## Form **990-PF**

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

OMB No. 1545-0047 2019

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

A   Exert	For cal	endar ve	ar 2019 or ta	x year beginnir	ıq	, 2019.	and ending			
## 1405 LEXTNOTON AVENUE, 32ND FLOOR STE A    B				-		,	,g	Α		nber
C   Check all that apply:	405	LEXINO	GTON AVEN	NUE, 32ND				В	Telephone number (see inst	
Final return   Name change		101111	111 1017	-				С		
Check type of organization:   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   Fair marks value of all sasts at end of year (from Part I, John (6), lite 1)   Accounting method:   Cash   Macrount (7)   Cash   Macrount   If private foundation   If private foundation   Fair marks value of all sasts at end of year (1)   Cash   Macrount   If private foundation   If private foundation   If private foundation   If private foundation   If private foundation (50 (c)) and (6)   Cash   Macrount   If private foundation   If private foundatio	<b>G</b> Che						D	1 Foreign organizations, chec	k here ▶	
Check type of organization:					nae	<u> </u>			2 Foreign organizations meet	ing the 85% test, check
Fair market value of all seets at end of year (from Part II, column (c), line 16 year (from Part II, column (c), must be on cash basis.)	H Che		•	on: X Sec	tion 50	1(c)(3) exempt private f			,	
Part   Lolumn (c), line 16	I Fair			•				Е		
Analysis of Reverue and Expenses (%)   Analysis of Reve	(fro	n Part II, co	olumn (c), line 1	6)		Other (specify)		F		
Columns (b), (c), and (d) may not necessarily equal the amounts in columns (a), (ce) and (d) may not necessarily equal the amounts in column (a) (see instructions).					(Part I,	column (d), must be on (	cash basis.)		under section 50/(b)(1)(B)	
1   Controllations, office, promise, rect, received of black schedule).   311,766.	i arci	colum neces	enses (The nns (b), (c), a ssarily equal	total of amount and (d) may not the amounts in	s in			nt		for charitable purposes
2   Dick			` , `		edule)	311 766				
1,156,868.   1,156,868.   1,156,868.   1,156,868.   5 a Cross rents.   5 a Cross rents.   5 b Net rental income of (closs)   6 b Net rental income of (clo		<b>2</b> Che	ck F if the four	ndation is <b>not</b> required to	attach Sch. B	3117700.				
1,156,868.   1,156,868.   1,156,868.   1,156,868.   5 a Cross rents.   5 a Cross rents.   5 b Net rental income of (closs)   6 b Net rental income of (clo		3 Inte	rest on savings and te	emnorary cash investments		3/1 783	3/1 82	1	3/1 821	
## Part		_	•				1.156.86	. <u></u>	1.156.868.	
Comparison   Com						2/200/0001			2,200,000	
B Cross sales price for all   12,857,254		or (	(loss)							
7 Capital gain net income (from Part IV, line 2).  8 Ret short-term capital gain. 9 Income modifications. 10a Gross sales less returns and salidowances. 10 Less: Cost of groods Sold. 11 Other income (returns the short-dule). 12 Total. Add lines 1 through 11. 13 Compensation of officers, directions, fusitees, etc. 14 34, 407. 14 Other employee salaries and wages. 15 14, 12 1. 15 Persicion plans, employee benefits. 16 Legal fees (attach schedule). 17 Exprision plans, employee benefits. 18 Accounting fees (attach schedule). 18 Accounting fees (attach schedule). 19 Expression plans, employee benefits. 19 Expression plans, employee benefits. 10 Legal fees (attach schedule). 20 SEE. ST. 2 20 SEE. ST. 3 30 SEE. ST. 3 40 SEE. ST	Ð					4,144,342.				
10 a Gross sales less refutires and b   Less: Cost of group of the first shadow   11 Other income (attach schedule)   11 Other income (attach schedule)   12   12   13   14   15   15   15   15   15   15   15	Ž						4.144.34	12		
10 a Gross sales less refutires and b   Less: Cost of group of the first shadow   11 Other income (attach schedule)   11 Other income (attach schedule)   12   12   13   14   15   15   15   15   15   15   15	Š	8 Net	t short-term capita	al gain			1/111/0		689,180.	
b   Less: Cost of goods sold.	~			S						
Comparison of the continuous		1010	ui i i s ai i u							
C Gross profit or (loss) (attach schedule).  11 Other income (attach schedule).  SEE STATEMENT 1 370,685. 370,873. 370,873.  12 Total. Add lines 1 through 11. 6,018,444. 5,706,904. 2,251,742.  13 Compensation of officers, directors, trustees, etc. 434,407. 458,417.  14 Other employee salaries and wages. 514,121. 95,074. 95,074. 423,309. 220,054. 9,273. 9,273. 240,739.  16a Legal fees (attach schedule). SEE, ST. 2 856. 1,920. 504. 504. 505. 505. 505. 505. 505. 50										
SEE STATEMENT 1   370,685.   370,873.   370,873.		<b>c</b> Gros	ss profit or (loss) (atta	ach schedule)						
12   Total. Add lines 1 through 11.   6,018,444   5,706,904   2,251,742		<b>11</b> Oth	-	•		270 605	270 05	, ,	270 072	
13   Compensation of officers, directors, trustees, etc.   434, 407.   14   Other employee salaries and wages.   514, 121.   95,074.   95,074.   423,309.   15   Pension plans, employee benefits.   220,054.   9,273.   9,273.   240,739.   240,739.   25   25   25   26   26   26   27   27   27   28   26   27   28   26   27   28   28   28   28   28   28   28		12 Tot	_	-						
C Other professional fees (attach sch). SEE. ST. 4  17 Interest.  18 Taxes (attach schedule) (see instrs). SEE. STM. 5  19 Depreciation (attach schedule) and depletion.  20 Occupancy.  21 Travel, conferences, and meetings.  22 Printing and publications.  23 Other expenses (attach schedule)  SEE. STATEMENT 6  24 Total operating and administrative expenses. Add lines 13 through 23.  25 Contributions, gifts, grants paid.  26 Total expenses and disbursements.  Add lines 24 and 25.  Add lines 24 and 25.  D Net investment income (if negative, enter -0-).  D Net investment income (if negative, enter -0-).  11							3,700,90	) <del>4</del> .	2,231,142.	458,417.
C Other professional fees (attach sch). SEE. ST. 4  17 Interest.  18 Taxes (attach schedule) (see instrs). SEE. STM. 5  19 Depreciation (attach schedule) and depletion.  20 Occupancy.  21 Travel, conferences, and meetings.  22 Printing and publications.  23 Other expenses (attach schedule)  SEE. STATEMENT 6  24 Total operating and administrative expenses. Add lines 13 through 23.  25 Contributions, gifts, grants paid.  26 Total expenses and disbursements.  Add lines 24 and 25.  Add lines 24 and 25.  D Net investment income (if negative, enter -0-).  D Net investment income (if negative, enter -0-).  11	8									423,309.
C Other professional fees (attach sch). SEE. ST. 4  17 Interest.  18 Taxes (attach schedule) (see instrs). SEE. STM. 5  19 Depreciation (attach schedule) and depletion.  20 Occupancy.  21 Travel, conferences, and meetings.  22 Printing and publications.  23 Other expenses (attach schedule)  SEE. STATEMENT 6  24 Total operating and administrative expenses. Add lines 13 through 23.  25 Contributions, gifts, grants paid.  26 Total expenses and disbursements.  Add lines 24 and 25.  Add lines 24 and 25.  D Net investment income (if negative, enter -0-).  D Net investment income (if negative, enter -0-).  11	5						9,27	13.	9,273.	
c Other professional fees (attach sch). SEE. ST. 4  17 Interest.  18 Taxes (attach schedule)(see instrs). SEE. STM. 5  19 Depreciation (attach schedule) and depletion.  20 Occupancy.  21 Travel, conferences, and meetings.  22 Printing and publications.  23 Other expenses (attach schedule)  SEE STATEMENT 6  24 Total operating and administrative expenses. Add lines 13 through 23.  25 Contributions, gifts, grants paid.  PART XV.  26 Total expenses and disbursements.  Add lines 24 and 25.  Add lines 24 and 25.  Add lines 26 from line 12:  a Excess of revenue over expenses and disbursements.  Add lines 26 from line 12:  a Excess of revenue over expenses and disbursements.  b Net investment income (if negative, enter -0-).  b Net investment income (if negative, enter -0-).	_	h Acc	gai rees (attach so counting fees (atta	ach sch) SEE	ST 3		33 03	25	33 035	
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Ш a)	C Othe	er professional fees (a	attach sch) SEE .	ST 4		957.73	38.	957.738.	148,840.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Š	<b>17</b> Inte	erest				33.7.3			
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Ę				5'I'M . 5	190,352.	76,81	6.	76,816.	50,675.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	nis.		,			3.937.				
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Ē	_								221,467.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Ad			-						
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	2					30,920.	23	3/.	237.	31,212.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	<u>e</u>		S	SEE STATEM	ENT 6	929,806.	9,62	28.	9,628.	934,287.
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	Ë					2 040 400	1 226 66	7	1 226 667	2 722 042
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	<u> </u>				T XV		1,230,00	) / .	1,230,007.	
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	ğ	26 Tot	tal expenses and	disbursements.		·	1 000 00	,	1 226 667	
a Excess of revenue over expenses and disbursements						4,769,490.	1,236,66	) / .	1,230,667.	3,553,942.
b Net investment income (if negative, enter -0-) 4,470,237.		a Exc	cess of revenue of	over expenses		1 0 10 0 -				
		_				1,248,954.	4 470 23	7		
T, UIJ, UIJ.							4,4/0,23	, ,	1,015,075.	

Par	l II	Balance Sheets	ttacned schedules and am olumn should be for end-c	f-vear amounts only.	Beginning of year		End of	year
ı aı		Salarios Officoto (S	olumn should be for end-code instructions.)	. your amounts only:	(a) Book Value	(b) Book Valu	ıe	(c) Fair Market Value
	1	Cash - non-interest-be	-		275,695.	320,7		320,707.
		Savings and temporary			3,128,000.	3,186,3	362.	3,186,362.
	3	Accounts receivable		<u>1,042,045.</u>				
		Less: allowance for dou			2,989,855.	1,042,0	)45.	1,042,045.
	4	Pledges receivable	<b>-</b> _	<u>5,000.</u>				
		Less: allowance for dou	ubtful accounts ►_		53,000.	5,0	000.	5,000.
	5	Grants receivable						
	6	Receivables due from officers	s, directors, trustees, an	d other				
	_	disqualified persons (attach s		ns)				
	7	Other notes and loans receive	` _					
		Less: allowance for dou	_					
	8	Inventories for sale or or Prepaid expenses and			00.004	106.6	\_1	100 051
	9		-		98,984.	106,0	751.	106,051.
Assets	10 a	Investments – U.S. an obligations (attach sche	id state governmen edule)	TATEMENT 7		1,010,3	385	1,010,385.
SS		Investments — corporate stoo			5,210,461.	5,500,3		5,500,309.
Ø		: Investments — corporate bon			1,986,535.	3,000,0	,,,,	0,000,003.
		Investments – land, bu	•		2/300/0001			
		equipment: basis						
		Less: accumulated depreciation (attach schedule)	on					
	12	Investments – mortgad	_					
	13	Investments – other (a	•		62,177,789.	72,159,7	751	72,159,751.
	_	Land, buildings, and ed			02,111,109.	12,139,1	51.	12,139,131.
	1-7	Less: accumulated depreciation	on	130,344.				
	Less: accumulated depreciation (attach schedule) SEE STMT 10 ▶		122,020.	11,123.	8,9	24.	8,924.	
	15		► SEE STATEM	ENT 11 )	61,877.	61,8	377.	61,877.
	16	<b>Total assets</b> (to be consee the instructions. Al	mpleted by all filers	;	75,993,319.	83,401,4	111	83,401,411.
	17	Accounts payable and			233,684.	289,8		05,401,411.
	18	Grants payable	•		233,004.	205,0	,51.	
X	19	Deferred revenue						
ĕ	20	Loans from officers, directors	s, trustees, & other disq	ualified persons				
Liabilities	21	Mortgages and other notes pa	ayable (attach schedule)					
Ë	22	Other liabilities (describ	be► SEE STATE	CMENT 12	220,000.	240,0	000.	
	22	Total liabilities (add lin			453,684.	529,8	21	
/Δ	23	Foundations that follow			433,004.	529,6	534.	
89		and complete lines 24,		check here ►X				
ā	24	Net assets without done			25 621 120	26 220 3	017	
<u>3</u>	24	ivet assets without don't	ioi restrictions		35,621,130.	36,220,3	)	
豆	25	Net assets with donor r	restrictions		39,918,505.	46,651,2	260.	
٥		Foundations that do not	t follow FASB ASC 9	58, check here	,			
F		and complete lines 26	through 30.					
Net Assets or Fund Balanc	26	Capital stock, trust prin	ncipal, or current fu	ınds				
ğ	27	Paid-in or capital surplus, or						
Š	28	Retained earnings, accumulate	ted income, endowment,	or other funds				
त्र	29	Total net assets or fun			75,539,635.	82,871,5	577.	
Ž	30	Total liabilities and net (see instructions)			75,993,319.	83,401,4	111.	
Par	t III	Analysis of Change				00,101,		
		net assets or fund bala				agree with		
•	end-	of-year figure reported o	on prior year's retur	n)	(a), iiio 25 (iiiust (		1	75,539,635.
2	Ente	r amount from Part I, lin	ne 27a				2	1,248,954.
3	Other	increases not included in line 2	2 (itemize) ► <u>SEE</u> <u>S</u>	TATEMENT 13_			3	6,082,988.
4	Add	lines 1, 2, and 3					4	82,871,577.
5	Decrea	ases not included in line 2 (iter net assets or fund bala	mize) •				5	
6	Total	net assets or fund bala	inces at end of yea	r (line 4 minus line 5)	- Part II, column (b),	line 29	6	82,871,577.

Pai	t IV   Capital Gains and I	Losses for Lax on Investmen	it Income			
		the kind(s) of property sold (for examp arehouse; or common stock, 200 sh		( <b>b)</b> How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	SEE STATEMENT 14					
	)					
	<u>;</u> I					
	)					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or ((e) plus (f) m	
á	1					
ŀ	)					
(	;					
	l					
•			10/21/60			
		g gain in column (h) and owned by the			(I) Gains (Col gain minus col. (k), b	.(h) out not less
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		nan -0-) <b>or</b> Losses (f	
	1					
	)					
(	;					
(	d					
•	)					
2	Capital gain net income or (ne	t capital loss) If gain, also lf (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		4,144,342.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	) and (6): 			
	If gain, also enter in Part I, lin in Part I, line 8	e 8, column (c). See instructions. If	(loss), enter -0-	3		689,180.
		r Section 4940(e) for Reduce			<b>:</b>	
(For	optional use by domestic private f	oundations subject to the section 4940	(a) tax on net investment inco	ome.)		
If se	ction 4940(d)(2) applies, leave t	this part blank.				
\/\/ac	the foundation liable for the sec	ction 4942 tax on the distributable a	mount of any year in the ha	se period?	Yes	X No
		fy under section 4940(e). Do not co	, ,	ise periou:	Lies	NO.
	•	each column for each year; see the ins		entries.		
	(a)	(b)	(c)		(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets	Distribution (col. (b) divided	
	2018	3,460,555.	79,638	- 910		0.043453
	2017	3,582,720.	76,189			0.047024
	2016	3,369,431.	70,589			0.047733
	2015	3,338,964.	74,416	,182.		0.044869
	2014	2,808,893.	74,797	,776.		0.037553
2	Total of line 1, column (d)			2		0.220632
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total on has been in existence if less than	on line 2 by 5.0, or by the 5 years.	3		0.044126
4	Enter the net value of nonchar	itable-use assets for 2019 from Par	t X, line 5	4	78	3,500,904.
5	Multiply line 4 by line 3			5	,	3,463,931.
6	Enter 1% of net investment in	come (1% of Part I, line 27b)		6		44,702.
7	Add lines 5 and 6			7	;	3,508,633.
8	Enter qualifying distributions for	rom Part XII, line 4		8		3,555,681.
	If line 8 is equal to or greater that Part VI instructions.	n line 7, check the box in Part VI, line	1b, and complete that part us	sing a 1% tax	rate. See the	

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)		
	a 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)			
ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,		44.	702.
	check here. ► X and enter 1% of Part I, line 27b		11/	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2.		44.	702.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		44.	702.
6	Credits/Payments:			
á	a 2019 estimated tax pymts and 2018 overpayment credited to 2019			
ŀ	Exempt foreign organizations — tax withheld at source			
(	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		90.	751.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		46,0	)49.
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax 46,049. Refunded 11			0.
Pai	t VII-A   Statements Regarding Activities			
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
1 6	participate or intervene in any political campaign?			Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?			
	See the instructions for the definition	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published			
	or distributed by the foundation in connection with the activities.			
(	Did the foundation file Form 1120-POL for this year?	1 c		Χ
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	<u>-</u>		
,	foundation managers $\blacktriangleright$ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If 'Yes,' attach a detailed description of the activities.	_		Λ
_	·			
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		Х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		Х	71
	of 'Yes,' has it filed a tax return on Form 990-T for this year?			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			Х
	If 'Yes,' attach the statement required by <i>General Instruction T</i> .			21
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6	Χ	
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	7	X	
8 8	■ Enter the states to which the foundation reports or with which it is registered. See instructions			
	NY	-		
ŀ	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
•	(or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation	8 b	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			
-	for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If 'Yes,' complete Part XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		ļ	
	and addresses.	10		X

**BAA** Form **990-PF** (2019)

Pai	rt VII-A   Statements Regarding Activities (continued)			- 3 -
I al	Statements Regarding Activities (Continued)		Yes	Na
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	res	No X
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?		Х	21
	Website address ▶ <u>WWW.LASKERFOUNDATION.ORG</u>		21	
14	The books are in care of ► BENCIVENGA WARD & COMPANY CPAS Telephone no. ► (914)  Located at ► 420 COLUMBUS AVENUE, SUITE 304 VALHALLA NY ZIP + 4 ► 10595-138	7 <u>69</u>	<u>-500</u>	5_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — check here	<u>∠</u> N/A		
13	and enter the amount of tax-exempt interest received or accrued during the year	. 11.7. 43		N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pai	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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.)			
ŀ	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			
		1 b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
(	c 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 2019?	1 c		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)):			
á	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and			
	6e) for tax year(s) beginning before 2019?			
	If 'Yes,' list the years > 20, 20, 20			
ŀ	b Are there any years listed in 2a for which the foundation is <b>not</b> 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			
	all years listed, answer 'No' and attach statement — see instructions.).	2b	N,	/A
(	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	► 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
ŀ	b If 'Yes,' did it have excess business holdings in 2019 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 Form 4720, Schedule C, to			
	détermine if the foundation had excess business holdings in 2019.)	3 b	N.	/A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its	_		
	charitable purposes?	4 a		X
ŀ	<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4 b		X
	the tax year beginning in 2013	_ <b>→</b> IJ		Λ

Part VII-B   Statements Regarding Activit	ies for Which Form	1 4/20 May Be Req	uired (continued)			
<b>5a</b> During the year, did the foundation pay or incur a <b>(1)</b> Carry on propaganda, or otherwise attemption	•	n (section 4945(e))?	Yes X	No	Yes	No
(2) Influence the outcome of any specific pub	lic election (see section	4955): or to carry				
on, directly or indirectly, any voter registra  (3) Provide a grant to an individual for travel,	ation drive? study, or other similar	purposes?	Yes X	No No		
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described	Yes X	No		
(5) Provide for any purpose other than religio educational purposes, or for the prevention	No					
<b>b</b> If any answer is 'Yes' to 5a(1)—(5), did <b>any</b> or described in Regulations section 53.4945 or in a	f the transactions fail to current notice regarding c	qualify under the exceldisaster assistance?	ptions			
See instructions					N,	/A
• If the answer is 'Ves' to question Fa(1), does	the foundation claim ev	omotion from the		•		
tax because it maintained expenditure responditives, attach the statement required by Reg	sibility for the grant?		N/A. Yes	No		
<b>6 a</b> Did the foundation, during the year, receive a on a personal benefit contract?			Yes X	No		
<b>b</b> Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	6b		X
If 'Yes' to 6b, file Form 8870. <b>7a</b> At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action? Yes X	No		
<b>b</b> If 'Yes,' did the foundation receive any proceed	eds or have any net inco	ome attributable to the	transaction?			
8 Is the foundation subject to the section 4960 tax of				ING		
or excess parachute payment(s) during the ye						
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employee:	s,	
1 List all officers, directors, trustees, and foun	dation managers and th	neir compensation. See	instructions.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other a		
SEE STATEMENT 15			·			
		424 407	20 400			^
		434,407.	30,408.			0.
2 Compensation of five highest-paid employees (o	ther than those included	ı pn line 1 — see instructio	। ns). If none, enter 'NONE	<u> </u>  -		
(a) Name and address of each employee paid more than \$50,000 SEE STATEMENT 16	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other a		
		402,342.	28,164.			0.
Total number of other employees paid over \$50,000	<u> </u> D		<u> </u> ▶	-		0
				ı		U

# Form 990-PF (2019) ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. Ser	e instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NEW VENTURE FUND		
1201 CONNECTICUT AVENUE NW		
WASHINGTON, DC 20036	MEMBERSHIP	100,000.
BENCIVENGA WARD & COMPANY CPAS, PC		
420 COLUMBUS AVE, SUITE 304		
VALHALLA, NY 10595	ACCOUNTNG & TAX	129,885.
FLORA LICHTMAN		
FL WORKS, LLC, 422 3RD ST #3		
BROOKLYN, NY 11215	VIDEO CONTRACTOR	107,101.
COLONIAL CONSULTING		
750 THIRD AVENUE, 20TH FLOOR		
NEW YORK, NY 10017	INVESTMENT CONSULT	150,591.
R&S CHRYSLER LLC		
RFR REALTY, 107 ELM ST, STE 4010		
STAMFORD , CT 06902	RENT	180,201.
<b>Total</b> number of others receiving over \$50,000 for professional services	▶	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis organizations and other beneficiaries served, conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1 SEE STATEMENT 17		
		1,958,375.
2 OTHER PROGRAMS SUPPORT NEW INITIATIVES THAT FU	JRTHER THE FOUNDATION'S	, ,
MISSION. THESE INITIATIVES INCLUDE EDUCATIONA		
STUDY, AND STUDY GROUPS.		496,228.
3		,
4		
Part IX-B   Summary of Program-Related Investments (see inst	ructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
BAA		Form <b>990-PF</b> (2019)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities. 1 a 79,463,765 **b** Average of monthly cash balances..... 1 b 232. 584 c Fair market value of all other assets (see instructions)..... 1 c d Total (add lines 1a, b, and c). 1 d 696 e Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets..... 2 3 79,696 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)..... 4 1,195,445 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4...... 5 78,500,904 Minimum investment return. Enter 5% of line 5..... 6 3,925,045 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here | |x|| and do not complete this part.) 1 2a Tax on investment income for 2019 from Part VI, line 5...... 2a **b** Income tax for 2019. (This does not include the tax from Part VI.)..... 2b 2 c Distributable amount before adjustments. Subtract line 2c from line 1..... 3 Recoveries of amounts treated as qualifying distributions..... 4 5 Deduction from distributable amount (see instructions)..... 6 **Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1......... 7 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: **a** Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26..... 1 a 3,553,942 **b** Program-related investments — total from Part IX-B. 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes..... 2 Amounts set aside for specific charitable projects that satisfy the:

a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule).... 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 . . . . 4 3,555,681 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 Adjusted qualifying distributions. Subtract line 5 from line 4. 6 The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**BAA** Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)  N/A								
	(a)	(b)	(c)	(d)				
	Corpus	Years prior to 2018	<b>(c)</b> 2018	<b>(d)</b> 2019				
1 Distributable amount for 2019 from Part XI, line 7								
2 Undistributed income, if any, as of the end of 2019:								
a Enter amount for 2018 only								
<b>b</b> Total for prior years: 20, 20, 20								
3 Excess distributions carryover, if any, to 2019:								
<b>a</b> From 2014								
<b>b</b> From 2015								
<b>c</b> From 2016								
<b>d</b> From 2017								
<b>e</b> From 2018								
f Total of lines 3a through e								
4 Qualifying distributions for 2019 from Part								
XII, line 4: Sa Applied to 2018, but not more than line 2a								
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)								
c Treated as distributions out of corpus								
(Election required – see instructions) <b>d</b> Applied to 2019 distributable amount								
e Remaining amount distributed out of corpus.								
<b>5</b> Excess distributions carryover applied to 2019								
(If an amount appears in column (d), the same amount must be shown in column (a).)								
6 Enter the net total of each column as indicated below:								
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5								
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b								
c Enter the amount of prior years' undistributed income for which a notice of deficiency has 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 2018. Subtract line 4a from								
line 2a. Taxable amount — see instructions								
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020								
7 Amounts treated as distributions out of corpus 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 2014 not applied on line 5 or line 7 (see instructions)								
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a								
10 Analysis of line 9:								
a Excess from 2015								
<b>b</b> Excess from 2016								
c Excess from 2017								
d Excess from 2018								
e Excess from 2019								
BAA				Form <b>990-PF</b> (2019)				

Part XIV   Private Operating Foundat	<b>ions</b> (see instru	ctions and Part	VII-A, question	9)	
1 a If the foundation has received a ruling or dete is effective for 2019, enter the date of the	rmination letter that in	t is a private operatir	ng foundation, and th	e ruling	2/14/74
<b>b</b> Check box to indicate whether the foundation	3			X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
income from Part I or the minimum investment return from Part X for	<b>(a)</b> 2019	<b>(b)</b> 2018	<b>(c)</b> 2017	<b>(d)</b> 2016	, ,
each year listed	1,015,075.	118,511.	753,390.	992,713.	2,879,689.
<b>b</b> 85% of line 2a	862,814.	100,734.	640,382.	843,806.	2,447,736.
c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly	3,555,681.	3,508,416.	3,630,565.	3,384,454.	14,079,116.
for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	3,555,681.	3,508,416.	3,630,565.	3,384,454.	14,079,116.
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
minimum investment return shown in Part X, line 6, for each year listed	2,616,697.	2,654,631.	2,539,651.	2,352,991.	10,163,970.
<b>c</b> 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the			foundation had	\$5,000 or more	e in
1 Information Regarding Foundation Manag		structions.)			
a List any managers of the foundation who have close of any tax year (but only if they have NONE	contributed more that	an 2% of the total co han \$5,000). (See s	ntributions received l section 507(d)(2).)	by the foundation be	fore the
b list and managers of the foundation who are	100/ 24 2222 26 462	stanti of a navonation	· /ar an aguallu larga	marking of the access	valain of
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the NONE	foundation has a 10	or greater intere	r (or all equally large st.	portion of the owne	istilb of
2 Information Regarding Contribution, Grant, C	Sift Loan Scholarsh	in etc Programs:			
Check here ☐ if the foundation only ma requests for funds. If the foundation makes 2a, b, c, and d. See instructions.	kes contributions to p	preselected charitable			
a The name, address, and telephone number or	email address of the	person to whom app	olications should be a	addressed:	
CDD CDD DDVD 10					
SEE STATEMENT 18 <b>b</b> The form in which applications should be s	submitted and inform	nation and material	s they should inclu	do:	
	submitted and inion	nation and material	s they should include	ue.	
SEE STATEMENT FOR LINE 2A c Any submission deadlines:					
C Ally Submission deadines.					
SEE STATEMENT FOR LINE 2A					
<b>d</b> Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitab	ole fields, kinds of i	nstitutions, or other	tactors:
SEE STATEMENT FOR LINE 2A					

3	Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen	ıt	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Continuation	
а	Paid during the year				
	STATEMENT 19				
ОЦЦ	SIMILMENT 19				
	Total			·	3a 820,000.
	Approved for future payment				020,000.
	Approved for ratare payment				
	Total			<b>&gt;</b>	3 b

Part AVI-A   Analysis of income-Producing A			T =		
Enter gross amounts unless otherwise indicated.	Unrelated	d business income	Excluded by	y section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
· ·			code		
a	+				
b					
C	+				
d					
e	+				
T					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	34,783.	
4 Dividends and interest from securities			14	1,156,868.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			18	370,685.	
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	4,144,342.	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
•					
e					
12 Subtotal. Add columns (b), (d), and (e)				5,706,678.	
					5,706,678.
Subtotal. Add columns (b), (d), and (e)					5,706,678.
<ul><li>Subtotal. Add columns (b), (d), and (e)</li><li>Total. Add line 12, columns (b), (d), and (e)</li></ul>	ons.)			13	5,706,678.
12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
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12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
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12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the
12 Subtotal. Add columns (b), (d), and (e)	ons.)  • Accomplishacome is report	shment of Exemp	ot Purpos	ies contributed importantl	y to the

# Form 990-PF (2019) ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

-										
а	old the organization direction by the organization 501 (escribed in section 501) elating to political organ	(c) (other than se	engage in any o ection 501(c)(3) o	f the following organizations)	with any or in sec	other organization 527,	on		Yes	No
	ransfers from the report		a noncharitable	e exempt orga	nization o	of:			- 1	
	1) Cash							1 a (1)		X
	2) Other assets							1 a (2)		X
<b>b</b> C	Other transactions:									
(1	Sales of assets to a	noncharitable exe	empt organizatio	on				. 1 b (1)		X
	2) Purchases of assets									X
	3) Rental of facilities, e									X
	4) Reimbursement arrai							1 b (4)		X
	5) Loans or loan guarar							1 b (5)		X
(6	6) Performance of servi	ces or membersh	nip or fundraising	g solicitations	11111111111					X
	haring of facilities, equi									X
										-21
<b>d</b> If th a	the answer to any of the goods, other assets, or ny transaction or sharin	ne above is 'Yes,' services given by g arrangement, s	complete the for the reporting four show in column (	ollowing sched ndation. If the (d) the value of	lule. Colu foundation of the goo	mn (b) should alverteeling received less that described less that described assets.	ways show the fain n fair market value or services recei	r market vali in ved.	ue of	
(a) Line			of noncharitable exer				nsfers, transactions, a		gement	s
N/A						,	, , , , , , , , , , , , , , , , , , , ,		7501110110	-
										_
										_
										_
										_
										_
de	the foundation directly or escribed in section 501(	c) (other than se	d with, or related ction 501(c)(3))	to, one or mor or in section !	e tax-exer 527?	npt organizations	raumra maragara	Yes	X	Mo
b IT	'Yes,' complete the foll									
37.73	(a) Name of organiz	zation	<b>(b)</b> Type	e of organizat	ion	(0	c) Description of r	elationship		
N/A										
	Lladan a malkina at manim. Late	alam that I have a	in a database of the first	P					_	
	Under penalties of perjury, I de correct, and complete. Declara	clare that I have exam ition of preparer (other	ilned this return, inclu than taxpayer) is bas	iding accompanyin sed on all informat	g schedules on of which	and statements, and to preparer has any know	the best of my knowle rledge.	dge and belief, it	is true,	
Sign	100.	() -		1 1	1			May the II	RS discu	iss
Here	Clane	Nameran	)	111/10/23	o 🕨	PRESIDENT		this return preparer s	shown b	elow?
	Signature of officer or trustee		1	Pate /		Title		See instru	Yes	¬₀
	Print/Type preparer's	name	Prepare	signature	111	Date	Check if	PTIN		10
Paid	LEONARD J. B	ENCIVENGA, CPA	A / //	un Illum	דן־זט	11/10/20	self-employed	P0011678	R R	
Prepa			ARD & COMPAN	Y CPAS, PC		111/10/20			20	
Use O			AVENUE, SUI				13-3	274930		
J3 <del>C</del> U	Tilly	VALHALLA, NY		10 304			Phone no. (914	1) 760 500	_	
BAA	-						, none no. (912	1) 769-500. Form <b>990</b>		2010
									rrr ()	20 I 91

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2019

Employer identification number

ALBER	T & MARY LASKE	ER FOUNDATION	N, IN	J.		13-1680062
Organiza	ation type (check one)	):				
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)(	)	(enter number) organizatio	n	
		4947(a)(1) n	onexem	ot charitable trust <b>not</b> treat	ted as a private foundati	on
Form 990-PF		527 political	organiza	ation		
		X 501(c)(3) ex	empt pri	vate foundation		
		4947(a)(1) n	onexem	ot charitable trust treated a	as a private foundation	
		501(c)(3) tax	able pri	vate foundation		
_		,		•	ne General Rule and a S	Special Rule. See instructions.
acriciai	rtuic					
X	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules					
	under sections 509(a) received from any or	(1) and 170(b)(1)(A) ne contributor, duri	(vi), that ng the y	checked Schedule A (Form	990 or 990-EZ), Part II, lir he greater of ( <b>1</b> ) \$5,000	6 support test of the regulations ne 13, 16a, or 16b, and that r; or (2) 2% of the amount on (i)
	during the year, total	I contributions of m	ore than		igious, charitable, scien	eived from any one contributor, tific, literary, or educational
	during the year, cont \$1,000. If this box is charitable, etc., purp	tributions <i>exclusive</i> checked, enter he oose. Don't complet	ly for relate to the to the any of	igious, charitable, etc., pu	rposes, but no such con received during the yea eral Rule applies to this	
						lule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF.

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

1

Name of organization

ALBERT & MARY LASKER FOUNDATION, INC.

Employer identification number 13-1680062

ALBERT & MARY LASKER FOUNDATION, INC.

Part | Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RUSSELL STEENBERG  405 LEXINGTON AVE, 32ND FLR	\$20,000.	Person X Payroll Noncash
	NEW YORK, NY 10017		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ZERHOUNI FAMILY FOUNDATION  1107 BOTETOURT GARDENS  NORFOLK, VA 23507	\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CRAIG & BARBARA BARRETT FOUNDATION  4617 E. OCOTILLO  PARADISE VALLEY, AZ 85253-4032	\$ 10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	TOTAL CONTRIBUTIONS UNDER \$5,000  405 LEXINGTON AVE, 32ND FLR  NEW YORK, NY 10174	\$ <u>12,484.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>	ANTHONY ENVIN  405 LEXINGTON AVE, 32ND FLR  NEW YORK, NY 10174	\$ <u>52,828.</u>	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>	SOL SNYDER  405 LEXINGTON AVE, 32ND FLR  NEW YORK, NY 10174	\$10,000.	Person X Payroll

lame of organization					
ALBERT	ς,	MARY	T.ASKER	FOUNDATION	TNC

Employer identification number

13-1680062

Part I	Contributors (see instructions).	Use duplicate copies of Par	t I if additional space is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MARSHALL W. FORDYCE  405 LEXINGTON AVE, 32ND FLR	\$5,000.	Person X Payroll Noncash  (Complete Part II for
(a)	NEW YORK, NY 10174 (b)	(c)	noncash contributions.)
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	BESSEMER TRUST  100 WOODBRIDGE CENTER DRIVE	\$ 25,000.	Person X Payroll Noncash
	WOODBRIDGE, NJ 07095		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	SHERI LANSING  405 LEXINGTON AVENUE  NEW YORK, NY 10174	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_	ROCHE FAMILY FOUNDATION  6506 MONTROSE AVENUE  BALTIMORE, MD 21212	\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>11</u> _	JOSEPH GOLDSTEIN  405 LEXINGTON AVE, 32ND FLR  NEW YORK, NY 10174	\$ <u>5,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u> _	ACT FOR NIH  300 INDEPENDENCE AVE, SE  WASHINGTON, DC 20003	\$ <u>18,000.</u>	Person X Payroll

Name of organization

ALBERT & MARY LASKER FOUNDATION, INC.

Employer identification number

13-1680062

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u> _	FIDELTY CHARITABLE		Person X
	PO BOX 77001	\$ <u>50,000.</u>	Payroll Noncash
	CINCINATTI, OH 45277	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>14</u> _	JAMES FORDYCE		Person X
	405 LEXINGTON AVENYE, 32ND FLR	\$ <u>5,000.</u>	Payroll
	NEW YORK, NY 10174	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>15</u> _	WILLIAM BROWN	_	Person X
	16 MAHER AVENUE	\$5,000.	Payroll
	GREENWICH, CT 06830	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>16</u> _	COLLEGE FOR HEALTH INFORMATION	_	Person X Payroll
	710 AVID DRIVE, STE 200	\$5,000.	Noncash
	ANN ARBOR, MI 48108	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>17</u> _	THE PEW CHARITABLE TRUSTS	-	Person X
	901 E STREET, NW	\$ <u>13,454.</u>	Payroll
	WASHINGTON, DC 20004	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person
	 	\$	Payroll
		-	(Complete Part II for noncash contributions.)

Employer identification number

Name of organization ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

(a) N =	/L\	(5)	/-/\
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	400 SHARES OF JOHNSON & JOHNSON STOCK		
		\$ <u>52,828.</u>	7/19/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		i e	
		<sup>Y</sup>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ŝ	
	<u> </u>	<sup>*</sup>	

ALBERT	& MARY LASKER FOUNDATION, INC	C.	13-1680062
			ations described in section 501(c)(7), (8),
	or (10) that total more than \$1,000 for the	year from any one contributo	Or. Complete columns (a) through (e) and
	the following line entry. For organizations com	npleting Part III, enter the total of	
	contributions of <b>\$1,000</b> or less for the year. (E Use duplicate copies of Part III if additional sp		nstructions.)
	ose duplicate copies of Fart III II additional sp		(4)
(a) No. from	Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	, ,		·
	N/A		
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
			·
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held
		(e)	<u>'</u>
	_ , , , , , , , , , , , , , , , , , , ,	(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
	L		
		. – – – – – – – – – – – – – – .	
(a)	(b)	(c)	(4)
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
		(e)	
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
	L		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	. a.poso or girt		2000 ipaon of non-gire is neid
<b></b>			
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
	mansieree s manie, address,	Unit 211   7	ויסומנוטווטווף טו נומווטוכוטו נט נומווטוכוככ

#### Form **2220**

Department of the Treasury

FORM 990-PF

**Underpayment of Estimated Tax by Corporations** 

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123

2019

Name

ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2,

**Required Annual Payment** 1 1 Total tax (see instructions)..... 44,702. 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included 2a on line 1..... **b** Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income 2b forecast method . . . . . . . **c** Credit for federal tax paid on fuels (see instructions)..... d Total. Add lines 2a through 2c..... 2 d Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty. 3 44,702. Enter the tax shown on the corporation's 2018 income tax return. See instructions. Caution: If the tax is 4 zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. 47,861 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 . . . . 44,702

**Part II** Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.

6	The corporation is using the adjusted seasonal installment method.
7	The corporation is using the annualized income installment method.

8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

_							
Par	t III Figuring the Underpayment						
			(a)	(b)	(c)	(d)	
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th ( <i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year.	9	5/15/19	6/15/19	9/15/19	12/15/19	
10	7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	11,175.	11,175.	11,176.	11,176.	
"	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions.	11	90,751.				
	Complete lines 12 through 18 of one column before going to the next column.						
12	Enter amount, if any, from line 18 of the preceding column	12		79,576.	68,401.	57,225.	
13	Add lines 11 and 12	13		79,576.	68,401.	57,225.	
14	Add amounts on lines 16 and 17 of the preceding column	14			•		
15	Subtract line 14 from line 13. If zero or less, enter -0	15	90,751.	79,576.	68,401.	57,225.	
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0	16		0.	0.	, , ,	
17	<b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17					
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	79,576.	68,401.	57,225.		

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Par	IV Figuring the Penalty		•			
10	Enter the data of normant or the 15th day of the 4th		(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. ( <i>C corporations with tax years ending June</i>					
	30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the date shown on line 19.	20				
21	Number of days on line 20 after 4/15/2019 and before 7/1/2019.	21				
22	Underpayment x Number of days on line 21 × 6% (0.06)	22				
23	Number of days on line 20 after 6/30/2019 and before 10/1/2019.	23				
24	Underpayment on line 17  Number of days on line 23 × 5% (0.05)  365	24				
25	Number of days on line 20 after 9/30/2019 and before 1/1/2020.	25				
26	Underpayment x Number of days on line 25 x 5% (0.05)	26				
27	Number of days on line 20 after 12/31/2019 and before 4/1/2020.	27				
28	Underpayment x Number of days on line 27 × 5% (0.05)	28				
29	Number of days on line 20 after 3/31/2020 and before 7/1/2020.	29				
30	Underpayment x Number of days on line 17 x on line 29 x*%	30				
31	Number of days on line 20 after 6/30/2020 and before 10/1/2020.	31				
32	Underpayment x Number of days on line 17 x on line 31 x*%	32				
33	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33				
34	Underpayment x Number of days on line 17 x on line 33 x ***	34				
35	Number of days on line 20 after 12/31/2020 and before 3/16/2021.	35				
36	Underpayment x Number of days on line 17 x on line 35 x*%	36				
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37				
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the comparable line for other income tax returns	ne tota	al here and on Forn	n 1120, line 34; or	he 38	0

<sup>\*</sup>Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov.** You can also call 1-800-829-4933 to get interest rate information.

2019 FEDI	ERAL STATEMENTS	PAGE 1
CLIENT 0001786 ALBERT & N	ARY LASKER FOUNDATION, INC.	13-1680062
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
OTHER INVESTMENT INCOME	(A) (B) I REVENUE INVEST PER BOOKS INCO TOTAL \$ 370,685. \$ 370 \$ 370,685. \$ 370	MENT ADJUSTED
STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES		
GENERAL & ADMINISTRATIVETOTAL	EXPENSES INVESTMENT ADJ PER BOOKS INCOME NET \$ 856.	(C) (D) USTED CHARITABLE INCOME PURPOSES  \$ 1,920. \$ 1,920.
STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING AND TAX AUDIT TOTAI	EXPENSES INVESTMENT ADJ PER BOOKS INCOME NET  \$ 128,173. \$ 33,835. \$ 41,000.	(C) (D) CHARITABLE PURPOSES  33,835. \$ 132,050. 45,000. 33,835. \$ 177,050.
STATEMENT 4 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
CONSULTANTS - OTHER. CONSULTANTS - RETIREMENT. INVESTMENT ADVISORY FEES. PUBLIC RELATIONS. TOTAI	EXPENSES INVESTMENT ADJ PER BOOKS INCOME NET  \$ 66,508.     1,250.     957,738. \$ 957,738. \$ 9     114,798.	(C) (D) CHARITABLE PURPOSES  \$ 32,792. 1,250. 57,738.

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

STATEMENT 5 FORM 990-PF, PART I, LINE 18 TAXES

	EXPÌ	A) ENSES <u>BOOKS</u>	INVÉS	NET TMENT OME	AD. NET	(C) JUSTED INCOME	01111	(D) RITABLE RPOSES
EXCISE TAXES FOREIGN TAXES PAYROLL TAXES TOTAL	(	52,861. 59,141. 58,350. 90,352.	<del>-</del> -	9,141. 7,675. 6,816.	\$	69,141. 7,675. 76,816.	\$	50,675. 50,675.

#### STATEMENT 6 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	 (A) EXPENSES PER BOOKS	II	(B) NET VESTMENT INCOME	 (C) DJUSTED <u>INCOME</u>	_	(D) CHARITABLE PURPOSES
DUES & SUBSCRIPTIONS	\$ 109,357.	\$	132.	\$ 132.	\$	108,344.
EQUIPMENT RENTAL AND MAINT.	20,233.		3,601.	3,601.		15,687.
INSURANCE	21,146.					21,228.
MEDICAL RESEARCH	598,103.					614,198.
MISCELLANEOUS	40,415.		24.	24.		40,333.
OFFICE SUPPLIES & OTHER EXP	4,073.		2,684.	2,684.		529.
POSTAGE & DELIVERY	14,197.		325.	325.		12,135.
PROGRAM EXPENSE	93,147.					97,621.
STORAGE	2,779.		505.	505.		3,897.
TELEPHONE	12,998.		2,357.	2,357.		11,058.
WEBSITE	13,358.		,	,		9,257.
TOTAL	\$ 929,806.	\$	9,628.	\$ 9,628.	\$	934,287.

#### STATEMENT 7 FORM 990-PF, PART II, LINE 10A INVESTMENTS - U.S. AND STATE GOVERNMENT OBLIGATIONS

U.S. GOVERNMENT OBLIGATIONS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE		
SMITH BARNEY - US TREASURY NOTE	MKT VAL <u>\$</u>	1,010,385.	\$ 1,010,385.		
	TOTAL <u>\$</u>	1,010,385.	\$ 1,010,385.		

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

#### STATEMENT 8 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK <u>VALUE</u>	FAIR MARKET  VALUE
HS MANAGEMENT SMITH BARNEY	MKT VAL MKT VAL TOTAL	\$ 5,500,309. 0. \$ 5,500,309.	\$ 5,500,309. 0. \$ 5,500,309.

#### STATEMENT 9 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATION METHOD	BOOK <u>VALUE</u>	FAIR MARKET VALUE
OTHER INVESTMENTS			
VESSEY STREET FUND III, L.P. NEW ENTERPRISE ASSOCIATES 12 LP THE COLCHESTER GLOBAL BOND FUND WARBURG PINCUS 3285 COMMONFUND PRIVATE EQUITY PARTNERS, LP COMMONFUND VENTURE PARTNERS, LP FARALLON INVESTMENTS SILCHESTER TOBACCO FREE INT'L TRUST WARBURG PINCUS 3640 REGIMENT ABERDEEN	MKT VAL	\$ 88,219. 125,733. 3,964,321. 288,258. 19,200. 0. 53,799. 8,214,872. 47,312. 1,524. 1,024,427.	\$ 88,219. 125,733. 3,964,321. 288,258. 19,200. 0. 53,799. 8,214,872. 47,312. 1,524. 1,024,427.
WESTWOOD CAPITAL	MKT VAL	4,055,985.	4,055,985.
RCP FUND	MKT VAL	807,141.	807,141.
LONE CASCADE	MKT VAL	0.	0.
ABRAMS	MKT VAL	2,834,930.	2,834,930.
CANYON VALUE	MKT VAL	3,558,823.	3,558,823.
NEW ENTERPRISE ASSOCIATES 14LP	MKT VAL	1,874,981.	1,874,981.
WP XI PARTNERS	MKT VAL MKT VAL	1,238,507.	1,238,507.
CLAYTON DUBLIER LANDSDOWNE	MKT VAL	3,071,297. 1,833,634.	3,071,297. 1,833,634.
LONE SAVIN	MKT VAL	1,655,654.	1,033,034.
DEERFIELD	MKT VAL	898,298.	898,298.
HIGHBROOK	MKT VAL	1,053,457.	1,053,457.
LANDSDOWNE LONG	MKT VAL	0.	0.
TIGER GLOBAL VII	MKT VAL	839,019.	839,019.
TIGER GLOBAL IX	MKT VAL	955,397.	955,397.
WP_ENERGY	MKT VAL	803,954.	803,954.
AURELIUS CAPITAL	MKT VAL	2,279,811.	2,279,811.
CEVIAN CAPITAL	MKT VAL	3,853,344.	3,853,344.
FOUR RIVERS NEA 15	MKT VAL MKT VAL	504,105.	504,105.
WP XII PARTNERS	MKT VAL	1,420,936. 1,647,445.	1,420,936. 1,647,445.
BERKSHIRE	MKT VAL	563,520.	563,520.
FOUR RIVERS IV	MKT VAL	574,923.	574,923.
MARBLE RIDGE	MKT VAL	3,155,898.	3,155,898.
NEA 16	MKT VAL	521,630.	521,630.
NIPPON	MKT VAL	1,821,054.	1,821,054.
BAIN CAPITAL	MKT VAL	554,867.	554,867.
VENROCK	MKT VAL	1,411,803.	1,411,803.
BLS	MKT VAL	2,433,412.	2,433,412.
GOBI	MKT VAL	3,439,161.	3,439,161.

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART II, LINE 13
INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
FOUR RIVERS VENTURE HELLEMAN & FRIEDMAN NEA 17 NITORIUM WP GLOBAL GROWTH CORRE OPPORTUNITIES TOTAL OTHER	MKT VAL MKT VAL MKT VAL MKT VAL MKT VAL MKT VAL INVESTMENTS	\$ 45,421. -13,943. 86,484. 3,346,418. 217,508. 3,000,000. \$ 68,516,885.	-13,943. 86,484. 3,346,418. 217,508. 3,000,000.
OTHER PUBLICLY TRADED SECURITIES	-		
BBH FUNDS TOTAL OTHER PUBLICLY TRADE	MKT VAL SECURITIES	3,642,866. \$ 3,642,866.	3,642,866. \$ 3,642,866.
	TOTAL	\$ 72,159,751.	\$ 72,159,751.

#### STATEMENT 10 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY			BASIS	 ACCUM. DEPREC.	 BOOK VALUE	FAIR MARKET VALUE		
FURNITURE AND FIXTURES IMPROVEMENTS		\$	120,115. 10,829.	\$ 117,283. 4,737.	\$ 2,832. 6,092.	\$	2,832. 6,092.	
	TOTAL	\$	130,944.	\$ 122,020.	\$ 8,924.	\$	8,924.	

#### STATEMENT 11 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

	BOOF	<u> VALUE</u>	FA	IR MARKET VALUE
SECURITY DEPOSIT	\$	61,877.	\$	61,877.
	\$	61,877.	\$	61,877.

#### STATEMENT 12 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

DEFERRED	EXCISE	TAX	\$ 240,000.

TOTAL \$ 240,000.

2019

#### **FEDERAL STATEMENTS**

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

STATEMENT 13 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

# STATEMENT 14 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		(B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION	ACQUIRED	ACQUIRED	SOLD
1	HS MANAGEMENT SHORT TERM - SEE ATTACHMENT	PURCHASED	VARIOUS	VARIOUS
2	HS MANAGEMENT LONG TERM - SEE ATTACHMENT	PURCHASED	VARIOUS	VARIOUS
3	K1 INVEST ACT SHORT TERM GAINS	PURCHASED	VARIOUS	VARIOUS
4	400 JOHNSON & JOHNSON	PURCHASED	7/18/2019	7/19/2019
5	43800 ISHARES MSCI ACWI EFT	PURCHASED	2/08/2019	4/26/2019
6	1158 ANTERO RES CORP	PURCHASED	3/05/2019	3/07/2019
7	284 AVALARA INC	PURCHASED	5/06/2019	6/19/2019
8	331 CROWSTRIKE HLDGS INC CL A	PURCHASED	12/24/2019	12/27/2019
9	301 ELASTIC N V	PURCHASED	3/05/2019	3/26/2019
10	2107 ELASTIC N V	PURCHASED	5/14/2019	5/29/2019
11	1551 SPOTIFY TECHNOLOGY SA	PURCHASED	3/05/2019	3/07/2019
12	1349 SPOTIFY TECHNOLOGY SA	PURCHASED	4/24/2019	4/24/2019
13	2494 STONE CO LTD CL A	PURCHASED	4/30/2019	5/03/2019
14	K1 INVEST ACT LONG TERM GAINS	PURCHASED	VARIOUS	VARIOUS

	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
ITEM	SALES	ALLOWED	BASIS	(LOSS)	12/31/69	12/31/69	(I) - (J)	(LOSS)
1	2487139.		2273104.	214,035.				\$ 214,035.
2	3197938.		2644239.	553,699.				553,699.
3	263,160.		0.	263,160.				263,160.
4	52,015.		52,828.	-813.				-813.
5	3247306.		3005006.	242,300.				242,300.
6	9,311.		10,966.	-1,655.				-1,655.
7	20,558.		19,608.	950.				950.
8	16,012.		16,368.	-356.				-356.
9	24,448.		26,229.	-1,781.				-1,781.
10	174,896.		178,800.	-3,904.				-3,904.
11	215,267.		228,292.	-13,025.				-13,025.
12	180,694.		190,304.	-9,610.				-9,610.
13	67,047.		67,168.	-121.				-121.
14	2901463.		0.	2901463.				2901463.
							TOTAL	\$ 4144342.

2019

### **FEDERAL STATEMENTS**

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

#### STATEMENT 15 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	 COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ALFRED SOMMER, M.D., M.H.S. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174				\$ 0.
CHRISTOPHER W. BRODY 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
GEORGE ROCHE 405 LEXINGTON AVE, 32ND FLR, NEW YORK, NY 10017	SEC & TREAS/DIR 1.00	0.	0.	0.
MARSHALL W. FORDYCE 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
JOSEPH L. GOLDSTEIN, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 0	0.	0.	0.
SOLOMON SNYDER 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
JORDAN U. GUTTERMAN, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
DR. CLAIRE POMEROY 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	PRESIDENT 40.00	434,407.	30,408.	0.
CHRIS JONES 18 BUCKINGHAM STREET, APT 3 LONDON, WC2N 6DR UNITED KINGDOM	DIRECTOR 1.00	0.	0.	0.
RUSSELL STEENBERG 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
ERIN O'SHEA, PHD 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
ELIAS ZERHOUNI 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.

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**CLIENT 0001786** 

#### ALBERT & MARY LASKER FOUNDATION, INC.

13-1680062

# STATEMENT 15 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ANTHONY B. EVNIN, PH. D. 405 LEXINTON AVE, 32ND FLR NEW YORK, NY 10174	CHAIRMAN 1.00	\$ 0.	\$ 0.	\$ 0.
SHERRY LANSING 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
	TOTAL	\$ 434,407.	\$ 30,408.	\$ 0.

#### STATEMENT 16 FORM 990-PF, PART VIII, LINE 2 COMPENSATION OF FIVE HIGHEST-PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DAVID N. KEEGAN 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	SENIOR PROGRAM DIR 40.00	136,852.	9,580.	0.
LUCY J. RINALDI 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	CHIEF INVESTMENT 25.00	95,074.	6,655.	0.
BEATRICE RENAULT 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	STRATEGY OFFICER 16.00	89,355.	6,255.	0.
COURTNEY NANDAGIRI 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	PROJECT MANAGER 40.00	81,061.	5,674.	0.
	TOTAL	\$ 402,342.	\$ 28,164.	\$ 0.

#### STATEMENT 17 FORM 990-PF, PART IX-A, LINE 1 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

DIRECT CHARITABLE ACTIVITIES	EXPENSES
ALBERT AND MARY LASKER MEDICAL RESEARCH AWARDS RECOGNIZE AND	\$ 1,958,375.
IOD TNIDTVITDIINI C OD CDOIIDC WHO HAVE MADE CICNITEICANT CONTDIENTONC	

THE ALBERT AND MARY LASKER MEDICAL RESEARCH AWARDS RECOGNIZE AND HONOR INDIVIDUALS OR GROUPS WHO HAVE MADE SIGNIFICANT CONTRIBUTIONS IN BASIC OR CLINICAL RESEARCH AND IN PUBLIC SERVICE ON BEHALF OF HEALTH AND MEDICAL RESEARCH IN THE DISEASES THAT ARE THE MAIN CAUSES OF DEATH AND DISABILITY.

**CLIENT 0001786** ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062

### **STATEMENT 18** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

ALBERT & MARY LASKER FOUNDATION

NAME: CARE OF:

STREET ADDRESS: 405 LEXINGTON AVENUE, 32ND FLR, SUITE A

NEW YORK, NY 10174 (212) 286-0222 CITY, STATE, ZIP CODE:

TELEPHONE:

E-MAIL ADDRESS: FORM AND CONTENT:

NO SPECIFIC FORM

NONE SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: NONE

# STATEMENT 19 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
IBIOLOGY GHN476D, MC 2240, 600 16TH ST SAN FRANCISCO CA 94143	NONE	PC	YOUNG SCIENTIST SEMINAR	\$ 20,000.
MAX D. COOPER 1179 OAKDALE ROAD, NE ATLANTA GA 30307	NONE	I	GENERAL AWARD	125,000.
JACQUES F. MILLER 5 CHARTERIS DRIVE IVANHOE EAST VICTORIA 3079 AUSTRALIA	NONE	I	GENERAL AWARD	125,000.
HAROLD MICHAEL SHEPARD BIOONCOLOGY CONS. 13225 BAVARIAN DR SAN DIEGO CA 92129	NONE	I	GENERAL AWARD	100,000.
DENNIS J. SLAMON 23122 CALVERT ST WOODLAND HILLS CA 91367	NONE	I	GENERAL AWARD	100,000.
ALEX ULRICH BRUNNSTRASSE 5 MUNCHEN MUNCHEN 80331 GERMANY	NONE	I	GENERAL AWARD	100,000.
GAVI ALLIANCE CHEMIN DU POMMIER 40 GRND-SACONNEX GENEVA 1218 SWITZERLAND	NONE	NC	GENERAL AWARD	250,000.
			TOTA	L \$ 820,000.