



**ARHF** *Resonance Healing*

**Amma Resonance Healing Foundation**

**Annual Report and Accounts of 2025**

**CONCEPT**

# CONTENTS

## **1. ARHF Board & Heart Team Report**

### **1.1. Message from the Executive Director**

### **1.2. Our Impact**

### **1.3. Our Mission, Vision, Goal & Method**

1.3.1. Mission

1.3.2. Vision

1.3.3. Goal

1.3.4. Method

1.3.5. Organisational structure

### **1.4. Amma4Africa Projects**

1.4.1. Africa Malaria Prevention Project

1.4.2. Learning Enhancement Africa Program

1.4.3. Treatment of diseases and trauma

1.4.4. Sustainability projects

### **1.5. Research**

1.5.1. Malaria Research

1.5.2. HIV/AIDS Research

1.5.3. Sickle Cell Anaemia Research

1.5.4. LEAP Research

### **1.6. Our organization**

1.6.1. Transparency and Accountability: Amma4Africa Guidelines

1.6.2. Code of Ethics

1.6.3. Partners supporting ARHF

1.6.4. Composition of the Africa Heart Team

1.6.5. Composition of the ARHF Heart Team

1.6.6. Composition of the ARHF Board

## **2. Accounts**

### **2.1. Report**

2.1.1. Compilation report

2.1.2. Result

### **2.2. Annual Accounts**

2.2.1. Balance sheet per December 31, 2025

2.2.2. Profit and loss statement for the year 2025

2.2.3. Clarification on the Annual Report

2.2.4. Clarification of the Profit and loss account

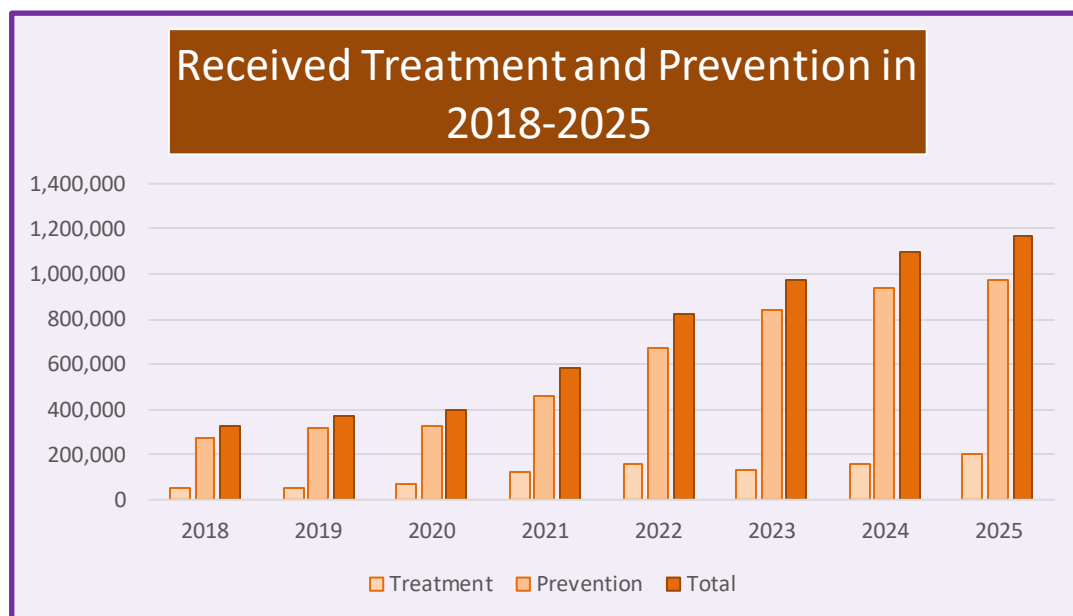
# 1. ARHF Board & Heart Team Report

## 1.1. Message from the Executive Director

The demand for the treatment and prevention services provided by our teams of volunteers has been steadily increasing for several years. With over 1 million people served, a new milestone was reached in 2024. The exponential growth of amma4africa projects continued in 2025 with an increase of 10,7% children and adults treated.

Received Treatment and Prevention from 2018 to 2025								
Year	2018	2019	2020	2021	2022	2023	2024	2025
Treatment	54.278	52.352	67.923	120.291	156.752	135.869	160.955	200.435
Prevention	276.011	322.135	330.096	460.454	670.197	840.344	936.024	971.113
Total	330.289	374.487	398.019	580.745	826.949	976.213	1.096.979	1.171.548
Growth in %		13,40%	6,20%	45,90%	42,40%	18,00%	12,20%	10,71%

Table: Overview of yearly achievements in 2018-2025



Graph: Total number of people that received Prevention and Treatment in 2018-2025

The primary focus of our interventions overwhelmingly revolves around prevention, with the emphasis on the health and well-being of children in underserved areas. The Africa Malaria Prevention Project (AMPP), initiated in 2013, has gained increasing significance, echoing the adage 'prevention is better than cure', particularly as malaria significantly impacts health and quality of life across sub-Saharan Africa.

With the introduction of the audio-based Learning Enhancement Africa Program (LEAP), schools have become a major focus, as LEAP has proven to be a most practical way of offering many children a better chance on a healthy and successful life. Nelson Mandela said: "Education is the most powerful weapon which you can use to change the world." For children to benefit maximally from the education that is being offered to them, they need to be healthy, free from stress and have good learning skills. LEAP aims at optimizing these prerequisites.

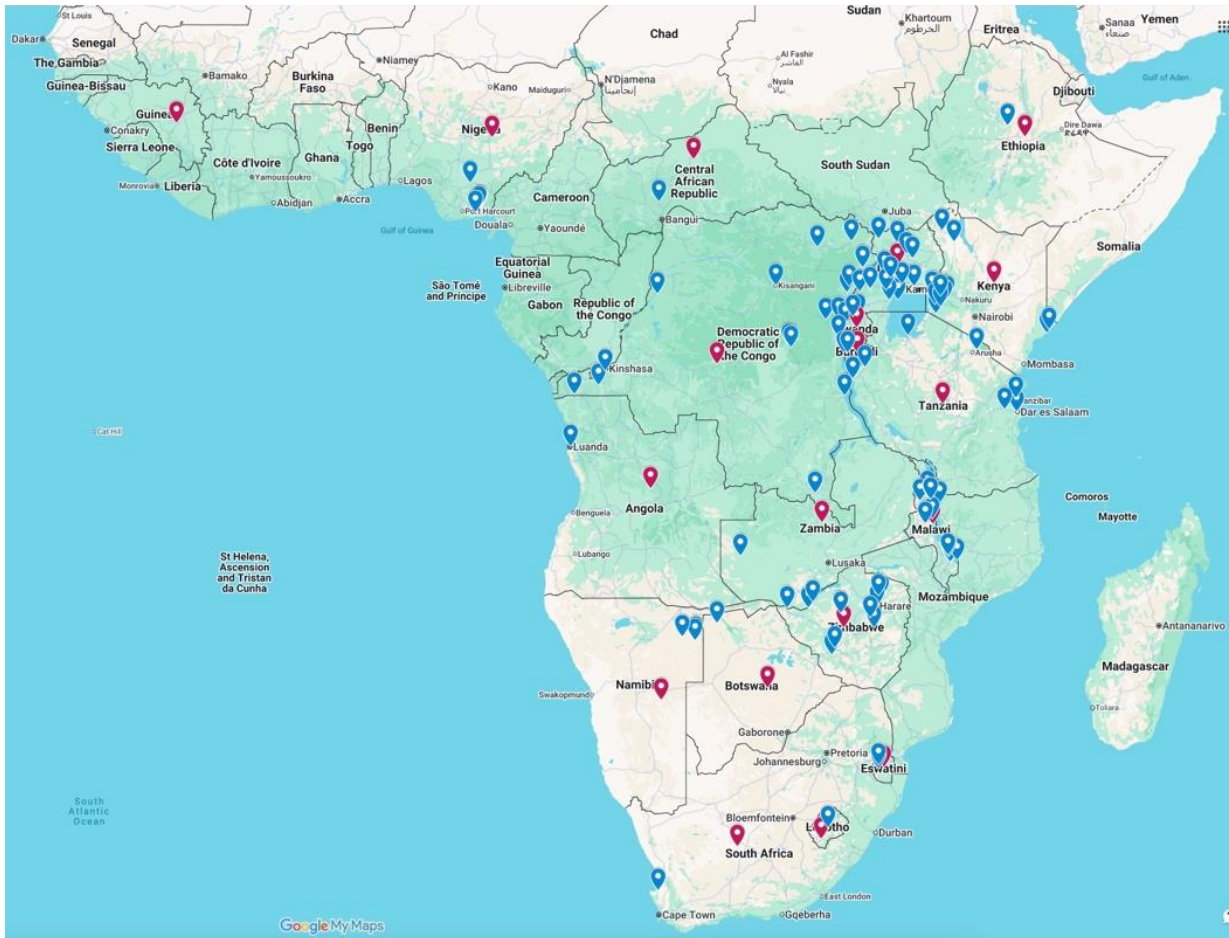
Spanning across now 15 countries, the remarkable success of our endeavours is attributed to dozens of Amma4Africa teams comprising several hundred volunteers. While it's impossible to enumerate all the developments, several noteworthy achievements stand out:

- In 2025 a young Swiss doctor show interest in joining ARHF and made trips to Kenya and Malawi to have first-hand experience. He came back full of enthusiasm and started preparing Research on LEAP in Malawi, a study we hope will be authorized to start in 2026.
- Another extensive tour across Namibia, Zambia, Botswana and Zimbabwe further established amma4africa in this region.
- Ethiopia was visited by an experienced team of three people that know the country well. They have initiated new initiatives and trained new volunteers. 2025 thus became the year that Ethiopia became part of the ARHF family.
- A trip involving several people was made to Malawi, where they supported the local amma4africa team as well as the local governmental hospital and visited several schools.
- Another trip was made to Uganda which offered some of our donors an opportunity to see the impact of their support by themselves, while it also gave the opportunity to a Portuguese doctor to be trained on the ground. Having her join ARHF has a big advantage for future developments in Portuguese speaking African countries.
- A new contact was established with a project in Ghana that is supported by a Dutch foundation. The doctor running mobile clinics will be trained and supplied in 2026.
- The article *Novel Immune Supportive Prevention of Malaria – Data Collection Research in the city of Bukavu (DR Congo)* was published early 2025. The study showed statistically compelling data collected over a period of 6 years on the effect of malaria prevention.
- The study was presented and well received at the *Liga Medicorum Homeopathica Internationalis (LMHI)–congress* which took place May 2025 in Utrecht (Netherlands).
- One of remarkable outcomes of the above study is that the Social Return on Investment (SROI) shows a ratio of 40: for every euro invested in AMPP, local health care facilities save 40 euros because of reduced hospitalisations.
- In honour of the late Peter Chappell (1941-2023), in *Homeopathy in Practise* an article was published that gives testimony to the huge impact his creative and unconventional mind had and will continue to have on the lives of literally millions of people.
- As for a decade the PC Remedy for Sickle Cell Disease has been used in several African countries with consistent success, it was decided to plan a study. A protocol *Treatment of Sickle Cell Disease with PC1436n – An observational, prospective, multicentre cohort study* was designed, and a research team constituted. Despite a few dozen of applications, funding was not found yet in 2025.
- Despite rebels conquering the city, the poultry project in Goma (DR Congo) was able to continue and with the help of *De Wilde Ganzen*. The project is now providing eggs and meat in a city where food security is a big issue due to the many militia in the province of Kivu. It offers a source of income for volunteers, while the manure is used for farming. From the profits local amma4africa projects are funded, making the team in Goma less depending on external support.
- In November ARHF organized a conference with the Extended Heart Team. Plans and strategies were discussed on how to keep meet the growing demand, and four working groups where established so the management of ARHF is delegated to a larger group of people.
- In 2025 we are happy to welcome new members to the Extended Heart Team, a doctor from Portugal, a midwife from Germany and a doctor from Switzerland.

## 1.2. Our impact

Over the years, the Amma4Africa network has experienced remarkable growth and expansion. In 2025 the network boasts a volunteer base exceeding 1,000 dedicated individuals, whose collective efforts have positively impacted more than 1 million people. Additionally, the network has facilitated that prevention services are provided to pupils of around 800 schools, thus further enhancing the organization's contribution to community welfare and education.

The diverse strategies employed by various teams is tailored to the specific possibilities and circumstances within their respective areas of operation. The image below provides a visual representation of the extensive reach of the Amma4Africa network.



*Illustration: Map of sub-Saharan Africa (projects highlighted in blue)*

The year 2025 presents a diverse panorama of developments across different countries compared to 2024. In some countries, teams were unable to achieve the same numbers as the previous year, while significant progress was observed in others. Particularly noteworthy are increased activities in Malawi and Zambia, while the war in DR Congo has impacted the teams there.

COUNTRY	PREVENTION	TREATMENT	TOTAL 2025	TOTAL 2024
DR CONGO	442011	67108	509119	541673
MALAWI	249458	12282	261740	167080
UGANDA	22595	33449	56044	75490
KENYA	43607	28213	71820	85858
BURUNDI	2447	10452	12899	7295
NAMIBIA	14890	3348	18238	19057

<b>ZIMBABWE</b>	27769	8873	36642	47780
<b>TANZANIA</b>	73839	9461	83300	75948
<b>NIGERIA</b>	1200	33	1233	1200
<b>LESOTHO</b>	13718	399	14117	13379
<b>ESWATINI</b>	15029	265	15294	15029
<b>ZAMBIA</b>	34294	26157	60451	15655
<b>ANGOLA</b>	30256	345	30601	31553
<b>ETHIOPIA</b>		50	50	
<b>TOTAL</b>	<b>971113</b>	<b>200435</b>	<b>1171548</b>	<b>1096997</b>

*Table: Prevention and Treatment per Country in 2024 and 2025*

### **1.3. Our Mission, Vision, Goal & Method**

#### **1.3.1. Mission**

The Amma Resonance Healing Foundation (ARHF) is dedicated to fostering health, well-being, and the alleviation of suffering on both individual and collective levels. Embodying the universal values of compassion, care, and generosity, the term 'Amma' symbolizes these principles, resonating across diverse cultures worldwide. ARHF's primary focus lies within the African continent.

#### **1.3.2. Vision**

##### *Human functionality*

ARHF perceives human beings as holistic entities, where physical, emotional, mental, and spiritual facets intricately intertwine to form an indivisible whole. Recognizing the interconnectedness of all elements, ARHF advocates for viewing individuals in relation to their environments. The symbiotic relationship between humans and their surroundings underscores the vital role of environmental factors in shaping human existence and well-being.

##### *Health and illness*

In ARHF's perspective, symptoms and ailments are manifestations of an organism's innate drive towards wholeness and growth. Central to this understanding is the acknowledgment of the body's inherent self-healing capabilities, wherein symptoms serve as meaningful indicators of imbalance. ARHF emphasizes the importance of interventions that support individuals' developmental journeys, facilitating restoration and newfound equilibrium.

##### *Health-care approach*

ARHF advocates for healthcare interventions that bolster individuals' inherent capacity for self-resolution and preserve their holistic integrity. By addressing collective health challenges such as epidemics, trauma, and lifestyle diseases, ARHF endeavors to optimize both individual and societal well-being. Employing innovative modalities such as 'information medicine,' ARHF aims to harmonize all levels of human functioning, promoting holistic healing.

#### **1.3.3. Goal**

ARHF's overarching goal is to democratize access to its interventions, ensuring that those most in need can benefit from improved health outcomes. By prioritizing conditions and regions where

interventions yield the greatest impact, ARHF seeks to foster positive transformation on both individual and community levels, with a current focus on Africa.

### **1.3.4. Method**

Aligned with its holistic healthcare paradigm, ARHF utilizes modalities that promote coherence and harmony within the individual. Leveraging the concept of vital energy and the principles of coherence, ARHF endeavors to restore balance and vitality by delivering targeted 'coherence-inducing information.' This innovative approach, encompassing water-based and sound-based interventions, harnesses the inherent healing potential within individuals.<sup>123456</sup>

### **1.3.5. Organisational structure**

Embodying the principle of self-reliance, ARHF operates through networks of volunteers, particularly in rural areas, to effectively address health challenges. Local teams, under the umbrella of Amma4Africa, autonomously manage projects, supported by ARHF through training and resources. These decentralized efforts are coordinated through the Africa Heart Team, serving as a pivotal link between the Board and grassroots initiatives.

ARHF's initiatives are further bolstered by partnerships with licensed European pharmacies for the production of Source Remedies and by a Source Work Team that provides Source Audios. As a non-profit organization registered in the Netherlands, ARHF operates with transparency and accountability, guided by its status as a 'Public Benefit Institution' recognized by the Dutch Tax Authorities.

## **1.4. Amma4Africa Projects**

### **1.4.1. Africa Malaria Prevention Project (AMPP)**

Malaria stands as the most impactful disease affecting the health and well-being of people residing in sub-Saharan Africa. Beyond inflicting immense suffering and numerous fatalities, malaria is intricately linked to hindering progress, perpetuating the cycle of poverty, and fostering frustration. The Africa Malaria Prevention Project (AMPP) endeavours to combat malaria and address its chronic repercussions by harnessing PC240m—a targeted therapy designed for prevention and treatment.

AMPP is disseminated through various channels including schools, clinics, outreach programs, and churches. Schools serve as particularly effective venues for AMPP implementation and assessment of its efficacy. Within each classroom, meticulous records of absenteeism are maintained, complemented by end-of-term tests conducted in every class. The impact of AMPP has been thoroughly investigated across numerous schools, revealing several key observations:

- A significant reduction in absenteeism rates.
- Decreased referrals of children to hospitals.
- Enhanced mean school performance.

---

<sup>1</sup> <https://pubmed.ncbi.nlm.nih.gov/30901775/>

<sup>2</sup> <https://riviste.fupress.net/index.php/subs/article/view/324>

<sup>3</sup> <https://riviste.fupress.net/index.php/subs/article/view/645>

<sup>4</sup> <https://pubmed.ncbi.nlm.nih.gov/30901775/>

<sup>5</sup> <https://riviste.fupress.net/index.php/subs/article/view/324>

<sup>6</sup> <https://riviste.fupress.net/index.php/subs/article/view/645>

(See also the article *Africa Malaria Prevention Project and Novel Immune Supportive Prevention of Malaria – Data Collection Research in the city of Bukavu (DR Congo)*)<sup>7</sup>

#### **1.4.2. Learning Enhancement Africa Program (LEAP)**

LEAP, developed by Peter Chappell, is a ground-breaking sound-based program tailored for school children. It addresses a diverse array of conditions with the primary goal of offering a healthy and successful future to children, by: 1) enhancing learning capabilities, 2) alleviating stress, and 3) bolstering the immune system to mitigate infectious diseases.

All that's required for implementation is a basic mp3 player and a USB stick containing the LEAP file. LEAP is played daily at the outset of each school day. Schools incorporating LEAP have reported the following benefits:

- Improved academic performance
- Increased enrolment in secondary education
- Lowered stress levels among both students and teachers
- Reduced rates of absenteeism
- Decreased hospitalizations for ailments such as malaria and typhoid

While initially designed for schools, LEAP is applicable across all age groups, as infectious diseases, stress management, and cognitive enhancement are pertinent to individuals of all ages.

#### **1.4.3. Treatment of diseases and trauma**

ARHF provides Amma4Africa Kits to its trainees, which include 36 unique PC Resonances for oral use. Comprehensive instructions for utilizing the kit are detailed in the Amma4Africa Volunteers Manual, accessible to all trainees.

#### **1.4.4. Sustainability projects**

Sustainability initiatives aim at enhancing food security for volunteers and reducing a teams' reliance on financial support. The poultry project in Goma (DRC) is successfully meeting these goals. Provided there is a solid business plan, ARHF hopes to welcome more projects in the years to come.

### **1.5. Research**

#### **1.5.1. Malaria Research**

*Prevention of Malaria with PC240m – Epidemiological outcomes study in Bukavu, DR Congo.*  
[An article on this study was published in 2025 in *The International Journal for Malaria and Tropical Diseases*]

*Introduction:* This research aims at demonstrating that with the Africa Malaria Prevention Project (AMPP) the immune system of African people can be enhanced to prevent malaria by

---

<sup>7</sup> <https://arhf.nl/en/info/books-and-articles>

using PC240m, a Source Resonance created by Peter Chappell in 2002 based on Information Medicine.

*Method:* This was a naturalistic, non-randomised outcome study with the primary aim of serving people and the secondary aim of finding out about potential effects of PC240m in malaria prevention to inform further research. The Bukavu commune Kadutu has a health zone subdivided into 13 health areas (HAs). In HA 1-5 AMPP was made available from 2019-2023; HA 6-10 was non-AMPP from 2019-2022, while AMPP started in 2023; HA 11-13 was non-AMPP for the full study period and thus functioned as a control cohort. These three groups could be compared with each other and with 2018 as a non-AMPP base-line for all HAs. Registered cases of malaria and malaria related deaths were collected in each HA from 2018-2023. Since only group level-data were available due to limited resources, the data were analysed at this level using a random-effects meta-analytical approach.

*Results:* There were significant results for registered malaria cases (odds ratio 0.55) and malaria related deaths (odds ratio 0.61). This would mean, a person treated with PC240m is 45% less likely to develop malaria and 39% less likely to die of it compared to a control person.

*Conclusion:* We found strong indications that PC240m effectively enhances immunity against malaria. This first epidemiological comparative study shows that PC240m is a feasible, inexpensive and safe therapy for preventing malaria. A future study, preferably cluster-randomized, with single person level data would enable a more rigorous analysis of the data and a comparison of the exact proportions between the treated and the control group.

For access to the complete article, please visit our website.<sup>8</sup>

### **1.5.2. HIV/AIDS Research**

In 2023, *The International Journal for Healing and Caring* accepted for publication a groundbreaking study titled "Novel Immune Supportive Treatment of HIV/AIDS – A Comparative Outcomes Study in Rural Clinics in Africa." The research explores a pioneering approach to HIV/AIDS treatment.

The conclusion drawn in the article asserts: "This first epidemiological comparative study shows that PC1 is a feasible treatment that can either be given alone or combined with ARV therapy in African HIV/AIDS patients and might thus be an inexpensive and safe therapy."

For access to the complete article, please visit our website.<sup>9</sup>

### **1.5.3. Sickle Cell Anaemia Research**

A research protocol for a multi-centre study involving clinics in Nigeria, which has the highest incidence of SCA, has been designed. Provided funding for the budget of ± € 43.000,- is found, the study could start in 2026.

### **1.5.3. LEAP Research**

A research protocol for studying the results with the *Learning Enhancement Africa Program* as been designed, and the process for having the study authorized by the authorities in Malawi has

---

<sup>8</sup> <https://arhf.nl/en/info/books-and-articles>

<sup>9</sup> <https://arhf.nl/en/info/books-and-articles>

been set in motion. As soon as clearance has been received, the study can start at 4 selected schools.

## **1.6. Organisation of ARHF and Amma4Africa**

The principle of self-reliance not only lies at the core of the healing methodology employed but also serves as the foundation for ARHF projects. These initiatives are orchestrated by networks of volunteers operating predominantly in Africa's rural regions, aimed at effectively addressing epidemic diseases, trauma (including post-traumatic stress disorder), and chronic illnesses. Local Amma4Africa teams have been strategically established for this purpose, equipped with the insight into the community's needs, enabling them to promptly respond and assume full responsibility for their endeavours. ARHF extends its support by providing comprehensive training and necessary supplies. Amma4Africa entities have been established across multiple African nations, functioning as integral members of the International Amma For Africa Foundation, which is officially registered in Nigeria.

Representatives from various regional Amma4Africa teams form the Africa Heart Team, acting as a vital link between the Board and Africa.

Remedies are sourced from licensed European pharmacies and made accessible to ARHF at cost price. The Source Audios are provided by the ARHF Source Audio Team.

ARHF operates as a non-profit organization registered in the Netherlands. Board members, the ARHF Heart Team, and global employees all contribute on a voluntary basis, without remuneration. Recognizing its public benefit, the Dutch Tax Authorities have conferred upon ARHF the status of a 'Public Benefit Institution' (ANBI status).

### **1.6.1. Transparency and Accountability: Amma4Africa Guidelines**

#### *General*

- serving those that suffer sickness or trauma is the goal of Amma4Africa
- working with a network of volunteers is the sustainable way to reach many
- self-reliance and independence are necessary for a healthy organisation

#### *The team*

- a harmonious and well-functioning team is crucial. Without that projects will fail.
- important to have different qualities and skills within a team
- as much as possible decisions are made based on consensus, meaning all agree
- divide clear roles in the team; if needed the chairperson has a decisive vote
- working out differences and providing an atmosphere of mutual trust is important
- if needed the team can consult the Amma4Africa Coordinator or the Country Coordinator

#### *Amma4Africa activities*

- volunteers participating in activities should be properly trained and supplied
- asking a little extra besides the costs of a water bottle is okay and supports independence, provided the client can afford. It is up to the team to make clear guidelines about this. If the team decides asking a small sum for treatment or prevention, then it should make clear how much that is, how much of it should go to amma4africa and how much to the volunteers. Anyone joining an activity should be informed about the rules made and agree to them.

- In case of outreaches local volunteers should be involved as much as possible

#### *Sustainability projects*

- these belong to amma4africa and the complete team carries responsibility for them
- the team therefore needs to supervise all projects
- this can only function if there is absolute accountability and transparency
- important decisions need to be made by the full team, not only by the one directly involved
- where possible involve volunteers in the projects; it strengthens their commitment, may help them in their livelihood and takes away some of your workload
- where possible let others run the sustainability projects; these projects are there to support your main responsibility, namely making prevention and treatment available
- best to have a separate account (bank or mobile) for sustainability projects

#### *Finances*

- accountability and transparency are a must
- all amounts coming in or going out must be accounted for
- the team has the responsibility to check the accounts
- finances of outreaches or other activities should be transparent for all participating in them and should always be checked by at least two persons

#### *Reports*

- ARHF wishes to receive reports that are correct and truthful
- Amma4Africa Managers have the responsibility to do regular audits
- to make reporting easier, the Amma4Africa Whatsapp-group is to be used to share short info plus photos and or videos about all activities
- the General Amma4Africa Coordinator will gather the team's whatsapp reports and bring them together in a quarterly report. After checking the report with the team the General Amma4Africa Coordinator will send it to ARHF
- the team will send a quarterly financial report to the General Amma4Africa Coordinator

### **1.6.2. Code of Ethics for all involved with ARHF / Amma4Africa**

#### *Guiding principles*

- Cooperation based on self-reliance and equality.
- Respect for the communities we work with and serve.
- Integrity in our actions.
- Responsibility for our decisions and their consequences.

#### *We are committed to:*

- Acting honestly, truthfully and with integrity in all our transactions and dealings.
- Avoiding conflicts of interest.
- Appropriately handling actual or apparent conflicts of interest in our relationships.
- Treating those we serve fairly and with respect.
- Treating every individual with dignity and respect.
- Treating our volunteers with respect, fairness and good faith and providing conditions of engagement that safeguard their rights and welfare.

- Internationally and locally complying with both the spirit and the letter of the law.
- Acting responsibly toward the communities in which we work and for the benefit of the communities that we serve.
- Being responsible, transparent and accountable for all of our actions.
- Improving the accountability, transparency, ethical conduct and effectiveness of the non-profit field.

### **1.6.3. Partners supporting ARHF**

- Throughout the years many *individual donors* have made our work possible.
- *Hahnemann Pharmacy* (Netherlands): supplies ARHF and its teams in Africa with PC Resonances at cost price and has supported fundraising campaigns.
- *The Homeopathic Supply Company* (UK) has been supporting ARHF through donations, both financially as also by providing us with free glass bottles for packing remedies.
- *De Wilde Ganzen* (Netherlands) has supported both rebuilding the burned down poultry project in Goma (DRC) as well as later upscaling the project by funding 50% of the costs.
- *De Marketingkraam* (Netherlands) has given free advice for preparing ARHF for further expansion.
- For already many years *Des Melvin* (Japan) has been building and maintaining websites and apps for ARHF free of charge and hosted the site for sending newsletters. *Kamala* and *Nitesh* (Portugal) have prepared social media templates and a new website that was ready mid-2025.
- Filmmaker *Yael Lev* (Israel) has prepared the documentary ‘A Story of Hope & Love’ to inform the wider public of ARHF’s work concerning malaria and HIV/AIDS.
- *Physis Foundation* is a partner organisation that uses the same tools and has the same goals as ARHF, and is preparing an App that can also be used for LEAP and data-collection.

### **1.6.4. Composition of Africa Heart Team**

- Alain Mubugalo – Amma4Africa Coordinator
- Willis Okumu (Kenya) – Chairman
- Yuanita Hongo (Kenya)
- Ndebo Joseph Balikwisha (DR Congo)
- Dr. Dieudonné Alimasi Bisibo (DR Congo)
- Dr. Gryson Kumwenda (Malawi)
- Linly Mandota (Malawi)
- Boaz Turyahikayo (Uganda) – Secretary
- Lezlie Jenkinson (Namibia, Lesotho, Eswatini, Zambia, Zimbabwe, Angola)

### **1.6.5. Composition of the ARHF Heart Team**

- Andreas Holling, MD (Germany)
- Bernard Opsomer, HP (Belgium)
- Gunhild Quante, HP (Germany)
- Harry van der Zee, MD (Netherlands)

The Extended Heart Team includes other volunteers from Germany, Switzerland, United Kingdom, the Netherlands, Israel, South Africa, Japan and the United States.

### **1.6.6. Composition of the ARHF Board**

- Corrie Hiwat, MRelSc (Netherlands)
- Onno Nieveen, MSEE (Netherlands)
- Harry van der Zee, MD (Netherlands)

## **2. Accounts**

### **2.1. Report by *Hendriks Accountancy*, Groningen (Netherlands)**

#### **2.1.1. Compilation report**

***Hendriks Accountancy***  
***Schuitendiep 47, 9711 RB Groningen***  
***Tel. 050-3604294 Fax 050-3147506***

**Amma Resonance Healing Foundation**  
**P.O.Box 68**  
**9750 AB Haren**  
**The Netherlands**

Groningen, 28-05-2026

Dear Management,

Following your instructions to compile the financial statement over 2025, we report as follows.

#### **Declaration of compilation**

##### **Overview**

In accordance with your instructions we have incorporated the financial statements of Amma Resonance Healing Foundation in this report, derived from the information you provided.

The responsibility for the accuracy and completeness of this data and the financial statements solely rests with you. It is our responsibility to provide a compositional statement summarizing the financial statements.

##### **Proceedings**

We conducted our review in accordance with generally accepted guidelines regarding compilation requests and primarily collecting, processing, classifying and summarizing financial data.

The nature and extent of these activities mean that they do not result in such certainty regarding the accuracy of the financial statements that can be derived from an audited or assessed statement.

If desired, we will be more than happy to clarify anything stated in this report.

With kind regards

H.P. Hendriks

## 2.1.2. Result

### Budget summary

For analysis of the financial result of the foundation we provide you with the following table which is based on the income and expenses.

<b>Budget summary 2025</b>				
	<b>2025</b>		<b>2024</b>	
		<b>%</b>		<b>%</b>
<b>Revenues</b>	€ 104.203	100,0%	€ 103.625	100,0%
Donations for ARHF	€ 98.634	94,7%	€ 92.155	88,9%
Humanitarian aid for volunteers	€ 1.010	1,0%	€ 7.752	7,5%
Sales of PCs, books etc	€ 750	0,7%	€ 610	0,6%
Royalties	€ 3.809	3,7%	€ 3.108	3,0%
<b>Expenses</b>				
Office and organisation expenses	€ 2.042	2,0%	€ 4.492	4,3%
Resonance purchases	€ 2.462	2,4%	€ 2.516	2,4%
Research	€ 738	0,7%	€ 2.939	2,8%
Projects, travel and support in Africa	€ 75.923	72,9%	€ 49.012	47,3%
Sustainability projects	€ 3.000	2,9%	€ 723	0,7%
Humanitarean aid	€ 2.991	2,9%	€ 6.885	6,6%
Conferences	€ 2.885	2,8%	€ 3.191	3,1%
Documentary film	€ -	0,0%	€ -	0,0%
Fundraising	€ 395	0,4%	€ 273	0,3%
<b>Total operational expenses</b>	<b>€ 90.436</b>	<b>86,8%</b>	<b>€ 70.031</b>	<b>67,6%</b>
<b>Result</b>	<b>€ 13.767</b>	<b>13,2%</b>	<b>€ 33.594</b>	<b>32,4%</b>

## 2.2. Annual account

### 2.2.1. Balance sheet per December 31<sup>st</sup> 2025

(result after processing)

Below is an overview of the financial position of the Foundation as of December 31st. 2024 and December 31st. 2025:

balance sheet		
<b>Assets</b> (in Euros)	31-12-2025	31-12-2024
Current assests	€ 141.051	€ 127.284
	€ 141.051	€ 127.284
<b>Liabilities</b> (in Euros)	31-12-2025	31-12-2024
Cash and cash equivalents	€ 141.051	€ 127.284
Short term debt		€ -
	€ 141.051	€ 127.284

The increase in working capital of € 13.767 can be analysed by means of the following state:

Result	€ 13.767
Increase in working capital	€ 13.767

## 2.2.2. Profit and loss statement over 2025

Profit and loss statement over 2025		
(in Euro's)		
	2025	2024
<b>Income</b>		
Donations	€ 98.634	€ 92.155
Donations for humanitarian aid	€ 1.010	€ 7.752
Sales & training	€ 750	€ 610
Royalties	€ 3.809	€ 3.108
	€ 104.203	€ 103.625
<b>Expenses</b>		
Office and organisation expenses	€ 2.042	€ 4.492
Purchase resonances	€ 2.462	€ 2.516
Humanitarian aid	€ 2.991	€ 2.939
Research	€ 738	€ 723
Projects + travel Africa	€ 75.923	€ 49.012
Sustainability projects	€ 3.000	€ 6.885
Conferences	€ 2.885	€ 3.191
Documentary	€ -	€ -
Fundraising	€ 395	€ 273
	€ 90.436	€ 70.031
<b>Result</b>	€ 13.767	€ 33.594

## 2.2.3. Clarification on the Annual Report

### Principles for the valuation of assets and liabilities and grounds for determining the result

#### In general

The principles of valuation and determination of results are based on the assumption of continuity of the foundation.

#### Balance

##### Claims:

Valued at their nominal value.

measured at nominal value.

## Revenues

Revenues are the proceeds from donations and delivery of goods.

Revenues and expenses are recognised in the period to which they relate.

### 2.2.4. Clarification of the profit and loss account

(in Euro's)

<b>Clarification of the profit and loss account</b>		
<b>Income</b>	<b>2025</b>	<b>2024</b>
received donations	€ 98.634	€ 92.155
received donations for humanitarian aid	€ 1.010	€ 7.752
other income: resonances and books sale	€ 750	€ 610
royalties	€ 3.809	€ 3.108
<b>Office and organisation expenses</b>	<b>2025</b>	<b>2024</b>
postage and shipping	€ 521	€ 797
bank costs	€ 516	€ 684
printing etc	€ 896	€ 687
travel expenses	€ 40	€ 395
external advice	€ 69	€ 1.929
	€ 4.067	€ 4.492
<b>Purchase of resonances</b>	<b>2025</b>	<b>2024</b>
PC remedies	€ 2.424	€ 504
LEAP-sticks	€ 38	€ 2.012
	€ 2.462	€ 2.516

<b>Malaria prevention and other projects</b>	<b>2025</b>	<b>2024</b>
Amma4Africa Coordinator	€ 2.499	€ 3.280
Registration in countries	€ -	€ 765
DR Congo	€ 22.420	€ 19.535
Kenya	€ 6.069	€ 4.728
Malawi	€ 6.677	€ 5.116
Uganda	€ 4.769	€ 2.707
Tanzania	€ 823	€ 508
Ethiopia	€ 2.179	€ -
Angola	€ -	€ 900
Zimbabwe	€ 9.742	€ 3.695
Zambia	€ 11.657	€ 3.031
Namibia	€ 6.088	€ 2.100
Lesotho/Eswatini	€ 3.000	€ 2.647
	€ 75.923	€ 49.012

<b>Sustainability projects</b>	<b>2025</b>	<b>2024</b>
Uganda	€ -	€ -
Kenya	€ -	€ 723
DR Congo	€ 3.000	€ -
	€ 3.000	€ 723
<b>Humanitorean aid</b>	<b>2025</b>	<b>2024</b>
orphan care	€ 1.106	€ 894
aid for natural disasters / war / food crisis	€ 1.630	€ 4.437
refugees	€ 255	€ 1.554
	€ 2.991	€ 6.885
<b>Research expenses</b>	<b>2025</b>	<b>2024</b>
Data Collection Malaria Prevention Bukavu (DRC)	€ 598	€ 2.939
LEAP study Malawi	€ 140	€ -
	€ 738	€ 2.939
<b>Conferences</b>	<b>2025</b>	<b>2024</b>
	€ 2.885	€ 3.191
<b>Fundraising</b>	<b>2025</b>	<b>2024</b>