Department of the Treasury Interial Revenue Service

Change of Accounting Period
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

*See Stmt 1

OMB No 1545-0052

Open to Public Inspection

	alendar year 2017 or tax year beginning	becember 1	<u>, 2017, a</u>	and ending	December 31	, 20 17
Name	of foundation				A Employer identifie	
Bay	er U.S. Patient Assistance Fo	oundation			90-091880	·
Numb	er and street (or P O box number if mail is not delivered	to street address)	F	Room/suite	B Telephone number	er (see instructions)
					/410\ 333	2000
	Tax Department 100 Bayer Roa				(412)777-	-2000
City o	r town, state or province, country, and ZIP or foreign pos	tal code			C If exemption applicat	tion is
_					pending, check here	▶∟
	tsburgh, PA 15205-9741		6 a 6aur	نشيع طم مياط	-	
3 Ch	eck all that apply Initial return	Initial return of	=	blic charity	D 1. Foreign organizati	
	Final return	Amended retu			2 Foreign organizat 85% test, check h	
. 0	Address change	Name change			computation .	▶□□
	eck type of organization X Section 501(ູ 03	E if private foundation	~
	Section 4947(a)(1) nonexempt charitable trust remarket value of all assets at J Acco	Other taxable priv			under section 507(b)	
		ther (specify)	SII [A] ACCIT	uai	F If the foundation is	in a 60-month termination (1)(B), check here
	, , , , , , , , , , , , , , , , , , , ,	column (d) must be on casl	h hasis \		- 111001 3001011 301 (5)	(1)(5), 0100111010
	Analysis of Revenue and Expenses (The		11 04313 /			(d) Disbursements
r art	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inves		(c) Adjusted net	for charitable purposes
	may not necessarily equal the amounts in column (a) (see instructions))	books	income	•	income	(cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	0.00	many and high property services and a	manuscript of the		and a sequence among the second
2	Check I if the foundation is not required to	1, 1	2 4 34 34			
3	attach Sch B					
4	Dividends and interest from securities					
5a						
ь	Net rental income or (loss)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			<i>**</i>	31 0 0
ម្ន 6a	Net gain or (loss) from sale of assets not on line 10				* ****	
<u> </u> 6	Gross sales price for all assets on line 6a	140	13 1 % <u></u>	* * * .	V 4.5	11.15
6a b	Capital gain net income (from Part IV, line 2)				* * * *	Carrier III
ے 8 ک	Net short-term capital gain	7,5	- 1 m - 2	<u> </u>		
9	Income modifications	Section with market of	, 110 a 3 m.			1 1 1
10 a	Gross sales less returns and allowances	4. 11. 11.	Sign of Special		and the second	1. 1. X.1
b	Less Cost of goods sold .	A Section of the section	A, "A	- ' '	Company of the second	4 583
0				· ·		() () () () () () () () ()
11	Other income (attach schedule)	0.00	<u></u>	None	None	
12	Total. Add lines 1 through 11	0.00		None	None	×
م 13 م	Compensation of officers, directors, trustees, etc				. <u>.</u>	
14 15 16 a 16 a	Other employee salaries and wages					<u></u>
15	Pension plans, employee benefits		- F	ECEIV	EU	
16 a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6			
ِ ا	Accounting fees (attach schedule)			UI 1 6	26.3	
	Other professional fees (attach schedule)		- - ''	<u>~~ </u>	2010	
18	Taxes (attach schedule) (see instructions)		15	GDEN.	177	
Administrative 17 18 19 20	Depreciation (attach schedule) and depletion.			306 *,		11 1 1 1 1 1 1 1
E 20	Occupancy					
21	Travel, conferences, and meetings		 ,	-		
E 22	Printing and publications					
23	Other expenses (attach schedule)					
24	Total operating and administrative expenses.					
23 24 24 25	Add lines 13 through 23				-	15.05.5
25	Contributions, gifts, grants paid	174,997.00	`			174,997.00
26	Total expenses and disbursements Add lines 24 and 25	174,997.00		None	None	174,997.00
27	Subtract line 26 from line 12	4.50	45 4			
	Excess of revenue over expenses and disbursements	-174,997.00	27 456	37 = 1	<u> </u>	, , , , , , , , , , , , , , , , , , , ,
	Net investment income (if negative, enter -0-)	5 5 3	,	None	None	· · ·
	Adjusted net income (if negative, enter -0-)		,			

-	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
_	artii	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments			
		Accounts receivable ▶			
Ì		L'ess allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use	9,812,774.00	9,637,777.00	9,637,777.00
Assets	9	Prepaid expenses and deferred charges			
ä	10 a	Investments - U S and state government obligations (attach schedule)			
1	b	Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	,		
		Less accumulated depreciation (attach schedule)			
-	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) ,			
		Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	···		
	15	Other assets (describe >)			
		Total assets (to be completed by all filers - see the			
\dashv		Instructions Also, see page 1, item l)	9,812,774.00	9,637,777.00	9,637,777.00
1	17	Accounts payable and accrued expenses			
ł	18	Grants payable			
es	19	Deferred revenue			. ,
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable (attach schedule) , .			
ᅵ	22	Other liabilities (describe)			
Į					
_		Total liabilities (add lines 17 through 22)		·	, , , , , , , , , , , , , , , , , , , ,
		Foundations that follow SFAS 117, check here ▶ 🗓			,
ces		and complete lines 24 through 26, and lines 30 and 31.			,
ă	24	Unrestricted	9,812,774.00	9,637,777.00	
Za	25	Temporarily restricted			
0		Permanently restricted			
딆		Foundations that do not follow SFAS 117, check here 🕨 🛄			
ř		and complete lines 27 through 31.			· ;
S	27	Capital stock, trust principal, or current funds			***
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund			,
βS	29	Retained earnings, accumulated income, endowment, or other funds		0 600 000	u .,
듦	30	Total net assets or fund balances (see instructions)	9,812,774.00	9,637,777.00	
Ž	31	Total liabilities and net assets/fund balances (see	0.010 554 00	0 600 000 00	,
		instructions)	9,812,774.00	9,637,777.00	,
		Analysis of Changes in Net Assets or Fund Bala			
1		I net assets or fund balances at beginning of year - Part			0 012 774 00
_		of-year figure reported on prior year's return)			9,812,774.00
		r amount from Part I, line 27a			-1/4,397.00
_		er increases not included in line 2 (itemize)			9,637,777.00
4		lines 1, 2, and 3			5,031,111.00
5		reases not included in line 2 (itemize)	line E) Dead II 1 "	5	9,637,777.00
<u>6</u>	rota	I net assets or fund balances at end of year (line 4 minus	iine 5) - Paπ II, column (l	b), line 30 6	9, 637, 777.00 Form 990-PF (2017)

(i) FMV as of a b c d e C aprital ga 3 Net short-	only for assets sho	(f) Depreciation allowed (or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	(g) Cost or other basis plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any		(h) Gain or (lo ((e) plus (f) mine (e) plus (f) mine Gains (Col (h) ga (k), but not less the Losses (from col	us (g)) ain minus han -0-) or
c d e (e) Gross sa a b c d e Complete o d e C d	only for assets sho	(or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i)		((è) plus (f) mini	us (g)) ain minus han -0-) or
d e (e) Gross sa b c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	only for assets sho	(or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i)		((è) plus (f) mini	us (g)) ain minus han -0-) or
e (e) Gross sa b c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	only for assets sho	(or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i)		((è) plus (f) mini	us (g)) ain minus han -0-) or
(e) Gross sa a b c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	only for assets sho	(or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i)		((è) plus (f) mini	us (g)) ain minus han -0-) or
a b c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	only for assets sho	(or allowable) wing gain in column (h) and owner (j) Adjusted basis as of 12/31/69	plus expense of sale d by the foundation on 12/31/69 (k) Excess of col (i)		((è) plus (f) mini	us (g)) ain minus han -0-) or
b c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
c d e Complete o (i) FMV as of a b c d e Capital ga Net short-	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
d e Complete o (i) FMV as of a b c d e Capital ga Net short-	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
Complete o (i) FMV as of a b c d e Capital ga Net short-	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
Complete o (i) FMV as of a b c d e Capital ga Net short-	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
(i) FMV as of a b c c d e Capital ga	f 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı)		(k), but not less the	han -0-) or
a b c d Capital ga Net short-		as of 12/31/69				
b c d e Capital ga Net short-	ain net income of					
b c d e Capital ga Net short-	ain net income of					
c d e Capital ga Net short-	ain net income of					
d e Capital ga Net short-	ain net income of			 		
e Capital ga Net short-	un net income of		 			
Capital ga	ain net income of			 -		
Net short-	in net income oi	r If r	gain, also enter in Part I, line 7	 		
			loss), enter -0- in Part I, line 7	2		
	term capital daii	n or (loss) as defined in section:	•			
n gan, a			istructions If (loss), enter -0- in \mathbf{l}			
Part I line			1 (1035), Citter 40 111	3		
			educed Tax on Net Investment I			_
			butable amount of any year in the b	ase perio	d?	Yes X N
		qualify under section 4940(e)			-1	
Enter the a		ount in each column for each ye	ear, see the instructions before mak	ing any er	tries (d)	
Base pend alendar year (or tax	od years year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
201			 	 		
201			 	+		
201			 	+		
201			 	+		
201			 	 		
			, , , . , . , , , , , , . , .	2		
_			de the total on line 2 by 5 0, or by			
the number	er of years the fo	oundation has been in existence	e if less than 5 years	3		
Catan the		hard 11a	for Boly L			
Enter the	net value of non	cnaritable-use assets for 2017	from Part X, line 5	4		
Multiply lii	ne 4 by line 3			5		
Enter 1%	of net investme	nt income (1% of Part I line 27h)	6		
			,			
Add lines	5 and 6			7		
Enter qual	lifying distributio	ns from Part XII, line 4		8		74,997.0

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here And enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		NI.	one
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		IN	<u></u>
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	t VII-A Statements Regarding Activities	-		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		x
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
_	instructions for the definition	1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$,
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>x</u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	.		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	NT / N	<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	75	N/A	- 37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T	,		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1	١.	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		x	
-	conflict with the state law remain in the governing instrument?	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		 -	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ļ		
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>	l	
•	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			٠
	complete Part XIV	9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х

Pa	rt VII-A Statements Regarding Activities (continued)			
		,	Yes	No
11 .	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► N/A			
14	The books are in care of ▶ Sarah Toulouse Telephone no ▶ (412)777	-200	0	
	Located at ▶ 100 Bayer Road Pittsburgh, PA ZIP+4 ▶ 15205-9	741		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		_	T
	and enter the amount of tax-exempt interest received or accrued during the year			
16			Yes	No
	,	16		X
	over a bank, securities, or other financial account in a foreign country?	-		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			. 1
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
ı aı			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	163	
та	During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No.			. 1
	(1) Ingege in the state of exertaining of property with a disqualities person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			.
	(e) refined goods, services, or recinites to (or accept them from) a disqualified person?			
	(4) as compensation to, or pay of reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			1
	the benefit or use of a disqualified person)?			i
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)]		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		NI / D	j
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here			1 1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years		:	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ļ		
	all years listed, answer "No" and attach statement - see instructions)	2b ^N	// A	ļ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	·			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		N/A	
	foundation had excess business holdings in 2017)	3b	11/A	ļ.,
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ऻ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		<u> </u>	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)				
5a	During the	e year, did the foundation pay or incur any amo	ount to				Yes	No	
	(1) Carry	on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	. Yes X No	, [
	(2) Influe	nce the outcome of any specific public ele	ection (see section	4955), or to carry o	n,				
		ly or indirectly, any voter registration drive?		•		,			
		de a grant to an individual for travel, study, or o			1 1 1 1 1 1 1 1	,			
		le a grant to an organization other than a	• •						
		•		<i>*</i>		, [
	section 4945(d)(4)(A)? See instructions								
	purposes, or for the prevention of cruelty to children or animals? Yes X No								
b									
-		ns section 53 4945 or in a current notice regar		•	3		N/A		
		ions relying on a current notice regarding disas	-			`— **			
С		swer is "Yes" to question 5a(4), does the				'''			
·		t maintained expenditure responsibility for the		•		.			
		t maintained experioliture responsibility for the t ttach the statement required by Regulations s			NC				
6.		· · ·							
6a		oundation, during the year, receive any fur	•		Yes X No				
b		onal benefit contract? undation, during the year, pay premiums, dire			. — —	Ī		Х	
U		ondation, during the year, pay premiums, dire	city of indirectly, on a	personal benefit contra	actr,,,,,,,,,,,	6b			
7.		•	artic to a mechibited to	v altar transaction?	□ vaa ⊠ va				
	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?								
		Information About Officers, Director						<u> </u>	
		and Contractors		_					
_1	List all of	ficers, directors, trustees, foundation r	nanagers and thei	r compensation. Sec (c) Compensation					
		(a) Name and address	hours per week	(If not paid,	(d) Contributions to employee benefit plans	(e) Expen other al			
See	attach	ed Statement 2	devoted to position	enter -0-)	and deferred compensation				
									
					1				
									
2	Compens	ation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instructi	ons). If n	one.	enter	
	"NONE."								
(0)	Nama and a	ddress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expen			
(α)	Ivallic allu a	duress of each employee paid more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	other al	lowance	es	
None	· · · · · ·								
_									
_				· · · · · · · · · · · · · · · · · · ·					
_									
		 							
			-						
Total	number o	f other employees paid over \$50,000					No	one_	
						Form 99			

Part VIII	and Contractors (continued)	ees,
3 Five h	ighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Fotal numbe	r of others receiving over \$50,000 for professional services	None
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
	e one month ended Decemeber 31,2017, the foundation distributed	
	f charge 27 units of Betaseron to ill and needy	
indivi	duals nationwide via US Bio, a licensed specialty	174,997.00
2 pharmacy	. Each dosage -28 day supply for treatment of MS.	
3		
4		
Part IX-B	Summary of Brogram Bolated Investments (see instructions)	
	Summary of Program-Related Investments (see instructions) two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	the largest pregram rolated intestitions intestitions and an adding the tar year on lines 1 and 2	
2		
All other pro	gram-related investments. See instructions	
3		l
		
Fotal. Add li	nes 1 through 3	None
		Ear 990-PF (201

FOILE	990-PF (2017)		Page U
Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ıgn fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	None
b	Average of monthly cash balances	1b	None
С	Fair market value of all other assets (see instructions).	1c	None
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	None
3	Subtract line 2 from line 1d	3	None
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
-	instructions)	4	None
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	None
6	Minimum investment return. Enter 5% of line 5	6	None
	Tixl Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	ndations	
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	Noné
2a	Tax on investment income for 2017 from Part VI, line 5 2a		
b	Income tax for 2017 (This does not include the tax from Part VI).		
c	Add lines 2a and 2b	-2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	None
5	Add lines 3 and 4.	5	
6	Deduction from-distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	Tine 1	7	
Da			
ra	T XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	174,997.00
b	Program-related investments - total from Part IX-B	1b	None
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	None
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	174,997.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	None
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	174,997.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	lculatin	g whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years	·	

P	art XIII Undistributed Income (see inst	tructions)			7
	•	(a)	(b)	(c)	(d) /
1	Distributable amount for 2017 from Part XI,		Years prior to 2016	2016	201,7
	line-7			*	
2	Undistributed income, if any, as of the end of 2017				/
	a Enter amount for 2016 only.				
ı	Total for prior years 20,20,20				/
3	Excess distributions carryover, if any, to 2017	,			
	From 2012			/	
. 1	From 2013	1		<i>j</i>	
	: From 2014]			
	1 From 2015				
	From 2016			/	
	Total of lines 3a through e	Ì			
	Qualifying distributions for 2017 from Part XII.			/	
	line 4 ▶ \$ 174,997.00				
а	Applied to 2016, but not more than line 2a			/	
t	Applied to undistributed income of prior years		1		
	(Election required - see instructions)		/	***	
C	Treated as distributions out of corpus (Election required - see instructions)			i	
d	Applied to 2017 distributable amount		. /		-
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2017	<u> </u>			
	(If an amount appears in column (d), the same		/		
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:		/		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		/		
	Prior years' undistributed income Subtract		7		,
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has	[`.`		4	
	been issued, or on which the section 4942(a)			*	*
	tax has been previously assessed			,	,
d	Subtract line 6c from line 6b Taxable	/		·, ·	
_	amount - see instructions				
e	Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount - see				
	instructions	/			
f	Undistributed income for 2017 Subtract lines		,		
	4d and 5 from line 1 This amount must be				
	distributed in 2018			-	
7	Amounts treated as distributions out of corpus		4		,
	to satisfy requirements imposed by section		`		
	170(b)(1)(F) or 4942(g)(3) (Election may be	,		·	
_	required - see instructions)	-			
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)				•
9	Excess distributions carryover to 2018.	· · · · · · · · · · · · · · · · · · ·			
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
	Excess from 2016				
е	Excess from 2017				
					Form 990-PF (2017)

Pa	rt XIV Private Op	erating Foundations	s (see instructions a	na Part VII-A, questi	on 9)	
	If the foundation has				ating	
	foundation, and the ruling Check box to indicate v				▶ [ı section X 4942(j)	(3) or 4942(J)(5)
	·	Tax year	is a private operating	Prior 3 years	1 Section [11] 4942()	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	I or the minimum investment		, ,		, ,	
	return from Part X for each year listed	None	None	None	None	X None
b	85% of line 2a	None	None	None	None	None
С	Qualifying distributions from Part					1
d	XII, line 4 for each year listed . Amounts included in line 2c not					
	used directly for active conduct of exempt activities	None	None	None	None	None
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line	174,997.00	26 742 606 00	20 600 410 00	36 462 222 00	
3	2d from line 2c Complete 3a, b, or c for the	1/4,997.00	36,742,606.00	38,698,418.00	36,462,233.00	112,078,254.00
	alternative test relied upon	.,,				1.7
а	"Assets" alternative test - enter (1) Value of all assets	None	None	None	None	l X None
	(2) Value of assets qualifying under section	154 005 00	0.6 - 1.0 .00.6 .00		0.5 1.50 0.00 0.0	,
h	4942(j)(3)(B)(i)	174,997.00	36,742,606.00	38,698,418.00	36,462,233.00	112,078,254.00
	enter 2/3 of minimum invest-					
	ment return shown in Part X, Ine 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)),	N7	17		.,	N7
	or royalties)	None	None	None	None	None
	public and 5 or more					
	exempt organizations as provided in section 4942					/
	(j)(3)(B)(iii)		- 			
	port from an exempt organization	None	None	None	None	None
	(4) Gross investment income	None	None	None	None	None
Pa		itary information (C uring the year - see		only if the founda	tion had \$5,000 or	more in assets at
	Information Regarding					
а	List any managers of before the close of any	the foundation who h	nave contributed mor	e than 2% of the tota	al contributions receives section 507(d)(2)	ed by the foundation
3 T	•	tax year (but only if th	ley have contributed i	note than \$5,000) (S	ee section 507(u)(2))	
Nor.	List any managers of	the foundation who	own 10% or more o	f the stock of a corn	oration (or an equally	large portion of the
	ownership of a partner					large portion of the
	-			-		
Nor						
	Information Regarding	-	, ,	., , ,		
	Check here ▶ if the unsolicited requests for	he foundation only i	makes contributions	to preselected char	itable organizations a	ind does not accept
	complete items 2a, b, o			ino, oto, to marriago	no or organizations ar	
	The name, address, a	nd telephone number	or email address of t	ne person to whom app	olications should be add	ressed
	Statement 3					
b	The form in which appl	ications should be sul	omitted and information	on and materials they	should include	
Con	pletion of PAP	FDN dual applic	cation, sumbit	verification o	of income and in	ısurance
	Any submission deadli		,		140 4	
Mari	20					
Nor d	ne Any restrictions or li	mitations on awards	such as by geogr	aphical areas charits	able fields kinds of	institutions or other
	factors		,, 50091	, mean, onditte		

Part XV Supplementary Information (continued) 3. Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year 174,997.00 Under the Health Insurance NC Provide Betaseron No relationship Free of Charge Portability and Accountability Act, the name and addresses to needy to any individuals foundation of the recipients are not being provided manager or nationwide substantial contributor 174,997.00 **b** Approved for future payment

None

Part XV	-A Analysis of Income-Prod	ucing Act	ivities		- · · · · · · · · · · · · · · · · · · ·	
	amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)
1 Progran	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_						(coo monadano)
d						
е						
f	 		<u></u>			
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments					
	on savings and temporary cash investments •					
	ds and interest from securities		<u> </u>			· · · · · · · · ·
	al income or (loss) from real estate					
	-financed property					
	al income or (loss) from personal property					
	vestment income			· · ·		
	loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					<u></u>
1 Other re	venue a					
b						
				<u> </u>		
e						
	Add columns (b), (d), and (e)			1	40	None
See worksl	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calci	ulations)				
Part XVI-			ccomplishment of Ex	cempt Pur	poses	*
Line No.	Explain below how each activit	y for which	n income is reported ii	n column (e	e) of Part XVI-A contribi	uted importantly to th
lacktriangledown	accomplishment of the foundation	on's exemp	t purposes (other than b	by providing	funds for such purposes	s) (See instructions)
_						
						
	-					
						-,
					 	
	***			.	··	
				_		
	-					-

Part	XVII	Information R Exempt Organ		sfers to and Transact	ions and	Relations	hips With Nonc	harit	able	
I		ion 501(c) (other		gage in any of the following of the foll					Yes	No
	-		g,foundation to a i	noncharitable exempt orga	inization of					l
			-					1a(1)		X
((2) Othe	er assets						<u>1a(2)</u>		X
		ransactions					•			Х
			· ·	t organization				1b(1)		×
				exempt organization				1b(2) 1b(3)		×
			-	sets				1b(4)		х
		-						1b(5)		х
				or fundraising solicitations .						х
				other assets, or paid emplo						х
d	If the a	inswer to any of th	e above is "Yes,"	complete the following s	chedule C	olumn (b) si	hould always show	the	faır m	ıarket
•	value o	f the goods, other	assets, or services	given by the reporting for	oundation I	f the founda	ation received less	than	fair m	ıarket
		·	i e	nent, show in column (d)						
(a) Lir	e no	(b) Amount involved	(c) Name of none	charitable exempt organization	(d) Desci	ription of transfe	ers, transactions, and sha	ring arra	angeme	nts
							<u> </u>			
				···-	+					
										
					 				-	
					_					
									-	
		- ·-								
	-									-
				· · · · · · · · · · · · · · · · · · ·						
					-		·- <u>·</u>			
	describ		(other than section	nted with, or related to, on 501(c)(3)) or in section			organizations	Y	es X	No
		(a) Name of organizatio	n	(b) Type of organization		_ (c) Description of relation	ship		
							<u>-</u> .			
							. <u>-</u>			
		•				_	<u>-</u>			
							.			
	Under	penalties of penury, I declar	are that I have examined	this return, including accompanying	schedules and s	statements, and to	o the best of my knowled	ge and	belief, i	t is true
	correct	, and complete Declaration o	f preparer (other than taxpa	ayer) is based on all information of whic	h preparer has an	ıy knowledge				
Sign Here	. "	ature of officer or trustee	i Je	7/5/208	VP Ta	ax Opera	May the IR with the property See instruction	eparer		
Paid		Print/Type preparer's na	ime	Preparer's signature	•	Date	Check if	PTIN		
							self-employed			
Prep	arer	Firm's name		<u>.</u>			Firm's EIN			

Form **990-PF** (2017)

Phone no

Use Only Firm's address

Bayer U S Patient Assistance Foundation 90-0918808 Attachment to 2017 NJ Form 990-PF Page 6, Part VIII, line 1

Name and Address		Average hours	Compensation	Employee	Expense
	Title	per week	Received	benefit plans	account
Daniel Apel	Director and Chair	As needed	None	None	None
Michael J McDonald	Director	As needed	None	None	None
Theresa Natalicchio	Director	As needed	None	None	None
Sarah Toulouse	President	2 hours	None	None	None
Mario G Joseph	Vice President and Head of Accounting	As needed	None	None	None
Karen Wnek	Vice President, Patient Assistance	As needed	None	None	None
Richard K Heller	Vice President Tax	As needed	None	None	None
James E McBride	Vice President Tax Operations	As needed	None	None	None
Daniel J Cella	Treasurer	As needed	None	None	None
Richard Liner	Secretary	As needed	None	None	None
Keith R Abrams	Assistant Secretary	As needed	None	None	None

Bayer U.S Patient Assistance Foundation 90-0918808 Attachment to 2017 Form 990-PF Page 10, Part XV, Line 2a

Betaseron Assistance Programs P.O Box 221349 Charlotte, NC 28222-1349 1-877-744-5815