

Return of Organization Exempt From Income Tax

2006

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2006 calendar year, or tax year beginning 1/1/2006 , 2006, and ending 12/31/2006 , 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
Children's Tumor Foundation
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
95 Pine Street 16th Floor
 City or town, state or country, and ZIP + 4
New York, NY 10005-3904

D Employer identification number
13 2298956

E Telephone number
 (**212**) **344-6633**

F Accounting method: Cash Accrual
 Other (specify) ▶

G Website: ▶ **www.ctf.org**

J Organization type (check only one) ▶ 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **5143078**

M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:					
	a Contributions to donor advised funds	1a		0		
	b Direct public support (not included on line 1a)	1b		4,212,448		
	c Indirect public support (not included on line 1a)	1c		119,806		
	d Government contributions (grants) (not included on line 1a)	1d		0		
	e Total (add lines 1a through 1d) (cash \$ 4,199,899 noncash \$ 132,355)	1e			4,332,254	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			28,292	
	3 Membership dues and assessments	3			6,050	
	4 Interest on savings and temporary cash investments	4			3,635	
	5 Dividends and interest from securities	5			87,349	
	6a Gross rents	6a		0		
	b Less: rental expenses	6b		0		
c Net rental income or (loss). Subtract line 6b from line 6a	6c			0		
7 Other investment income (describe ▶)	7			0		
Revenue	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		492,007	8a	0		
	b Less: cost or other basis and sales expenses	480,978	8b	0		
		11,029	8c	0		
	c Gain or (loss) (attach schedule) Stmt 1					
	d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			11,029	
	9 Special events and activities (attach schedule). If any amount is from gaming, check here <input checked="" type="checkbox"/>					See Statement 2
	a Gross revenue (not including \$ 1,156,805 of contributions reported on line 1b)	9a		193,491		
9b			193,491			
c Net income or (loss) from special events. Subtract line 9b from line 9a	9c			0		
10a Gross sales of inventory, less returns and allowances	10a		0			
	10b		0			
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c			0		
11 Other revenue (from Part VII, line 103)	11			0		
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			4,468,609		
Expenses	13 Program services (from line 44, column (B))	13		3,303,654		
	14 Management and general (from line 44, column (C))	14		381,075		
	15 Fundraising (from line 44, column (D))	15		644,323		
	16 Payments to affiliates (attach schedule)	16		0		
	17 Total expenses. Add lines 16 and 44, column (A)	17			4,329,052	
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12	18		139,557		
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		2,936,348		
	20 Other changes in net assets or fund balances (attach explanation) Stmt 3	20		181,225		
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			3,257,130	

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a 0	0		
22b	Other grants and allocations (attach schedule) (cash \$ 1,253,840 noncash \$ 0) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>	22b 1,253,840	1,253,840		
23	Specific assistance to individuals (attach schedule)	23 0	0		
24	Benefits paid to or for members (attach schedule)	24 0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule) Stmt 5	25a 475,294	295,315	69,743	110,236
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b 0	0	0	0
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c 0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	26 731,199	502,747	87,807	140,645
27	Pension plan contributions not included on lines 25a, b, and c	27 15,668	11,744	2,057	1,867
28	Employee benefits not included on lines 25a - 27	28 161,241	106,742	20,961	33,538
29	Payroll taxes	29 86,194	56,280	11,512	18,402
30	Professional fundraising fees	30 0	0	0	0
31	Accounting fees	31 27,325	0	27,325	0
32	Legal fees	32 1,464	1,464	0	0
33	Supplies	33 19,167	12,731	344	6,092
34	Telephone	34 51,329	32,631	6,205	12,493
35	Postage and shipping	35 89,364	56,041	2,332	30,991
36	Occupancy	36 151,889	101,519	20,050	30,320
37	Equipment rental and maintenance	37 31,015	24,570	2,465	3,980
38	Printing and publications	38 139,575	101,837	1,901	35,837
39	Travel	39 130,367	108,224	2,527	19,616
40	Conferences, conventions, and meetings	40 334,464	237,138	10,024	87,302
41	Interest	41 0	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	42 29,536	20,481	4,176	4,879
43	Other expenses not covered above (itemize): See Statement 7	43a 600,121	380,350	111,646	108,125
a	-----	43b			
b	-----	43c			
c	-----	43d			
d	-----	43e			
e	-----	43f			
f	-----	43g			
g	-----				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 4,329,052	3,303,654	381,075	644,323

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► Fund research to cure neurofibromatosis All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a See Statement 8 (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
b (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ►	3,303,654

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	333,553	45	569,762
	46 Savings and temporary cash investments	0	46	0
	47a Accounts receivable	47a 0		
	b Less: allowance for doubtful accounts	47b 0	21,370	47c 0
	48a Pledges receivable	48a 6,605		
	b Less: allowance for doubtful accounts	48b 0	38,266	48c 6,605
	49 Grants receivable		0	49 0
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		0	50a 0
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		0	50b 0
	51a Other notes and loans receivable (attach schedule)	51a 0		
	b Less: allowance for doubtful accounts	51b 0	0	51c 0
	52 Inventories for sale or use		0	52 0
	53 Prepaid expenses and deferred charges		20,046	53 55,378
	54a Investments—publicly-traded securities	▶ <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,740,172	54a 3,034,663
	b Investments—other securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54b 0
	55a Investments—land, buildings, and equipment: basis	55a 0		
	b Less: accumulated depreciation (attach schedule)	55b 0	0	55c 0
	56 Investments—other (attach schedule)		0	56 0
	57a Land, buildings, and equipment: basis	57a 182,372		
b Less: accumulated depreciation (attach schedule) Stmt 9	57b 113,063	70,448	57c 69,309	
58 Other assets, including program-related investments (describe ▶ See Statement 10)		27,985	58 151,510	
59 Total assets (must equal line 74). Add lines 45 through 58		3,251,840	59 3,887,227	
Liabilities	60 Accounts payable and accrued expenses	34,238	60	14,585
	61 Grants payable	80,000	61	423,375
	62 Deferred revenue	0	62	0
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		0	63 0
	64a Tax-exempt bond liabilities (attach schedule)		0	64a 0
	b Mortgages and other notes payable (attach schedule)		0	64b 0
	65 Other liabilities (describe ▶ See Statement 11)		201,254	65 192,137
66 Total liabilities. Add lines 60 through 65		315,492	66 630,097	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	2,637,595	67	3,195,696
	68 Temporarily restricted	298,753	68	61,434
	69 Permanently restricted	0	69	0
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		2,936,348	73 3,257,130
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		3,251,840	74 3,887,227

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<input checked="" type="checkbox"/>	
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b <u>5,000</u>		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	
	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	<input checked="" type="checkbox"/>	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		<input checked="" type="checkbox"/>
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	c Dues, assessments, and similar amounts from members		
	d Section 162(e) lobbying and political expenditures		
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
	b Gross receipts, included on line 12, for public use of club facilities		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		<input checked="" type="checkbox"/>
88b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI.		<input checked="" type="checkbox"/>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0</u> ; section 4912 <u>0</u> ; section 4955 <u>0</u>		
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		<input checked="" type="checkbox"/>
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0</u>		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0</u>		
	e <i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		<input checked="" type="checkbox"/>
	f <i>All organizations.</i> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		<input checked="" type="checkbox"/>
	g <i>For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		<input checked="" type="checkbox"/>
90a	List the states with which a copy of this return is filed NY		
	b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b <u>0</u>	
91a	The books are in care of Children's Tumor Foundation Telephone no. 212-344-6633 Located at 95 Pine Street 16th Floor, New York, NY ZIP + 4 10005		
	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	<input checked="" type="checkbox"/>	Yes No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92** |

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a NF Youth Camp					12,757
b Wristband Sales					9,237
c Sale of publication and publication royalties					6,298
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					6,050
95 Interest on savings and temporary cash investments			14	3,635	
96 Dividends and interest from securities			14	87,349	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	11,029	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0		102,013	34,342
105 Total (add line 104, columns (B), (D), and (E)) ▶					136,355

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	See Statement 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Table with 4 columns: (A) Name, address, of each controlled entity; (B) Employer Identification Number; (C) Description of transfer; (D) Amount of transfer. Includes rows for 'a', 'b', 'c', and 'Totals'.

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Table with 4 columns: (A) Name, address, of each controlled entity; (B) Employer Identification Number; (C) Description of transfer; (D) Amount of transfer. Includes rows for 'a', 'b', 'c', and 'Totals'.

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Please Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer: Thomas Malone, Date: 5/15/07, Title: Thomas Malone, Director of Finance and Administration.

Paid Preparer's Use Only: Preparer's signature: [Signature], Date: 5/14/07, Check if self-employed: [X], Preparer's SSN or PTIN (Sec. Gen. Inst. X): P18864, Firm's name (or yours if self-employed), address, and ZIP - 4: Cusack & Co CPA's LLC, 7 Airport Park Blvd, Latham NY 12110, EIN: 14-1800427, Phone no.: 518-786-3550.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2006

Name of the organization Children's Tumor Foundation	Employer identification number 13 2298956
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Catherine Silberstein 95 Pine Street, New York, NY 10005-3904, US	Dir. of Volunteers 40	64,375	1,894	0
Steven Kendra 95 Pine Street, New York, NY 10005-3904, US	Dir. Marathon Team 40	58,888	1,500	0
April Frazier 95 Pine Street, New York, NY 10005-3904, US	Database Manager 40	51,000	1,500	0

Total number of other employees paid over \$50,000 ▶ **0**

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Patton Boggs LLP 2550 M Street NW, Washington, DC 20037-1350, US	Political / Lobby Advocate	156,000

Total number of others receiving over \$50,000 for professional services ▶ **0**

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services ▶ **0**

Part III Statements About Activities (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>172,000</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	Lending of money or other extension of credit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c	Furnishing of goods, services, or facilities?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e	Transfer of any part of its income or assets? See Form 990, Pt. V	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	Did the organization have a section 403(b) annuity plan for its employees?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	Did the organization make any taxable distributions under section 4966?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c	Did the organization make a distribution to a donor, donor advisor, or related person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d	Enter the total number of donor advised funds owned at the end of the tax year ▶		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶		0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶		0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ►
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: **(1) more than 33½%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33½%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,837,826	692,389	1,622,975	1,056,075	5,209,265
16 Membership fees received	6,555	179,809	50,950	8,643	245,957
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	2,049,462	602,902	1,655,475	939,224	5,247,063
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	69,492	21,570	69,042	73,905	234,009
19 Net income from unrelated business activities not included in line 18.	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	132,355	10,067	59,110	96,930	298,462 Stmt 15
23 Total of lines 15 through 22	4,095,690	1,506,737	3,457,552	2,174,777	11,234,756
24 Line 23 minus line 17	2,046,228	903,835	1,802,077	1,235,553	5,987,693
25 Enter 1% of line 23	40,957	15,067	34,576	21,748	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a 119,754
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b 2,954,674
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c 5,987,693
d Add: Amounts from column (e) for lines: 18 <u>234,009</u> 19 <u>0</u> ▶					
22 <u>298,462</u> 26b <u>2,954,674</u> ▶					26d 3,487,145
e Public support (line 26c minus line 26d total) ▶					26e 2,500,548
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f 42 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶					27c
d Add: Line 27a total _____ and line 27b total _____ ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40	} 41	
	Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 . . . \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000 . . . \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers	✓		
b Paid staff or management (Include compensation in expenses reported on lines c through h .)		✓	
c Media advertisements		✓	
d Mailings to members, legislators, or the public	✓		12,000
e Publications, or published or broadcast statements	✓		2,000
f Grants to other organizations for lobbying purposes	✓		156,000
g Direct contact with legislators, their staffs, government officials, or a legislative body	✓		2,000
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h .)			172,000
If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.			Stmt 16

Statement 1

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Children's Tumor Foundation

13-2298956

Sales of Assets Other than Inventory

Publicly Traded Securities

Description:

Sold To:

Sales Price:	\$492,007.00	Date Sold:
Expense of Sale:	\$0.00	Date acquired:
Cost or value when acquired:	\$480,978.00	How acquired:
Depreciation since acquisition:	\$0.00	
Net Sale:	\$11,029.00	

Statement 2

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Children's Tumor Foundation**13-2298956****Schedule of Special Events**

Description	Gross Receipts	Contributions	Gross Revenue	Direct Costs	Net Income (Loss)
NY Gala	\$821,356.00	\$697,061.00	\$124,295.00	\$124,295.00	\$0.00
Dinners, Galas, Cocktail and Tea	\$226,944.00	\$200,336.00	\$26,608.00	\$26,608.00	\$0.00
Golf and Sporting Events	\$166,193.00	\$139,079.00	\$27,114.00	\$27,114.00	\$0.00
All Other	\$135,803.00	\$120,329.00	\$15,474.00	\$15,474.00	\$0.00
Total:	\$1,350,296.00	\$1,156,805.00	\$193,491.00	\$193,491.00	\$0.00

Statement 3

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Children's Tumor Foundation**13-2298956****Other changes in Net Assets or Fund Balances**

Explanation	Amount
Unrealized Holding Gain on Investments	\$181,225.00
Total:	\$181,225.00

Statement 4

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Children's Tumor Foundation
13-2298956

Grants and Allocations

Classification Drug Discovery
Date:
Type: Cash
Grant Amount \$27,500.00
Relationship: None
Description of Property:
How Determined
Book Value of Property:
FMV of Property:

Brigham and Women's Hospital
Address: 75 Francis Street
Boston, MA 02115-6110
United States

Classification Clinic Network Support
Date:
Type: Cash
Grant Amount \$40,000.00
Relationship: None
Description of Property:
How Determined
Book Value of Property:
FMV of Property:

Children's Hospital of Los Angeles
Address: 4650 SUnset Blvd 29
Los Angeles, CA 90027
United States

Classification Young Investigator Awards
Date:
Type: Cash
Grant Amount \$82,500.00
Relationship: None
Description of Property:
How Determined
Book Value of Property:
FMV of Property:

Whitehead Institute
Address: 5 Cambridge Center R771
Cambridge, MA 02142
United States

Classification Young Investigator Awards
Date:
Type: Cash
Grant Amount \$120,500.00
Relationship: None
Description of Property:
How Determined
Book Value of Property:

Massachusetts General Hospital
Address: 50 Stamford Street
Boston, MA 02114-2554
United States

FMV of Property:

Classification Young Investigator Awards Baylor College of Medicine

Date:

Type: Cash

Address: One Baylor Plaza

Grant Amount \$50,000.00

Houston, TX 77030
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards UC Los Angeles

Date:

Type: Cash

Address: 10920 Wilshire Blvd Suite 500

Grant Amount \$49,750.00

Los Angeles, CA 90024
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Drug Discovery Washington University

Date:

Type: Cash

Address: Campus Box 1034

Grant Amount \$27,500.00

St Louis, MO 63114-1408
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Drug Discovery Cincinnati Children's Hospital

Date:

Type: Cash

Address: 333 Burnet Avenue

Grant Amount \$11,000.00

Cincinnati, OH 45229
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Clinic Network Support Children's Hospital Foundation

Date:

Type: Cash

Address: PO Box 50020 S-200

Grant Amount \$20,000.00

Seattle, WA 98145
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

DanaFarber Cancer Institute

Date:

Type: Cash

Address: 44 Binney Street

Grant Amount \$82,500.00

Boston, MA 02115
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

UC San Francisco

Date:

Type: Cash

Address: 3333 California Street Suite 315

Grant Amount \$122,000.00

San Francisco, CA 94143-0962
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

Hospital for Sick Children

Date:

Type: Cash

Address: 555 University Avenue

Grant Amount \$55,000.00

Toronto, Ontario M5G 1X8
Canada

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Clinic Network Support

Washington University

Date:

Type: Cash

Address: Box 8111 660 South Euclid Ave

Grant Amount \$40,000.00

St Louis, MO 63110
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Award

Ohio State University

Date:

Type: Cash

Address: 1960 Kenny Road

Grant Amount \$50,000.00

Columbus, OH 43210

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification NF Database

University of British Columbia

Date:

Type: Cash

Address: 4500 Oak Street

Grant Amount \$24,323.00

Vancouver, British Columbia V6H 3N1

Canada

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

UT Health Science Center at San Antonio

Date:

Type: Cash

Address: 2040 Babcock Road SUite 201

Grant Amount \$13,250.00

San Antonio, TX 78229

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Drug Discovery

Max Planck Institute for Molecular Genetics

Date:

Type: Cash

Address: Ihnestrassee 6373

Grant Amount \$27,500.00

Berlin, Germany 14195

Germany

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Drug Discovery

Hospital for Sick Children

Date:

Type: Cash

Address: 555 University Ave

Grant Amount \$27,500.00

Totonto, Ontario M5G 1X8
Canada

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

Harvard Medical School

Date:

Type: Cash

Address: 25 Shattuck Street

Grant Amount \$50,313.00

Boston, MA 02115
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

University of Florida

Date:

Type: Cash

Address: 302 Tigert Hall

Grant Amount \$50,000.00

Gainesville, FL 32611
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

Fox Chase Cancer Center

Date:

Type: Cash

Address: 333 Cottman Avenue

Grant Amount \$13,250.00

Philadelphia, PA 19111-2497
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Schwannomatosis Research

Massachusetts General Hospital

Date:

Type: Cash

Address: 50 Stamford Street

Grant Amount \$70,000.00

Boston, MA 02114-2554
United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Imaging Studies

Massachusetts General Hospital

Date:

Type: Cash

Address: 50 Stamford Street

Grant Amount \$70,000.00

Boston, MA 02114-2554

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Learning Disability Grant

UC Los Angeles

Date:

Type: Cash

Address: 10920 Wilshire Blvd

Grant Amount \$5,000.00

Los Angeles, CA 90024

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Young Investigator Awards

Brigham and Women's Hospital

Date:

Type: Cash

Address: PO Box 3149

Grant Amount \$84,454.00

Boston, MA 02241-3149

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Classification Clinic Network Support

Children's Hospital Foundation

Date:

Type: Cash

Address: 1245 E Colfax Ave STE 400

Grant Amount \$40,000.00

Denver, CO 80218

United States

Relationship: None

Description of Property:

How Determined

Book Value of Property:

FMV of Property:

Total Grants:

\$1,253,840.00

Statement 5

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Children's Tumor Foundation**13-2298956****Compensation Detail - Officers, Directors, Etc.**

Description	Total:	Pgm Services	Mgt and General	Fundraising
Kim HunterSchaedle PhD				
Compensation	\$140,000.00	\$140,000.00	\$0.00	\$0.00
Benefits	\$1,750.00	\$1,750.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$141,750.00	\$141,750.00	\$0.00	\$0.00
John Risner				
Compensation	\$119,000.00	\$65,450.00	\$23,800.00	\$29,750.00
Benefits	\$3,600.00	\$1,980.00	\$720.00	\$900.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$122,600.00	\$67,430.00	\$24,520.00	\$30,650.00
George Orfanakos				
Compensation	\$68,223.00	\$30,700.00	\$0.00	\$37,523.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$68,223.00	\$30,700.00	\$0.00	\$37,523.00
Thomas Malone				
Compensation	\$58,596.00	\$17,579.00	\$41,017.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$58,596.00	\$17,579.00	\$41,017.00	\$0.00
Alice Gordon				
Compensation	\$83,000.00	\$37,350.00	\$4,150.00	\$41,500.00
Benefits	\$1,125.00	\$506.00	\$56.00	\$563.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$84,125.00	\$37,856.00	\$4,206.00	\$42,063.00
Suzanne Earle				
Compensation	\$0.00	\$0.00	\$0.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00
Farah Walters				
Compensation	\$0.00	\$0.00	\$0.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00
Nate Walker				
Compensation	\$0.00	\$0.00	\$0.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00

Description	Total:	Pgm Services	Mgt and General	Fundraising
Carolyn Setlow				
Compensation	\$0.00	\$0.00	\$0.00	\$0.00
Benefits	\$0.00	\$0.00	\$0.00	\$0.00
Expenses	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00
Total:	\$475,294.00	\$295,315.00	\$69,743.00	\$110,236.00

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Children's Tumor Foundation**13-2298956****Depreciation and Depletion**

Asset	Current Deprec.
Furniture	\$101.00
Equipment	\$26,542.00
Leashold Imprv.	\$493.00
Intangibles	\$2,400.00
Total	\$29,536.00

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Children's Tumor Foundation**13-2298956****Attachment listing other expenses for Part II**

Description	Total:	Pgm Services	Mgt and General	Fundrasing
Camp	\$47,613.00	\$47,613.00	\$0.00	\$0.00
Dues and Other Fees	\$68,170.00	\$13,856.00	\$48,936.00	\$5,378.00
Advocacy	\$156,000.00	\$156,000.00	\$0.00	\$0.00
IT / Computer Related	\$82,719.00	\$51,312.00	\$17,378.00	\$14,029.00
Misc. Other Expenses	\$118,826.00	\$70,619.00	\$27,760.00	\$20,447.00
Insurance	\$22,095.00	\$15,321.00	\$3,124.00	\$3,650.00
Professional Fees	\$104,698.00	\$25,629.00	\$14,448.00	\$64,621.00
Total:	\$600,121.00	\$380,350.00	\$111,646.00	\$108,125.00

Statement 8

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Part: III

Question:

Children's Tumor Foundation**13-2298956****Program Services**

Achievement	Pgm. Svc. Exp.
Medical Research, General/Other: Provide grant support through a national peer review process to fund research in Neurofibromatosis. In FY 2006, we continued or completed funding of 13 grants awarded in 2004 & 2005. We also funded 8 new Young Investigator Awards. Sponsor NF International Consortium Meeting and various other NF scientific meetings to promote NF research and foster collaboration. (22 Grants funded)	\$2,112,112.00
Grants and Allocations: \$992,840.00 This amount includes foreign grants: Yes	
Diseases, Disorders & Medical Disciplines, General: Public awareness and education programs including quarterly newsletters (28,000 each quarter), web based programs (avg 55,000 sessions per month), local symposia and support groups, brochures, Public Service Announcement distribution (19,082 airings to date) and other initiatives. Host International NF Summer Camp in Utah for teens with NF. (0 Clients)	\$930,542.00
Grants and Allocations: \$0.00 This amount includes foreign grants: N/A	
Medical Specialties Programs: Expanded program to provide financial support to regional hospitals to fund NF Clinic Coordinators. In 2006, we funded clinics in Los Angeles, Seattle, Denver, and St. Louis. (4 Clinics Funded)	\$140,000.00
Grants and Allocations: \$140,000.00 This amount includes foreign grants: No	
Medical Research, General/Other: Launched the Drug Discovery Initiative to fund & facilitate preclinical screening of candidate treatments for NF. (5 Grants funded)	\$121,000.00
Grants and Allocations: \$121,000.00 This amount includes foreign grants: Yes	
Total:	\$3,303,654.00

Statement 9

Form: 990

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Part: IV

Question: 57

Children's Tumor Foundation

13-2298956

Schedule of Land, Buildings and Equipment

Description	Cost	Depreciation	Book Value
Furniture and Equipment	\$182,372.00	\$113,063.00	\$69,309.00
Total:	\$182,372.00	\$113,063.00	\$69,309.00

Statement 10

Form: 990

Page: 4

Part: IV

Question: 58

Children's Tumor Foundation**13-2298956****Other Assets**

Asset Description	BOY Amount	EOY Amount
Land	\$0.00	\$125,000.00
Security Deposits	\$18,637.00	\$19,562.00
Intangible Assets, net	\$9,348.00	\$6,948.00
Total:	\$27,985.00	\$151,510.00

Statement 11

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Part: IV

Question: 65

Children's Tumor Foundation**13-2298956****Other Liabilities**

Liability Description	BOY Amount	EOY Amount
Accrued Wages	\$6,584.00	\$10,979.00
Rent Payable	\$10,187.00	\$7,471.00
Capital Lease Obligation	\$10,796.00	\$0.00
Assets Held in Trust	\$173,687.00	\$173,687.00
Total:	\$201,254.00	\$192,137.00

Statement 12

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Part: IV-A

Question: d(2)

Children's Tumor Foundation

13-2298956

Revenue Audit Line d(2)

Description	Amount
Dividends and interest from securities	\$87,349.00
Interest of savings and temporary cash investments	\$3,635.00
Sale of securities, net	\$11,029.00
Total:	\$102,013.00

Statement 13

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Page: 5

Part: V

Question:

Children's Tumor Foundation**13-2298956****Officers, Directors, Trustees, and Key Employees**

Name and Address	Hrs	Comp.	Benefits	Expenses
John Risner	40	\$119,000.00	\$3,600.00	\$0.00
Title: President Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Kim HunterSchaedle PhD	40	\$140,000.00	\$1,750.00	\$0.00
Title: Scientific Officer Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
George Orfanakos	40	\$68,223.00	\$0.00	\$0.00
Title: Vice President Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Alice Gordon	40	\$83,000.00	\$1,125.00	\$0.00
Title: Vice President Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Thomas Malone	40	\$58,596.00	\$0.00	\$0.00
Title: Dir. of Finance Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Suzanne Earle	0	\$0.00	\$0.00	\$0.00
Title: Chairman Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				

Name and Address	Hrs	Comp.	Benefits	Expenses
Nate Walker	0	\$0.00	\$0.00	\$0.00
Title: Vice Chairman Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Farah Walters	0	\$0.00	\$0.00	\$0.00
Title: Treasurer Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
Carolyn Setlow	0	\$0.00	\$0.00	\$0.00
Title: Secretary Addr 1: 95 Pine Street Addr 2: CSZ: New York, NY 10005-3904 Country: United States				
TOTALS		\$468,819.00	\$6,475.00	\$0.00

Statement 14

Form: 990

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Part: VIII

Question:

Children's Tumor Foundation

13-2298956

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
93 a	Fees collected are used to send children with NF to summer camp.
93 b	To increase awareness of neurofibromatosis among the general public and health care professionals. Publications are an important part of up-to-date information on neurofibromatosis, and enhances public awareness.
93 c	To increase awareness of neurofibromatosis among the general public and health care professionals. Publications are an important part of up-to-date information on neurofibromatosis, and enhances public awareness.
94	To enable the Foundation to finance their rapidly growing programs in a more stable manner.

Statement 15
Form: Schedule A
Page: 3
Part: IV-A
Question: 22

Children's Tumor Foundation
13-2298956

Other Income

Description	2005	2004	2003	2002
Other Income	\$132,355.00	\$10,067.00	\$59,110.00	\$96,930.00
Total:	\$132,355.00	\$10,067.00	\$59,110.00	\$96,930.00

Statement 16
Form: Schedule A
Page: 5
Part: VI-B
Question:

Children's Tumor Foundation
13-2298956

Description of Lobbying Activity

Explanation of Lobbying Activities

During the fiscal year ending 12/31/06, the Children's Tumor Foundation engaged a law firm, Patton Boggs LLP located in Washington D.C. This firm's retainer of \$156,000 is disclosed on Schedule A, Part II. Patton Boggs assists the Children's Tumor Foundation in lobbying Congress for increases in federal funding of neurofibromatosis research. The Foundation does not support individual candidates, PACs, or other interest groups, nor does it take positions on individual races.