Form **990-PF**

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

OMB No. 1545-0047 2021

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

For ca	lendar year 2021 or tax year beginning	, 2021	, and ending	,20				
ALBE	RT & MARY LASKER FOUNDATION,			A Employer identification null 13-1680062				
	LEXINGTON AVENUE, 32ND FLOOR YORK, NY 10174	STE A		B Telephone number (see instructions) (212) 286-0222				
				C If exemption application is	pending, check here >			
G Ch	eck all that apply: Initial return	Initial return of a forr	ner public charity	D 1 Foreign organizations, chec	ck here			
	Final return Address change	Amended return Name change		2 Foreign organizations mee				
H Ch		(c)(3) exempt private f	oundation	here and attach computation	on ►			
	Section 4947(a)(1) nonexempt charitable t	rust Other taxable	orivate foundation	E If private foundation status under section 507(b)(1)(A)				
	market value of all assets at end of year m Part II, column (c), line 16)	counting method: C Other (specify)	ash X Accrual	.,,,,				
Èş	, , , , , ,	column (d), must be on	cash basis.)	F If the foundation is in a 60 under section 507(b)(1)(B)				
Part	Analysis of Revenue and	() Davis and	d > N = t in	A A Adimenta di cant	(d) Disbursements			
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmen income	t (c) Adjusted net income	for charitable purposes (cash basis only)			
	1 Contributions, gifts, grants, etc., received (attach schedule)	262,232.						
	2 Check ► if the foundation is not required to attach Sch. B							
	3 Interest on savings and temporary cash investments	201.	169,12					
	4 Dividends and interest from securities	1,347,957.	1,279,22	7. 1,279,227.				
	b Net rental income or (loss)							
	6 a Not gain or (loss) from sale of assets not on line 10	7,314,469.						
Revenue	b Gross sales price for all assets on line 6a 12,735,685.		6 400 00					
φ	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		6,493,08	1,241,331.				
Æ	9 Income modifications			1,241,331.				
_	10 a Gross sales less returns and							
	allowances b Less: Cost of goods sold							
	C Gross profit or (loss) (attach schedule)							
	11 Other income (attach schedule)							
	SEE STATEMENT 1	87,123.	-314,79					
	12 Total. Add lines 1 through 11	9,011,982. 451,760.	7,626,64	5. 2,374,890.	451,760.			
8	14 Other employee salaries and wages	491,612.	102,06		383,964.			
xpenses	Pension plans, employee benefits	210,174.	13,58	5. 13,585.	258,113.			
Š	16a Legal fees (attach schedule) SEE . ST2. b Accounting fees (attach sch) SEE . ST3	15,830. 197,940.	39,58	8. 39,588.	8,908. 152,246.			
ш	c Other professional fees (attach sch) SEE . ST 4	1,121,987.	864,32		195,051.			
Ę	17 Interest	·						
Ę	18 Taxes (attach schedule)(see instrs) SEE STM . 5	334,263.	72,35	0. 72,350.	46,913.			
n <u>is</u>	19 Depreciation (attach schedule) and depletion	5,079.						
<u>Έ</u>	20 Occupancy	282,808.			278,323.			
Ac	21 Travel, conferences, and meetings	341. 20,074.			340. 2,181.			
밑	23 Other expenses (attach schedule)	20,074.						
g	SEE STATEMENT 6	861,485.	95,54	4. 95,544.	726,934.			
흎	24 Total operating and administrative expenses. Add lines 13 through 23	3,993,353.	1,187,45	6. 1,187,456.	2,504,733.			
Operating and Administrative	25 Contributions, gifts, grants paid PART . XIV	850,500.	2,20,,10	2,10,,100.	850,500.			
o	26 Total expenses and disbursements. Add lines 24 and 25	4,843,853.	1,187,45	6. 1,187,456.	3,355,233.			
	27 Subtract line 26 from line 12:	1,010,000.	1,10,,40	1,101,100.	3,333,233.			
	a Excess of revenue over expenses and disbursements	4,168,129.						
	b Net investment income (if negative, enter -0-)	4,100,123.	6,439,18	9.				
	C Adjusted net income (if negative, enter -0-)			1,187,434.				

Par	l II	Balance Sheets	column should be for end-of-year amounts only.	Beginning of year	End of	year
ı aı		Balarice Criccis	column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	246,447.	414,582.	414,582.
	2	Savings and tempora	ary cash investments	6,309,540.	4,038,349.	4,038,349.
	3	Accounts receivable				
		Less: allowance for o	doubtful accounts ►	154,408.	2,469,657.	2,469,657.
	4	Pledges receivable.			·	·
		Less: allowance for	doubtful accounts ►	10,000.	2,000.	2,000.
	5	Grants receivable		·	·	<u> </u>
	6	Receivables due from offic	cers, directors, trustees, and other			
		disqualified persons (attac	ch schedule) (see instructions)			
	7	Other notes and loans rece				
		Less: allowance for (doubtful accounts >			
	8		or use			
	9	Prepaid expenses ar	nd deferred charges	404,642.	285,915.	285,915.
रु	10 a	Investments – U.S.	and state government			
Assets	_		chedule)	1,493,378.		
As			stock (attach schedule) . STATEMENT . 7	6,333,020.	8,260,277.	8,260,277.
		·	bonds (attach schedule)			
	11	Investments — land, equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	12	Investments – morto	gage loans			
	13		(attach schedule)STATEMENT8	73,679,680.	87,830,126.	87,830,126.
	14	Land, buildings, and	equipment: basis - 135,755.			
		Less: accumulated deprect (attach schedule)	iation SEE STMT 9 ► 123,498.	12,156.	12,257.	12,257.
	15	Other assets (descri	be ► SEE STATEMENT 10)	61,877.	61,877.	61,877.
		see the instructions.	completed by all filers — Also, see page 1, item l)	88,705,148.	103,375,040.	103,375,040.
	17		nd accrued expenses	282,273.	308,113.	
	18	· ·				
<u>8</u>	19					
≝	20		tors, trustees, & other disqualified persons			
Liabilities	21		s payable (attach schedule)			
	22	Other liabilities (desc	cribe SEE STATEMENT 11)	300,000.	410,000.	
	23	Total liabilities (add	lines 17 through 22)	582,273.	718,113.	
8		Foundations that fol and complete lines 2	llow FASB ASC 958, check here ► X			
Ĭ		•		26 252 222	41 540 005	
ë	24	Net assets without d	onor restrictions	36,073,982.	41,743,305.	
<u> </u>	25	Net assets with dono	or restrictions	52,048,893.	60,913,622.	
Ē			not follow FASB ASC 958, check here	32,040,033.	00,515,022.	
正		and complete lines 2	26 through 30.			
Net Assets or Fund Balanc	26	Capital stock, trust p	orincipal, or current funds			
ह्य	27	Paid-in or capital surplus,	or land, bldg., and equipment fund			
SS	28	Retained earnings, accumu	ulated income, endowment, or other funds			
*	29		und balances (see instructions)	88,122,875.	102,656,927.	
Ž	30		net assets/fund balances	88,705,148.	103,375,040.	
Par	+ III		ges in Net Assets or Fund Balanc		103,373,040.	
			alances at beginning of year - Part II, colu		aree with	
٠	end-	of-year figure reported	d on prior year's return)	(a), iiile 2) (iiiust di		88,122,875.
2	Ente	r amount from Part I,	line 27a		2	4,168,129.
3	Other	increases not included in lin	ne 2 (itemize) SEE STATEMENT 12		3	10,365,923.
4	Add	lines 1, 2, and 3			4	102,656,927.
5	Decrea	ases not included in line 2 ((itemize) •		5	
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5) – Part II, column (b), li	ne 29 6	102,656,927.

(a) List and describe	the kind(s) of property sold (for examination representation of property sold (for examination) are the kind(s) of property sold (for examination) are the kind(s) of property sold (for examination) and the kind(s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold (for examination) are the kind (s) of property sold	ple, real estate,	(b) How acqui	se (mo., day	
	raienouse, or common stock, 200 s	13. 14120 00.)	D — Donatio	n	
1a					
b					
C					
d					
е				42.0	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense o			ain or (loss) s (f) minus (g))
а					
b					
С					
d					
e					
Complete only for assets showing	ng gain in column (h) and owned by th	e foundation on 12/31/69.		(I) Gair	ns (Col. (h)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col over col. (j), if a			. (k), but not less sses (from col. (h))
а					
b					
С					
d					
е					
If gain, also enter in Part I, lir in Part I, line 8	(loss) as defined in sections 1222(f (loss), enter -0-	_	3	6,493,086. 1,241,331.
Part V Excise Tax Based	on Investment Income (Section	on 4940(a), 4940(b), or 4	1948 – see instr	ructions)	
1 a Evernt operating foundations describ	ed in section 4940(d)(2), check here	► and enter 'N/A' on li	ne 1 —		
Date of ruling or determination letter:		ter if necessary – see ins			
	s enter 1.39% (0.0139) of line 27b.			- 1	89,505.
	ol. (b)	, , ,			03,303.
	• •				
2 Tax under section 511 (dome	stic section 4947(a)(1) trusts and ta	xable			0
	er -0-)				0.
	estic section 4947(a)(1) trusts and t				89,505.
		•		· — —	0.
	ome. Subtract line 4 from line 3. If	zero or iess, enter -0		5	89,505.
6 Credits/Payments:	vernoument eredited to 2001	ا م ا	140	. F.O.	
	verpayment credited to 2021		148,3	58.	
	- tax withheld at source		150.0	00	
	extension of time to file (Form 8868	·	150,0	100.	
•	sly withheld	<u></u>			000 050
	Add lines 6a through 6d	_		7	298,358.
	ayment of estimated tax. Check her				
	is more than line 7, enter amount owed				0.
	the total of lines 5 and 8, enter the amount o	i i			208,853.
11 Enter the amount of line 10 to be: Cre	dited to 2022 estimated tax	208,853.	Refunded	▶ 11	0. Form 990-PF (2021)

Part VI-A Statements Regarding Activities

. u.	t ti /t Guacimento regularity /tetritios			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X
ŀ	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 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
(Did the foundation file Form 1120-POL for this year?	1 c		X
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation $\Rightarrow \$$ 0. (2) On foundation managers $\Rightarrow \$$			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ►\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		37
2				X
	If 'Yes,' attach a detailed description of the activities.			
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	7.7	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X	
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	Χ	• • • • • • • • • • • • • • • • • • • •
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If 'Yes,' attach the statement required by <i>General Instruction T</i> .			
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	X	
	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 XIV.	7	Χ	
88	Enter the states to which the foundation reports or with which it is registered. See instructions			
	NY			
ŀ	olf 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	Х	
		0.0	Λ	
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 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If 'Yes,' complete Part XIII.	9	Χ	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10		Х
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		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?	13	Χ	
-	Website address. ► WWW.LASKERFOUNDATION.ORG	-		
14	The books are in care of ► BENCIVENGA WARD & COMPANY CPAS Telephone no. ► (914)	769	 -500	5
	Located at ► 420 COLUMBUS AVENUE, SUITE 304 VALHALLA NY ZIP +4 ► 10595-138			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	.Ņ <u>/</u> A		
-	and enter the amount of tax-exempt interest received or accrued during the year			N/A
10			Yes	No
16	At any time during calendar year 2021, 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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
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	ΓΟ	111 230	,-i i (2	.021)

Part VI-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 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?	1 a (1)		Χ
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1 a (2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			Х
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		Х	
(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)?	1 a (5)		Х
(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.)	1 a (6)		X
b If any answer is 'Yes' to 1a(1)—(6), did any 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
c Organizations relying on a current notice regarding disaster assistance, check here ▶ ☐			
d 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 2021?	1 d		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)):			
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021?	2 a		X
If 'Yes,' list the years ▶ 20 , 20 , 20 , 20			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.).	2 b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
► 20 , 20 , 20 , 20			
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3 a		X
b If 'Yes,' did it have excess business holdings in 2021 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? (I se Form 4720. Schedule C. to			
(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.)	3 b		
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
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 2021?			X
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Part VI-B Statements Regarding Activit		14/20 May be Req	uirea (continuea)		
5 a During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attem	-	n (section 1915(e))?		- 0 (1)	Yes No
					X
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr	ation drive?			5 a (2)	
(3) Provide a grant to an individual for travel				··· 5 a (3)	X
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	n a charitable, etc., organi S	zation described		5 a (4)	Х
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or or animals?		5 a (5)	Х
b If any answer is 'Yes' to 5a(1)—(5), did any o described in Regulations section 53.4945 or in a See instructions	f the transactions fail to current notice regarding d	qualify under the exceptisaster assistance?	otions	EL	N / 7
Organizations relying on a current notice rega				5 b	N/A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respor If 'Yes,' attach the statement required by Reg	sibility for the grant?			/A. 5d	
6 a Did the foundation, during the year, receive a			S		
on a personal benefit contract? b Did the foundation, during the year, pay prem					X
If 'Yes' to 6b, file Form 8870.	nums, unectly of mairec	ily, on a personal belie	in contract:	ОВ	X
7 a At any time during the tax year, was the foun					Х
b If 'Yes,' did the foundation receive any proces8 Is the foundation subject to the section 4960 tax				/A 7b	
or excess parachute payment(s) during the ye				8	Х
Part VII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	 S,
and Contractors 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 (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other al	e account, Ilowances
SEE STATEMENT 13					
		420,137.	31,623.		0.
		420,137.	31,023.		
2 Compensation of five highest-paid employees (c		on line 1 – see instruction	ns). If none, enter 'NONE.' (d)Contributions to		
(a) Name and address of each employee paid more than \$50,000 SEE STATEMENT 14	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expens other al	e account, llowances
		486,029.	34,022.		0.
Total number of other employees paid over \$50,00	0		►		0

Form 990-PF (2021) ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062 Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

and contractors (continued)		
3 Five highest-paid independent contractors for professional services. See	•	
(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	ACCOUNTING & TAX	151,048.
CREWCIAL PARTNERS LLC		
PO BOX 2008		
RIVER VALE, NJ 07675	INVESTMENT CONSULT	160,207.
R&S CHRYSLER LLC		
RFR REALTY, 107 ELM ST, STE 4010		000 454
STAMFORD, CT 06902	RENT	298,174.
COUNTERPOINT MEDIA		
443 PARK AVENUE	CONCLUE BENG	F7 07F
SARANAC LAKE, NY 12893 Total number of others receiving over \$50,000 for professional services	CONSULTING	57,075.
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 SEE STATEMENT 15		Expenses
022_0122221_10		
		2,023,100.
2 OTHER PROGRAMS SUPPORT NEW INITIATIVES THAT FUR	RTHER THE FOUNDATION'S	
MISSION. THESE INITIATIVES INCLUDE EDUCATIONAL	_ FORUMS, SCHOLARLY	
STUDY, AND STUDY GROUPS.		442,720.
3		
4		
D. J.VIII D. C	and in a second	
Part VIII-B Summary of Program-Related Investments (see instr Describe the two largest program-related investments made by the foundation during the		Amount
	ne tax year on lines i and z.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
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Form **990-PF** (2021)

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 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 97,326,033. **b** Average of monthly cash balances..... 1 b 331,044 c Fair market value of all other assets (see instructions)..... 1 c d Total (add lines 1a, b, and c). 1 d 657,077 e Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets. 2 Subtract line 2 from line 1d. 3 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)..... 4 1,464,856 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4...... 5 96, 192, 221 Minimum investment return. Enter 5% (0.05) of line 5 6 4,809,611 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 2021 from Part V, line 5..... 2a **b** Income tax for 2021. (This does not include the tax from Part V.)..... 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 XII. line 1.......... 7 Part XI | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 a 3,355,233 **b** Program-related investments – total from Part VIII-B.... 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes..... 2 3 a **b** Cash distribution test (attach the required schedule)..... 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4..... 4 3,360,413.

Part XII Undistributed Income (see instructions) N/A									
	(a)	(b)	(c)	(d)					
	Corpus	Years prior to 2020	(c) 2020	2021					
Distributable amount for 2021 from Part X, line 7									
2 Undistributed income, if any, as of the end of 2021:									
a Enter amount for 2020 only.									
b Total for prior years: 20, 20, 20									
3 Excess distributions carryover, if any, to 2021:									
a From 2016									
b From 2017									
c From 2018									
d From 2019									
e From 2020									
f Total of lines 3a through e									
4 Qualifying distributions for 2021 from Part XI, line 4: ► \$									
a Applied to 2020, but not more than line 2a									
b Applied to undistributed income of prior years (Election required — see instructions)									
c Treated as distributions out of corpus (Election required – see instructions)									
d Applied to 2021 distributable amount									
e Remaining amount distributed out of corpus.									
5 Excess distributions carryover applied to 2021									
(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 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 2020. Subtract line 4a from									
line 2a. Taxable amount — see instructions									
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022.									
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 2016 not applied on line 5 or line 7 (see instructions).									
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a									
10 Analysis of line 9:									
a Excess from 2017									
b Excess from 2018									
c Excess from 2019									
d Excess from 2020									
e Excess from 2021									
BAA				Form 990-PF (2021)					

Part XIII	Private Operating Foundat	ions (see instru	ctions and Part	VI-A, question 9	9)	
1 a If the for	undation has received a ruling or deter tive for 2021, enter the date of the	rmination letter that it	t is a private operatir	ng foundation, and th	e ruling	2/14/74
	box to indicate whether the foundati	3			X 4942(j)(3) or	4942(j)(5)
2a Enter th	ne lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
investme	from Part I or the minimum ent return from Part IX for	(a) 2021	(b) 2020	(c) 2019	(d) 2018	
,	ear listed	1,187,434.	1,359,719.	1,015,075.	118,511.	3,680,739.
•	85) of line 2a	1,009,319.	1,155,761.	862,814.	100,734.	3,128,628.
line 4, f	ng distributions from Part XI, for each year listed	3,360,413.	2,452,979.	3,555,681.	3,508,416.	12,877,489.
for active	included in line 2c not used directly conduct of exempt activities.					0.
for activ Subtrac	ng distributions made directly ve conduct of exempt activities. t line 2d from line 2c	3,360,413.	2,452,979.	3,555,681.	3,508,416.	12,877,489.
alternat	te 3a, b, or c for the ive test relied upon:					
	alternative test – enter:					
` '	ue of all assets					
sec	ue of assets qualifying under tion 4942(j)(3)(B)(i)					
minimum	ent' alternative test — enter 2/3 of investment return shown in Part IX, each year listed	3 206 407	2 554 442	2,616,697.	2 654 631	11 032 177
•	t' alternative test – enter:	3,200,407.	2,331,442.	2,010,057.	2,034,031.	11,032,177.
(1) Tota inve divi	al support other than gross estment income (interest, dends, rents, payments securities loans (section (a)(5)), or royalties)					
	,,,,,,					
more	oort from general public and 5 or e exempt organizations as provided ection 4942(j)(3)(B)(iii)					
(3) Larg	gest amount of support from exempt organization					
٠,,	ss investment income					
Part XIV	Supplementary Information (assets at any time during the	(Complete this	part only if the	foundation had	\$5,000 or more	e in
	ition Regarding Foundation Manag		structions.)			
a List any	managers of the foundation who have	contributed more that	an 2% of the total co	ntributions received I	by the foundation be	fore the
close of NONE	any tax year (but only if they have	contributed more t	han \$5,000). (See s	section 507(d)(2).)		
b List anv	managers of the foundation who own	10% or more of the s	stock of a corporation	n (or an equally large	portion of the owne	rship of
a partñe NONE	ership or other entity) of which the	foundation has a 10)% or greater intere	est.	•	·
2 Informati	tion Bosovding Contribution Cront C	Sift I can Cabalayah	in etc. Duanuama			
Check h	tion Regarding Contribution, Grant, Genere if the foundation only males for funds. If the foundation makes, and d. See instructions.	kes contributions to p	preselected charitable			
	ne, address, and telephone number or	email address of the	person to whom app	plications should be a	addressed:	
	STATEMENT 16	1 20 1 1: 6				
b The form	m in which applications should be s	submitted and inforn	nation and material	is they should includ	de:	
	STATEMENT FOR LINE 2A					
c Any sub	omission deadlines:					
	STATEMENT FOR LINE 2A					
d Any res	trictions or limitations on awards, s	uch as by geograph	nical areas, charitat	ole fields, kinds of in	nstitutions, or other	factors:
SEE 9	STATEMENT FOR LINE 2A					

	true cappionical surface (c				
3	Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	t	
	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	Contribution	
а	Paid during the year				
	STATEMENT 17				
опп	SIAILMENI I/				
	Total			► 3a	850,500.
	Approved for future payment				030,300.
_	The state of the s				
	Total	ı	ı	▶ 3b	

Enter gross	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue:a		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a						
b						
С						
d						
е						
f						
q Fees	and contracts from government agencies					
-	bership dues and assessments					
	st on savings and temporary cash investments			14	201.	
	ends and interest from securities			14	1,347,957.	
	ental income or (loss) from real estate:			14	1,347,337.	
	-financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	r investment income			1.0	01 516	
				18	-91,516.	
	r (loss) from sales of assets other than inventory			18	7,314,469.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
11 Other	revenue: a <u>UBIT_FROM_K-1_INVESTM</u>	523000	178,639.			
	b					
	c					
	otal. Add line 12, columns (b), (d), and (e)					
	e					
40	otal Add columns (b) (d) and (e)		170 620		0 571 111	
12 Subto	stall ridd coldillis (b), (d), and (c)		1/8,639.		0.3/1.111.1	
12 Subto	Add line 12, columns (b), (d), and (e)		1/8,639.			8 749 750
15 10(a)	• Add line 12, coldinis (b), (d), and (e)		178,639.		13	8,749,750.
(See works	sheet in line 13 instructions to verify calculatio	ns.)				8,749,750.
(See works	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	8,749,750.
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculatio	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	
(See works Part XV- Line No.	sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accomplish	ment of Exemp	t Purpos	es	

Form 990-PF (2021) ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062 Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
descr	ne organization directly ibed in section 501(c) ng to political organizat	(other than sec	ngage in any of the following ction 501(c)(3) organizations	g with any o) or in section	other organization on 527,	n			
	0 1		a noncharitable exempt orga	anization of					
							1 a (1)		X
							1 a (1)		X
	transactions:						1 a (2)		Λ
		ncharitable exe	mpt organization				1 b (1)		X
` '			ble exempt organization				1 b (2)		X
` '			r assets				1 b (3)		X
` '							1 b (4)		X
` '	-						1 b (5)		X
` '	ŭ		ip or fundraising solicitations				1 b (6)		X
` '			its, other assets, or paid em				1 c		X
		,g	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
d If the the go any tr	answer to any of the a pods, other assets, or ser ransaction or sharing a	above is 'Yes,' rvices given by rrangement, sl	complete the following sche the reporting foundation. If the now in column (d) the value	dule. Colum foundation r of the good	in (b) should alw received less than s, other assets,	rays show the fair r fair market value in or services receive	market valı ı :d.	ue of	
(a) Line no.	(b) Amount involved	(c) Name o	of noncharitable exempt organization	(d)) Description of trans	sfers, transactions, and	sharing arran	gement	S
N/A									
2a Is the descr	foundation directly or incibed in section 501(c)	directly affiliated (other than sec	d with, or related to, one or mo tion 501(c)(3)) or in section	re tax-exemp 527?	ot organizations		. Yes	X	No
b If 'Ye	s,' complete the following	•							
	(a) Name of organizati	ion	(b) Type of organiza	ition	(c)	Description of rela	ationship		
N/A									
1					<u> </u>				
Sign Here	ect, and complete. Declaration	of preparer (other	ned this return, including accompanyi than taxpayer) is based on all informa	ation of which pro	preparer has any knowledge of the property of	edge.	May the II this return preparer s See instru	RS discu with the	uss e elow?
Si	ignature of officer or trustee	11 ame	Z66-20 Dâte /		Title		-	Yes	No
	Print/Type preparer's nar	me	Preparer's signature		Date	Check if	PTIN		1
Paid	LEONARD J. BENG	CIVENGA CPI		h /	11/14/22	self-employed	P001167	8.8	
raiu Preparer		•	ARD & CO CPAS PC	/	•	Firm's EIN ► 13-32'	1	<u> </u>	
Use Only			AVE STE 304			13-32	14330		
C3C Only		ALHALLA, NY				Phone no. (914)	769-500	5	
BAA		,				(314)	Form 99 (20211
							1 01111 330	(4	_0_1)

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2021

Employer identification number Name of the organization ALBERT & MARY LASKER FOUNDATION, INC. 13-1680062 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)((enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** 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 For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.....

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

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 space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	RUSSELL STEENBERG		Person X Payroll			
	405 LEXINGTON AVE, 32ND FLR	\$20,000.	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	TOTAL CONTRIBUTIONS UNDER \$5,000		Person X Payroll			
	405 LEXINGTON AVE, 32ND FLR	\$ <u>18,622.</u>	Noncash			
	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			
3	ANONYMOUS		Person X Payroll			
	405 LEXINGTON AVENUE, 32ND FLR	\$10,000.	Noncash			
	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>4</u>	ANTHONY ENVIN		Person Payroll			
	405 LEXINGTON AVE, 32ND FLR	\$52,027.	Noncash X			
	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			
5	MARSHALL W. FORDYCE		Person X Payroll			
	405 LEXINGTON AVE, 32ND FLR	\$5,000.	Noncash			
	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>6</u>	ACT FOR NIH		Person X Payroll			
	300 INDEPENDENCE AVE, SE	\$26,000.	Noncash			
	WASHINGTON, DC 20003		(Complete Part II for noncash contributions.)			

Schedule B (Form 990) (2021)							
Name of organization							
ΔΙΒΕΡΤ	ς.	MADV	INCKED	FULLMUMTATION	TNC		

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
7	THE AE FAMILY FOUNDATION 405 LEXINGTON AVENE, 32ND FLR NEW YORK, NY 10174	\$ <u>10,000.</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
8	THE PEW CHARITABLE TRUSTS 901 E STREET, NW WASHINGTON, DC 20004	\$ <u>10,583.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	CHARLES SCHWAB PO BOX 628291 ORLANDO, FL 32862	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_	VANGUARD CHARITABLE 2670 WARWICK AVENUE WARWICK, RI 02889	\$7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_	FIDELTY CHARITABLE PO BOX 77001 CINCINATTI, OH 45277	\$60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12_	JOSEPH GOLDSTEIN 405 LEXINGTON AVNEUE, 32ND FL NEW YORK, NY 10174	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

3 Employer identification number

Part I	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					
<u>13</u> _	SOLOMON SNYDER 405 LEXINGTON AVENUE, 32ND FL NEW YORK, NY 10174	\$ <u>10,000</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					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
	TFFA0702L 10/06/21	1	Schodula P (Farm 990) (2021)					

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Employer identification number

13-1680062

ALDEKI	& MARI LASKER FOUNDATION, INC.	13-1000	062
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	IDEXX_LABS_STOCK		
		\$52,027.	7/22/21_
(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
	<u> </u>		

(a) No. from Part I

(b)
Description of noncash property given

(d) Date received

(c) FMV (or estimate) (See instructions.)

Schedule B (Form 990) (2021)

Name of organization

ALBERT & MARY LASKER FOUNDATION, INC Employer identification number 13-1680062 Pa

	a final Energic Footbill on,		10 1000002						
ırt III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8),								
	or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)								
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	N/A								

	ese auphoute copies of fait in it additional s	pace is fiedaca.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	-			
		(e) Transfer of gift		
	Transferee's name, address	s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
from Part I	(a) i ai poco ei giit	(0) 000 01 g		(a) 2 000 p. 10 g. 11 g. 11
		(e) Transfer of gift		
	Transferee's name, address	s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part I		.,		•

Part I					
				 	
		t			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	

Part I					
	<u> </u>				
		(e) Transfer of gi	ift		
	Transferee's name, addres	ss, and ZIP + 4	Rela	ationship of transferor to transferee	
			[
			T		

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

2021

Employer identification number

Department of the Treasury

13-1680062 ALBERT & MARY LASKER FOUNDATION, INC. 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, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220. Required Annual Payment 1 1 Total tax (see instructions)..... 89,505. 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 3 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 89,505. Enter the tax shown on the corporation's 2020 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..... 47,691 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 47.691 Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must Part II 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 X The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Figuring the Underpayment Part III (a) (b) (c) (d) Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year...... 9 5/15/21 6/15/21 9/15/21 12/15/21 Required installments. If the box on line 6 and/or line 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) 10 11,923 32,830. 22,376. 22,376. Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions..... 11 148,358 Complete lines 12 through 18 of one column before going to the next column. 136,435 103,605 **12** Enter amount, if any, from line 18 of the preceding column 12 81,229 13 136,435 103,605 81,229 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-.... 136,435 81,229 15 148,358 103,605 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-.... 16 0 0 **Underpayment.** If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of 17 the next column. Otherwise, go to line 18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the 136,435. 103,605. 18 81,229. next column...

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	t IV Figuring the Penalty					
10	Enter the data of normant or the 15th day of the 14th		(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 4/15/2021 and before 7/1/2021	21				
22	Underpayment on line 17 Number of days on line 21 × 3% (0.03)	22				
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021.	23				
24	Underpayment on line 17 Number of days on line 23 x 3% (0.03)	24				
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022.	25				
26	Underpayment on line 17 Number of days on line 25 x 3% (0.03)	26				
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022.	27				
28	Underpayment on line 17 Number of days on line 27 × 3% (0.03)	28				
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022.	29				
30	Underpayment x Number of days on line 17 Number of days 365 x*%	30				
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022.	31				
32	Underpayment on line 17 Number of days on line 31 x*%	32				
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023.	33				
34	Underpayment on line 17 Number of days on line 33 x*%	34				
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023.	35				
36	Underpayment on line 17 Number of days on line 35 365 X*%	36				
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37				
38	Penalty. Add columns (a) through (d) of line 37. Enter t	he tot	al here and on Forn	n 1120, line 34; or t	he	
	comparable line for other income tax returns					0.

^{*}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.

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 1	
FORM 990-PF, PART I, LINE 1	1
OTHER INCOME	

]	(A) REVENUE PER BOOKS	I	(B) NET NVESTMENT INCOME	_	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOMEUBIT FROM K-1 INVESTMENTS	\$	-91,516. 178,639.	\$	-314,797.	\$	-314,797.
TOTAL	\$	87,123.	\$	-314,797.	\$	-314,797.

STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES

	(A)	(B) NET	(C)	(D)
	EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
	PER BOOKS	INCOME	NET INCOME	PURPOSES
LEGAL TOTAL	\$ 15,830. \$ 15,830.	\$ 0.	\$ 0.	\$ 8,908. \$ 8,908.

STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A)		(B) NET		(C)	(D)
]	EXPENSES	Ι	NVESTMENT	A.	DJUSTED	CHARITABLE
	P	ER BOOKS		INCOME	NE'	T INCOME	 PURPOSES
ACCOUNTING AND TAX	\$		\$	39,588.	\$	39,588.	\$ 110,246.
AUDIT		42,000.					42,000.
TOTAL	\$	197,940.	\$	39,588.	\$	39,588.	\$ 152,246.

STATEMENT 4 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

	_	(A) XPENSES ER BOOKS	I	(B) NET NVESTMENT INCOME	_	(C) ADJUSTED ET INCOME	_	(D) CHARITABLE PURPOSES
CONSULTANTS - INVESTMENTSCONSULTANTS - OTHERCONSULTANTS - RETIREMENT	\$	160,207. 71,380. 1,250.	\$	160,207.	\$	160,207.	\$	73,658. 1,250.
INVESTMENT ADVISORY FEES. PUBLIC RELATIONS.		769,007. 120,143.		704,116.		704,116.		120,143.
TOTAL	\$ 1	,121,987.	\$	864,323.	\$	864,323.	\$	195,051.

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ALBERT & MARY LASKER FOUNDATION, INC.

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

	-	(A) EXPENSES PER BOOKS	I	(B) NET NVESTMENT INCOME	-	(C) ADJUSTED ET INCOME	_((D) CHARITABLE PURPOSES
EXCISE TAXES FOREIGN TAXES PAYROLL TAXES TOTAL	\$	215,000. 64,071. 55,192. 334,263.	\$	64,071. 8,279. 72,350.	\$	64,071. 8,279. 72,350.	\$	46,913. 46,913.

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

	_	(A) EXPENSES PER BOOKS]	(B) NET INVESTMENT INCOME	N	(C) ADJUSTED ET INCOME	_	(D) CHARITABLE PURPOSES
DUES & SUBSCRIPTIONS	\$	104,380. 22,003.					\$	105,380. 23,457.
FILING FEES		1,525.						1,525.
INSURANCE		20,457.		04 000				23,285.
INVESTMENT EXPENSE		67,132.	Ş	91,928.	Ş	91,928.		222 601
MEDICAL RESEARCH		369,317. 4,387.						322,681. 4,388.
OFFICE SUPPLIES & OTHER EXP		1,286.						1,307.
PAYROLL PROCESSING FEES		13,457.		3,499.		3,499.		9,958.
POSTAGE & DELIVERY		11,350.		•		,		10,524.
PROGRAM EXPENSE		152,500.						132,180.
STORAGE		3,504.				445		3,504.
TELEPHONE		11,896.		117.		117.		11,587.
WEBSITETOTAL	٠	78,291. 861,485.	<u>خ</u>	05 544	<u>خ</u>	05 5//	٠	77,158. 726,934.
TOTAL	<u>ې</u>	001,403.	Ş	95,544.	Ą	95,544.	Ş	120,934.

STATEMENT 7 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION	BOOK	FAIR MARKET
	METHOD	VALUE	VALUE
HS MANAGEMENT	MKT VAL <u>\$</u> TOTAL <u>\$</u>	8,260,277. 8,260,277.	\$ 8,260,277. \$ 8,260,277.

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STATEMENT 8 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUA <u>METI</u>		FAIR MARKET VALUE
OTHER INVESTMENTS			
OTHER INVESTMENTS VESSEY STREET FUND III, L.P. NEW ENTERPRISE ASSOCIATES 12 LP THE COLCHESTER GLOBAL BOND FUND WARBURG PINCUS 3285 COMMONFUND PRIVATE EQUITY PARTNER FARALLON INVESTMENTS SILCHESTER TOBACCO FREE INT'L TRU WARBURG PINCUS 3640 ABERDEEN WESTWOOD CAPITAL RCP FUND ABRAMS CANYON VALUE NEW ENTERPRISE ASSOCIATES 14LP WP XI PARTNERS DEERFIELD HIGHBROOK TIGER GLOBAL VIII	MKT VA MKT VA MKT VA MKT VA S,LP MKT VA MKT VA	AL \$ 40,653. AL 130,442. AL 4,037,042. AL 24,577. AL 13,183. AL 7,951,558. AL 12,016. AL 1,014,651. AL 3,726,836. AL 605,160. AL 852,690. AL 3,847,574. AL 3,533,924. AL 1,080,040. AL 3,030,588. AL 3,030,588. AL 3,030,588.	\$ 40,653. 130,442. 4,037,042. 24,577. 13,183. 21,815. 7,951,558. 12,016. 1,014,651. 3,726,836. 605,160. 852,690. 3,847,574. 3,533,924. 1,080,040. 832,322. 3,030,588. 849,878.
TIGER GLOBAL IX WP ENERGY CEVIAN CAPITAL FOUR RIVERS NEA 15 WP XII PARTNERS BERKSHIRE FOUR RIVERS IV	MKT VA MKT VA MKT VA MKT VA MKT VA MKT VA MKT VA	AL 763,351. AL 5,119,685. AL 498,039. AL 1,700,956. AL 2,264,643. AL 1,434,794. AL 1,922,167.	763,351. 5,119,685. 498,039. 1,700,956. 2,264,643. 1,434,794. 1,922,167.
MARBLE RIDGE NEA 16 NIPPON BAIN CAPITAL VENROCK BLS GOBI FOUR RIVERS VENTURE	MKT VZ	AL 950,589. AL 0. AL 2,123,700. AL 1,389,421. AL 3,196,175. AL 5,352,890. AL 290,069.	950,589. 0. 2,123,700. 1,389,421. 3,196,175. 5,352,890. 290,069.
HELLEMAN & FRIEDMAN NEA 17 NITORIUM WP GLOBAL GROWTH CORRE OPPORTUNITIES CDR FUND IX CDR FUND X CDR FUND XI CONSONANCE	MKT VA	AL 670,841. AL 3,388,255. AL 1,665,391. AL 3,724,031. AL 2,928,567. AL 2,696,197. AL 335,524.	670,841. 3,388,255. 1,665,391. 3,724,031. 2,928,567. 2,696,197. 335,524.
CONSONANCE FOSSE CAPITAL AFR BAIN CAPITAL 2021 FPR PARTNERS GENERAL ATLANTIC HELLMAN & FRIEDMAN X INSIGHT ONE EQUITY PARTNERS	MKT VA	AL 2,317,988. AL 2,492,767. AL 458,377. AL 2,248,782. AL 340,543. AL 170,311. AL 350,809. AL 174,799.	2,317,988. 2,492,767. 458,377. 2,248,782. 340,543. 170,311. 350,809. 174,799.

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 8 (CONTINUED) FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

OTHER PUBLICLY TRADED SECURITIES

TOTAL \$ 87,830,126. \$ 87,830,126.

STATEMENT 9 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS		ACCUM. DEPREC.		BOOK VALUE	E	FAIR MARKET VALUE
FURNITURE AND FIXTURES IMPROVEMENTS	\$ TAL \$	124,926. 10,829.	\$	116,571. 6,927. 123,498.	\$	8,355. 3,902.	\$	8,355. 3,902.
10	тиг <u>э</u>	135,755.	<u>ې</u>	123,498.	ې	12,237.	<u>ې</u>	12,257.

STATEMENT 10 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

	BOC	OK VALUE	F <i>F</i>	AIR MARKET VALUE
SECURITY DEPOSITS TOTAL	\$	61,877.	\$	61,877.
	\$	61,877.	\$	61,877.

STATEMENT 11 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

DEFERRED EXCISE TAX \$ 410,000.

TOTAL \$ 410,000.

STATEMENT 12 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS. \$10,365,923.\$ TOTAL \$10,365,923.\$

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 13 FORM 990-PF, PART VII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPE SATIO	IN- ON	CONTRI- BUTION TO EBP & DC	ACCOUNT/
ALFRED SOMMER, M.D., M.H.S. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	\$	0.	\$ 0.	\$ 0.
CHRISTOPHER W. BRODY 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
WILLIAM H. HAMMOND 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
MARSHALL W. FORDYCE, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	SEC & TREAS/DIR 1.00		0.	0.	0.
JOSEPH L. GOLDSTEIN, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
SOLOMON SNYDER, M.D. 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.
CLAIRE POMEROY, M.D., M.B.A. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	PRESIDENT 40.00	420,	.137.	31,623.	0.
CHRIS JONES 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
SUSAN HOCKFIELD, PH. D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
RUSSELL STEENBERG 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.
ELIZABETH G. NABEL, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00		0.	0.	0.

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 13 (CONTINUED) FORM 990-PF, PART VII, 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	-
E. ALBERT REECE, MD, PH.D, MBA 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
MARGARET A HAMBURG, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
ELIAS A. ZERHOUNI, M.D. 405 LEXINGTON AVE, 32ND FLR NEW YORK, NY 10174	DIRECTOR 1.00	0.	0.	0.
ANTHONY B. EVNIN, PH. D. 405 LEXINGTON 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	\$ 420,137.	\$ 31,623.	\$ 0.

STATEMENT 14 FORM 990-PF, PART VII, 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	155,304.	10,871.	0.
LUCY J. RINALDI 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	CHIEF INVESTMENT 25.00	101,146.	7,080.	0.
BEATRICE RENAULT 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	STRATEGY OFFICER 22.00	130,356.	9,125.	0.
COURTNEY NANDAGIRI 405 LEXINGTON AVE, 32ND FLR, STE NEW YORK, NY 10174	PROJECT MANAGER 40.00	99,223.	6,946.	0.
	TOTAL	\$ 486,029.	\$ 34,022.	\$ 0.

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 15 FORM 990-PF, PART VII-A, LINE 1 **SUMMARY OF DIRECT CHARITABLE ACTIVITIES**

DIRECT CHARITABLE ACTIVITIES

EXPENSES

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 SPECIAL ACHIEVEMENT OR PUBLIC SERVICE ON BEHALF OF HEALTH AND MEDICAL RESEARCH IN THE DISEASES THAT ARE THE MAIN CAUSES OF DEATH AND DISABILITY.

2,023,100.

STATEMENT 16 FORM 990-PF, PART XIV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME: ALBERT & MARY LASKER FOUNDATION

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

SUBMISSION DEADLINES: NONE RESTRICTIONS ON AWARDS: NONE

STATEMENT 17 FORM 990-PF, PART XIV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	A	MOUNT
RESEARCH AMERICA 1101 KING STREET, SUITE 520 ALEXANDRIA VA 22314	NONE	PC	GENERAL OPERATING SUPPORT	\$	25,000.
IBIOLOGY GHN476D, MC 2240, 600 16TH ST SAN FRANCISCO CA 94143	NONE	PC	SHARE YOUR RESEARCH PRGM		20,000.
KARL DEISSEROTH 720 ALVARADO ROW STANFORD CA 94305	NONE	I	GENERAL AWARD		100,000.
PETER HEGEMANN KOCHSTRASSE 56 FALKENSEE 14612 GERMANY	NONE	I	GENERAL AWARD		100,000.

2021

FEDERAL STATEMENTS

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ALBERT & MARY LASKER FOUNDATION, INC.

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STATEMENT 17 (CONTINUED) FORM 990-PF, PART XIV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
DIETER OESTERHELT 17 WERDENFELSSTRASSE MUNCHEN 81377 GERMANY	NONE	I	GENERAL AWARD	\$ 100,000
DREW WEISSMAN 614 S. HANCOCK STREET PHILADELPHIA PA 19147	NONE	I	GENERAL AWARD	125,000
KATALIN KARIKO 1022 KIPLING ROAD RYDAL PA 19046	NONE	I	GENERAL AWARD	125,000
DAVID BALTIMORE 1255 S. GRAND AVENUE PASAENA CA 91105	NONE	I	GENERAL AWARD	250,000
FRIENDS OF THE AMERICAN PHILOSOPHICAL SO 104 SOUTH FIFTH STREET PHILADELPHIA PA 19106	NONE	PC	GENERAL OPERATING SUPPORT	500
THE GEORGE WASHINGTON UNIVERSITY 2175 K STREET, SUITE 257 WASHINGTON DC 20037	NONE	PC	RISING STAR	5,000
			TOT	AL \$ 850,500