990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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.

Open to Public Inspection

Α	For the	2023 caleng	dar year, or tax year beginning 01/01/2023 and ending	12/31/2	023		
В	Check if	applicable:	C Name of organization PATIENTS FOR AFFORDABLE DRUGS NOW		D Empl	oyer identification number	
	Address	change	Doing business as			82-3044855	
	Name ch	ange	Number and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telepl	hone number	
$\overline{\Box}$	Initial ret	urn	1155 15TH ST NW SUITE 500			202-734-7555	
$\overline{\Box}$		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code				
П	Amended		WASHINGTON, DC 20005		G Gross	receipts \$ 4,060,198	
П		on pending	F Name and address of principal officer: DAVID MITCHEL	H(a) Is this a gro	up return fo		
			1155 15TH ST NW SUITE 500, WASHINGTON, DC 20005			tes included? Yes No	
ī	Tax-exer	npt status:				ee instructions.	
J	Website	· www.pati	entsforaffordabledrugsnow.org	H(c) Group ex			
K	Form of c	organization:		· · · ·		of legal domicile: DC	
	art l	Summa		2011			
			cribe the organization's mission or most significant activities: PATIENTS	FOR AFFOR	RDABI	F DRUGS NOW	
ø	_		THE COMMUNITY, STATE, AND FEDERAL LEVELS TO MOBILIZE PATIENT				
Governance			on Schedule O, Statement 1)				
ern	2		box if the organization discontinued its operations or disposed of m	ore than 25	% of it	s net assets.	
Š			voting members of the governing body (Part VI, line 1a)		3	3	
8					4	3	
es			per of individuals employed in calendar year 2023 (Part V, line 2a)		5	0	
įξ			per of volunteers (estimate if necessary)		6	6	
Activities &			ated business revenue from Part VIII, column (C), line 12		7a	0	
-			red business taxable income from Form 990-T, Part I, line 11		7b	0	
			, , , , , , , , , , , , , , , , , , , ,	Prior Year		Current Year	
•	8	Contributio	2.1	47,206	4,060,198		
ng			ons and grants (Part VIII, line 1h)		0	0	
Revenue	10	_	income (Part VIII, column (A), lines 3, 4, and 7d)		0 0		
æ			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0	
			ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2 1	47,206	4,060,198	
			I similar amounts paid (Part IX, column (A), lines 1–3)	۷, ۱۰	0	0	
	14		aid to or for members (Part IX, column (A), line 4)		0	0	
'n	15	-	her compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0	
se			al fundraising fees (Part IX, column (A), line 11e)		0	0	
Expenses			aising expenses (Part IX, column (D), line 25)		0		
$\overline{\mathbf{X}}$			enses (Part IX, column (A), lines 11a–11d, 11f–24e)	2.5	62,422	2,629,260	
			nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		62,422	2,629,260	
			ess expenses. Subtract line 18 from line 12		15,216	1,430,938	
- Se		110 101100 10	·	inning of Curre		End of Year	
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)		87,355	2,152,288	
Ass I Bal	21		ties (Part X, line 26)		14,741	548,736	
Ę, Ę	22		or fund balances. Subtract line 21 from line 20		72,614	1,603,552	
	art II		re Block	<u> </u>	72,011	1,000,002	
			I declare that I have examined this return, including accompanying schedules and stateme	nts. and to the	best of	mv knowledge and belief, it is	
tru	e, correct	, and complete	e. Declaration of preparer (other than officer) is based on all information of which preparer ha	s any knowled	ge.		
			Sourid Mitchell	13	1/07/2	024	
Sig	gn	Signature	-3000 000 11 0000 10000	Date			
He	ere	DAVID M	ITCHEL, FOUNDER/PRESIDENT				
	-		int name and title				
_	: _I	Print/Type	preparer's name Preparer's signature Date		Check	if PTIN	
Pa		JEREMY	CORK Jereny Cork 11/	07/2024	self-emp	_ ,	
	epare	Firm's non	- 0 	Firm's	EIN	26-2176601	
US	e Onl	Firm's add		Phone		208-287-4777	
Ма	y the IR		this return with the preparer shown above? See instructions			. V Yes No	

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	PATIENTS FOR AFFORDABLE DRUGS NOW WORKS AT THE COMMUNITY, STATE, AND FEDERAL LEVELS TO MOBILIZE
	PATIENTS TO SUPPORT LEGISLATION TO LOWER DRUG PRICES. IT ALSO ENGAGES IN A LIMITED NUMBER OF
	ELECTORAL CAMPAIGNS TO ELEVATE THE ISSUE OF HIGH DRUG PRICES IN POLITICAL DEBATE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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 expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,355,731 including grants of \$0) (Revenue \$0)
	GENERAL PROGRAM - PATIENTS FOR AFFORDABLE DRUGS NOW WORKS AT THE COMMUNITY, STATE, AND FEDERAL
	LEVELS TO MOBILIZE PATIENTS TO SUPPORT LEGISLATION TO LOWER DRUG PRICES. IT ALSO ENGAGES IN A LIMITED
	NUMBER OF ELECTORAL CAMPAIGNS TO ELEVATE THE ISSUE OF HIGH DRUG PRICES IN POLITICAL DEBATE.
	(O. I
4b	(Code:) (Expenses \$ 761,811 including grants of \$ 0) (Revenue \$ 0)
	COMPETITION GRANT - ISSUE AND EDUCATION ADVOCACY IN SUPPORT OF BIPARTISAN PATENT AND FDA REFORM
	TO INCREASE COMPETITION FOR PRESCRIPTION DRUGS IN CONGRESS.
4c	(Code:) (Expenses \$ 48,000 including grants of \$ 0) (Revenue \$ 0)
	BIPARTISAN POLLING GRANT - CONDUCTING BIPARTISAN POLLING INTO LIKELY VOTER OPINIONS ABOUT BIG DRUG
	COMPANIES, CURRENT LITIGATION OVER MEDICARE NEGOTIATION, AND RELATED MESSAGING.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses 2,165,542

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Form 99	90 (2023)			Page (
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		-
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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		-
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		,
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for 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		_
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		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		,
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		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		,
d	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? <i>If "Yes," complete Schedule D, Part IX </i>	11d	_	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	,	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	,	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		_
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		,
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		-
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

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

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

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20a

20b

Part I	V 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		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		,
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		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		-
C	to defease any tax-exempt bonds?	24c		ĺ
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		~
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			
00	•	25b		~
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% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
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		~
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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		_
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	JZ		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
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	~	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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	256		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
38	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	37		~
	19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V		 V	L
4.	Enter the number reported in box 2 of Form 1006. Enter 0, if not applicable		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	10	.,	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	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 return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	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 financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<i>-</i>
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b 11	Section 501(c)(12) organizations. Enter:	-		
a	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources	-		
	against amounts due or received from them.)			
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 12b			
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		
L	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			
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	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		~
46	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
17	If "Yes," complete Form 4720, Schedule O. 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.			

Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 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* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Upon request Other (explain on Schedule O) Own website ✓ Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. EASY OFFICE DBA JITASA, (208)287-4777

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 nor any related organization compensated any current officer, director, or trustee.

				((C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average		not check more than one					Reportable	Reportable	Estimated amount
Name and title	hours	box, unless person is both an officer and a director/trustee)						compensation	compensation	of other
	per week		_	_	_			from the	from related	compensation
	(list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ighe	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	dua	oit	4	mp	e byee	e	1099-NEC)	1099-NEC)	related organizations
	organizations	or tr	nal		loye	Öm				
	below dotted line)	ıste	rus		ď	pen				
	,	Φ	lee			Highest compensated employee				
DAVID MITCHELL	20.00									
FOUNDER/PRESIDENT	40.00	~		~				0	0	0
GLORIA JOHNSON-CUSACK	0.25									
BOARD MEMBER		~						0	0	0
ROBERT JONES	0.25									
BOARD MEMBER		~						0	0	0
MERITH BASEY	40.00									
EXECUTIVE DIRECTOR	40.00			~				0	0	0
WENDY CHEW	40.00									
CFO/COO	40.00			~				0	0	0
	 									
	 	-								
	 	-								

Part	VII Section A. Officers, Directors,	Trustees,	Key	Em	plo	yee	s, an	d F	lighest Compe	nsated	Emplo	yees (continued
					•	C)						
	(A)	(B)	(do n	ot ob		ition	e than o	ana	(D)	(E))	(F)
	Name and title	Average	,				is both		Reportable	Report		Estimated amount
		hours per week	office	er and	_	lirect	or/trust	T .	compensation from the	compen from re		of other compensation
		(list any	Indi or c	Inst	Officer	Key	Highest compensated employee	Former	organization (W-2/	organizatio	ns (W-2/	from the
		hours for related	Individual to or director	ituti	cer	Key employee	nest	mer	1099-MISC/ 1099-NEC)	1099-M 1099-N		organization and related organizations
		organizations	ð al	ona		ploy	e con		1099-NEO)	1099-1	NLO)	Telated Organizations
		below	Individual trustee or director	Institutional trustee		/ee	nper					
		dotted line)	9	stee			nsate					
							ed e					
			1									
			-									
			1									
			1									
			1									
			1									
1b	Subtotal			•					0		0	C
C	Total from continuation sheets to Part	•	n A	•	•				_			
d	Total (add lines 1b and 1c) Total number of individuals (including		limite	.d +	• •	hoc		tod	abovo) who re	l nonivod i	0	han \$100,000 a
2	reportable compensation from the organi		IIIIIILE	u i	.0 1	1105	e iis	ieu	above) who re	eceived i	nore i	.nan \$100,000 0
	Toportable compensation from the organi								U			Yes No
3	Did the organization list any former of	officer dire	ector	tru	ste	o k	ev e	mn	lovee or highes	st compe	nsated	
•	employee on line 1a? If "Yes," complete							p				3 1
4	For any individual listed on line 1a, is the							n a	and other compe	nsation fr	om the	
	organization and related organizations											
	individual											4
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	froi	m any	/ un	related organiza	tion or inc	dividual	
	for services rendered to the organization	? If "Yes," c	compl	lete	Sch	nedu	ıle J t	or s	such person .			5
Secti	on B. Independent Contractors											
1	Complete this table for your five high											
	compensation from the organization. Rep	ort compen	satio	n for	r the	e ca	lenda	r ye	ear ending with or	within th	e orgar	nization's tax year.
	(A)								(B)			(C)
	Name and business add	Iress							Description of serv	/ices		Compensation
See S	chedule O, Statement 2											
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot I	limit	ed to	th	nose listed abov	e) who		
	received more than \$100,000 of compens								2	,		

(202	-,
Part VIII	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	ise or note to ar	ny line in this Pa	rt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	0				
اع ق	С	Fundraising events			1c	0				
fts,	d	Related organization	ns .		1d	0				
ig ë	е	Government grants	(cont	ributions)	1e	0				
ns,	f	All other contribution								
tio er		and similar amounts no				4,060,198				
ള	g	Noncash contribution	ons in	cluded in						
d C		lines 1a-1f 1g				\$ 0				
Contributions, Gifts, Grants, and Other Similar Amounts	h	Total. Add lines 1a-	-1f .				4,060,198			
						Business Code				
Ce	2a									
e Z	b									
S II	С									
gram Ser Revenue	d									
g &	е									
Program Service Revenue	f	All other program se								
	g	Total. Add lines 2a-	-2f .				0			
	3	Investment income								
		other similar amoun	its) .							
	4	Income from investr	nent (of tax-exem	npt bo	and proceeds				
	5	Royalties								
				(i) Real	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)			0	0				
	d	Net rental income o	r (los	T [*]						
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets								
		other than inventory	7a							
ne	b	Less: cost or other basis and sales expenses .								
Revenue	_	•	7b 7c							
Be		Gain or (loss)			0					
ē		Net gain or (loss)			<u> </u>	· · · · ·				
Other	ва	Gross income from events (not including		naraising						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expens			8b					
	C	Net income or (loss)				ents				
		Gross income f			9 010					
		activities. See Part I			9a					
	b	Less: direct expens	es .		9b					
		Net income or (loss)			ctivitie	es				
		Gross sales of ir								
		returns and allowan	ces		10a					
	b	Less: cost of goods	sold		10b					
	С	Net income or (loss)			vento	ory				
2						Business Code				
eo e	11a									
scellaneo Revenue	b									
e e	С									
Miscellaneous Revenue	d	All other revenue								
_	е	Total. Add lines 11a					0			
	12	Total revenue. See	instr	uctions .			4,060,198	0	0	0

Page **10** Form 990 (2023)

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 (4).	
Check if Schedule O contains a response or note to any line in this Part IX		 ī

	Check if Schedule O contains a response or note to any line in this Part IX								
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)				
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								
	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								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees								
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 8	Other salaries and wages								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (nonemployees):								
а	Management								
b	Legal	1,185	1,185	0.007					
۲ C	Accounting	9,287	220.007	9,287					
d e	Lobbying	239,887	239,887						
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column								
Ŭ	(A), amount, list line 11g expenses on Schedule O.) .	773,161	734,503	38,658					
12	Advertising and promotion	773,101	704,000	30,030					
13	Office expenses	75,793	75,612	181					
14	Information technology	137,332	137,232	100					
15	Royalties								
16	Occupancy	139,585	59,240	80,345					
17	Travel	2,448	2,448						
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	14,415	2,115	12,300					
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 O.)								
а	PROGRAM EXPENSES - MEDIA	907.107	907,107	0	0				
b	RETURN OF UNUSED GRANT FUNDS	322,847	0	322,847	0				
C	STAFF DEVELOPMENT/TRAINING	6,213	6,213	0	0				
d		-,	, ,						
е	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	2,629,260	2,165,542	463,718	0				
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 (2000)				

2 Savings and temporary cash investments 3 1,605,000	Р	art X	Balance Sheet			. age 11
1			Check if Schedule O contains a response or note to any line in this Par			
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from on yourrent or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 10c Interview of the securities of the passion of						(B) End of year
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958I(f)(1)), and persons described in section 4958I(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b 10c 11 Investments—publicly traded securities 11 Investments—program-related. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties. 23 Unsecured notes and loans payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities inclinding federal income tax, payables to related third parties. 26 Total liabilities. Add lines 17 through 25 27 Net assets with donor restrictions 28 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 22, and 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds 31 Retained earnings, endowment, accumulated income, or other funds 31 Taz, 14 22		1	Cash—non-interest-bearing	121,503	1	80,722
4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 10 Linvestments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 187,355 16 2,152,288 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to any current or former officer director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 22 Controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Organizations that follow FASB ASC 958, check here and		2	Savings and temporary cash investments	49,848	2	24,848
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net . 7 8 Inventories for sale or use . 8 Inventories for sale or use . 8 Inventories for sale or use . 9 Prepaid expenses and deferred charges . 16,004 9 49,981 10 Less: accumulated depreciation . 10b		3	Pledges and grants receivable, net		3	1,605,000
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(h(1)), and persons described in section 4958(h(2)(3)(B) 6 7 Notes and loans receivable, net 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4	Accounts receivable, net		4	
6 Loans and other receivables from other disqualified persons (as defined under section 4958(n)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 18 Grants payable and accrued expenses 11 Investments—publicly traded securities 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 20 Total liabilities, Add lines 17 through 25 10 Total liabilities, Add lines 17 through 25 11 Secured mortgages and notes payable to unrelated third parties 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities, Add lines 17 through 25 17 Net assets without donor restrictions 172,614 27 1,603,552 28 Net assets without donor restrictions 0 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances		5	trustee, key employee, creator or founder, substantial contributor, or 35%		5	
The property of the propert		6				
7 Notes and loans receivable, net 7 8 8 1 1 1 1 1 1 1 1					6	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b Less: accumulated depreciation 10b 10c 11 Investments — publicity traded securities 12 Investments — publicity traded securities 13 Investments — program—related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 19 Tax—exempt bond liabilities 20 Lans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Loans and other payables to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Net assets with donor restrictions 28 Net assets with donor restrictions 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 31 Total net assets or fund balances 31 Total net assets or fund balances 32 Loso, 552	G	7				
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	šet					
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	AS5		<u> </u>	1/ 00/	<u> </u>	40.001
b Less: accumulated depreciation 10b 10c 11 Investments—publicity traded securities 111 12 Investments—other securities. See Part IV, line 11 12 13 Investments—other securities. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 391,737 16 Total assets. Add lines 1 through 15 (must equal line 33) 187,355 16 2,152,288 17 Accounts payable and accrued expenses 14,741 17 35,093 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 20 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 513,643 26 Total liabilities. Add lines 17 through 25 14,741 26 548,736 27 Net assets with donor restrictions 0 28 0 07ganizations that follow FASB ASC 958, check here			Land, buildings, and equipment: cost or other	16,004	9	49,901
11 Investments — publicly traded securities 11 12 Investments — other securities. See Part IV, line 11 12 13 Investments — program-related. See Part IV, line 11 13 14 15 15 391,737 15 15 391,737 16 2,152,288 17 Accounts payable and accrued expenses 14,741 17 35,093 187,355 16 2,152,288 17 Accounts payable and accrued expenses 14,741 17 35,093 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 25 26 27 27 27 28 27 28 28 29 29 29 20 20 20 20 20		h			100	
12 Investments – other securities. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 13 Intangible assets 14 15 Other assets. See Part IV, line 11 15 391,737 16 Total assets. Add lines 1 through 15 (must equal line 33) 187,355 16 2,152,288 18 Grants payable and accrued expenses 14,741 17 35,093 18 Grants payable and accrued expenses 14 19 20 Tax-exempt bond liabilities 20 Tax-exempt						
13 Investments — program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 391,737 16 Total assets. Add lines 1 through 15 (must equal line 33) 187,355 16 2,152,288 17 Accounts payable and accrued expenses 14,741 17 35,093 18 Grants payable 18 19 19 19 19 19 19 19					-	
14			-		-	
15 Other assets. See Part IV, line 11.		_	· -		-	
Total assets. Add lines 1 through 15 (must equal line 33)					-	204 707
17		_	-	407.055		
18 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 24 Unsecured notes and loans payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 25 513,643 26 Total liabilities. Add lines 17 through 25 14,741 26 548,736 Organizations that follow FASB ASC 958, check here 20 27 1,603,552 Net assets with donor restrictions 172,614 27 1,603,552 Organizations that do not follow FASB ASC 958, check here 29 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Total net assets or fund balances 172,614 32 1,603,552 172,614 32 1,603,552 172,614 32 1,603,552 172,614 32 1,603,552 172,614 32 1,603,552 28 Total net assets or fund balances 172,614 32 1,603,552 29 Total net assets or fund balances 172,614 32 1,603,552 20 Total net assets or fund balances 172,614 32 1,603,552 20 Total net assets or fund balances 172,614 32 1,603,552 30 Total net assets or fund balances 172,614 32 1,603,552 31 Total net assets or fund balances 172,614 32 1,603,552						
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 22 22 22 22 22 22			· ·	14,/41		35,093
Tax-exempt bond liabilities		_				
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			F			
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		_	· · · · · · · · · · · · · · · · · · ·			
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	٠,		· · ·		21	
Unsecured notes and loans payable to unrelated third parties	ilitie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Unsecured notes and loans payable to unrelated third parties	<u>ia</u>					
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	_					
26 Total liabilities. Add lines 17 through 25			Other liabilities (including federal income tax, payables to related third		24	
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 7 Net assets without donor restrictions			of Schedule D		25	513,643
and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions		26		14,741	26	548,736
Net assets without donor restrictions	Seou					
Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances Net assets with donor restrictions O 28 O 29 10 10 11 12 11 12 11 12 11 12 11 12 11 12 13 14 15 16 16 17 17 16 16 17 17 16 18 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	<u>a</u>	27	Net assets without donor restrictions	172,614	27	1,603,552
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds	ĕ	28	Net assets with donor restrictions	0	28	0
29 Capital stock or trust principal, or current funds	Fund					
87 86 75 87 	ō	29	-		29	
31 Retained earnings, endowment, accumulated income, or other funds 31	ets					
Total net assets or fund balances 172,614 32 1,603,552 33 Total liabilities and net assets/fund balances 187,355 33 2,152,288	SSI				31	
Z33Total liabilities and net assets/fund balances187,355332,152,288	λλ	32	g ·	172,614	32	1,603,552
	ž	33	Total liabilities and net assets/fund balances			2,152,288

Part	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)		4,06	0,198	
2	Total expenses (must equal Part IX, column (A), line 25)		29,260		
3	Revenue less expenses. Subtract line 2 from line 1		1,430,93		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		17		
5	Net unrealized gains (losses) on investments			0	
6	Donated services and use of facilities			0	
7	Investment expenses			0	
8	Prior period adjustments			0	
9	Other changes in net assets or fund balances (explain on Schedule O)			0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))		1,60	3,552	
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			. \square	
			Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain of a prior year or checked "Other," explain or checked "Other," explai	on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			
	reviewed 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	~		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a			
	separate 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				
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		'	$oxed{oxed}$	
	If the organization changed either its oversight process or selection process during the tax year, explain of Schedule O.	on			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	he			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo to required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.				

Form **990** (2023)

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	of the organization		Employer identification number
PATIE	INTS FOR AFFORDABLE DRUGS NOW		82-3044855
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	s or Accounts
	Complete if the organization answered "		
	Complete if the organization answered		(h) Funda and ather accounts
	T	(a) Donor advised 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 a		ld in donor advised
	funds are the organization's property, subject to the	<u> </u>	
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
			· · · · · · L Yes L No
Par	t II Conservation Easements		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o	rganization (check all that apply).	
	Preservation of land for public use (for example, recreation)		f a historically important land area
	☐ Protection of natural habitat	,	f a certified historic structure
	Preservation of open space	- Treservation of	a continea motorio stractare
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
_	easement on the last day of the tax year.	d a qualified conservation contribution	
			Held at the End of the Tax Year
а	Total number of conservation easements		. 2 a
b	Total acreage restricted by conservation easements		. 2b
С	Number of conservation easements on a certified hi	storic structure included on line 2a .	. 2c
d	Number of conservation easements included on line	e 2c acquired after July 25, 2006, and	not
	on a historic structure listed in the National Register		· 2d
3	Number of conservation easements modified, trans	ferred released extinguished or term	
•	tax year	romod, romadod, oxumganomod, or torri	mated by the organization during the
	Number of states where property subject to conserv	votion accoment is leasted	
4 5	Does the organization have a written policy regard		oction bandling of
5	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing c	conservation easements during the year
8	Does each conservation easement reported on line	2d above satisfy the requirements of s	ection 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · · · · · · · · · No
9	In Part XIII, describe how the organization reports co	onservation easements in its revenue a	and expense statement and balance
	sheet, and include, if applicable, the text of the footi		•
	organization's accounting for conservation easemer	=	
Dor	Organizations Maintaining Collections	of Art Historical Tracquires or (Other Similar Assets
rail			Julei Sillillai Assets
	Complete if the organization answered "		
1a	3 · · · · · · · · · · · · · · · · · · ·		
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote to	o its financial statements that describe	es these items.
b	If the organization elected, as permitted under FAS	B ASC 958, to report in its revenue s	tatement and balance sheet works of
	art, historical treasures, or other similar assets held	for public exhibition, education, or res	earch in furtherance of public service,
	provide the following amounts relating to these item		•
	(i) Revenue included on Form 990, Part VIII, line 1		¢
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art,		assets for financial gain, provide the
	following amounts required to be reported under FA	-	
а	Revenue included on Form 990, Part VIII, line 1 .		\$
b	Assets included in Form 990, Part X		

Schedu	le D (Form 990) 2023										P	age Z
Part												
3	Using the organization's acquisition, a collection items (check all that apply).		sion, and ot	ther recor	ds, chec	k any of the	e follov	wing that make	signi	ificant	use	of its
а	☐ Public exhibition			d	☐ Loan	or exchang	e prog	ram				
b	☐ Scholarly research			е	Other							
С	☐ Preservation for future generations											
4	Provide a description of the organizat	tion's	collections a	and expla	ain how t	hey further	the or	ganization's ex	empt	purpo	se in	Par
5	XIII. During the year, did the organization assets to be sold to raise funds rather									□ v -		7 .
Davi				allieu as p	Jan Oi lin	e organizan	011 5 00	Jilection? .	•	Yes	<u> </u>	No
Part	Complete if the organization 990, Part X, line 21.			" on For	m 990, F	Part IV, line	9, or	reported an a	amou	nt on	Forr	n
1a									not	☐ Yes		
b	If "Yes," explain the arrangement in Pa								٠ ١	16:	> ∟	No
D	ii res, explain the arrangement ii r	ait Aiii	rana compi	ete trie io	mowning to	abie.			Amoi	unt		
С	Beginning balance						10	2	7			
d	Additions during the year						10					
e	Distributions during the year						16	9				
f	Ending balance						11	f				
2a	Did the organization include an amour						ustodia	ıl account liabil	ity?	Ye	s [No
b	If "Yes," explain the arrangement in Pa	art XIII	l. Check her	e if the ex	kplanatio	n has been	provid	ed in Part XIII]
Par	t V Endowment Funds											
	Complete if the organization	ansv	vered "Yes	" on For	m 990, F	Part IV, line	e 10.					
		(a) (Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years b	ack (e) Four	years l	back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and											
	losses											
d	Grants or scholarships											
е	Other expenditures for facilities and											
	programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the		-	nd balanc	e (line 1g	j, column (a)) held	as:				
а	Board designated or quasi-endowmer	nt		%								
b	Permanent endowment	%										
С	Term endowment%											
_	The percentages on lines 2a, 2b, and 2											
3a	Are there endowment funds not in the	e poss	session of th	ne organi	zation tha	at are held	and ac	iministered for	the	Г		
	organization by:								ī		Yes	No
									t	3a(i)	\dashv	
	(ii) Related organizations?									3a(ii)	\rightarrow	
b	If "Yes" on line 3a(ii), are the related or	_		•					. [3b		
4 Por	Describe in Part XIII the intended uses Land, Buildings, and Equip			on s enac	wment it	unas.						
Part				" on For	m 000 E	Dart IV line	112	See Form 90	η Da	rt V I	ina 1	Λ
	Complete if the organization	aiisv								d) Book		
	Description of property		(a) Cost or of (investm		1	or other basis other)		Accumulated epreciation	(а) воок	value	!
1a	Land											
b	Buildings	[
С	Leasehold improvements	[
d	Equipment	[
е	Other											
Total.	Add lines 1a through 1e. (Column (d) m		qual Form 9	90, Part)	K, line 10	c, column (l	3)) .					

Schedule D (Form 990) 2023

(1) Financial der (2) Closely held (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In	omplete if the organization answered "Yes" on Form 990, Part (a) Description of security or category (including name of security) rivatives	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(2) Closely held (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (Colum	(including name of security) rivatives	IV, line 11c. See F	Form 990, Part X, line 13.
(2) Closely held (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (Colum	(b) must equal Form 990, Part X, line 12, col. (B)) ivestments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII Inc. (C) (1) (2) (3)	(b) must equal Form 990, Part X, line 12, col. (B)) ivestments – Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column ((b) must equal Form 990, Part X, line 12, col. (B)) ivestments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(B) (C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (Colu	westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(C) (D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(D) (E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (Colu	westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(E) (F) (G) (H) Total. (Column (Part VIII In Column (Column (westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(F) (G) (H) Total. (Column (Part VIII In Co (1) (2) (3)	westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(G) (H) Total. (Column (Part VIII In Column (Column (westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
Total. (Column (Part VIII In Co	westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(1) (2) (3)	westments—Program Related omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(1) (2) (3)	omplete if the organization answered "Yes" on Form 990, Part		(c) Method of valuation:
(1) (2) (3)	· · · · · · · · · · · · · · · · · · ·		(c) Method of valuation:
(2) (3)	(a) Description of investment	(b) Book value	
(2) (3)			
(2) (3)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
	(b) must equal Form 990, Part X, line 13, col. (B))		
	ther Assets	IV line 11d Cool	Form 000 Dort V line 15
	omplete if the organization answered "Yes" on Form 990, Part (a) Description	iv, iiie i iu. See i	(b) Book value
(1) LEASE ROU	***		391,737
(2)	ASSET		371,737
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	(b) must equal Form 990, Part X, line 15, col. (B))		391,737
	ther Liabilities	1\/ line 11e er 11f	Con Form 000 Dort V
	omplete if the organization answered "Yes" on Form 990, Part ne 25.	iv, line rie or rii	. See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal incom			(b) Book value
(2) LEASE LIAB			395,949
(3) DUE TO C3			117,694
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	(b) must equal Form 990, Part X, line 25, col. (B))		
	certain tax positions. In Part XIII, provide the text of the footnote to the orga bility for uncertain tax positions under FASB ASC 740. Check here if the tex		

Schedule D (Form 990) 2023 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 4,060,198 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: Net unrealized gains (losses) on investments 0 Donated services and use of facilities 0 h . . . Recoveries of prior year grants 0 Other (Describe in Part XIII.) 0 Add lines 2a through 2d 2e n 3 3 Subtract line **2e** from line **1** 4,060,198 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 4,060,198 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 2,629,260 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a 0 Prior year adjustments 2b 0 Other losses 2c 0 Other (Describe in Part XIII.) 0 Add lines 2a through 2d 2е 0 3 3 Subtract line **2e** from line **1** 2,629,260 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 Other (Describe in Part XIII.) 4b 0 Add lines **4a** and **4b** 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 2,629,260 **Supplemental Information** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part X, Line 2 - UNCERTAIN TAX POSITIONS - THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASRD ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE. SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR FISCAL YEAR 2023. THE ORGANIZATION FILES FORM 990 IN THE U.S. FEDERAL JURISDICTION. THE ORGANIZATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2019.

SCHEDULE O (Form 990)

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.

2023

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

name of the organization	Employer identification number
PATIENTS FOR AFFORDABLE DRUGS NOW	82-3044855
Form 990, Part III, Line 2 - NEW PROGRAM SERVICES: COMPETITION GRANT AND BIPARTISAN POLLING	G GRANT
Communication Continued Line 44b. THE FORM 900 IC DEPARTMENT OF AN INDEPENDENT TAY DEFINA	DED THE CODMIC
Form 990, Part VI, Section B, Line 11b - THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX PREPA	
REVIEWED BY THE EXECUTIVE DIRECTOR AND SHARED WITH MEMBERS OF THE BOARD THROUGH E	MAIL PRIOR TO FILING.
Form 990, Part VI, Section B, Line 15 - ALL SALARIES ARE PAID FOR BY RELATED ORGANIZATION, PAT	TENTS FOR AFFORDABLE
DRUGS(PFAD). PATIENTS FOR AFFORDABLE DRUGS NOW (PFAD NOW) REIMBURSES PFAD FOR ALL	
	SHAKED SALAKT
EXPENDITURES.	
Form 990, Part VI, Section C, Line 19 - THE FORM 990 WILL BE MADE AVAILABLE TO THE PUBLIC VIA G	UIDESTAR. THE
GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REASONABLE REQUEST.	
Form 990, Part IX, Line 11g - LABOR COSTS	
Tollin 790, Part IX, Line TIG- LABOK COSTS	

Schedule O, Statement 1

PATIENTS FOR AFFORDABLE DRUGS NOW

Form: Form 990 (2023)
Page: 1
Part I, Line 1

Activity Or Mission Description

Description

LOWER DRUG PRICES. IT ALSO ENGAGES IN A LIMITED NUMBER OF ELECTORAL CAMPAIGNS TO ELEVATE THE ISSUE OF HIGH DRUG PRICES IN POLITICAL DEBATE.

Schedule O, Statement 2

PATIENTS FOR AFFORDABLE DRUGS NOW

Form: Form 990 (2023)

EIN: **82-3044855**

Page: 8

Part VII, Section B

Name and address:	Description Of Services	Compensati			
BETTY AND SMITH LLC	VARIOUS PRODUCTION COSTS RELATED	392,465			
1818 N STREET NW SUITE 515	TO TV AND RADIO ADS				
WASHINGTON, DC 20036					
TRILOGY INTERACTIVE LLC	COMMUNICATION SUPPORT AND	333,935			
PO BOX 4177	STRATEGIC CONSULTANT FEES				
MOUNTAIN VIEW, CA 94040					

Total: 726,400

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

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

Open to Public Inspection

Employer identification number

				82	-3044855	
e if the organization	answered "Yes	on Form 990, Pa	rt IV, line 33.			
Prin	(b) nary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Direct co	ntrolling
ations. Complete if turing the tax year.	the organization	answered "Yes" o	n Form 990, P	art IV, line 34, bed	cause it h	nad
(b) Primary activity					cor	(g) n 512(b)(1 ntrolled ntity?
					Yes	No
	ations. Complete if iring the tax year.	(b) Primary activity Ations. Complete if the organization aring the tax year. (b) Primary activity (c) Legal domicile (state)	(b) (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country)	Primary activity Legal domicile (state or foreign country) Total income Total income	te if the organization answered "Yes" on Form 990, Part IV, line 33. (b)	(b) Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Total income End-of-year assets Direct contents Direct contents Primary activity ations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it having the tax year. (b) (c) (d) (e) (f) Exempt Code section (e) Public charity status (if section 501(c)(3)) Direct controlling entity Section core in the primary activity of the public charity status (if section 501(c)(3))

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

because it had one of more related organizations treated as a partite strip during the tax year.												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets		h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b)	(c) Legal domicile (state or foreign country)	(d)	(e)	(f)	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 conti ent	(i) 512(b)(13) rolled tity?
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		~
b	Gift, grant, or capital contribution to related organization(s)	1b		~
С	Gift, grant, or capital contribution from related organization(s)	1c		~
d	Loans or loan guarantees to or for related organization(s)	1d		~
е	Loans or loan guarantees by related organization(s)	1e		~
f	Dividends from related organization(s)	1f		~
g	Sale of assets to related organization(s)	1g		~
h	Purchase of assets from related organization(s)	1h		~
i	Exchange of assets with related organization(s)	1i		~
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		~
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		~
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		~
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		~
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	~	
0	Sharing of paid employees with related organization(s)	10	~	
р	Reimbursement paid to related organization(s) for expenses	1p	~	
q	Reimbursement paid by related organization(s) for expenses	1q		~
_		_		
r	Other transfer of cash or property to related organization(s)	1r		~
s	Other transfer of cash or property from related organization(s)	1s		~
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction	on thr	eshol	ds.
	(a) (b) (c) (d)			
	Name of related organization Transaction Amount involved Method of determinin	g amou	nt invol	ved
	type (a-s)			
Р	ATIENTS FOR AFFORDABLE DRUGS 0 771,238 ACTUAL COST			
(1)				
P	ATIENTS FOR AFFORDABLE DRUGS p 54,817 ACTUAL COST			
(2)				
P	ATIENTS FOR AFFORDABLE DRUGS 0 44,763 ACTUAL COST			
(3)				
•				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	unrelated, excluded	Are all sec	+:0	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ttions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) eral or aging ner?	(k) Percentage ownership
				sections 512—514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Page 5 Schedule R (Form 990) 2023 **Supplemental Information** Provide additional information for responses to questions on Schedule R. See instructions.

PATIENTS FOR AFFORDABLE DRUGS NOW

Form: **Schedule R (2023)** EIN: **82-3044855**

Page: 1 Part II

Description of Identification of Related Tax-Exempt Organizations

Name and EIN PATIENTS FOR AFFORDABLE DRUGS (81-4011501)

Address 1155 15TH ST NW SUITE 500

WASHINGTON, DC 20005

Primary activities TO PROMOTE HEALTH AND EDUCATE THE PUBLIC.

Direct controlling entity N/A 512(b)(13) controlled organization? No