** PUBLIC DISCLOSURE COPY **

Extended to November 15, 2023

_{=orm} 990

Extended to November 15, 202.

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

er section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection A For the 2022 calendar year, or tax year beginning and ending D Employer identification number Check if applicable: C Name of organization Address change APOPO US, Inc. 47-1389723 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ (202) 286-2804712 H Street NE termin-ated 1,033,537. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended return Washington, DC 20002 H(a) Is this a group return Applica-F Name and address of principal officer: Charles Richter Yes X No for subordinates? pending same as C above H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) If "No," attach a list. See instructions __ 501(c) (4947(a)(1) or (insert no.) www.apopo.org H(c) Group exemption number J Website: K Form of organization: X Corporation Association Other L Year of formation: 2014 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: APOPO US raises funds in the Activities & Governance United States to support the charitable purposes of APOPO VZW. oxdot if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 5 Number of independent voting members of the governing body (Part VI, line 1b) 2 0 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Current Year Contributions and grants (Part VIII, line 1h) 1,138,232. 1,033,537. Revenue 0. Program service revenue (Part VIII, line 2g) 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,138,232. 1.033.537. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 720,000. 983,000. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 180,328. 140,182. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 69,380. 91,048. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 969,708. 1,214,230. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 168,524. -180,693. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 288,418. 103.884. Total assets (Part X, line 16) 6,953. 3,112. 21 Total liabilities (Part X, line 26) 281,465. 100,772. Net assets or fund balances. Subtract line 21 from line 20 ... Part II | Signature Block 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 Date Sign Charles Richter Charles Richter, CEO 8/16/23 Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature if self-employed 08/09/23 Paid Hemali Kane, EA P01337292 Rogers & Company PLLC Firm's EIN 58-2676261 Preparer Firm's name Firm's address 8300 Boone Boulevard, Suite 600 Use Only Phone no. (703) 893-0300Vienna, VA 22182 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: APOPO US raises funds in the United States to, among other thir	nas.
	support the charitable and humanitarian purposes of APOPO VZW.	APOPO
	VZW is a Belgium-based social enterprise whose mission is to de	
	and implement detect ion rats technology to provide solutions.	<u>-</u>
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organization of the se	penses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1,057,795. including grants of \$983,000.) (Revenue \$)
	APOPO US works to support the tuberculosis (TB) program, mine a	action
	program and research department of APOPO's global operations	
	headquartered in Tanzania. APOPO US is also working to increase	
	knowledge of the landmine and TB issue among the US public, and	d has
	demonstration detection rat partnerships with the San Diego,	
	Indianapolis and Point Defiance Zoo in Tacoma, Washington.	
	See Schedule O	
	see schedule o	
1h	(0)	
4b	(Code:) (Expenses \$)
4c	(Code:) (Expenses \$)
44	Other program services (Describe on Schedule O.)	
→u		1
4e	(Expenses \$\frac{\text{including grants of \$}}{\text{Total program service expenses}} \frac{1,057,795}{\text{.}}	1
	- 7 7 7	Form 990 (2022)

Form 990 (2022) APOPO US, Inc. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		Λ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			77
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	, 1 , , ,	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	. 10	_ -	\vdash
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			177
•	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

Form 990 (2022) APOPO US, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//	28c		Х
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
-	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
D-	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
_)	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0 if not applicable	.		
b	Effect the flumber of Forms w-2d included of line 1a. Effect-of thot applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4	X	
	(gambling) winnings to prize winners?	1c	27	Щ

Form 990 (2022) APOPO US, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No							
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return2a	-	37								
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	v							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х							
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		_v							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X							
D	If "Yes," enter the name of the foreign country See instructions for filing requirements for Fig.CN Form 114. Papert of Foreign Bank and Figure 14 Accounts (FRAR)										
5 0	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		Х							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b	<u> </u>	X							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c									
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30									
ou	any contributions that were not tax deductible as charitable contributions?	6a		Х							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts										
-	were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required										
	to file Form 8282?	7c		Х							
d	If "Yes," indicate the number of Forms 8282 filed during the year										
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X							
f											
g											
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?										
8	, , ,										
_	sponsoring organization have excess business holdings at any time during the year?										
9 Sponsoring organizations maintaining donor advised funds.											
	, , , , , , , , , , , , , , , , , , , ,	9a 9b	-	<u> </u>							
т 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	90									
	Initiation fees and capital contributions included on Part VIII, line 12										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1									
11	Section 501(c)(12) organizations. Enter:	1									
	Gross income from members or shareholders 11a										
	Gross income from other sources. (Do not net amounts due or paid to other sources against	1									
	amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
а	Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans	-									
	Enter the amount of reserves on hand	4.4		Х							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b									
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		х							
	If "Yes," see the instructions and file Form 4720, Schedule N.	13									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х							
	If "Yes," complete Form 4720, Schedule O.										
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities										
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17									
	If "Yes," complete Form 6069.										

APOPO US, Inc. Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 5 **b** Enter the number of voting members included on line 1a, above, who are independent _____ Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? Х 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X on Schedule O how this was done X 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? X 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Charles Richter - 202-286-2804 712 H Street NE, Washington, DC

20002

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	aniza	ation	COI	mpe	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do		Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle	t check more than one nless person is both an and a director/trustee)			h an	compensation	compensation	amount of
	week	_	_	ia a a	Irecto	or/trus	itee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	e e			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		9 0	nbens	Former	(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	ional		yoldı	st con	_	1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	ighes	orme			organizations
(1) Charles Richter	40.00	_	_		<u> </u>	1 0	-			
CEO		1		Х				89,841.	0.	0.
(2) Kristen Davis	1.00									
Chairwoman		Х		Х				0.	0.	0.
(3) Beverly Schwartz	1.00									
Secretary	1 00	Х		Х				0.	0.	0.
(4) Piet Van Hove	1.00	,,						_	0	0
Board Member	1 00	Х		_	_	<u> </u>		0.	0.	0.
(5) Bart Weetjens	1.00									
Board Member		Х						0.	0.	0.
(6) Isa Mirza	1.00									
Board Member	ļ	Х						0.	0.	0.
				\vdash						
				\vdash	\vdash		\vdash			
							L			
		-								
	1									

Pan	Section A. Officers, Directors, Trus	tees, Key Em	<u>ploy</u>	rees	, and	d Hi	ighe	st C	compensated Employe	es (continued)				
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one					ono	Reportable	Reportable	,	Es	timate	ed
		hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n nc	an	nount (of
		week	\vdash	cer ar	id a d	irecto	or/trus	itee)	from	from related	- 1		other	
		(list any hours for	recto						the	organization			pensa	
		related	or di	ee			sated		organization	(W-2/1099-MIS	- 1	l	om the	
		organizations	ustee	trust		9 0	npen		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		ı ~	anizati d relate	
		below	dual tr	tional		yoldı	st cor		1033-1120)			l	anizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				l		
			一	_		Ť	1	_						
			1											
			L											
			ļ											
			┢				-	H				<u> </u>		
			ł											
								\vdash						
			L											
			⊢		\vdash		\vdash	\vdash						
			1											
1b	Subtotal								89,841.		0.			0.
	Total from continuation sheets to Part VI								0.		0.			0 .
	Total (add lines 1b and 1c)								89,841.		0.			0.
	Total number of individuals (including but n	ot limited to th	iose	liste	ed al	bov	e) wł	no r	eceived more than \$100	,000 of reportab	le			(
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director, trust	ee. I	kev e	emp	love	e. o	r hio	nhest compensated emr	olovee on	ľ			
	line 1a? If "Yes," complete Schedule J for s	•		•		•		_		•		3		Х
	For any individual listed on line 1a, is the su													
	and related organizations greater than \$150			-					•			4		Х
5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion 1	rom	any	y unr	elat	ed organization or indiv	idual for services	;			
	rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch	pers	son .					5		X
	ion B. Independent Contractors													
	Complete this table for your five highest co										npens	ation f	rom	
	the organization. Report compensation for (A)	the calendar y	ear e	enai	ng v	vitri	or w	ıtmır	the organization's tax (B)	year.		(C	٠,	
	Name and business	address	NO	INC	3				Description of s	ervices	С	omper		า
											ı			
								\dashv						
											ı			
								\dashv						
											i			
	Total number of independent contractors (i		ot li	mite	d to	tho	se li	stec	d above) who received m	nore than				
	\$100,000 of compensation from the organi	zation				(0						000	
												Farm (ALM 1 /c	2000

Form 990 (2022) APOPO U
Part VIII Statement of Revenue

_ · ·		Check if Schedule O con	taine a reenone	a or note to any lir	ne in this Part VIII			
		Check if Schedule O con	tains a response	e or note to arry iii	(A)	(B)	(C)	l (D)
					Total revenue	Related or exempt		Revenuè éxcluded
						function revenue	business revenue	from tax under sections 512 - 514
S								360110113 3 12 - 3 14
ant		Federated campaigns						
ية 5 و		Membership dues						
Fts,		Fundraising events						
		Related organizations						
ns,		Government grants (contribu	· -					
e ë	f	All other contributions, gifts, gran		000 505				
듗된		similar amounts not included abo		<u>,033,537.</u>				
Contributions, Gifts, Grants and Other Similar Amounts	_	Noncash contributions included in lines			1 000 505			
<u>a</u>	h	Total. Add lines 1a-1f			1,033,537.			
				Business Code				
<u>e</u>	2 a							
er	b							
n S	С	·						
rar Sev	d	<u> </u>						
Program Service Revenue	е							
۱ ۵		All other program service reve		4				
\dashv	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, inte	rest, and				
	4	Income from investment of ta		•				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents 6a	1					
	b	Less: rental expenses 6b)					
	С	Rental income or (loss)	<u> </u>					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7a	1					
	b	Less: cost or other basis						
nu		and sales expenses 7b						
e e		Gain or (loss) 70						
her Revenue		Net gain or (loss)		······				
	8 a	Gross income from fundraising e	vents (not					
ð		including \$	of					
		contributions reported on line						
		Part IV, line 18		+				
		Less: direct expenses		o				
		Net income or (loss) from fund	· -					
	9 a	Gross income from gaming a						
		Part IV, line 19		-				
		Less: direct expenses		o				
		Net income or (loss) from gan	_	·····				
	10 a	Gross sales of inventory, less						
		and allowances		a				
		Less: cost of goods sold						
\dashv	С	Net income or (loss) from sale	es of inventory					
sn				Business Code				
Miscellaneous Revenue	11 a							
llan	b							
Re	С							
žΞ		All other revenue						
		Total. Add lines 11a-11d			1 022 527	^	_	^
	12	Total revenue. See instructions			1,033,537.	0.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respon				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			g	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	983,000.	983,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	89,841.	34,715.	4,003.	51,123.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	39,959.	15,441.	1,781.	22,737.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,382.		10,382.	
11	Fees for services (nonemployees):				_
а	Management				
	Legal				
	Accounting	29,480.		29,480.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	8,223. 3,179.	2,206.	4,413.	1,604. 1,735.
12	Advertising and promotion		1,444.		1,735.
13	Office expenses	36,632.	14,520.	21,462.	650.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	13,534.	6,469.	1,643.	5,422.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
	All other expenses	1 21/ 220	1 057 705	72 164	02 271
25	Total functional expenses. Add lines 1 through 24e	1,214,230.	1,057,795.	73,164.	83,271.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (2022)

Form 990 (2022) Part X Balance Sheet

ra	IL A	balance Sneet				
		Check if Schedule O contains a response or	note to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		252,209.	1	60,446.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		36,209.	3	43,438.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any curren				
		trustee, key employee, creator or founder, su	bstantial contributor, or 35%			
		controlled entity or family member of any of t	hese persons		5	
	6	Loans and other receivables from other disqu				
		under section 4958(f)(1)), and persons descri	bed in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
¥	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other	r			
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, lir		12		
	13	Investments - program-related. See Part IV, li		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must e	qual line 33)	288,418.	16	103,884.
	17	Accounts payable and accrued expenses \dots		6,953.	17	3,112.
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple	te Part IV of Schedule D		21	
es	22	Loans and other payables to any current or f	ormer officer, director,			
Ħ		trustee, key employee, creator or founder, su	bstantial contributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese persons		22	
_	23	Secured mortgages and notes payable to un	related third parties		23	
	24	Unsecured notes and loans payable to unrela			24	
	25	Other liabilities (including federal income tax,				
		parties, and other liabilities not included on li	nes 17-24). Complete Part X			
		of Schedule D		C 0F2	25	2 110
	26	Total liabilities. Add lines 17 through 25	77	6,953.	26	3,112.
S		Organizations that follow FASB ASC 958, o	check here X			
nce		and complete lines 27, 28, 32, and 33.		281,465.		100 772
ala	27	Net assets without donor restrictions		201,403.	27	100,772.
P B	28	Net assets with donor restrictions			28	
Ē		Organizations that do not follow FASB AS6	3 958, check here			
ō		and complete lines 29 through 33.			200	
ets	29	Capital stock or trust principal, or current fun			29	
188	30	Paid-in or capital surplus, or land, building, or			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		281,465.	31	100,772.
Z	32	Total net assets or fund balances		288,418.	32	100,772.
	33	Total liabilities and net assets/fund balances		400,410.	33	TU3,004.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1			3,5		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	, 21	4,2	30.	
3	Revenue less expenses. Subtract line 2 from line 1	3	-	-180,693.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		28	1,4	65.	
5	Net unrealized gains (losses) on investments	5					
6							
7							
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))						
Pa	rt XII Financial Statements and Reporting	•					
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,				
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	_X_		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule (0.				
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	dit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization APOPO US . I:

Employer identification number 47-1389723

		O US, Inc.						7-1389723				
Part I	Reason for Public	Charity Status.	(All organizations must o	omplete tl	nis part.) S	See instruction	S.					
The orga	anization is not a private found	dation because it is: (For lines 1 through 12, o	check only	one box.)							
1 🗀	A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).						
2	A school described in sect											
3	A hospital or a cooperative		•)(b)(1)(A)(i	ii).						
4	A medical research organiz						(iii). Enter	the hospital's name.				
	city, and state:	acion oporacou in oo	njanotion with a noopita	. 400011501		((2)(1)() 1)	(III)I LINCOI	and mospital o marile,				
5	An organization operated for	or the benefit of a co	allege or university owner	d or opera	ted by a n	overnmentalı	ınit descrik	ned in				
<u> </u>	section 170(b)(1)(A)(iv). (0		moge of armiversity owner	a or opera	tod by a g	overminental c	ii iit doooi k	500 II 1				
6	A federal, state, or local go		mantal unit dagarihad in	aaatian 1	70/6\/4\/A\	()						
7 X	¬							nublic described in				
/ 21	•		intial part of its support i	rom a gov	emmentai	unit or from ti	ne generai	public described in				
۰ _	¬	section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8	7											
9 🗀	An agricultural research org	-			-		-	-				
	or university or a non-land-o	grant college of agric	culture (see instructions).	Enter the	name, city	y, and state of	the colleg	e or				
	university:											
10	An organization that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contribution	ons, membersl	nip fees, a	nd gross receipts from				
	activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more that	n 33 1/3% of i	ts support	from gross investment				
	income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the or	ganization	after June 30, 1975.				
	See section 509(a)(2). (Co	mplete Part III.)										
11 🖳	An organization organized	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).						
12	An organization organized	and operated exclus	ively for the benefit of, to	perform :	the functio	ons of, or to ca	arry out the	e purposes of one or				
	more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 5	609(a)(3). C	Check the box on				
_	lines 12a through 12d that	describes the type of	of supporting organization	n and con	nplete line:	s 12e, 12f, and	d 12g.					
a	Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s), t	ypically by	giving				
	the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or truste	es of the s	supporting				
	organization. You must o	complete Part IV, Se	ections A and B.									
b [Type II. A supporting org	anization supervised	d or controlled in connec	tion with it	s support	ed organizatio	n(s), by ha	iving				
	control or management of	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	ge the sup	ported				
	organization(s). You mus			·				•				
с	Type III functionally inte			in connec	tion with.	and functional	lv integrat	ed with.				
	its supported organizatio	-					, ,	,				
d [Type III non-functionally						ted organi	zation(s)				
-	that is not functionally int						-	* *				
	requirement (see instruct	-		•		=	a dir ditorri	17011000				
e [Check this box if the orga	•					II Tyne III					
C _	functionally integrated, or					а турст, турс	ii, Type iii					
f En	iter the number of supported		many integrated support	ing organi	zation.							
	ovide the following information	•	od organization(s)									
9 11	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other				
	organization	(,	(described on lines 1-10	Yes	ng document?	support (see in	,	support (see instructions)				
			above (see instructions))	100	140							
Total												

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	524,492.	665,487.	1,126,273.	1,138,232.	1,033,537.	4,488,021.				
2	Tax revenues levied for the organ-						_				
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities						_				
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	524,492.	665,487.	1,126,273.	1,138,232.	1,033,537.	4,488,021.				
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)						569,780.				
6	Public support. Subtract line 5 from line 4.						3,918,241.				
Sec	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
7	Amounts from line 4	(a) 2018 524, 492.	665,487.	1,126,273.	1,138,232.	1,033,537.	4,488,021.				
	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources										
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)										
11	Total support. Add lines 7 through 10						4,488,021.				
12		etc. (see instruction	ons)	•		12					
13	First 5 years. If the Form 990 is for th			fourth, or fifth tax y	ear as a section 5	501(c)(3)					
	organization, check this box and stop										
Sec	ction C. Computation of Publ	ic Support Pe	rcentage								
14	Public support percentage for 2022 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	87.30 %				
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	88.14 %				
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	4 is 33 1/3% or m	nore, check this bo					
	stop here. The organization qualifies	as a publicly supp	orted organization				X				
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box				
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation							
17 a	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not d	check a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,				
	and if the organization meets the fact	s-and-circumstand	es test, check this	box and stop her	e. Explain in Part '	VI how the organiza	ation				
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported o	rganization						
b	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not o	check a box on line	13, 16a, 16b, or 1	17a, and line 15 is	10% or				
	more, and if the organization meets the		•								
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	supported organ	ization					
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u>s</u>				

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	qualify under the tests listed beating A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(a) 2010	(b) 2019	(6) 2020	(u) 2021	(6) 2022	(i) iotai
'	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4							
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf				<u> </u>	 	
5	The value of services or facilities						
	furnished by a governmental unit to						
•	the organization without charge						
	Total. Add lines 1 through 5						
/ 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received						
L	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	etion B. Total Support		1		1		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
102	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ie organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
							<u></u>
	ction C. Computation of Publ					1 1	
	Public support percentage for 2022 (I					15	<u>%</u>
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					l l	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2						%
19a	33 1/3% support tests - 2022. If the						17 is not
	more than 33 1/3%, check this box as						
k	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	103	140
1		
2		
3a		
3b		
0-		
3c		
4a		
44		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
0-		
9c		
10a		
104		
10b		
lule A (Forr	n 990)	2022

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
	ion C. Type II Supporting Organizations			
	7		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions	;).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	nstructio	ns).	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Sche	dule A (Form 990) 2022 APOPO US, Inc.			47-1389723 Page 6
Pai		g Orgar	nizations	<u> </u>
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	-		·
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B. line 8, column A)	3		

__ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2022

5

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

5

6

APOPO US, Inc.

Par	t V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	the organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	•	(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization

APOPO US, Inc.

Employer identification number

47-1389723

Organization type (check one):					
Filers of: Section:					
Form 990 or 990-EZ	$\overline{\mathbf{X}}$ 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule					
	nization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or om any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules					
sections 509 contributor,	nization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 9(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 990-EZ, line 1. Complete Parts I and II.				
contributor, literary, or e	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
year, contrib is checked, purpose. Do	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$				
answer "No" on Part	aution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must iswer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify at it doesn't meet the filing requirements of Schedule B (Form 990).				

 $\ \, \text{LHA} \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990) (2022)

APOPO US, Inc.

47-1389723

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	\$ 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and ZIF + 4	\$ 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

APOPO US, Inc.

47-1389723

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** 47-1389723 APOPO US, Inc. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

APOPO US, Inc.

Employer identification number 47-1389723

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Similar Funds or <i>I</i>	Accounts. Complete if the	
		(a) Donor advise	d funds	(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in w	-			
	are the organization's property, subject to the organization's ex				
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that gra	ant funds can be used	only	
	for charitable purposes and not for the benefit of the donor or				
D-	impermissible private benefit?				
Pa			s" on Form 990, Part I\	/, line 7.	
1	Purpose(s) of conservation easements held by the organization		1		
	Preservation of land for public use (for example, recreation)	on or education)	1	orically important land area	
	Protection of natural habitat		Preservation of a cert	tified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contrib	ution in the form of a c	onservation easement on the last Held at the End of the Tax Year	
	day of the tax year.				
	Total number of conservation easements			2a	
	Total acreage restricted by conservation easements				
С.	Number of conservation easements on a certified historic structure.			2c	
a	Number of conservation easements included in (c) acquired af	•			
•	historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, release	ased, extinguished, or i	terminated by the orga	nization during the tax	
4	year	mont in located			
4 5	Number of states where property subject to conservation ease Does the organization have a written policy regarding the period		tion bandling of		
3	violations, and enforcement of the conservation easements it h			Yes No	
6	Staff and volunteer hours devoted to monitoring, inspecting, h		nd enforcing conservat		
Ū	Starr and volunteer flours devoted to monitoring, inspecting, in	ariding of violations, ar	ia cinording conscivat	non casements during the year	
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and en	forcing conservation e	asements during the year	
	Э,				
8	Does each conservation easement reported on line 2(d) above	satisfy the requiremen	ts of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?				
9	In Part XIII, describe how the organization reports conservation				
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's	financial statements t	hat describes the	
	organization's accounting for conservation easements.				
Pa	t III Organizations Maintaining Collections of	Art, Historical Tre	easures, or Other	Similar Assets.	
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its rev	enue statement and ba	alance sheet works	
	of art, historical treasures, or other similar assets held for publi	c exhibition, education	, or research in further	ance of public	
	service, provide in Part XIII the text of the footnote to its finance	cial statements that des	cribes these items.		
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue	e statement and balan	ce sheet works of	
	art, historical treasures, or other similar assets held for public e	exhibition, education, o	r research in furtherand	ce of public service,	
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1			\$	
				*	
2	If the organization received or held works of art, historical treas	sures, or other similar a	ssets for financial gain	, provide	
	the following amounts required to be reported under FASB AS	C 958 relating to these	items:		
а	Revenue included on Form 990, Part VIII, line 1			\$	
b	Assets included in Form 990, Part X \$				

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets:		t III Organizations Maintaining C		rt. Histo	orical Tr	easures, or O	ther S		ar Asse			age ∠
collection tems (check all that apply): a Public exhibition d Loan or exchange program b Scholarly research e Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for arise funder starter than to be maintained as part of the organization collection? Yes No											idea)	
a Public exhibition d	3		on, and other record	as, check	arry or trie	Tollowing that mar	e sign	IIICarit	use or its			
b Scholarly research e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Description of the organization and explain how they further the organization's exempt purpose in Part XIII. Description of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Tall is the organization the arrangement in Part XIII and complete the following table: Call if Yes, explain the arrangement in Part XIII and complete the following table:	2				oan or ove	hango program						
c Peservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part V Ecorow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Tal Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XV; line 10. The splan the arrangement in Part XIII and complete the following table: Amount to did did on Form 990, Part XV; line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. The part V Endowment Funds. Completed fit the organization answered "Yes" on Form 990, Part IV, line 10. Tal Beginning of year balance In Complete International Complete International Part XIII. Check here if the explanation has been provided on Part XIII. The part V Endowment Funds. Completed fit the organization answered "Yes" on Form 990, Part IV, line 10. Tal Beginning of year balance In Complete International Part XIII. Check here if the explanation has been provided on Part XIII. The precious for facilities and programs and programs In Administrative expenses In Complete International Part XIII. Check here if the explanation for Form 990, Part IV, line 10. The precious for facilities and programs In Administrative expenses In Complete International Part XIII. Check here if the explanation has been provided on Part XIII. Description of year balance In Complete International Part XIII. Check here if the organization that are held and administered for the organization by: In Complete International Part XIII. Ch			_									
4 Provide a description of the organization is collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 1c Amount 1c Beginning balance 2 Distributions during the year 1 to 1 2 Distributions during the year 1 to 2 1 Distributions during the year 1 to 2 1 Distributions during the year 1 to 2 1 Distributions during the year 1 to 3 1 Distributions during the year 1 to 4 2 Distributions during the year 3 Distribution			e	,	ei							
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be self to craise funds rather than to be maintained as part of the organization's collection?	_	_	alloations and avalai	in how the	ov further t	ho organization's	vomni	hurne	oo in Dor	+ VIII		
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C									ose III Fai	t AIII.		
Eacrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X lill and complete the following table: It is a complete if the organization include an arrangement in Part XIII and complete the following table: It is a complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII It	3					•				Voc		¬ No
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XY b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1 Ending balance 2 Distributions 1 If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 Beginning of year balance 2 Do Contributions 1 Administrative expenses 3 End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasiendowment 5 The percentages on lines 2a, 2b, and 2c should equal 100%. 3 Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iv) Related organizations into 4gil, are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organizations endowment funds. Description of property (a) Cost or or other (b) CAccumulated depreciation 1a Land Description of property (a) Cost or other (b) CAccumulated depreciation 1a Land Description of property (b) Buildings c Leasehold improvements 4 Edupment 4 Edupment 4 Edupment 1 End Amount 1 Clc Am	Pai											_ INO
Tall Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	ı aı			ete ii tile t	organizatio	iranswered res	OHFO	1111 990	, rantiv,	iii le 9, oi		
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 1 to 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Reginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	12			diany for c	ontribution	ne or other accete	act inc	ludod				
b !f "Yes," explain the arrangement in Part XIII and complete the following table: Amount	Ia									Voc		No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	h									_ 169		_ INO
c Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If "Yes", explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment — % 5 Permanent endowment — % 5 Permanent endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (ives in her add) A Describe in Part XIII the intended uses of the organization's endowment funds. Part V Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (investment) (c) Accumulated depreciation (d) Book value basis (investment) Buildings C Leasehold improvements C Easehold improvements	b	ii res, explain the arrangement in Fart Alli	and complete the ic	nowing ta	able.		[Amoun		
d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1	•	Reginning balance						10		7		
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property												
f Ending balance	u											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	f											
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back) 22									Ves		No
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back												
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back												
1a Beginning of year balance	1 0							Three v	ears back	(e) Four	vears	back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment year endowment year endowment fines ca, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations b If "Yes" on line 3a(ii), are the related organization is listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other.	12	Reginning of year balance	(, ,	(-,	, , , ,	(-, ,	1 -7			(-)		
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment funds endowment funds endowment funds endowment funds endowment funds endowment funds endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (other) basis (other) Buildings c Leasehold improvements d Equipment e Other	h	· · · · · · · · · · · · · · · · · · ·					+					
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Roard designated or quasi-endowment year end of endoment endowment year end endowment year end endowment endowment year end endowment year end endowment year end endowment year endoment endowment year endowment endowment year endowment endowment	C											
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	q	5 . 5 .										
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment												
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	·	•										
g End of year balance	f						+					
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment							_					
a Board designated or quasi-endowment	_			L co (lino 1a	L column (// pold se.						
b Permanent endowment			•	. •	i, coluitiit (a	a)) Held as.						
c Term endowment	a h											
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other	0											
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	C											
organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations	32			ation that	are held a	nd administered for	or the					
(i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	ou		331011 OF THE OFGATHE	ation that	. arc ricia a	ina aariiinisterea k	or title			[Yes	No
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other		,								3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other										·		
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other	h	If "Yes" on line 3a(ii) are the related organiza	ations listed as requi	red on Sc	hedule R2							
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) basis (other) c Leasehold improvements d Equipment e Other										_ <u></u>		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) basis (other) c Leasehold improvements d Equipment e Other				JWITIETT IC	arius.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment e Other	1 0			0. Part IV.	line 11a. S	See Form 990. Part	t X. line	10.				
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other			1						nd	(d) Boo	k valu	ie
1a Land b Buildings c Leasehold improvements d Equipment e Other		Description of property	, , ,		. ,					(u) D00	\ vaiu	
b Buildings	19	Land	<u> </u>		24010	(-35.)	p/100					
c Leasehold improvements d Equipment e Other				- 								
d Equipment				+					- -			
e Other				+					- -			
				+					- -			
				X. colum	n (B), line 1	(Oc.)						0.

Schedule D (Form 990) 2022

(C) (D) (E) (F) (G) (H)

Schedule D (Form 990) 2022 APOPO US, 13	nc.	4/-1389/23 Page 3
Part VII Investments - Other Securities.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(D)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

232054 09-01-22 Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

OMB No. 1545-0047
2022

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization Employer identification number 47-1389723 APOPO US, Inc. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes X No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total (a) Region (b) Number of émployees, expenditures (by type) (such as, fundraising, prooffices is a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Grants to recipients Europe located in the region 983,000. 3 a Subtotal 0 983,000. **b** Total from continuation sheets to Part I 0. c Totals (add lines 3a 983,000. and 3b)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2022

Page 2

Schedule F (Form 990) 2022 APOPO US, Inc.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(i) Method of valuation (book, FMN appraisal, other)					_		Schodule F (Form 990) 202
(h) Description of noncash assistance							20650
(g) Amount of noncash assistance	.0					A	•
(f) Manner of cash disbursement	T-EB					recognized as a tax uivalency letter	
(e) Amount of cash grant	.000,886					foreign country, tion 501(c)(3) eq	
(d) Purpose of grant	Grant for projects based in Africa and Asia.					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
(c) Region	Europe					Enter total number of recipient organizations listed above that are exempt 501(c)(3) organization by the IRS, or for which the grantee	or entities
(b) IRS code section and EIN (if applicable)						recipient organization nization by the IRS, o	other organizations c
1 (a) Name of organization						2 Enter total number of resempt 501(c)(3) organ	3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2022
(g) Description of noncash assistance					Schedu
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Foreign Partnerships (see Instructions for Form 8865)

Instructions for Form 5713; don't file with Form 990)

1

2

3

4

5

6

Part IV | Foreign Forms

le F (Form 990) 2022 APOPO US, Inc.	47-1389723	Page 4
V Foreign Forms		
Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes [X No
Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"	Yes [X No

Schedule F (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

APOPO US, Inc.

Employer identification number 47-1389723

Form 990, Part III, Line 4a, Description of Program Service:

Form 990, Part III, Line 4a, Description of Program Service:

APOPO's TB detection programs work with over 130 partner clinics in

Tanzania, Mozambique and Ethiopia and supports them to find and treat

more TB patients. For this, human sputum samples are collected from

partner clinics that have already tested them for TB, mostly using

sputum smear microscopy. At APOPO's labs the samples are made safe and

rapidly rechecked by trained TB detection rats followed by who-endorse

confirmation tests. Confirmed results are instantly sent back to the

clinics that oversee patient counselling and treatment. APOPO raises

partner clinic TB detection rates by 40%.

APOPO's tuberculosis detection programs continued to have a significant impact in 2022. APOPO's detected over 3,000 additional TB patients in Tanzania, Ethiopia, and Mozambique. This means that more TB-positive people who have been missed by public clinics are not put on life-saving treatment before they can infect other people and prolong the vicious cycle of TB.

APOPO's landmine detection rats, nicknamed HeroRATs, ignore scrap metal and only detect the scent of explosives, making them much faster at finding landmines than humans with metal detectors. HeroRATs are too light to set off landmines, making them a perfect tool to speed up detection. When integrated into conventional mine clearance methods, such vegetation-cutting machines, and manual deminers with metal

Name of the organization ${\bf APOPO\ US\,,\ Inc.}$

Employer identification number 47-1389723

detectors, the rats are proven to significantly accelerate operations,
helping return safe land to vulnerable communities as quickly and
cost-effectively as possible. This prevents accidents and quickly
returns land to communities for development and sustenance, at a
fraction of the cost, leaving funds to address yet more areas. APOPO's
Technical Survey Dogs or HeroDOGs complement the rats by more cost
efficiently finding the boundaries of a minefield, without the need for
vegetation cutting, accelerating APOPO's overall landmine detection
progress.

In 2022 APOPO continued to conduct mine and explosive ordinance clearance in Cambodia and Angola. The organization cleared over 10 million total M2 of land given back to local communities, helping thousands of people return to their lands and lives free from the threat of mines. In Cambodia, APOPO's HeroRATs and HeroDOGs proved their incredible speed and cost effectiveness. Animal integration with manual demining teams were able to clear land at five times the pace, and less than half the cost of manual deminer only demining teams. By the end of 2022 APOPO's mine action teams were working in 6 countries across the world; Mozambique Cambodia, Angola, South Sudan, Turkey, and Zimbabwe.

At APOPO, we train rats to save lives and our team of innovators make

all of this happen at our training and research headquarters in

Morogoro, Tanzania. Rising to this challenge, our team employs a

multi-pronged approach to address the primary objectives of optimizing

performance of our existing scent detection applications and exploring

innovative new applications for them, while continually evaluating and

Name of the organization APOPO US, Inc.

Employer identification number 47-1389723

assessing animal health and welfare and building local and global scientific capacity.

In 2022, APOPO's training teams continued research on two new applications while preparing new rats for landmine and TB detection and monitoring the work of existing rats in the field. Research on the rats ability to detection both illegal wildlife products when masked with other odors was very promising and finally operational refinement is happening before a pilot at the Port of Dar Es Salaam in early 2023.

APOPO also proved its rats could detect petroleum contamination in soil, a project which may expand to an operational pilot at an oil refinery site outside of Tanzania over the next year. Finally, in 2022, APOPO proved that its rats could be used in a unique role to penetrate deeper into rubble piles and find buried survivors faster than existing methods, at its training ground in Tanzania. APOPO is currently partnered up with a Turkish Search and Rescue Organization who plans to deploy the animals in 2024 after a successful trial on their more advanced training grounds in Turkey.

Form 990, Part VI, Section B, line 11b:

No review was or will be conducted.

Form 990, Part VI, Section B, Line 12c:

At the first board meeting each year we review the policy and everyone states whether or not they have a conflict of interest not previously recognized.

Form **8868** (Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

must use	Form 7004 to request an extension of time to file incor	me tax retu	rns.	50, 11211110	o, and indote		
Type or	Name of exempt organization or other filer, see instr		Taxpayer identification number (TIN)				
print	APOPO US, Inc.					723	
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 71.2 H Street NE						
instructions	Washington, DC 20002						
Enter the	Return Code for the return that this application is for (f	ile a separa	ate application for each return)			0 1	
Applicat	ion	Return	Application			Return	
Is For		Code	Is For	Code			
Form 990	or Form 990-EZ	01	Form 1041-A			08	
Form 472	20 (individual)	03	Form 4720 (other than individual)			09	
Form 990		04	Form 5227			10	
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11			
Form 990	O-T (trust other than above)	06	Form 8870				
Form 990	O-T (corporation) Charles Richte	07					
If theIf this	none No. ► 202-286-2804 organization does not have an office or place of busines is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box	t Group Exe	emption Number (GEN)	f this is fo	r the whole group		
the	equest an automatic 6-month extension of time until georganization named above. The extension is for the original calendar year 2022 or tax year beginning the tax year entered in line 1 is for less than 12 months, Change in accounting period	ganization's	nd ending	the exem		eturn for	
	his application is for Forms 990-PF, 990-T, 4720, or 606	9, enter the	e tentative tax, less			0.	
	y nonrefundable credits. See instructions.	3a	\$	0.			
	his application is for Forms 990-PF, 990-T, 4720, or 606	-	•	26	\$	0.	
	timated tax payments made. Include any prior year over			3b	Φ	0.	
	lance due. Subtract line 3b from line 3a. Include your p ng EFTPS (Electronic Federal Tax Payment System). Se	•		3с	\$	0.	
	If you are going to make an electronic funds withdrawa			3453-TE ar	nd Form 8879-TE	for payment	

instructions. For Privacy Act and Paperwork Reduction Act Notice, see instructions. LHA

Form 8868 (Rev. 1-2022)

223841 04-01-22 38