Registered Company Number: 02143917 (England and Wales)
Registered Charity Number: 327493

Trustees' Report and

Audited Financial Statements for the

Year Ended 31 March 2026 for

CHILDHOOD EYE CANCER TRUST
(A COMPANY LIMITED BY GUARANTEE)

Contents of the Financial Statements for the Year Ended 31 March 2026

	Page
Reference and Administrative Details	**2**
Report of the Trustees	**3**
Report of the Independent Auditors	**19**
Statement of Financial Activities	**22**
Balance Sheet	**23**
Cash Flow Statement	**24**
Notes to the Financial Statements	**25**

Reference and Administrative Details for the Year Ended 31 March 2026

TRUSTEES
Ian Ellington - Chairman
Gemma Boggs – Treasurer (resigned 22nd November 2025)
Sarah Watson – Treasurer (appointed 22nd November 2025)
Elizabeth Coleman
Alexandra Brebbia
Andrea Bonzano (resigned 23rd September 2025)
Matthew Holt
Rob Downes
Alexis Michelle Boothroyd
Ainee Ward
Patrick Tonks

COMPANY SECRETARY
Rose-Marie Sexton

REGISTERED OFFICE
The Royal London Hospital,
Whitechapel Road,
London,
E1 1BB

REGISTERED COMPANY NUMBER
02143917 (England and Wales)

REGISTERED CHARITY NUMBER
327493

INDEPENDENT AUDITORS
Knox Cropper LLP,
Chartered Accountants and Statutory Auditors,
65 Leadenhall Street,
London,
EC3A2AD

Report of the Trustees
For the year ended 31 March 2026

The trustees who are also directors of the charity for the purposes of the Companies Act 2006 present their report with the financial statements of the charity for the year ended 31 March 2026. The trustees have adopted the provisions of Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019).

OBJECTIVES AND ACTIVITIES

Objects of the Charity

The Objects of the Charity are to promote the relief of children with retinoblastoma and to provide ongoing support for those affected.

This means the Childhood Eye Cancer Trust is dedicated to helping anyone affected by retinoblastoma (Rb), a type of eye cancer that affects babies and young children, mainly under the age of six. We have been supporting families since 1987.

Around one child a week is diagnosed with Rb in the UK or 50 a year. It accounts for 3% of childhood cancers in the UK and 10% of cancers in babies under one. Around 45% of cases are heritable and this carries with it an increased risk of developing tumours in other parts of the body in later life.

The Charity was originally founded to provide support and information to those affected by Rb. In 1994 we merged with another charity that was funding research projects specifically related to Rb, and in 2004 we changed our name to the Childhood Eye Cancer Trust. As we grew, so did our aims and objectives and we began to run campaigns aimed at raising awareness among health professionals and the public in order to achieve the earliest possible diagnosis for children affected.

Our aims are to:

- Provide support and information to families and individuals affected by Rb.
- Raise funds to support research into issues concerned directly with Rb.
- Raise awareness of Rb among health professionals and others.
- Influence policy to improve service delivery for those affected by Rb.

Objectives, Strategies for Achievement and Public Benefit

During the period of this report, we have continued to deliver against our three core goals of support, research, and awareness.

The Trustees annually review the core goals and have reaffirmed that these remain the charitable focus.

The Trustees are aware of the public benefit guidance published by the Charity Commission. We have considered the objectives of the Charity and have given regard to how these objectives and the associated activities meet the public benefit criteria of advancing health, saving lives and the relief of those in need because of ill health.

We are the only UK-wide charity providing support to people affected by Rb and we believe that they benefit from our services in the following ways:

Main Objectives
Support: To ensure that everyone affected by Rb in the UK has access to support and information according to their need.

Our Head of Support Services and two Support Workers offer support to all families and individuals affected by Rb.

Support is provided on the wards and in clinics at the two specialist centres for Rb in the UK: Birmingham Women's and Children's Hospital and The Royal London Hospital. On non-clinic days, support is provided via telephone, video call, email, and social media.

Support is also provided through the delivery of a programme of regular face-to-face or virtual meetings for families, teens and young adults, and adults.

Our team provides signposting to organisations for financial grants, benefits advice, therapeutic and psychological support, visual impairment support, holidays, travel expenses, white goods, and other items.

Our support workers also assist with applications for Blue Badges, Disability Living Allowance and Carer's Allowance, and housing applications.

The support team collaborates with the wider CHECT team with stories from members for CHECT publications, information leaflets and social media.

Awareness - healthcare professionals: To save lives and minimise the impact of visual impairment by ensuring healthcare professionals are aware and know about Rb and its symptoms, listen to concerned parents and make urgent referrals where necessary.

Targeted activities to healthcare professionals associated with children aged six and under.
Distribution of resources that help early diagnosis and referral.

Media campaigns and articles for specialist healthcare professional journals and magazines.

Awareness - public: To increase awareness of Rb and its signs and symptoms amongst parents, guardians and carers to promote the seeking of medical advice as soon as possible.

Ensuring information for parents about the symptoms of Rb is available in all relevant NHS publications and on all NHS information websites.

Media activity regarding the condition including the signs and symptoms and how / where to seek help.
Developing relationships with organisations able to reach large sections of the public with a view to raising awareness.

Regular and sustained social media activity with information and advice accessible on the charity's website.

Promoting knowledge of the possible longer-term impact of having had Rb as a child with regard to genetics and other cancers.

Information campaigns targeted towards people affected by Rb as a child.

Research: Proactively engaging in the advancement of knowledge of Rb, its treatment and its impact through the awarding of grants to groups or individuals who wish to pursue research projects or audits to advance knowledge of Rb and related issues.

Supporting and funding clinical, psychosocial, and scientific research relating to Rb.
Working through the Scientific Advisory Committee (SAC) to identify and support suitable projects from a wide range of sources.
Encouraging applications from the international research community.
Supporting multi-centre and international collaboration including the sharing of experience, knowledge, and data.

The SAC is made up of experts from research and Rb-related fields. We also have three lay members representing families and the adult Rb community, and a CHECT Trustee and staff in attendance.

The committee evaluates the validity and appropriateness of the proposals using an agreed scoring matrix, seeking expert review for large projects, before making recommendations to the Board for funding. Grant recipients are required to provide six-monthly progress reports and present a final report to the SAC and Board on the conclusion of the project before disseminating the findings and learning through presentations and publications.

Influencing: Working with other organisations to bring about improvements in the way in which services are funded and delivered in the UK.

Working with the treatment centres in the UK, the NHS National Commissioning Group, National Artificial Eye Service, and other umbrella bodies who provide services to people affected by Rb.
Proactively seeking partnerships with other charities and organisations.

Volunteers

40 volunteers (including Trustees and SAC members) generously gave their time to support us in 2025/26.

Whether it was one off or ongoing support, we would like to thank each and every one for their invaluable contribution to our work.

ACHIEVEMENT AND PERFORMANCE
Charitable activities

Support

Whilst one of our core priorities is the delivery of support to the parents and carers of children affected by Rb, we have extended this to encompass anyone affected, including teenagers whose unique needs are very different to those of a young child or baby, and adults, many of whom are living with the late effects of the treatment they received for Rb as a child. Membership of CHECT is open to anyone affected by retinoblastoma (as well as their friends and family), supporters of CHECT and health professionals. We do not charge a membership fee.

In 2025/26, 100% of families were offered support following a diagnosis of Rb in the UK. As well as face to face, email, and telephone, we continue to use virtual platforms to support our members.

There has been an increase in the number of face-to-face sessions delivered with over 1,480 sessions delivered across both treatment hospitals at inpatient and outpatient clinics.

We record and monitor support interactions so that we ensure the service is meeting the needs of those affected by Rb as best it can.

Face-to-face and remote support

The main areas that people sought support from CHECT included:

- Practical and emotional support.
- Direct financial support and assistance with welfare applications.
- Detailed information about Rb including genetics, screening, fertility, and late effects of Rb.
- Signposting to other specialist organisations.
- Work and employment support.
- Housing support.

We continue to receive a small number of enquiries from non-members. These mainly consist of international patients requesting advice and financial help as well as UK-based parents, guardians or carers who have symptom concerns in their child.

Social media support

Social media is a vital source of support resources and information, with both members and non-members contacting us. We also raise awareness utilising all social media channels, including Facebook, Instagram, X, LinkedIn, and TikTok. As well as our main public-facing Facebook page, we have two closed groups for members which are for parents of children with Rb and adults who have had Rb, both of which have seen increases in membership in the period.

Financial Support

In 2025/26 we delivered 69 support grants to families and individuals to help with the costs associated with an Rb diagnosis and ongoing treatment - for example travel to and from hospital as well as occasionally helping to buy some specialist equipment for those with a visual impairment.

The demand for our grants continues to increase and the team continues to work in partnership with organisations to offer as much financial support as possible, especially as a number of other charitable organisations have reduced or stopped their own financial support programmes.

Support Events

In 2025/26, we organised three face-to-face Family Days in Reading, Manchester and London. These included the presentation of our CHECT Champions awards to some incredibly brave and deserving children.

We also ran a meet-up for adults who had had Rb where we enjoyed a boat trip down the Thames followed by lunch, and in December our annual online Christmas Quiz for teenagers and young adults was well-attended. These events provided opportunities for peer-to-peer support.

We also worked jointly with the oncology consultant at Birmingham Women's & Children's Hospital to host an online session for adults on Late Effects and Second Cancers. Thank you so much to Dr. Helen Jenkinson for being the lead speaker at this event.

Pip the Penguin

Pip (our enucleation support toy) continues to be very popular with 27 more this year given to children who have lost an eye as part of their treatment. This tool is used by families and clinicians to normalise and explain the enucleation process.

Teenage and Young Adult (TYA) Support

TYAs who had Rb as children can face specific challenges around self-esteem. We provide specialist support to meet needs and facilitate invaluable peer support.

We have a specific website and Instagram channel for TYAs, where they can contribute stories, videos, and information appropriate to their audience. We also have a moderated closed WhatsApp group where they keep in touch with each other.

Adults (Beyond Rb)

For some people, the effects of Rb are lifelong. We continue to respond to the needs of adults who were affected by Rb as children.

We have a specific Beyond Rb group, the membership of which has grown via a closed Facebook group and a dedicated WhatsApp Group. We also provide information on the specific issues faced by adults who had retinoblastoma in childhood.

Partnerships

Collaboration and partnership development are vital activities in the enhancement of our support provision.

Our support workers work very closely with the Eye Clinic Liaison Officers (ECLOs) based in each specialist centre and who offer advice, information and resources for children living with visual impairment. In Birmingham Women's & Children's Hospital this service is provided by the RNIB, and in the Royal London Hospital this service is provided by Guide Dogs.

Ongoing partnerships continue with immense gratitude via organisations such as Basket Brigade UK, Box4Kids, Children In Need Emergency Fund, Chris Aked Foundation, Cyclists Fighting Cancer, Ellen McArthur Cancer Trust, Emily Ash Trust, Family Fund, Feed London, Finley's Touch, Free Kicks Foundation, Gavin Glynn Foundation, Hallie's Hideaway, The Joshua Tree, LATCH Welsh Children's Cancer Charity, Lennox Children's Cancer Fund, Miracles the Charity, Molly Ollys Wishes, Owen McVeigh Foundation, Pajama Fairies, The Rob George Foundation and Young Lives vs Cancer.

Feedback From Those Supported

"The CHECT team … is amazingly supportive and helpful. The situation families go through is painful enough, but the help they give makes everything less hard for us. I don't think they realise how important they are, so BIG THANK YOU for always being there, it really makes the difference."

"[Our support worker] is amazing. She helped us with so many things. I cannot thank her enough for everything she does to help us."

"[Our support worker] has always been an amazing support to us. We are so grateful to have her in our lives and on this journey with us."

“[Our support worker] has been a huge emotional support for us during the hardest year of our lives.

“[Our support worker] has been a lovely person to deal with, regularly checks in on us when we visit, that unfortunately has been on a regular basis throughout the year. Always available for a chat and advice. Can't thank her enough for her help with a tough situation for the family with advice and small access to financial help. … Makes our visit more pleasurable in a hospital treatment / checks every time.

Awareness

Rb is a rare disease, which means that most people are not aware of it. Sadly, this can lead to a delay in a diagnosis being made and, because Rb is a fast-growing cancer, quick access to treatment can be vital to save a child's eyes, sight and life.

Raising awareness of Rb among both healthcare professionals and the public is therefore important in helping to drive early diagnosis and as such remains a key part of our work.

Pathways to Diagnosis

In 2012, as part of its aim to reduce the delays in diagnosis of retinoblastoma experienced by some families in the UK, CHECT began to collect information from parents called 'Pathways to Diagnosis'.

This information is gathered by support workers during their conversations with families and focusing on whether the families had any prior awareness of retinoblastoma; the signs they noticed in their child's eyes that prompted them to seek help; and the actions taken by the healthcare professionals they consulted.

It is apparent that the range of experience is huge: from families who were referred to one of the two specialist Rb centres in the UK within days of noticing their child's symptoms; to families who spent over six months and numerous visits to various healthcare professionals before anyone recognised the significance of what they were reporting or carried out the appropriate tests and made appropriate referrals.

Recording these experiences in a quantitative way allowed CHECT to refine messages and information to address those areas where it was most needed: not only to alert parents of young children, but also GPs, health visitors and opticians to the main signs and symptoms of Rb, and the need for urgent examination and onward referral.

In 2025, the total number of pathways collected was 39, and we reviewed the results against the ten-year average of reported figures.

A white glow in the eye remains the most common symptom overall. This year more than the 10-year average noticed a white glow in the child’s eye, and slightly fewer noticed it in a photograph. This is significant because the glow is likely to be noticeable earlier in a photo than with the naked eye. A new squint is still the second-most important symptom, but slightly fewer families reported this as a symptom in 2024 than in other years.

As usual, GPs were the first port of call for concerned families (62%), followed by opticians (18%). Other healthcare professionals consulted in the first instance were health visitors (5%), 111 (5%), A&E (3%).

Disappointingly, rates of urgent referrals were down amongst GPs who examined a child with retinoblastoma (34% vs 10-year average of 47%), whilst opticians exceeded the 10-year average (81% vs 67%).

We saw the drop in appropriate GP referrals reflected in the total rates of referrals. 47% of children were referred to their local ophthalmology department within the recommended two weeks of seeing a healthcare professional compared to the ten-year average of 54%.

Overall, the figures for this year were of concern. However, we are talking about a very small sample group where a few variances can impact the overall picture. Nonetheless, we will be looking carefully to see what happens in future years, and whether this is the start of a worrying decrease in rapid referrals for children with retinoblastoma from primary to secondary (local ophthalmology department) and tertiary healthcare (specialist Rb centre).

Although Pathways to Diagnosis is designed to be a snapshot, or an indicator of trends in diagnosis in the UK, it is a key part of the resources we use to help CHECT achieve its aim of raising awareness of Rb to aid earlier diagnosis.

Public awareness:

Retinoblastoma is most often first spotted by parents or carers - whether through a white glow in a family photo, a squint, or another symptom. Raising public awareness is therefore a vital part of our work, helping to ensure children receive a swift diagnosis. We use both traditional and digital media to reach parents and the wider public with information about the signs of Rb.

Media:

Previous research carried out by, or on behalf of, CHECT has shown that many people first hear about retinoblastoma through media coverage. Throughout the year we issued press releases tied to key awareness moments - including Rare

Disease Day, World Retinoblastoma Awareness Week, Childhood Cancer Awareness Month and Christmas - while our freelance regional journalist worked across the UK to share the stories of our CHECT Champions in local and national media.

During the reporting period we received over 80 mentions in the media, giving at least 272 million people the opportunity to see or hear content across all media outlets. Coverage included the BBC and ITV TV, radio, and digital, various national newspapers across the UK as well as coverage around the world. In 2025, we were also featured on BBC's Weatherman Walking for Children in Need.

We took part in the Daily Express' campaign to help change policy so that everyone who is diagnosed with cancer is offered mental health support – and the change in policy was successful. The campaign included sharing two member surveys and signing a letter to Wes Streeting.

Digital:

We continue to develop and improve the CHECT website, ensuring it is easy to navigate and contains relevant, useful information. Our most visited pages remain those covering the white eye sign, signs & symptoms, and the causes of retinoblastoma - reflecting the public's desire to understand the condition. Despite the growing use of AI search tools, which can reduce direct website traffic, our site reached over 90,000 visitors during the year.

Social Media:

Social media is a key tool to raise awareness of Rb. In this period, our Instagram followers increased by 12% and our Facebook followers by 3%. We reached nearly 2 million people on Facebook and Instagram alone. Our TikTok channel has 350+ followers, our X channel has 2,800+, our Instagram channel for CHECT TYA has 300+ followers, and a LinkedIn channel has 700+.

Ongoing communication:

We distribute monthly newsletters and emails covering support, awareness, research, fundraising, stories and events. In 2025/26 our average open rate reached 46.4% - the highest on record.

We publish two editions of our magazine, InFocus, each year, distributed both in print and digitally. We offset the carbon footprint of all printed copies.

We also maintain an active blog featuring news, events, real-life stories, research updates, and support articles.

Inclusivity:

We are committed to making our communications as inclusive and accessible as possible. We add image descriptions to our social media posts to ensure content is accessible to those who are unable to view images, and we regularly review our website to maintain accessibility standards.

The case studies and stories we share reflect a range of retinoblastoma experiences - including those living with blindness, those who have lost one or both eyes to Rb, and those who have had retinoblastoma without requiring eye removal.

Research

CHECT continues to fund research as a core pillar of activity with four ongoing projects:

Laboratory / Basic science

Professor Yellapantula: Prognostic stratification and early detection of relapsed retinoblastoma using aqueous humor based cfDNA screening

Cancers shed DNA fragments, called cell-free DNA (cfDNA), into bodily fluids which facilitates detection of genomic alterations driving tumor growth. Using aqueous humor (AH), a watery fluid that fills the eye, collected during treatment, we will evaluate:
1) If serial monitoring of cfDNA can inform intraocular relapse of retinoblastoma earlier than clinical findings-based screening methods currently used.
2) If cfDNA prevalence at the end of treatment can inform prognosis of retinoblastoma.
3) The genomic and clinical features that differentiate low and high risk of relapse.

Professor Seigel: A retinal organoid platform for retinoblastoma drug development.

One challenge in developing new treatments for retinoblastoma is to preserve vision by ensuring that Rb tumour cells are killed without damaging surrounding normal retina. For this project, we have a new approach for testing promising retinoblastoma drugs. We can coax adult human stem cells to represent normal retinal tissue in a plastic dish (a “retina-in-a-dish”). If we add human Rb tumour cells to this same

dish, we can disrupt the retina, like an Rb tumour might do in the human eye. This mixture of Rb tumour cells with the retina-in-a-dish lets us use human cells to see whether our new drug treatments will kill Rb cells specifically without harming nearby retinal cells. This new method will be very useful for testing Rb treatments that we have developed with previous support from CHECT.

Clinical

Dr Zerrin Onadim: Eloise Patterson Project: Study of records held at The Royal London Hospital and Childhood Cancer Research Group on retinoblastoma patients Phase II.

This project was initially funded via a donation from the Greendale Foundation, inspired by a young adult who has previously had retinoblastoma, Eloise Patterson. Phase I (collection of clinical and mutation data and linking to Public Health England records) is now complete. This will provide complete information on type of Rb, type of mutation, treatment, follow-up data on second primary tumours and causes of any deaths.

We were delighted that the Greendale Foundation provided further support to allow for an additional phase to be delivered - Phase II (statistical analysis to estimate risks, which it is hoped could potentially lead to earlier diagnosis and treatment of these second cancers in current - and future - Rb populations), due to complete in 2026.

The second phase of a previously funded PhD project started at the end of this year.

Professor Bob Phillips: Co-production of a novel psychoeducation intervention for young people who have had Retinoblastoma

The aim of this research is to develop, with support from teenage and young adult survivors of retinoblastoma (Rb), an intervention to improve psychological and social wellbeing in young survivors of Rb. We believe that this will be helpful in improving how young people think and feel and will help us to plan a feasibility study (a small-scale version of a full study) to test how effective this intervention is, before implementing this into routine clinical practice. This research builds upon a portfolio of work in the form of a PhD funded by CHECT “Developing an evidence-based psycho-educational intervention for teenagers and young adults who have had retinoblastoma.”

In 2025/26, we continued our objective of delivering an annual research award, and made two new two awards:

Professor Annette Moll: Non-invasive cancer-test development for the Rb-patient and Rb-survivor community

Professor Xu: Decoding tumor seeding in retinoblastoma: the genomic clues from aqueous humor liquid biopsy

Our thanks go to all members of our Scientific Advisory Committee, both lay and professional, who volunteer their time to make CHECT's research programme possible, and thus support our aim of improving the lives of everyone affected by retinoblastoma in the future.

Fundraising
Fundraising Policy

CHECT does not use fundraising services or external professional fundraisers to undertake its fundraising activities. Additionally, no data is shared with or sold to any external agency. The charity does not purchase external lists of potential individual donors or undertake direct mail appeals to such lists.

The charity issues a biannual newsletter and a monthly e-newsletter / blog (both of which can be easily unsubscribed from) that share information about the charitable work and fundraising activities undertaken.

The charity occasionally invites individuals to attend events but does not exert undue pressure to attend or to donate. It does not approach or pressure vulnerable people to support their work. A complaints policy is in place and is accessible on the charity's website (www.chect.org.uk). The charity adheres to the Fundraising Code of Practice issued by the Fundraising Regulator.

Any fundraising events carried out on behalf of the charity that we are aware of are supported and monitored by the Fundraising Manager. Any marketing materials and approaches are checked to ensure that they comply with the Fundraising Code of Practice, and details of income and expenditure are recorded by the Fundraising Manager. Income is acknowledged, and grateful thanks are sent, typically with a letter and certificate.

In 2025/2026, thanks to the generosity, creativity, and commitment of our supporters, we exceeded our budgeted income target, despite the many challenges faced by the wider charitable sector. From individual challenges and community events to corporate partnerships, every donation has gone towards supporting those affected by retinoblastoma, raising awareness and investing in groundbreaking research.

We are incredibly grateful and overwhelmed by the passion and dedication of our supporters who go to such lengths to raise funds for us.

Community and Events

Our Community & Events income was the highest ever. 39 supporters took part in a variety of challenge events including marathons, half marathons, treks and walks. And 60 individuals, schools & nurseries and community groups/clubs took part in many fundraising events from coffee mornings to the sale of pick n mix doggie treats.

To mark 10 years of opening Lambeth Palace’s doors, members of the public were invited to purchase a ticket and join CHECT on 29th August to explore the history of the home of the Archbishops of Canterbury.

A special mention goes to our London Marathon team who broke all previous fundraising records.

Scott & Olivia, who challenged themselves to a year of fundraising (May 2025-May 2026), taking part in many awareness campaigns and interviews and events including the 2026 London Marathon, raised over £30,000 for CHECT.

Nathan Young and three friends set themselves a challenge to beat the previous Guiness World Record of 32 hours of continuous padel play. In November 2025, they received the Guiness World Record of 40 hours of continuous padel play and raised more than £34,000.

Corporate Support

Income from corporates remained strong with key partners including:

- The Crane Fund for Widows and Children donated following a successful nomination from an employee at Crane BS&U who had retinoblastoma herself.
- Soop & Crooton, who provided CHECT with pro-bono marketing work focusing on Geofencing of GPs, placement ads and Search Engine Optimisation to help raise awareness. This opportunity was again through an employee recommendation.
- Pentaco Construction who raised funds through their version of the Ryder Cup.
- Maximus Foundation who supported our work.

Trusts & Foundations

Income from charitable trusts and foundations totaled more than £250,000. We were delighted to continue our three-year partnership with BBC Children in Need and to once again become a beneficiary of the National Lottery Community Fund's Awards for All programme. We are enormously grateful to every one of the trusts and foundations that have so kindly and generously supported CHECT's work over the past twelve months. These include multiyear grants from the Barbara Ward Children's Foundation and the 29th of May 1961 Charitable Trust, and further support from the Eveson Trust, the February Foundation, the Greendale Foundation, the Joe Gilligan Trust, the Sophie Fitzpatrick Foundation, the Matthew22 Fund and many others.

In Memoriam

Trustees and staff would like to thank and offer sincere condolences to families and friends who have given in memory of a loved one during the year and are grateful to those who have kindly remembered us in their will.

We were sad to share the news that CHECT member Robin Williams passed away in December 2025 aged 37. Robin played for England 106 times, scoring 30 goals and represented GB in the London 2012 Paralympic Games. A tribute was set up in his memory, raising funds for CHECT.

FINANCIAL REVIEW

Reserves Policy

CHECT maintains its reserves under two categories: (a) unrestricted (general) reserves, which are available for general use in pursuance of the charity's objectives, and (b) restricted reserves, which are for specifically earmarked purposes such as medical research or support to families belonging to a particular area.

The unrestricted funds of the Charity as of 31 March 2026 totaled £362,675. The Trustees have determined that the Charity should hold at least six months of running expenses in reserve. This figure represents the amount required to run the charity for six months excluding winding up costs and any special projects. Based on this calculation, the required value of reserves for the year 2025/26 was £247,947.

The reserves held as at 31 March 2026 represent 8.5 months of budgeted expenditure. This is intentional as levels of reserves are being built to allow for the delivery of member focused activities in 2027 which will be our 40th anniversary.

The Trustees review the Charity's reserves policy on a regular basis and no less than annually. The reserves position is reported at every board meeting.

Investment Policy
Funds surplus to immediate requirements are to be invested in interest bearing accounts without risk to the capital. Such accounts are to be those offered by institutions covered by the Financial Services Compensation Scheme (FSCS). No more than the amount covered by the FSCS is to be invested in any one institution.

FINANCIAL PERFORMANCE
The 2025/26 budget was set to breakeven following a number of years of deliberately operating at a deficit utilising the levels of free reserves built up at the end of 2022/23.

The final income figure broke all previous records, allowing for additional in year expenditure on charitable activity.

The total incoming resources of the Charity were £660,404, which was an increase of £141,036 on 2024/25 total income of £519,370. Total resources expended during the year increased by £46,051 to £588,637 (2024/25: £542,586).

Overall, the Charity recorded a surplus of £71,767 in 2025/26 compared to a deficit of £23,216 in 2024/25.

As of 31 March 2026, this has resulted in net assets increasing to £367,315, against the preceding year end of £295,548.

This is comprised of £4,640 restricted funds (2025/26: £6,800) and £362,675 of unrestricted funds (2025/26: £288,748).

FUTURE PLANS
Our vision continues to be the primary charity in the United Kingdom dedicated to helping families and individuals affected by Rb.

Our mission is to lessen the impact of retinoblastoma by driving early diagnosis, funding research into prevention and treatment, and offering lifelong support now and for future generations.

Our focus over the coming period is to:

- Use the 40th anniversary in 2027 as a platform to launch additional services.
- Place those that we support at the centre of everything that we do.
- Increase our impact by delivering improvements in the delivery of our Support, Research, Awareness, and Influence activity.
- Increase the levels of funds raised in an ethical and sustainable manner.
- Proactively seek alliances and partnerships to allow us to widen our reach, outputs, and impact.
- Be a caring and inclusive employer with a happy and focused team.

Support
The delivery of lifelong levels of support is the key focus of the charity using a support pathway that follows the key stages of the Rb journey – research, pre-diagnosis, diagnosis, treatment, follow up, end of life.

We will provide our information, practical, social, financial, and emotional support at each of the above stages and continue the offer of both the direct and indirect (partnership) delivered services.

We will run events for the three main groups of members: families; teens and young adults; and older adults (Beyond Rb), across different regions of the UK.

We will work closely with partner organisations allowing more children and young people to experience events that can increase confidence and resilience.

We will continue to offer members memorable experiences through our special relationships with organisations such as the Free Kicks Foundation and Box4Kids.

Research
Research will continue to be a vital focus for us and our members.

We will continue to manage and support the existing projects referenced earlier and continue our commitment to research via another call for projects and a further investment during 2026/27 and beyond.

Awareness
The raising of awareness around the signs and symptoms of Rb with both the public and the medical profession remains a vital function.

Using the “Pathways to Diagnosis’ as the guide we will be focusing on key areas and moments in the diagnostic pathway to ensure that the right people have the right knowledge and information at the right time.

We are investing in our digital presence, creating engaging content designed to reach wider audiences and raise awareness of retinoblastoma.

Influence
We will continue to liaise with the different organisations involved in a child and family's journey to make sure the voice of our membership is heard and helps influence all, to deliver the best and most effective experience to all families.

Through partnership and alliance working, we will look to use our position to positively influence policy to improve the pathways and associated levels of support for all those affected by Rb.

STRUCTURE, GOVERNANCE AND MANAGEMENT
Governing document
The Childhood Eye Cancer Trust (CHECT) ('the Charity') is a charitable company limited by guarantee ('the Company'), incorporated on 1 July 1987 and a registered charity. The Company was established under a Memorandum of Association, which established the objects and powers of the Company and is governed under its Articles of Association. The directors of the Company are also charity trustees for the purposes of charity law and are known as the board of trustees ('the Board'). The maximum number of trustees is 15.

The Company's Articles were amended in 2008 to change the charity’s objects and article 45 which focused on the terms of the directors. In 2009 an amendment was made to include a new article, article 60 on authorizing director conflicts of interest, and in 2017 the articles as a whole were replaced. In October 2022, the Articles were further amended to remove article 47 which concerned a director's term and ability to apply for reflection, and to allow Society, General and Board of Trustee meetings to be held remotely. On the 23rd November 2024 the articles were revised via a special resolution at a Meeting of Society Members in substitution for and to the exclusion of all existing Articles of the

Company. The revised articles ensure they are appropriate and fit for purpose, including the reduction of unnecessary administrative burdens.

Organisational structure
The Board meets a minimum of 4 times a year and at the beginning of each meeting, the trustees are requested to declare any conflicts of interest. No conflicts of interest were declared during this financial year. The Board's performance and trustees' skills are reviewed periodically and where possible new trustees are recruited to meet any needs or gaps identified. The Charity is a signatory to the NCVO's Good Governance Code for the voluntary and community sector.

To assist in the effectiveness and smooth running of the Charity, the Board continues to resource two sub-committees to help oversee certain aspects of the Charity's work. Sub-committees are currently set up for: Finance, Risk and Safeguarding and for Research (Scientific Advisory Committee).

The day-to-day management of the Charity is delegated to the CEO, supported by the staff team. At the close of the year, staffing consisted of ten staff: a chief executive (four days per week); a finance manager (two days per week); an operations & creative manager (full time); two fundraising managers (both full time) and one administrative assistant (two days per week); a head of support services (four days per week) and two support workers - one in London (four days per week) and one in Birmingham (four days per week); and a communications manager (three days per week).

The Childhood Eye Cancer Trust is not affiliated with any other charitable organisation and has no related parties except as shown in the notes to the accounts. The Charity is a member of the Association of Medical Research Charities, the National Institute of Health Research, and Cancer 52.

Induction and training of new trustees
New trustees are provided with information about their role and responsibilities as recommended by the Charity Commission and the National Council for Voluntary Organisations (NCVO). This includes: the trustee role description and person specification relevant to the role, the Charity's confidentiality policy, and the eligibility requirements for becoming a trustee. They are also supplied with a copy of the Memorandum and Articles of Association, the annual plan and budget, all policies and procedures, financial information, risk register and the chief executive's report and minutes from two previous board meetings.

Trustee roles are advertised on the CHECT website and on occasion, using external recruitment organisations. Enquiries are also occasionally received from members. A selection panel made up of the Chair and CEO considers the application and the suitability of the applicant using agreed criteria identified on the person specification and the role description. The prospective trustee is then invited to observe a board meeting prior to appointment and standing for election, which is voted on and approved by the Board.

Induction meetings covering the background to current matters take place with the CEO and key members of the staff team. Training on matters relevant to the role and responsibilities of trustees is encouraged and the Board subscribes to literature pertinent to good governance. All trustees are required to sign: a code of conduct; the conflict-of-interest policy; and confirmation of their eligibility to serve as a director. They also undergo enhanced with barred list checks Disclosure and Barring Service (DBS) clearance.

The majority of trustees have personal experience of retinoblastoma and its impact, but individuals with other key skills are also recruited to the Board to ensure an appropriate balance to meet the needs of the Charity.

Risk management
The trustees regularly assess the risks to the Charity and maintain a comprehensive risk register which includes plans to mitigate or manage the risks identified.

The risk register is reviewed by the Finance and Risk Committee at each of their meetings and in detail twice a year. Their discussions are reported at each Board Meeting, who in turn undertake a detailed annual review. The Chief Executive reviews on a monthly basis after which any concerns are discussed with the Chair of the Finance, Safeguarding & Risk Committee.

In addition to the Treasurer and Finance and Risk Committee, there are nominated trustees with oversight and non-executive lead for Human Resources, Policies & Procedures, Safeguarding, and Legal Matters.

The trustees are satisfied that there are systems and arrangements in place to manage the risks identified as far as possible.

Safeguarding
As a charity we are committed to safeguarding our employees and all those who receive and give support.

Safeguarding children, young people, and adults, with a focus on those who are vulnerable and may be at risk is a priority for the Childhood Eye Cancer Trust. Our safeguarding focus helps our trustees and employees to remove, reduce and manage safeguarding risks for those we support and work with.

We review our safeguarding policy on an annual basis, have a nominated Trustee lead along with a staff safeguarding lead with x2 deputies, have clear and documented reporting processes and follow up on any safeguarding concerns. All staff and trustees undertake biennial safeguarding training, and undergo enhanced with barred list checks Disclosure and Barring Service (DBS) clearance every three years.

The delivery of our safeguarding obligations is person-centered, and outcomes focused, ensuring we are timely and proportionate in all our actions.

STATEMENT OF TRUSTEES' RESPONSIBILITIES
The trustees (who are also the directors of Childhood Eye Cancer Trust for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice) including Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland."

Company law requires the trustees to prepare financial statements for each financial year. These give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements, the trustees are required to select suitable accounting policies and then apply them consistently; observe the methods and principles in the Charity SORP; make judgements and estimates that are reasonable and prudent; and prepare the financial statements on the going-concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company, and to enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the trustees are aware: there is no relevant audit information of which the charitable company's auditors are unaware; and the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

AUDITORS

The auditors, Knox Cropper LLP, have been re-appointed with a unanimous vote in favour by Trustees.

This report has been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

Approved by order of the Board of Trustees on 26/9/2026 and signed on its behalf by:



Ian Ellington – Trustee

REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF CHILDHOOD EYE CANCER TRUST

Opinion

We have audited the financial statements of Childhood Eye Cancer Trust (the 'charitable company') for the year ended 31 March 2026 which comprise the Statement of Financial Activities, the Balance Sheet, the Cash Flow Statement, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2026 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and the Republic of Ireland'; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditors responsibilities for the audit of the financial statements section of our report. We are independent of the charitable company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions Relating to Going Concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

Other Information

The trustees are responsible for the other information. The other information comprises the information included in the annual report, other than the financial statements and our Report of the Independent Auditors thereon.

Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on Other Matters Prescribed by the Companies Act 2006
In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Report of the Trustees, which includes the Directors' Report prepared for the purposes of company law, for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Report of the Trustees has been prepared in accordance with applicable legal requirements.

Matters on Which we are Required to Report by Exception
In the light of the knowledge and understanding of the charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Report of the Trustees.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the trustees were not entitled to take advantage of the small companies exemption from the requirement to prepare a Strategic Report or in preparing the Report of the Trustees.

Responsibilities of Trustees
As explained more fully in the Statement of Trustees Responsibilities, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Statements
Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue a Report of the Independent Auditors that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. 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.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- The charitable company is required to comply with both company law and charity law as applicable in England and Wales and, based on our knowledge of its activities, we identified that the legal requirement to accurately account for restricted funds was of key significance.
- We gained an understanding of how the charitable company complied with its legal and regulatory framework, including the requirement to properly account for restricted funds, through discussions with management and a review of the documented policies, procedures, and controls.
- The audit team, which is experienced in the audit of charities, considered the charitable company's susceptibility to material misstatement and how fraud may occur. Our considerations included the risk of management override.
- Our approach was to check that all restricted income was properly identified and separately accounted for and to ensure that only valid and appropriate expenditure was charged to restricted funds. This included reviewing journal adjustments and unusual transactions.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at www.frc.org.uk/auditorsresponsibilities. This description forms part of our Report of the Independent Auditors.

Use of our Report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members as a body, for our audit work, for this report, or for the opinions we have formed.



Richard Billinghurst FCA (Senior Statutory Auditor)
for and on behalf of Knox Cropper LLP
65 Leadenhall Street
London
EC3A 2AD

Date: 08/10/2026

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)
STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING AN INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 MARCH 2026

	Notes	Unrestricted funds £	Restricted funds £	2026 Total funds £	2025 Total funds £
INCOME AND ENDOWMENTS FROM:					
Donations and Legacies	2	**407,892**	**238,251**	**646,143**	507,970
Other Trading Activities	3	**1,180**	**-**	**1,180**	843
Investment Income	4	**13,081**	**-**	**13,081**	10,557
Total		**422,152**	**238,251**	**660,404**	519,370
EXPENDITURE ON:					
Raising Funds	5	**178,146**	**-**	**178,146**	154,967
Charitable activities	6				
Medical Research and Grant Making		**38,829**	**42,130**	**80,959**	102,137
Awareness Raising		**105,291**	**10,000**	**115,291**	111,526
Family Support and Information		**287**	**188,281**	**188,569**	154,415
Influencing		**25,671**	**-**	**25,671**	19,541
Total		**348,225**	**240,411**	**588,637**	542,586
NET INCOME/(EXPENDITURE)		**73,927**	**(2,160)**	**71,767**	(23,216)
RECONCILATION OF FUNDS					
Total Funds Brought Forward		**288,748**	**6,800**	**295,548**	318,764
TOTAL FUNDS CARRIED FORWARD		**£362,675**	**£4,640**	**£367,315**	£295,548

CONTINUING OPERATIONS
All income and expenditure has arisen from continuing activities.

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)
BALANCE SHEET AT 31 MARCH 2026

	Notes	2026 £	2025 £
CURRENT ASSETS			
Debtors	12	**17,360**	34,887
Cash at Bank and in Hand		**553,347**	473,048
		570,707	507,935
CREDITORS			
Amounts Falling Due Within One Year	13	**(190,892)**	(137,757)
NET CURRENT ASSETS		**379,815**	370,178
TOTAL ASSETS LESS CURRENT LIABILITIES		**379,815**	370,178
CREDITORS			
Amounts Falling Due After More Than One Year	14	**(12,500)**	(74,630)
NET ASSETS		**£367,315**	£295,548
FUNDS			
Unrestricted funds	16	**362,675**	288,748
Restricted funds		**4,640**	6,800
TOTAL FUNDS		**£367,315**	£295,548

These financial statements have been prepared in accordance with the provisions applicable to charitable companies subject to the small companies' regime.

The financial statements were approved by the Board of Trustees on 26/9/2026 and were signed on its behalf by:

.....

Ian Ellington - Trustee

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)
CASH FLOW STATEMENT FOR THE YEAR ENDED 31 MARCH 2026

	Notes	**2026**	2025
		£	£
Cash flows from operating activities:			
Cash Generated from Operations	19	**67,215**	(16,067)
Finance Costs Paid		**-**	-
Net Cash (Used in)/Provided by Operating Activities		**67,215**	(16,067)
Cash Flows from Investing Activities:			
Interest Received		**13,081**	10,557
Net Cash Provided by Investing Activities		**13,081**	10,557
Change in Cash and Cash Equivalents in reporting period		**80,296**	(5,510)
Cash and cash equivalents at beginning of reporting period		**473,047**	478,558
Cash and cash equivalents at end of reporting period		**£553,347**	£473,048

CHILDHOOD EYE CANCER TRUST (REGISTERED NUMBER: 02143917)
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2026

1. Accounting Policies

Basis of preparing the financial statements

The financial statements of the Charity, which is a public benefit entity under FRS 102, have been prepared in accordance with the Charities SORP (FRS 102) 'Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102)', Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

Going concern

The trustees consider that the Charity's cash at the date of approval of the financial statements and its projected cash flows for the following year are sufficient such that the Charity remains a going concern for the foreseeable future, being a period of at least 12 months from the date of approval of these financial statements. In making this judgement, the trustees and senior management team have considered future agreed funding and the anticipated impact of external factors on future funding and expenditure.

Critical accounting judgements and key sources of estimation uncertainty

The preparation of financial statements in accordance with generally accepted accounting practice requires management to make estimates and judgements that affect the reported amounts of assets and liabilities at the reporting date and the reported amounts of revenues and expenses during the reporting period. The critical judgements and estimates are reflected in these accounting policies.

Income

All incoming resources are included in the Statement of Financial Activities when the Charity is entitled to the income and the amount can be quantified with reasonable accuracy. The following specific policies are applied to particular categories of income when appropriate:

- Voluntary income is received by way of grants, donations and gifts and is included in full in the Statement of Financial Activities when receivable. Grants, where entitlement is not conditional on the delivery of a specific performance by the Charity, are recognised when the Charity becomes unconditionally entitled to the grant.
- Donated services and facilities are included at the value to the Charity only where this can be quantified. The value of services provided by volunteers has not been included in these accounts. Donated goods are measured at fair value and included within income.
- Investment income is included when receivable.

Expenditure

Expenditure is recognised on an accrual basis as a liability is incurred. Expenditure includes any VAT that cannot be fully recovered, and is reported as part of the expenditure to which it relates:

- Costs of generating funds comprise the costs associated with attracting voluntary income.
- Charitable expenditure comprises those costs incurred by the Charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.
- Governance costs include those costs associated with meeting the constitutional and statutory requirements of the Charity and include audit fees and costs linked to the strategic management of the Charity.
- All costs are allocated between the expenditure categories of the Statement of Financial Activities on a basis designed to reflect the use of the resource. Costs relating to a particular activity are allocated directly, others are apportioned on an appropriate basis e.g. time or estimated usage basis as set out in the notes to these accounts.

1. Accounting Policies – continued

Tangible fixed assets
Tangible fixed assets are stated at cost less accumulated depreciation. The cost of minor additions or those costing below £250 are not capitalised. Depreciation is provided at rates calculated to write off the cost of each asset over its expected useful life, which in all cases is estimated at 4 years.

Cash at bank and in hand
Cash at bank and cash in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

Debtors
Trade and other debtors are recognised at the settlement amount due. Prepayments are valued at the amount prepaid net of any trade discounts due.

Creditors
Creditors are recognised at their settlement amount, after allowing for any trade discounts due.

Financial instruments
The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value.

Employee benefits
Short-term benefits are recognised as an expense in the period in which the service is received. Termination benefits are accounted for on an accrual basis and in line with FRS 102. The Charity operates a defined contribution pension scheme. Contributions are charged to the Statement of Financial Activities in the period to which they relate and are allocated between activities and funds based on the use of the resource i.e. where employees spend their time.

Taxation
The Charity is exempt from corporation tax on its charitable activities.

Fund accounting
Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the trustees. Restricted funds can only be used for particular restricted purposes within the objects of the Charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes. Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

Hire purchase and leasing commitments
Rentals paid under operating leases are charged on a straight-line basis over the period of the lease.

2. Donations and Legacies

	Unrestricted funds £	Restricted funds £	Total 2026 £	Total 2025 £
Grants				
Grants from Trusts & Foundations	**16,050**	**238,251**	**254,301**	201,597
	16,050	**238,251**	**254,301**	201,597
Donations:				
General Donations	**32,314**	**-**	**32,314**	24,893
Standing Orders	**25,885**	**-**	**25,885**	29,618
In Memoriam	**29,194**	**-**	**29,194**	32,516
GAYE	**9,292**	**-**	**9,292**	2,126
Collecting Tins	**671**	**-**	**671**	457
Other Corporate Donations	**42,728**	**-**	**42,728**	20,604
London Marathon	**68,116**	**-**	**68,116**	45,837
Great North Run	**8,338**	**-**	**8,338**	21,319
Other events, Sporting Activities and Community Fundraisers	**175,303**	**-**	**175,303**	129,003
	391,842	**-**	**391,842**	306,373
Legacies	**-**	**-**	**-**	-
Total Income from Donations and Legacies	**£407,892**	**£238,251**	**£646,143**	£507,970

The Trustees would like to thank all the members and supporters who have contributed their time and effort to raising money for the Trust.

3. Other Trading Activities

	2026 Total £	2025 Total £
Christmas Cards	**453**	465
Merchandise Sales	**727**	378
	£1,180	£843

4. Investment Income

	2026 Total £	2025 Total £
Bank Interest	**13,081**	10,557
	£13,081	£10,557

5. Raising Funds

	2026 Total	2025 Total
	£	£
Raising Donations and Legacies		
Staff Costs	**134,774**	100,911
Fundraising Costs	**23,516**	14,259
Support Costs	**19,856**	39,797
	£178,146	£154,967

6. Charitable Activities

	Direct Costs	Grant Funding of Activities	Support Costs (see note 7)	2026 Total	2025 Total
	£	£	£		£
Medical Research and Grant Making	**54,885**	**22,704**	**3,370**	**80,959**	102,137
Awareness Raising	**3,091**	**97,617**	**14,583**	**115,291**	111,526
Family Support and Information	**27,198**	**140,523**	**20,848**	**188,569**	154,415
Influencing	**-**	**22,353**	**3,318**	**25,671**	19,541
	£85,174	**£283,197**	**£42,120**	**£410,490**	£387,619

7. Support Costs

Support costs are allocated to activities on the basis of staff time. In the current year support costs have been reanalysed for the financial statements to better reflect the figures which are provided in the management accounts. *The allocation of salary costs has been reviewed to ensure that expenditure is presented consistently with the underlying accounting records and management accounts. In a change to 2025, the current year salary costs (2026) have been allocated directly to the relevant charitable activity cost centres, rather than initially being recorded within support costs and subsequently reallocated. This change affects the presentation of costs only and has not resulted in any material change to the overall allocation of salary costs between activities compared with the prior year.

Governance costs of £8,085 are included in support costs.

	Raising Donations and Legacies	Medical Research and Grant Making	Awareness Raising	Family Support and Information	Influencing	Total Activities 2026	Total Activities 2025
	£	£	£	£	£	£	£
Salaries	**3,280**	**557**	**2,409**	**3,444**	**548**	**10,238***	109,007
Premises Rent	**4,428**	**752**	**3,252**	**4,650**	**740**	**13,822**	9,065
Premises Costs	**310**	**53**	**227**	**325**	**52**	**966**	137
Insurance	**336**	**57**	**247**	**353**	**56**	**1,050**	931
Communications and Stationery	**7,351**	**1,248**	**5,399**	**7,718**	**1,228**	**22,944**	19,915
Meetings, Seminars and Staff Training	**397**	**67**	**292**	**417**	**66**	**1,240**	728
Travel and Subsistence	**300**	**51**	**220**	**315**	**50**	**937**	503
Recruitment	**-**	**-**	**-**	**-**	**-**	**-**	648
Accountancy Fees	**766**	**130**	**563**	**805**	**128**	**2,392**	9,926
Sundries	**381**	**67**	**288**	**412**	**66**	**1,223**	800
Bank Charges	**123**	**21**	**90**	**129**	**21**	**383**	290
Auditors' Remuneration	**2,172**	**369**	**1,595**	**2,281**	**363**	**6,780**	7,237
	£19,856	**£3,370**	**£14,583**	**£20,848**	**£3,318**	**£61,976**	£159,187

8. Net Income (Expenditure)

	2026 Total	2025 Total
	£	£
Auditors Remuneration	**6,780**	6,420
Depreciation – Owned Assets	**-**	-
Auditors' Remuneration – Non Audit Services	**1,200**	1,200

9. Trustees' Remuneration and Benefits

There were no trustees' remuneration or other benefits for the year ended 31 March 2026 nor for the year ended 31 March 2025.

Trustees Expenses

During the current year £105 of expenses were reimbursed to the Trustees (2025: £85).

10. Staff Costs

	2026 Total	2025 Total
	£	£
Wages and Salaries	**377,754**	373,078
Social Security Costs	**38,782**	28,855
Other Pension Costs	**11,672**	11,141
	£428,208	£413,074

The average monthly number of employees during the year was as follows:

	2026 Total	2025 Total
Average Number of Employees	10	10

The number of employees whose employee benefits (excluding employer pension costs) exceeded £60,000 was:

	2026 Total	2025 Total
	£	£
£70,000 - £80,000	1	1

11. Comparatives For the Statement of Financial Activities

	Unrestricted Fund	Restricted Funds	Total Funds
	£	£	£
INCOME AND ENDOWMENTS FROM			
Donations and Legacies	334,637	173,333	507,970
Other Trading Activities	843	-	843
Investment Income	10,557	-	10,557
Total	346,037	173,333	519,370
EXPENDITURE ON			
Raising Funds	154,967	-	154,967
Charitable Activities			
Medical Research and Grant Making	77,537	24,600	102,137
Awareness Raising	111,526	-	111,526
Family Support and Information	5,682	148,733	154,415
Influencing	19,541	-	19,541
Total	369,253	173,333	542,586
NET INCOME /(EXPENDITURE)	(23,216)	-	(23,216)
RECONCILIATION OF FUNDS			
Total Funds Brought Forward	311,964	6,800	318,764
TOTAL FUNDS CARRIED FORWARD	£288,748	£6,800	£295,548

12. Debtors: Amounts Falling Due Within One Year

	2026 Total	2025 Total
	£	£
Trade Debtors	**-**	14,859
Other Debtors	**2,792**	7,388
Prepayments and Accrued Income	**14,569**	12,640
	£17,360	£34,887

13. Creditors: Amounts Falling Due Within One Year

	2026 Total £	2025 Total £
Trade Creditors	**29,595**	-
Pension and PAYE Creditor	**7,754**	1,515
Deferred Income	**47,205**	66,275
Accruals	**106,338**	69,967
	£190,892	£137,757

Included within Accruals is £87,313 for research grants awarded but expected to be drawn down within 12 months of the year end (2025: £62,315).

Deferred income relates to donations received in respect of future events, all of which is released in the following financial year.

14. Creditors: Amounts Falling Due After One Year

	2026 Total £	2025 Total £
Accruals and Deferred Income	**£12,500**	£74,630

Accruals reflect grants awarded but not expected to be drawn down until more than 12 months after the current year end.

15. Leasing Agreements

Minimum lease payments under non-cancellable operating leases fall due as follows

	2026 Total £	2025 Total £
Within One year	-	-

The current lease expired in August 2025, with no commitment remaining. A new lease was signed in August 2025 for a two-year period with a six-month notice period.

16. Analysis of Net Assets Between Funds

	Unrestricted Fund	Restricted Funds	2026 Total Funds	2025 Total Funds
	£	£	£	£
Current Assets	**566,067**	**4,640**	**570,707**	507,934
Current Liabilities	**(190,892)**	**-**	**(190,892)**	(137,757)
Long Term Liabilities	**(12,500)**	**-**	**(12,500)**	(74,630)
	£362,675	**£4,640**	**£367,315**	£295,547

17. Movement In Funds

	At 1.4.25	Net Movement in Funds	At 31.3.26
	£	£	£
Unrestricted Funds			
General Fund	**288,748**	**73,927**	**362,675**
Restricted Funds			
Family Support	**6,800**	**(2,160)**	**4,640**
TOTAL FUNDS	**295,548**	**71,767**	**367,315**

Net movement in funds, included in the above are as follows:

	Incoming Resources	Resources Expended	Movement in Funds
	£	£	£
Unrestricted Funds			
General Fund	**422,152**	**(348,225)**	**73,297**
Restricted Funds			
Awareness Raising	**10,000**	**(10,000)**	**-**
Family Support	**186,121**	**(188,281)**	**(2,160)**
Research	**42,130**	**(42,130)**	**-**
TOTAL FUNDS	**238,251**	**240,411**	**71,767**

17. Movement In Funds - continued

Comparatives for Movement in Funds	At 1.4.24	Net Movement in Funds	At 31.3.25
Unrestricted Funds	£	£	£
General Fund	311,964	(23,216)	288,748
Restricted Funds			
Family Support	6,800	-	6,800
TOTAL FUNDS	318,764	(23,216)	295,548

Comparative net movement in funds, included in the above are as follows:

	Incoming Resources	Resources Expended	Movement in Funds
	£	£	£
Unrestricted Funds			
General Fund	346,037	(369,253)	(23,216)
Restricted Funds			
Family Support	148,733	(148,733)	-
	24,600	(24,600)	-
TOTAL FUNDS			
	519,370	(542,586)	(23,216)

Purposes of Restricted Funds

Medical Research	Available for research into various projects that promote the objects of the Charity
Support	To provide support and information to families and individuals affected by retinoblastoma.
Kent Travel	A fund to provide eligible families living in Kent with one-off travel grants for financial assistance with travel to UK clinics.

18. Related Party Disclosures

There were no related party transactions for the year ended 31 March 2026.

19. Reconciliation of Net (Expenditure)/Income To Net Cash Flow From Operating Activities

	2026 Total	2025 Total
	£	£
Net Income/(Expenditure) for the reporting period (as per the Statement of Financial Activities)	**71,767**	(23,216)
Adjustments for:		
Interest Received	**(13,081)**	(10,557)
Decrease/(Increase) in Debtors	**17,526**	(14,116)
(Decrease)/Increase in Creditors	**(8,998)**	31,822
Net Cash provided by/(used in) operations	**£67,215**	£(16,067)

20. Analysis Of Changes In Net Funds

	At 1.4.25	**Cash Flow**	**At 31.3.26**
Net Cash	£	£	£
Cash at Bank	473,047	67,215	553,347
Total	473,047	£67,215	£553,347

21. Capital Commitments

At the year end the Board had agreed to commit to £12,500 of research expenditure for 2026-2027.