Oncology of the Lublin Region St. Jana z Bahrain Oncology Center **CHU Angers** 

BANC DE SANG I TEIXITS Central Hospital of Southern Pest CHU Bordeaux (ADERA)

Bank of Cyprus Oncology Centre Central University Marta Abreu of Las Villas CHU Bordeaux Groupe Hosp. Pellegrin

Barnali Srivatava **CHU CAEN** Centre Antoine Lacassagne **Baskent University Hospital** CHU de Lille Centre Henri Becquerel

**BASMA Pediatric Oncology Unit** Centre Hospitalier de Dunkerque CHU de Lille, Lille University Hospital

Beatson, West of Scotland Cancer Centre Centre Hospitalier de Lens CHU de Nantes Ashfield Meetings & Events CHU de Purpan Centre Hospitalier de Luxembourg Asklepios Klinik Altona Centre Hospitalier de Roubaix **CHU ESTAING** Asklepios Klinik St. Georg Centre Hospitalier de Saint Quentin **CHU Grenoble** 

CHU Grenoble Alpes - Université Grenoble Alpes

CHU Lapeyronie

**CHU Nantes** 

CHU Nice - Hôpital de l'ARCHET I

Churchill Hospital, dept of Haematology

City of Hope

City of Hope National Medical Center

Civitanova Marche Hospital

Clinica Alemana de Santiago/Daniel Ernst

Clínica de Marly

Clínica del Country

Clínica Universitaria de Navarra Clinical Hospital Merkur

Cliniques Universitaires St. Luc

CME-Congresses Ltd.

CMT Cellex Manufacturing Transports and

Logistics GmbH

Coltea Clinical Hospital

Columbia University

Combined Military Hospital

Complejo Hospitalario de A Coruña

Complejo Hospitalario de Navarra

Complexo Hospitalar de Niteroi

Çukurova University Medical School

Damietta Cancer Institute CRQ2+4VG

Danbury Hospital

DCZ St. Johannes Hospital Dortmund

Deepesh Lad

Dél-pesti Centrumkórház

Department of Veterans Affairs

Diagn. & Therapeutic Center of Athens

Diako Bremen

Diakonie Klinikum Schwäbisch Hall

Diakonie-Klinikum Stuttgart (Prev Tuebingen)

District headquarter hospital Lakki Marwat

Doç.Dr.Mehmet Ali Uçar Dokuz Eylul University

Donauspital Vienna

Dr Karen Gunther and Associates Inc

Dr Rela Institute & Medical Centre

DR RELA INSTITUTE AND MEDICAL CENTRE
Dr. Abd.Yurtaslan Ankara Onkoloji Egitim ve Arastirma

Hastanesi//Bahar Uncu Ulu

Dr. Abdurrahman Yurtaslan Ankara Oncology Training

and Research Hospital

Dr. Horst-Schmidt-Kliniken

DROMENA IKE

Edmond & Lily Safra Children's Hospital (SHEBA)

**EFS PACA CORSE** 

Ege University

Ege University Medical School

EGMOS

**Elements Communications** 

Elisabethinen-Hospital

**Emergency Hospital Louis Turcanu** 

**Emsey Hospital** 

Erasmus MC Cancer Institute

**Erciyes Medical School** 

Erciyes University, Faculty of Medicine

Eurasian Heatology Oncology Group (EHOG)

Eurasian Hematology Oncology Group (EHOG)

EUROCORD

European Hematology Association
European Institute of Oncology
Evang. Kliniken Essen-Mitte gGmbH

Evang. Krankenhaus Essen-Werden GmbH

Evangelisches Klinikum Bethel

Evangelisches Krankenhaus Hamm

**Evangelismos Hospital** 

Faculty of Medicine Ain Shams Research Institutefaculty of medicine Ain shams University Sheraton

Nozha

Faculty of Medicine Cairo University Hospitals

Faculty of Medicine-Alexandria Universty
Farrukh Ali Khan, Physician Dow University of Health

Science

Fielddrive BV

First Affiliated Hosp. of Soochow Univ.

Florence Nightingale Sisli Hospital

Florence Nightingale Sisii Hospital

Fondazione IRCCS - Ca' Granda

Fondazione IRCCS Policlinico San Matteo

Fondazione IRCCS San Gerardo dei Tintori

Fondazione MBBM c/o A.O.S. Gerardo Fondazione Policlinico Universitario Agostino

Gemelli

FOSCAL-UNAB

Frankfurter Diakonie Kliniken Franziskus-Hospital Harderberg Fred Hutchinson Cancer Center

freeman Hospital, Adult HSCT unit Fund. Inst. d'Investigació Sanitària Illes

Balears (IDISBA)

Fund. Invest. Biomedical Hospital 12 de

Octubre

FUND.PRIV.D'INVEST.ONCOLÒGICA VALL

HEBRON

Fundació Josep Carreras Contra la Leucèmia

Fundación Cardiovascular de Colombia

Fundación CAT

Fundación Favaloro
Fundación Jiménez Díaz

FLINDALFII

Fundeni Clinical Institute

Gaetano Pini Hospital, Università degli Studi

di

**Galway University Hospital** 

Gazi University Faculty of Medicine Gazi University School of Medicine

Gem. Salzburger Landesklinieken - SALK

 $Gemeinschaftsklinikum\ Mittelrhein\ gGmbH$ 

Gemelli Molise

George Papanicolaou General Hospital

Gerhard Boerner

Ghent University Hospital

Giorgio Orofino/student H. San Raffaele Gloucestershire Hospitals NHS (Cheltenham G.H.)

G.п.)

Goethe-Universitaet

GOVERNMENT MEDICAL COLLEGE

KOZHIKODE

Grand Hopital de Charleroi (GHdC) Grande Ospedale Metropolitano Bianchi

Melacrino Morelli

Grande Ospedale Niguarda

Great Ormond Street Hosp. Children's Ch. Groupe Hospitalier APHP Sorbonne

Universite

Groupe Hospitalier Artois-Ternois

Guy's and St Thomas' NHS Foundation Trust Hôpital Robert Debre Hospital Pequeno Príncipe/Carmem Bonfim
GZA Hospitals - campus Sint-Agustinus Hopital Saint Antoine Hospital Ramón y Cajal

H SS. Antonio e Biagio Hôpital Saint Louis 969 Hospital Regional de Málaga

H. Lee Moffitt Cancer Center Hôpital St Vincent de Paul Hospital Rio Hortega

Hacettepe University Hopital St. Louis Hospital Samaritano & Graacc
Hacettepe University Children`s Hospital Hôpital St. Louis Hospital San Maurizio

Hadassah University Hospital Hôpital Tenon Hospital Santa Creu i Sant Pau

Haematology DepartmentHopital TrousseauHospital Sao JoaoHaga HospitalHopital Victor DupouyHospital Sao Rafael

Hannover Medical School Hôpitaux Universitaires De Geneve Hospital Sirio-Libanes

HARMONY PLUS / EHA Hosp. Álvaro Cunqueiro -University Hospital U. Marqués de Valdecilla

HARMONY PLUS EHA Hosp. of Lithuanian Univ. of Health Scs. Hospital Univ. Virgen de las Nieves
Haukeland University Hospital Hosp. Reina Sofia (Fund. IBC) Hospital Universitari Arnau de Vilanova

Heinrich Heine Universitaet Hosp. Sant Joan de Deu Materno-Inf. Hospital Universitari i Politècnic la Fe
Helios Klinik Schwerin Hosp. Univ. Central de Asturias Hospital Universitari Son Espases (HUSE)(Fund.IdISBa)

HELIOS Klinikum Berlin-Buch Hosp. Univ. Sanitas La Zarzuela Hospital Universitari Vall d'Hebron HELIOS Klinikum Duisberg Hospices Civils de Lyon Hospital Universitario Donostia

Hospital Albert Einstein/Andreza Alice

HELIOS Klinikum Erfurt Ribeiro Hospital Universitario La Paz

Helsinki University Central Hospital Hospital Hospital Ampang Hospital Universitario Miguel Servet

Hematology Center after R. H. Yeolyan Hospital C. Panico Hospital Universitario Príncipe de Asturias

Hematology Center R.H Yeolyan (free Yr20+21) Hospital C.U. de Valencia\_Inclivia Hospital Universitario Puerta De Hierro

HIMA San Pablo Oncology Hosp/Jhon Guerra Hospital Clinic de Barcelona Hospital Universitario Quiron Salud

Hope Directorate, St. James's Hospital Hospital Clínico Univ. de Salamanca Hospital Universitario Virgen del Rocío

Hôpital Armand-TrousseauHospital Clinico Universitario de SantiagoHospital Universtiario TorrecardenasHopital AvicennesHospital de Gran Canaria Dr NegrinHospital Virgen de la VictoriaHopital BretonneauHospital de la PrincesaHUCH Comprehensive Cancer Center

Hopital Charles Nicolle Hospital de la Santa Creu i Sant Pau Huntsman Cancer Inst. / Univ. of Utah

Hopital d'Enfants de la Timone, CHU Hospital de León HUS - New Children's Hospital

HUS Helsinki University Hospital, New Children's

Hopital d'Enfants, CHU de Dijon Hospital dos Capuchos Hospital

Hôpital de Meaux (GHEF) Hospital Dr Luis Calvo Mackenna HUS Lasten ja Nuorten Sairaala

Hôpital F Muller Hospital Gregorio Marañón HUS Helsinki University Hospital

Hôpital E MullerHospital Gregorio MarañónHUS, Helsinki University HospitalHopital Henri MondorHospital Guglielmo da SalicetoHYATT REGENCY PARIS ETOILEHôpital Henri MondorHospital HirslandenICAN (Nouvel Hopital Civil (NHC))

Hopital Jean Minjoz (CHU Besancon)

Hospital Italiano De Buenos Aires

ICO – Hospital Duran i Reynals

Hospital Italiano de Buenos Aires (free

Hôpital Jeane de FlandreYr20+21)ICO H.U. de TARRAGONA JOAN XXIIIHopital La Miletrie, CHU PoitiersHospital Josep TruetaICO-Hosp. Univ. Germans Trias i PujolHôpital Maisonneuve-RosemontHospital Morales MeseguerIEO - European Institute of Oncology

Hôpital NeckerHospital of Barlettaìlstituto Oncologico Veneto IOV IRCCSHôpital PercyHospital of med. faculty BratislavaImmuneel Therapeutics

Hôpital Pitié Salpêtrière Hospital of Ravena Imperial College

Kokilaben Dhirubhai Ambani Hospital

Kuopio University Hospital

Matchis Foundation

Mauricio Sarmiento

Mayo Clinic

Maternal and Child Hospital Gregorio Marañón

## Non-Industry (continuance) Indraprastha Apollo Hospitals

Jessa Ziekenhuis

**UUsimaa** 

John Radcliffe Children's Hospital

Justus-Liebig-University Giessen

Joint Authority for the Hospital District of Helsinki and

Inst. d'Hematologie et d'Oncologie Ped.

Inst. Português de Oncologia do Porto Kantonsspital Aarau AG Lady Ridgeway Hospital for Children Inst. Portugues Oncologia Lisboa Kantonsspital St.Gallen Landspitali University Hospital Inst. Univ. du Cancer Toulouse (IUCT) Kaplan Medical Centre Leicester Royal Infirmary Inst.Hemat.& Bloodtransf. Warsaw Karolinska University Hospital, Huddinge Leiden University Hospital Institut de Cancerologie Lucien Neuwirth Kasr Alainy Faculty of Med., Cairo Univ. Leiden University Medical Centre (LUMC) LEVER DE RIDEAU VOYAGES **Institut Gustave Roussy** Kath. Krankenhaus Hagen gem. GmbH Kepler Universitätsklinikum Linz Liberum IME Ltd Institut Jules Bordet Institut Paoli Calmettes , Pr.de Transpl&Th.Cellulaire King Abdulaziz medical city Jeddah LKH - University Hospital Graz Institute G. Gaslini King Abdullah Medical City LOH GUAN LYE SPECIALISTS CENTRE Instituto de Cancerologia (Erasmus MC - Sophia>'20) King Fahad Medical City London Bridge Hospital Instituto de Prevision Social Lower Silesian Center of Oncology(DCTK) King Fahad Specialist Hospital Instituto Oncológico Nacional - SOLCA Guayaquil King Faisal Spec. Hosp. & Research Cent. LUMC P Spruitenburg KING FAISAL Spec. Hosp.& Research-INSTITUTUL REGIONAL DE ONCOLOGIE Jeddah Lurie Children's Hospital of Chicago IQVIA Luzerner Kantonsspital King Hussein Cancer Centre (KHCC) IRCCS Burlo Garofo, Ist. Maternal and Child health King's College Hospital NHS Maidstone Hospital King's College Hospital NHS Foundation **IRCCS Burlo Garofolo** Trust Makarios Hospital III KITVAK Bone Marrow and Oncology Centre **Establishment and Development** IRCCS CROB Foundation Mak-System France Manchester FT/Department of Paediatric IRCCS Ist. Tumori "Giovanni Paolo \* Klinicki centar Srbije (CCS) Haematology IRCCS San Raffaele Scientific Institute Klinikum Augsburg Manchester Royal Infirmary IRCCS, Casa Sollievo della Sofferenza Klinikum Bielefeld Manchester University Foundation Trust IRRCS Ospedale Pediatrico Bambino Gesù Klinikum Bremen-Mitte Manipal hospital Isala Klinieken Klinikum Chemnitz gGmbH Mansoura University Children's Hospital Ist Naz Tumori - Fond. Sen G Pascale Klinikum Darmstadt GmbH Mansoura University-Faculty of Medicine Istanbul Medipol University Klinikum Ernst von Bergmann Marburg University Istanbul Medipol University, Klinikum Frankfurt (Oder) GmbH Maria Isilda Lopes Rebelo Klinikum Grosshadern (Kl.U. Munchen) Istanbul University-Cerrahpasa Maria Sklodowska-Curie Institute Maria Sklodowska-Curie National Research Institute of Klinikum hochsauerland Istishari Hospital Oncology Istituto Clinico Humanitas Klinikum Karlsruhe gGmbH Marien Gesellschaft Siegen gGmbH Istituto Nazionale Tumori, Fondazione G Pascale Marien Gesellschaft Siegen, St. Marien-Krankenhaus Klinikum Minden Istituto Oncologico Veneto-IRCSS, P-TMO autologo Klinikum Nuernberg Marlies Van Hoef Klinikum Oldenburg Marmara University Istituto Ortopedico Rizzoli Istituto Tumori "Giovanni Paolo II" – IRCCS Klinikum Osnabrueck Marmara University Hospital Jacobi Medical Center, Albert Einstein College of Medicine Internal Medicine Klinikum Rechts der Isar Martin-Luther-Univ. Halle-Wittenberg

Klinikum Schwabing

Koç University Hospital

Klinikum Stuttgart-Olgahospital

Klinikum Stuttgart

Kansai Medical University Medical Center

Kantonsspital Aarau

Parkside Hospital

Pelham Crescent S.r.l.

Pediatric University Teaching Hospital

Peking University People's Hospital

#### Non-Industry (continuance)

Mr Andrea Acerbis/student H. san Raffaele

Mudskipper Inc

Munira Borhany

NADACE HAIMOM

Mayo Clinic Florida. Hematology/Oncology Národný onkologický ústav Odense University Hospital Mazumdar Shaw Cancer Cent. Narayana H. Nat. Hospital of Haematological Diseases ÖGK Hanusch krankenhaus Mazzoni Hospital National and Kapodistrian Univ.of Athens Olivier Veilleux Oncol.& Emat. Pediatrica Lalla Seràgnoli National Cancer Institute Med. Universitaet Rostock Medical city Dallas/US Oncology National Cancer Institute Cairo University **Oncology Center Mansoura University** National Center for Cancer Care & Medical Faculty Mannheim, Heidelberg University Research(NCCCR) Örebro University Hospital Medical Park Antalya Hospital National Hospital Kandy, Ministry of Health OSI Ezkerraldea-Enkarterri-Cruces Oslo University Hospital HF (OUS), Rikshospitalet, Avd. National Institute of Blood Diseases & Bone Medical Park Hospitals>Medicana International **Marrow Transplantation** for blodsykdommer, Sek National Institute of blood diseases and Medical School University of Salerno Oslo University Hospital, Rikshospitalet bone marrow Medical University of Heidelberg Ospedale Civile di Pescara National Registry of HSC Voluntary Donor Medical University of Lodz National Taiwan University Hospital Ospedale dei Bambini Medical University of Vienna National University Hospital Ospedale Dell'Angelo Medical University of Warsaw Hospital Nayera Abdelhafez Ospedale di Circolo di Busto Arsizio Medigas Italia Srl. New Children's Hospital Ospedale di Circolo, ASST Sette Laghi Medisch Spectrum Twente New York University Langone Health Ospedale Infantile Regina Margherita Medizinische Universitaet Wien National Cancer Institute Ospedale La Maddalena - Dpt. Oncologico MedscapeLIVE! National Cancer Institute Cairo University Ospedale Nord National Center for Cancer Care & Medstar Antalya Hospital Research(NCCCR) Ospedale Nuovo di Legnano MedStar Georgetown University Hospital/Pashna Munshi National Hospital Kandy, Ministry of Health Ospedale Regionale Bellinzona e Valli National Institute of Blood Diseases & Bone Memorial Bahcelievler Hospital **Marrow Transplantation** Ospedale S. Camillo-Forlanini National Institute of blood diseases and Memorial Bahçelievler Hospital bone marrow Ospedale San Carlo Memorial Sloan Ketterin Cancer Center National Registry of HSC Voluntary Donor Ospedale San Francesco Memorial Sloan Kettering Cancer Center National Taiwan University Hospital Ospedale San Gerardo National University Hospital Memorial Sloan Kettering Cancer Center. Ospedale San Martino (IRCCS) Metaxa Cancer Hospital Nayera Abdelhafez Ospedale San Raffaele s.r.l. METAXA CANCER HOSPITAL 1020 New Children's Hospital Ospedale Santa Maria Goretti Meyer University Children's Hospital New York University Langone Health Ospedale Vito Fazzi NHS Blood & Transplant, Therapeutic Military Institute of Health Services **Apheresis Services** Oulu University Hospital Military Medical Academy Belgrade **NHS Grampian** Özel Koru Ankara Hastanesi Moffitt Cancer Center/Aleksandr Lazaryan NHS National Services Scotland Pakistan kidney liver transplant institute and research Pamela Dennis Montenegro Chahar, Physician Mother & Child Health Institute of Sezbia Ninewells Hospital Hospital del Niño Mount Elizabeth Hospital (Free 2020+21) Niño Jesus Children's Hospital Paramveer Singh NKI-Antoni van Leeuwenhoek Hospital Mount Elizabeth Novena Specialist Centre (NKI-AVL) Parinda Mehta

NMDP

North Estonia Medical Centre

Nottingham University Hospital

Nottingham University

Royal Devon and Exeter Hospital NHS

Royal Hospital for Children (Glasgow)

PENANG GENERAL HOSPITAL Royal Marsden Hospital South African Nat. Blood Services SANBS Royal Marsden NHS Trust Perrino Hospital Southampton General Hospital Royal United Hospital Bath Philipps Universitaet Marburg Sozialstiftung Bamberg Policlinico G.B. Rossi **Ruby Hall Clinic** Spedali Civili - Brescia Polish Stem Cell Bank FamiCord Group S. Bortolo Hospital ST GEORGE'S UNIV HOSP NHS FT Post Graduate Inst of Med Educ.&Research Sabrina Giammarco St James's Institute of Oncology Poznan University of Medical Sciences Sadaf Altaf St Jude Children's Research Hospital Pr.Maxima Center / UHC WKZ Sagar Bhattad St. Anna Hospital Prabani Shiromala Maddumarachchi Sahlgrenska University Hospital Götenborg St. Anna Kinderspital Presidio Ospedaliero Ca`Foncello Sahyadri Speciality Hospital St. Antonius Hospital Prince Sultan Med. Military City (PSMMC) Samodzielny Publiczny St. Augustinus / GZA VZW Queen Mary Hospital San Raffaele Scientific Institute St. Barbara-Klinik Hamm GmbH Queens University of Belfast Sanjay Gandhi Post Graduate Inst of Med. St. Franziskus Hospital Sanjay Gandhi Post Graduate Institute Radboud University Medical Center Nijmegen (SGPGI) St. James's Hospital Sanjay Gandhi Postgraduate Institute of Rambam Medical Center Medical Science St. Mary's Hospital Raniit Kumar Chatada Srivaishnava Santa Chiara Hospital St. Sophia Children's Hospital **RASO VIAGENS E TURISMO** Sara Makkeyah St. Vincent's Hospital Red Cross Hospital Munich SAS Mak-System France St.Bartholomew's & Royal London NHST Red de Salud UCChristus-Francisco Barriga Saudi Scientific Society of BMT St. Vincent's Hosp., Kinghorn Cancer Cent. Saudi Society of Blood & Marrow Transplantation (SS-BMT) Staedtisches Klinikum Braunschweig Region Östergötland (Linköping University) Schneider Children's MC of Israel Staedtisches Krankenhaus Kiel Rems-Murr-Klinikum Sez. Ematologia - Centro Trapianti STAND2B State Institution Minsk Scientific and Practical Center Ribeirao Preto Med. School, Univ. Sao Paulo SFGM-TC for Surgery Riga East University hospital SGPGI Stefan Morsch Siftung Rigshospitalet Shaare Zedek Medical Center Stg op de Been/MultipleSclerosis Patient Shaukat Khanum Memorial Cancer Hospital Stichting Sanquin Bloedvoorziening, Research and RMEI Medical Education, LLC and Research Centre Labservices RMEI Medical Education, LLC Sheba Medical Center, Tel-Hashomer **Swiss Transfusion SRC** Robert Bosch Krankenhaus Sheffield Childrens NHS Foundation Trust Sydney Children's Hospital Robert Bosch Krankenhaus Stuttgart Sheffield Teaching Hospitals NHS Trust Takeda Pharmaceuticals U.S.A. Sheffield Teaching Hospitals/ University of Sheffield Tampere University Hospital (Pirkanmaan S.K.) Robert\_Bosch\_Krankenhaus Roosevelt Hospital Silesian Medical Academy Tan Tock seng Hospital Simona Calza, Nurse IRCCS Istituto **Rosales Ortiz** Giannina Gaslini Tan Tock Seng Hospital (2020) **Rotherham NHS Foundation Trust** Singapore General Hospital Tartu University Hospital Royal Bournemouth Hospital Sir H.N.Hospital Tata Medical Center Royal Children's Hospital (AU) Skäne University Hospital Tel Aviv Sourasky Medical Center Royal Children's Hospital, Melbourne Skanes University Hospital Tel-Aviv Sourasky Medical Center

Somerset NHS Foundation Trust

Soroka University Medical Center

Terumo BCT Europe

Terumo BCT Europe NV

The Children's Hospital at Westmead Univ. Hosp. Queen Johanna-ISUL University Children's Hospital Zürich The Christie NHS trust University Clinical Center (Gdansk) Univ. Hosp., Collegium Med. UMK The Clatterbridge Cancer Centre NHS Foundation Univ. La Sapienza, policlinico Umberto University College London Hospital Trust The Dudley Group of Hospitals NHS Trust University Hospital Aachen Univ. Med. Cent. Schleswig-Holstein Univ. of Miami Sylvestor Comprehensive The Great Western Hospital University Hospital Basel Cancer Cent. Univ. of Novi Sad, Cent. of The Great Western Hospitals NHS Foundation Trust Vojvodina(MEDICON) University Hospital Bern University Hospital Birmingham NHSTrust The Kinghorn Cancer Centre, St Vincent's Hospital Univ. of Parma Univ. St.Cyril & Methodius, Med. faculty The Medical University of Warsaw University Hospital Brno The Norfolk and Norwich U.H. NHS Univ.of Florida - UF Health Cancer Cent. University Hospital Center Rebro The Royal Children's Hospital Melbourne Univ.sklinikum Frankfurt Goethe-Univ. University Hospital Dubrava The South African National Blood Services Univeristà degli Studi di Milano University Hospital Eppendorf The Trustee of London Clinic Universidad de Murcia University Hospital Erlangen Thomas Wainwright, lab Technician NHS Blood and T. Universidade Federal do Ceara University Hospital Essen Tishreen hospital Universita Cattolica S. Cuore University Hospital Galway TMDU (OLD:Keio University School of Medicine) Università degli Studi di Napoli Federico II University Hospital Gasthuisberg Tor Vergata Univ. - Faculty of Medicine Università di Cagliari University Hospital Gent - UZ Gent Universita` Di Sassari Tor Vergata University of Rome University Hospital Giessen Turku University Hospital Universitaet Bonn University Hospital Hradec Králové U. Childrens Hospital Würzburg Universitaet Tuebingen University Hospital Innsbruck U. Clinical of Haematology Skopje Universitaetsklinikum Dresden University Hospital La Fe U.H. of Heraklion-Univ. of Crete School Universitaetsklinikum Goettingen University hospital Leipzig U.H. Royal Liverpool/Clatterbridge Cancer Centre Universitaetsklinikum Jena University Hospital Maastricht (MUMC) U.H.. Coventry & Warwickshire (UHCW) Universitaetsklinikum Muenster University Hospital Motol U.K. Hamburg-Eppendorf Universitaetsklinikum Wuerzburg University Hospital of Oran U.O. Ematologia con Trapianto University Hospital of Parma Universitaetsklinium Magdeburg **UHC** "Mother Theresa" Universitaetsmedizin Mannheim University Hospital of Patras UHKT Universitair Ziekenhuis Brussel University Hospital of Perugia Universitair Ziekenhuis Brussel (UZ Brussel) UKC Ljubljana University Hospital of Ulm UM Greifswald Klinik fuer Innere Medizin C Universitätsklinikum Hamburg-Eppendorf University Hospital of Wales Universitätsklinikum Knappschaftskrankenhaus Bochum GmbH UMC Schleswig-Holstein, Campus Kiel University Hospital Ostrava UMC Utrecht Universitätsklinikum Köln (AöR) University Hospital Policlinico Riuniti Foggia **Umea University Hospital** Universitätsklinikum Magdeburg A. ö. R University Hospital Sankt Poelten Unidad de trasplantes Clínica León XIII Universitätsklinikum Ulm University Hospital Southampton NHS FT Unikliniek Dusseldorf Université de Montréal University Hospital Split Uniklinik Cologne Université Paris Diderot University Hospital Tuebingen Unité d'Hématologie Oncologie Pédiatrique Hôpital Universite Paris IV, Hospital la Pitie-University Hospital Uppsala des enfants - CHU de Bordeau Salpetriere Univ. Hosp. of North Staffordshire Universiti Malaya Medical Centre University Hospital Zürich University Hospitals Bristol & Weston NHS Foundation University Children's Hospital in Krakow University Children's Hospital Zuerich University Hospitals Plymouth NHS Trust

University Med. Center Hamburg-Eppendorf
University Medical Center Groningen (UMCG)

University Medical Center Mainz

University Medical Center Utrecht
University Medical Centre Utrecht

University Medical Centre Würzburg, IKTH

University Medicine Greifswald

University of Alabama

University of Ankara

University of Calgary

University of Cape Town Faculty of Health Sciences

University of Cologne (UKK)

University of Crete

University of Debrecen, Clinical Center

University of Freiburg

University of Gothenburg

University of Helsinki

University of Jena

University of Liege

University of Maryland Baltimore

University of Miami

University of Milano

University of Minnesota

University of Muenster
University of Napels Federico II

University of Pécs

University of PretoriaCandice Hendricks

University of Rochester University of Saarland

University of Virginia Medical Center

University Regensburg

Uniwersytecki Szpital Kliniczny

UOC Trasfusion Medicine, Immunohematology and

Hematology Labs

Uppsala university

USD Trapianti di Midollo, Adulti (Brescia)

Valduce Hospital

Vanderbilt University

Vanderbilt university medical center

Vanderbilt Univesity Medical Center

Vasantha Subramanian Hospital

Vilnius Univ. Hospital Santaros Klinikos Vilnius University Hospital Santaros

Klinikos(UH Santaros)
Vinmec High Tech Center

VU Medisch Centrum (Corien Eeltink)

VU University Medical Center Amsterdam

Warszawski Uniwersytet Medyczny

WebsEdge Ltd

Welsh Bone Marrow Donor Registry

Western General Hospital
Westpfalz-Klinikum GmbH

Wilhelminenspital
Wisepress Ltd

Wits Donald Gordon Medical Centre

Wroclaw Medical University, Cape of Hope

Yeditepe University Hospital

Yeni Yüzyýl Üniversity Gaziosmanpaþa H. Yeniyuzyil University, Gaziosmanpasa

Hospital

Ysbyty Gwynedd (NHS 111 Wales)

Ýstanbul Tip Fakultesi

Zhejiang University School of Medicine

ZNA

ZSIS U.klinikum Bochum Gmbh

## **Auditors report**

#### Accountants



To the Board of directors of European Society for Blood and Marrow Transplantation Baker Tilly (Netherlands) N.V. Fascinatio Boulevard 260 Postbus 8545 3009 AM Rotterdam

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KvK: 24425560

### INDEPENDENT AUDITOR'S REPORT

### A. Report on the audit of the financial statements 2023 included in the annual report

#### Our opinion

We have audited the financial statements 2023 of European Society for Blood and Marrow Transplantation based in Maastricht.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of European Society for Blood and Marrow Transplantation as at 31 December 2023 and of its result for 2023 in accordance with the 'RJ-Richtlijn 640 Organisaties zonder winststreven' (Guideline for annual reporting 640 'Not-for-profit organizations' of the Dutch Accounting Standards Board).

The financial statements comprise:

- 1. the consolidated and company balance sheet as at 31 December 2023;
- 2. the consolidated and company profit and loss account for 2023; and
- 3. the notes comprising of a summary of the accounting policies and other explanatory information.

#### Basis for our opinion

We conducted our audit in accordance with Dutch law, including the Dutch Standards of Auditing. Our responsibilities under those standards are further described in the 'Our responsibilities for the audit of the financial statements' section of our report.

We are independent of European Society for Blood and Marrow Transplantation in accordance with the Verordening inzake de onafhankelijkheid van accountants bij assurance-opdrachten (ViO, Code of Ethics for Professional Accountants, a regulation with respect to independence) and other relevant independence regulations in the Netherlands. Furthermore we have complied with the Verordening gedrags- en beroepsregels accountants (VGBA, Dutch Code of Ethics).

We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.



### B. Information in support of our opinion

We designed our audit procedures in the context of our audit of the financial statements as a whole and in forming our opinion thereon. The following information in support of our opinion was addressed in this context, and we do not provide a separate opinion or conclusion on these matters.

#### Audit approach fraud risks

#### Our responsibility

Although we are not responsible for preventing fraud or non-compliance and we cannot be expected to detect non-compliance with all laws and regulations, it is our responsibility to obtain reasonable assurance that the financial statements, taken as a whole, are free from material misstatement, whether caused by fraud or error. Non-compliance with laws and regulations may result in fines, litigation or other consequences for the foundation that may have a material effect on the financial statements.

#### Our audit response related to fraud risks

We identified and assessed the risks of material misstatements of the financial statements due to fraud. During our audit we obtained an understanding of the foundation and its environment and the components of the system of internal control, including the risk assessment process and management's process for responding to the risks of fraud and monitoring the system of internal control, as well as the outcomes. The (fraud) risk management is mainly organized informally.

We evaluated the design and relevant aspects of the system of internal control and in particular the fraud risk assessment. We evaluated the design and the implementation and, where considered appropriate, tested the operating effectiveness, of internal controls designed to mitigate fraud risks.

As part of our process of identifying fraud risks, we evaluated fraud risk factors with respect to financial reporting fraud. We evaluated whether these factors indicate that a risk of material misstatement due to fraud is present.

Our audit response related to risks of non-compliance with laws and regulations

We assessed factors related to risks of non-compliance with laws and regulations that could reasonably be expected to have a material effect on the financial statements from our industry experience, through discussions with management, getting understanding about the nature of the entity and its structure, performing substantive tests of details of classes of transactions.

We incorporated elements of unpredictability in our audit. We also considered the outcome of our other audit procedures and evaluated whether any findings were indicative of fraud or non-compliance.

We identified the following fraud risks and performed the following specific procedures:

### Risk of fraud due to management override of controls

Risk:

The management board is in a position to commit fraud because it is able to manipulate accounting records and prepare fraudulent financial statements by overriding controls that otherwise appear to be operating effectively.

Responses:

We have evaluated the design and existence of internal control measures in the processes for generating and processing journal entries and making estimates, assuming a risk of disruption of that process. We have assessed the process surrounding the preparation of financial reporting.

We also paid specific attention to the access security in the IT system and the possibility of breaking through the segregation of duties.



We have selected journal entries based on risk criteria, such as journal entries in revenue recognition, direct costs and other operating costs.

Audit procedures, such as substantive testing of journal entries with underlying documentation, have been performed on this, in which we also paid attention to significant transactions outside the normal course of business and estimates.

Part of our procedures relates to the reviewing of the minutes of the Board of Directors meetings and Executive Committee meetings.

Our audit procedures have not resulted to specific indications of fraud or suspicions of fraud with regard to the breach of internal control by the management board.

## Risk of illegitimate payments due to insufficient internal control procedures regarding changes of creditor master data in the financial administration.

Risk:

We have identified that the rights regarding the changing of creditor master data have been set too broadly, as there are users able to authorize adjustments in the creditor master data whilst also having access to the bank application.

As such the risk exists that payments have been made to the wrong bank account numbers. These broad rights in the financial administration provide employees with the opportunity to commit fraud.

Responses:

We have evaluated the design and existence of internal control measures in the payment process. We paid specific attention to the access of management in the finance and bank application and assessed the possibility of breaking through segregation of duties.

In addition, we have evaluated the design and existence of internal control measures in the purchase process. We paid specific attention to the process of authorization of purchase invoices.

We determined that all purchases authorization of purchases invoices by appropriate personnel (in line with procuration schedule).

We performed substantive procedures on the mutations in creditor master data by obtaining the logfile of creditor master data during the financial year. For the selected creditor mutations, we checked the actual mutation by reconciling to underlying supportive documentation like purchase invoices.



We analyzed the bank transactions and performed a IBAN-NAME check. For specific employees who have rights to adjust creditor master data, we analyzed payments made to their bank account and searched for possible related parties of these employees.

For a sample we have checked the bank accounts with underlying invoices or an IBAN-NAME check using software to determine whether the name of the contra accounts matches the name from the IBAN-NAME software.

Our audit procedures did not reveal indications and/or reasonable suspicion of fraud and non-compliance that are considered material for our audit.

Based on our risk analysis and the nature of the entity, we did not identify a fraud risk regarding revenue recognition. This mainly because we see no tendency and benefit for management to commit financial reporting fraud in the revenue. Furthermore the opportunity to manipulate the annual revenue stream is limited. Annual meeting sponsors have fixed sponsorships and are published in the annual program. The opportunity in the participants fee is also limited, because they register and pay on the website of the annual meeting. In the clinical trials revenue stream we see only an opportunity for shifting profits to another financial year, but there is no incentive for management to commit such a financial reporting fraud. For the other revenue streams we have not identified any material fraud risk factors, that lead to a material fraud risk.

#### Audit approach going concern

The board of directors has performed its going concern assessment as included in the general notes of the financial statements and has not identified any significant going concern risks. We performed the following procedures on the statement of the board:

- we considered whether the board of directors assessment of the going concern assumption includes all relevant information of which we are aware as a result of our audit;
- we established that the business activities could continue based on board's estimation of financial resources.
- We have read the budget 2024 in the board report in which a negative result of € 2.3 mio is expected. We agree with the board, that there are sufficient resources to absorb this negative result.
- we have read the future outlook paragraph of the management board's report with respect to the future results of the entity.

Most relevant are the reputation and the resources of the European Society for Blood and Marrow Transplantation. The foundation has more than sufficient resources to support the activities for at least one more year.

The outcome of our audit procedures did not give reason to perform additional procedures on management's going concern assessment. Based on our knowledge and understanding obtained from the audit of the financial statements and the financial position of the foundation as reflected in the financial statements, we believe that the use of the going concern assumption is justifiable. However, future events or conditions could affect the going concern assumption.



### C. Report on the other information included in the annual report

The annual report contains other information, in addition to the financial statements and our auditor's report thereon. Based on the following procedures performed, we conclude that the other information is consistent with the financial statements and does not contain material misstatements.

We have read the other information. Based on our knowledge and understanding obtained through our audit of the financial statements or otherwise, we have considered whether the other information contains material misstatements.

By performing these procedures, we comply with the requirements of the Dutch Standard 720. The scope of the procedures performed is substantially less than the scope of those performed in our audit of the financial statements.

The board of directors is responsible for the preparation of the other information, including the director's report in accordance with the 'RJ-Richtlijn 640 Organisaties zonder winststreven' (Guideline for annual reporting 640 'Not-for-profit organizations' of the Dutch Accounting Standards Board).

### D. Description of responsibilities regarding the financial statements

### Responsibilities of the board of directors for the financial statements

The board of directors is responsible for the preparation and fair presentation of the financial statements in accordance with the 'RJ-Richtlijn 640 Organisaties zonder winststreven' (Guideline for annual reporting 640 'Not-for-profit organizations' of the Dutch Accounting Standards Board). Furthermore, the board of directors is responsible for such internal control as the board of directors determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

As part of the preparation of the financial statements, the board of directors is responsible for assessing the foundations ability to continue as a going concern. Based on the financial reporting framework mentioned, the board of directors should prepare the financial statements using the going concern basis of accounting, unless the board of directors either intends to liquidate the foundation or to cease operations, or has no realistic alternative but to do so.

The board of directors should disclose events and circumstances that may cast significant doubt on the foundations ability to continue as a going concern in the financial statements.

### Our responsibilities for the audit of the financial statements

Our objective is to plan and perform the audit engagement in a manner that allows us to obtain sufficient and appropriate audit evidence for our opinion.

Our audit has been performed with a high, but not absolute, level of assurance, which means we may not detect all material errors and fraud during our audit.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. The materiality affects the nature, timing and extent of our audit procedures and the evaluation of the effect of identified misstatements on our opinion.



We have exercised professional judgement and have maintained professional scepticism throughout the audit, in accordance with Dutch Standards on Auditing, ethical requirements and independence requirements. Our audit included among others:

- identifying and assessing the risks of material misstatement of the financial statements, whether due to
  fraud or error, designing and performing audit procedures responsive to those risks, and obtaining audit
  evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a
  material misstatement resulting from fraud is higher than for one resulting from error, as fraud may
  involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
- obtaining an understanding of internal control relevant to the audit in order to design audit procedures
  that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
  effectiveness of the entity's internal control;
- evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management;
- concluding on the appropriateness of management's use of the going concern basis of accounting, and based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the foundations ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause a foundation to cease to continue as a going concern;
- evaluating the overall presentation, structure and content of the financial statements, including the disclosures; and
- evaluating whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

Because we are ultimately responsible for the opinion, we are also responsible for directing, supervising and performing the group audit. In this respect we have determined the nature and extent of the audit procedures to be carried out for group entities. Decisive were the size and/or the risk profile of the group entities or operations. On this basis, we selected group entities for which an audit or review had to be carried out on the complete set of financial information or specific items.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant findings in internal control that we identify during our audit.

Rotterdam, 11 April 2024

Baker Tilly (Netherlands) N.V.

was signed

drs. L. den Boer RA