

Form **990-PF**

Department of the Treasury Internal Revenue Service **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2024**Open to Public Inspection

For calendar year 2024 or tax year beginning and ending Name of foundation A Employer identification number TARGET ALS FOUNDATION INC 81-0756743 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 244 MADISON AVE #1025 646-592-2541 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW YORK, NY 10016 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Cash X Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here ... X(from Part II, col. (c), line 16) 128,911,762. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) 47,902,882. Contributions, gifts, grants, etc., received N/A2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2,201,600. 2,201,600. STATEMENT Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 1,641,294. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 32,981,057. 1,641,294. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income ,745,776. 3.842.894. 12 Total. Add lines 1 through 11 0. 757,052. 757,052. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 693,954. 0. 1,693,954. 599,620. 0. 599,620. 15 Pension plans, employee benefits 43,324. 0. 43,324. 16a Legal fees STMT Administrative Expenses 0. 53,628. b Accounting fees STMT 3 53,628. c Other professional fees STMT 4 718.799. 77.119. 641,680. 17 Interest 18 Taxes Depreciation and depletion 19 Occupancy 20 1,187,779. 21 Travel, conferences, and meetings 0. 1,187,779. 22 Printing and publications 3,218. 0. 3,218. 23 Other expenses STMT 5 4,002,257. 4,002,257. 0. 24 Total operating and administrative 9,05<u>9,631</u> 8,982,512. 77,119. expenses. Add lines 13 through 23 18,048,427. 18,048,427. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 27,108,058. 27,030,939. Add lines 24 and 25 77,119. 27 Subtract line 26 from line 12: 24,637,718. a Excess of revenue over expenses and disbursements 3,765,775. **b Net investment income** (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

423501 12-06-24 Form **990-PF** (2024)

| P | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End o | t year |
|-------------|-------|--|--------------------|----------------|---------------------------|
| _ | | column should be for end-of-year amounts only. | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 5,248,618. | 2,137,916. | 2,137,916. |
| | | Savings and temporary cash investments | 20,566,503. | 8,351,865. | 8,351,865. |
| | | | 20,000,000 | 0,001,0001 | 0,002,0001 |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable 48,581,875. | | | |
| | | Less; allowance for doubtful accounts | 37,060,511. | 48,581,875. | 48,581,875. |
| | 5 | Grants receivable | 79,111,867. | 730,032. | 730,032. |
| | 6 | Receivables due from officers, directors, trustees, and other | | • | |
| | | | | | |
| | _ | disqualified persons Other notes and loans receivable 250,000. | | | |
| | 1 | Other notes and loans receivable | 0 | 050 000 | 050 000 |
| | | Less: allowance for doubtful accounts | 0. | 250,000. | 250,000. |
| S | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | 48,235. | 76,751. | 76,751. |
| As | 10a | Investments - U.S. and state government obligations | | | |
| | h | Investments - corporate stock STMT 7 | 38,537,227. | 68,783,323. | 68,783,323. |
| | | Investments corporate hands | 30/33//22/1 | 00//03/3231 | 00770373231 |
| | | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment: basis | | | |
| | | Less: accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | | Land, buildings, and equipment; basis | | | |
| | | Less: accumulated depreciation | | | |
| | 15 | Other assets (describe) | | | |
| | | , | | | |
| | 16 | Total assets (to be completed by all filers - see the | 100 570 061 | 100 011 760 | 100 011 760 |
| | | instructions. Also, see page 1, item I) | | 128,911,762. | 128,911,762. |
| | 17 | Accounts payable and accrued expenses | | 33,343. | |
| | 18 | Grants payable | 3,030,383. | 4,318,332. | |
| s | 19 | Deferred revenue | | | |
| Liabilities | | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ē | | Mortgages and other notes payable | | | |
| <u>e</u> . | | Other liabilities (describe | | | |
| | 22 | Other habilities (describe | | | |
| | | Tabel Paking (add Page 47 thoronth 00) | 2 0/0 770 | 1 251 675 | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 3,048,779. | 4,351,675. | |
| | | Foundations that follow FASB ASC 958, check here | | | |
| S | | and complete lines 24, 25, 29, and 30. | | | |
| nce | 24 | Net assets without donor restrictions | | 81,346,621. | |
| <u>=</u> | 25 | Net assets with donor restrictions | 117,651,247. | 43,213,466. | |
| Fund Balan | | Foundations that do not follow FASB ASC 958, check here | | | |
| ဋ | | and complete lines 26 through 30. | | | |
| Ē | 26 | Capital stock, trust principal, or current funds | | | |
| sor | | | | | |
| ĕ | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| Ass | 28 | Retained earnings, accumulated income, endowment, or other funds \dots | 100 504 100 | 104 560 005 | |
| Net Assets | 29 | Total net assets or fund balances | 1//,524,182. | 124,560,087. | |
| Z | | | | | |
| | 30 | Total liabilities and net assets/fund balances | 180,572,961. | 128,911,762. | |
| D | art | Analysis of Changes in Net Assets or Fund Ba | lances | | |
| | aιι | / maryole of onallyse in Not Assets of Fana Be | iidi 1000 | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 29 | | |
| | | | | 1 | 177,524,182. |
| 2 | • | amount from Part I, line 27a | | | 24,637,718. |
| | | r increases not included in line 2 (itemize) | | 3 | 0. |
| | | | | | 202,161,900. |
| 4 | Auu | lines 1, 2, and 3 | CDD CD | | |
| | | eases not included in line 2 (itemize) | | ATEMENT 6 5 | 77,601,813. |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 29 | 6 | 124,560,087. |
| | | | | | Form 990-PF (2024) |

| (' ' / | | | | | | | | , , = 0 | |
|---|---|---|--|--|--|--|--|---|--|
| art IV Capital Gains a | and Losses for Tax on In | vestment Income | | | | | | | |
| | | | (b) | How acquire - Purchase - Donation | d (0 | | | | |
| | | | | P | | | | | |
| CAPITAL GAINS I | DIVIDENDS | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | | (| | | g)) | |
| 32,758,007. | | 31,339,76 | 53. | | | | 1 | L,418, | 244. |
| 223,050. | | | | | | | | 223,0 | 050. |
| · | | | | | | | | - | |
| | | | | | | | | | |
| | | | | | | | | | |
| Complete only for assets showin | g gain in column (h) and owned by | the foundation on 12/31/69. | | | (1) (| Gains (Col. (| h) gain r | minus | |
| (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 | | | còl. (I | k), but not le | eśs than | -0-) or | |
| | | | | | | | 1 | L,418, | 244. |
| | | | | | | | | 223,0 | 050. |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Net short-term capital gain or (los If gain, also enter in Part I, line 8, | ss) as defined in sections 1222(5) ar | nd (6): | } } | 3 | | | | L,641, | 294. |
| | ed on Investment Incom | ne (Section 4940(a), 4 | 940(| o), or 494 | 18 - s | | | ıs) | |
| a Exempt operating foundations o | described in section 4940(d)(2), che | ck here and enter " | N/A" or | line 1. | 1 | | | , | |
| | , , , , , | *** | | | 3) | 1 | | 52, | 344. |
| · · | | | | | ′ } | | | , | |
| | , , | | | | | | | | |
| | | | | | | 2 | | | 0. |
| , | | ,,,,, | | , | | | | 52, | 344. |
| | tic section 4947(a)(1) trusts and tax | able foundations only others. 6 | enter -(|)-) | | | | , | 0. |
| | | | | , | | | | 52. | |
| | ine. Subtract mile 1 mem mile 61 m 20 | | | | | , | | <u> </u> | |
| | nd 2023 overnayment credited to 20 | 024 6a | | | 0. | | | | |
| | | | | | 0. | 1 | | | |
| | | | | | 0. | 1 | | | |
| | | | | | 0. | | | | |
| | | | | | | 7 | | | 0. |
| | • | | | | | | | 2.8 | 355. |
| | | | | | | | | | |
| | • | | | | | | | , | |
| | | zmeent eterpaia | | | | | | | |
| | (a) List and describe 2-story brick was 2-story | (a) List and describe the kind(s) of property sold (for exa 2-story brick warehouse; or common stock, 200 shs CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) 32,758,007. 223,050. Complete only for assets showing gain in column (h) and owned by: (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 Capital gain net income or (net capital loss) (lf gain, also enter lf (loss), enter -Color short-term capital gain or (loss) as defined in sections 1222(5) are figain, also enter in Part I, line 8, column (c). See instructions. If (lose Part I, line 8 art V Excise Tax Based on Investment Incom a Exempt operating foundations described in section 4940(d)(2), che Date of ruling or determination letter: (at Date of ruling | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) (p) List expense of sale plus expense of sale 32,758,007. 223,050. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i), if any over col. (i), if any over col. (ii), if any over col. (iii), if any over col. (i | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) plus expense of sale 32,758,007. 31,339,763. 223,050. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any expense of sale as the in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 7 (pain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 art V Excise Tax Based on Investment Income (Section 4940(a), 4940(a) at Exempt operating foundations described in section 4940(d)(2), check here and enter "NA" or a Exempt operating foundations enter 1,39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) (as expendent exercise of 11 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Credits/Payments: 2024 estimated tax payments and 2023 overpayment credited to 2024 (a) Exempt foreign organizations - tax withheld at source (b) Exempt foreign organizations - tax withheld at source (b) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizations - tax withheld at source (c) Exempt foreign organizat | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale 32, 758, 007. 223, 050. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (j) FMV as of 12/31/69 (j) FMV as of 12/31/69 (k) Excess of col. (l) over col. (j), if any (k) Excess of col. (li) over col. (j), if any (k) Excess of col. (li) over col. (j), if any (li) FMV as of 12/31/69 (k) Excess of col. (li) over col. (j), if any (li) FMV as of 12/31/69 (li) FMV as of 12 | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) P CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (g) Cost or other basis plus expense of sale plus expense of sale (or allowable) 32,758,007. 223,050. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iii) FMV as of 12/31/69 (iv) Adjusted basis as of 12/31/69 (iv) Adjusted basis as of 12/31/69 (iv) FMV as of 12/31/69 (iv) Adjusted basis as of 12/31/69 (iv) FMV a | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) 22 3 , 0 5 0 . Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iii) FMV as of 12/31/6 | (a) List and describe the kind(s) of property sold (for example, real estate, 2-stroy brick warehouse; or common stock, 200 shs. MLC Co.) P CAPITAL GAINS DIVIDENDS (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (a) Cost or other basis (b) Gains or (loss) (e) plus (f) minus (go) plus expense of sale (or allowable) (ii) FMV as of 12/31/69 (iii) FMV as | (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acculared (me., day, yr.) (c) Date acquired (me., day, yr.) (d) Date (me., day, yr.) (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (le) plus (h) Gain or (loss) (le) plus (h) minus (g)) 32,758,007. 31,339,763. (l) Gains (Col. (h) gain minus (loss) (le) plus and basis (le) Excess of col. (l) over col. (l), if any col. (l), |

| Г | It VI-A Statements negaring Activities | | | |
|----|--|-----------------|-------------|---------------|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | Yes | |
| | any political campaign? | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | 1b | | Х |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | |
| | distributed by the foundation in connection with the activities. | | | |
| | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| | (1) On the foundation. \$ (2) On foundation managers. \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | |
| | managers. \$O • | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | <u> </u> |
| | 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 | | | <u> X</u> |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | |
| | 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 | <u> </u> |
| 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 XIV | 7 | Х | |
| | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | _ | | |
| | NY | _ | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | 77 | |
| _ | of each state as required by General Instruction G? If "No," attach explanation | 8b | X | |
| 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 | _ | | 37 |
| | year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII | | | X |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | X |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | v |
| | 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? | ,, | | v |
| | If "Yes," attach statement. See instructions | | 37 | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | Ь |
| | Website address TARGETALS.ORG | E02 2 | E / 1 | |
| 14 | The books are in care of KENNETH DEVANEY Telephone no. 646- | 10016 | 34 <u>1</u> | |
| 45 | | <u> </u> | | $\overline{}$ |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | nt. | /A | Ш |
| 10 | and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2024, did the foundation have an interest in an a signature or other outbacits year a back | 11/ | Yes | No |
| 16 | At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, | 10 | 163 | X |
| | securities, or other financial account in a foreign country? | 16 | | \vdash |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| | foreign country | Form 990 |)-PF | (2024) |
| | | FUITH 330 | | (2024) |

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| Fait VI-D | Statements negariting Activities for Which Form 4720 May be nequired | | | | |
|------------------------|---|-----|----------------|---------------|----------|
| File Form | 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 1a During the | year, did the foundation (either directly or indirectly): | | | | |
| (1) Engag | e in the sale or exchange, or leasing of property with a disqualified person? | | 1a(1) | | X |
| (2) Borrov | money from, lend money to, or otherwise extend credit to (or accept it from) | | | | |
| a disqı | ialified person? | | 1a(2) | | X |
| (3) Furnis | n goods, services, or facilities to (or accept them from) a disqualified person? | | 1a(3) | | X |
| (4) Pay co | mpensation to, or pay or reimburse the expenses of, a disqualified person? | | 1a(4) | | X |
| (5) Transf | er any income or assets to a disqualified person (or make any of either available | | | | |
| for the | benefit or use of a disqualified person)? | | 1a(5) | igsqcut | X |
| | to pay money or property to a government official? (Exception. Check "No" | | | | |
| if the f | oundation agreed to make a grant to or to employ the official for a period after | | | | |
| termin | ation of government service, if terminating within 90 days.) | | 1a(6) | | _X_ |
| b If any answ | er 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 | N/A | 1b | | <u> </u> |
| | ns relying on a current notice regarding disaster assistance, check here | | | | |
| d Did the fou | ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | | |
| before the | irst day of the tax year beginning in 2024? | | 1d | igsqcut | X |
| 2 Taxes on fa | ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | | |
| defined in s | ection 4942(j)(3) or 4942(j)(5)): | | | | |
| a At the end | of tax year 2024, did the foundation have any undistributed income (Part XII, lines | | | | |
| 6d and 6e) | for tax year(s) beginning before 2024? | | 2a | igsquare | X |
| If "Yes," list | the years , , , , | | | | |
| b Are there a | ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | | |
| valuation o | f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | | |
| | see instructions.) | N/A | 2b | \square | |
| c If the provi | sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | | |
| | | | | | |
| | ndation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | |
| during the | | | 3a | \square | X |
| b If "Yes," did | it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after | | | | |
| | 69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispo | ose | | | |
| | acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | | | | |
| | , to determine if the foundation had excess business holdings in 2024.) | | 3b | \longmapsto | <u> </u> |
| | ndation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | 4a | | X |
| | ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose th | at | | | |
| had not be | en removed from jeopardy before the first day of the tax year beginning in 2024? | | 4b | | X |
| | | Fo | orm 990 |)-PF | (2024) |

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| Form 990-PF (2024) TARGET ALS FOUNDATION INC | C | | 81-07567 | 743 | I | Page 6 |
|---|---|-----------------------------------|--|---|--------------------|---------------|
| Part VI-B Statements Regarding Activities for Which F | orm 4720 May Be R | equired _{(contine} | ued) | | | |
| 5a During the year, did the foundation pay or incur any amount to: | | | | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 1 4945(e))? | | | 5a(1) | | X |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | ectly, | | | | |
| any voter registration drive? | | | | 5a(2) | | X |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | | | 5a(3) | | X |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | | | |
| 4945(d)(4)(A)? See instructions | | | | 5a(4) | | X |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | | | | | | |
| the prevention of cruelty to children or animals? | | | | 5a(5) | | X |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | | | 37 / 3 | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instru | | | | 5b | | |
| c Organizations relying on a current notice regarding disaster assistance, check h | | | 🗀 | | | |
| d If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | | NT / 7 | | | |
| expenditure responsibility for the grant? | | | N/A | 5d | | |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d). | | | | | | l |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | • • | | | 0- | | Х |
| a personal benefit contract? | | | ····· | 6a 6b | | X |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | OU | | lacksquare |
| If "Yes" to 6b, file Form 8870. | holter transaction? | | | 7a | | х |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | | 7b | | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | | | 70 | | |
| | | | | 8 | | х |
| Part VII Information About Officers, Directors, Truste | es. Foundation Mar | nagers. Highly | I | | | |
| Paid Employees, and Contractors | , | <i>3</i> , <i>3</i> , | | | | |
| 1 List all officers, directors, trustees, and foundation managers and the | eir compensation. | | | | | |
| () Manage and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | | (e) Exp ccount, | ense |
| (a) Name and address | to position | enter -0-) | and deferred compensation | u | allowai | nces |
| | | | | | | |
| - <u>-</u> | | | | | | |
| SEE STATEMENT 8 | | 686,602. | 70,450 | <u>- </u> | | 0. |
| | | | | | | |
| | | | | | | |
| | | | | + | | |
| | | | | | | |
| | | | | | | |
| | | | | + | | |
| | | | | | | |
| | | | | | | |
| 2 Compensation of five highest-paid employees (other than those incl | luded on line 1). If none, o | enter "NONE." | | | | |
| | (b) Title, and average | _ | (d) Contributions to employee benefit plans | | (е) Ехр | ense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | | ccount, allowai | otner nces |
| AMY EASTON - 244 MADISON AVE #1025, | SENIOR DIRECT | OR SCIENT | | GR. | MS | |
| NEW YORK, NY 10016 | 40.00 | 300,564. | 15,028 | . 5 | 1,9 | 65. |
| JESSICA CHAPMAN - 244 MADISON AVE | CHIEF DEVELOP | MENT DIREC | CTOR | | | |
| #1025, NEW YORK, NY 10016 | 40.00 | 235,180. | 11,759 | . 1 | 9,8 | 08. |
| YULIYA RZAD - 244 MADISON AVE #1025, | 1 | OFFICER | | | | |
| NEW YORK, NY 10016 | 40.00 | 210,020. | | . 2 | 8,0 | <u>85.</u> |
| LAURA DUGOM - 244 MADISON AVE #1025, | CLINICAL RESE | | TIST | | | |
| NEW YORK, NY 10016 | 40.00 | 165,144. | 8,250 | _ | 9,7 | <u> 28.</u> |
| STEPHANIE ISHOO - 244 MADISON AVE | | ARCH COMMU | | | | |
| #1025, NEW YORK, NY 10016 | 40.00 | 155,358. | 7,763 | | | 0. |
| Total number of other employees paid over \$50,000 | <u></u> , | <u></u> | | | | 13 |

| Part VII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued) | dation Managers, Highly | |
|---|-------------------------|------------------|
| 3 Five highest-paid independent contractors for professional services. If none, en | ter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| LEROY & MORTON PRODUCTIONS LLC | | |
| 435 HUDSON STREET, NEW YORK, NY 10014 | ADVERTISING | 160,000. |
| CRIMSON PARK DIGITAL | | |
| 31703 CRIMSON DRIVE, WINCHESTER, CA 92596 | MARKETING | 110,966. |
| BGR GOVERNMENT AFFAIRS, LLC | | |
| PO BOX 14416, WASHINGTON, DC 20044 | PATIENT ADVOCACY | 105,000. |
| CORNERSTONE GOVERNMENT AFFAIRS | | |
| 800 MAINE AVENUE, WASHINGTON, DC 20024 | PATIENT ADVOCACY | 105,000. |
| — | | 0 |
| Total number of others receiving over \$50,000 for professional services Part VIII-A Summary of Direct Charitable Activities | | 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers p | | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part VIII-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year | on lines 1 and 2. | Amount |
| 1 N/A | | |
| - | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | 0. |

| P | Part IX Minimum Investment Return (All domestic foundation | ns must complete | this part. Foreign fo | undations | s, see instructions.) |
|----|--|-----------------------|-----------------------|-------------|---------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charita | ble, etc., purposes: | | | |
| а | Average monthly fair market value of securities | | | 1a | 42,319,812. |
| | Average of monthly cash balances | | | 1b | 33,474,452. |
| C | Fair market value of all other assets (see instructions) | | | 1c | 0. |
| | Total (add lines 1a, b, and c) | | | 1d | 75,794,264. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | | | |
| | 1c (attach detailed explanation) | 1e | 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | | 3 | 75,794,264. |
| 4 | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater a | amount, see instruct | ions) | 4 | 1,136,914. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 | | | 5 | 74,657,350. |
| 6 | Minimum investment return. Enter 5% (0.05) of line 5 | | | 6 | 3,732,868. |
| P | Distributable Amount (see instructions) (Section 4942(j))(Section 4942(j)) | 3) and (j)(5) private | | and certair | 1 |
| 1 | Minimum investment return from Part IX, line 6 | | | 1 | 3,732,868. |
| 2a | Tax on investment income for 2024 from Part V, line 5 | 2a | 52,344. | | |
| b | | | | | |
| C | Add lines 2a and 2b | | | 2c | 52,344. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | | 3 | 52,344. 3,680,524. |
| 4 | Recoveries of amounts treated as qualifying distributions | | | 4 | 0. |
| 5 | Add lines 3 and 4 | | | 5 | 3,680,524. |
| 6 | Deduction from distributable amount (see instructions) | | | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa | rt XII, line 1 | | 7 | 3,680,524. |
| P | Part XI Qualifying Distributions (see instructions) | | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., pu | irposes: | | | |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | | 1a | 27,030,939. |
| b | Program-related investments - total from Part VIII-B | | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charita | able, etc., purposes | | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | | | |
| | Suitability test (prior IRS approval required) | | | 3a | |
| | Cash distribution test (attach the required schedule) | | | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4 | | | 4 | 27,030,939. |
| | | | | | Form 990-PF (2024) |

Part XII Undistributed Income (see instructions)

| | · | | | |
|---|----------------------|----------------------------|---------------------|---------------------------|
| | (a) Corpus | (b) Years prior to 2023 | (c) 2023 | (d) 2024 |
| 1 Distributable amount for 2024 from Part X, | · | · | | 2 600 504 |
| line 7 | | | | 3,680,524. |
| 2 Undistributed income, if any, as of the end of 2024: | | | • | |
| a Enter amount for 2023 only | | | 0. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2024: | | 0. | | |
| a From 2019 5,146,749. | | | | |
| b From 2020 5,113,045. | | | | |
| c From 2021 6,674,498. | | | | |
| d From 2022 4,848,559. | | | | |
| e From 2023 8,070,539. | | | | |
| f Total of lines 3a through e | 29,853,390. | | | |
| 4 Qualifying distributions for 2024 from | | | | |
| Part XI, line 4: \$ 27,030,939. | | | | |
| a Applied to 2023, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2024 distributable amount | | | | 3,680,524. |
| e Remaining amount distributed out of corpus | 23,350,415. | | | |
| 5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 53,203,805. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | - | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2023. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2024. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2025 | | | | 0. |
| 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) | 0. | | | |
| 8 Excess distributions carryover from 2019 not applied on line 5 or line 7 | 5,146,749. | | | |
| 9 Excess distributions carryover to 2025. | -,, | | | |
| Subtract lines 7 and 8 from line 6a | 48,057,056. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2020 5,113,045. | | | | |
| b Excess from 2021 6,674,498. | | | | |
| c Excess from 2022 4,848,559. | | | | |
| d Excess from 2023 8,070,539. | | | | |
| e Excess from 2024 23,350,415. | | | | |
| | | | | Form 990-PF (2024) |

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| Form 990-PF (2024) TARGET 2 | ALS FOUNDAT: | | A guestion 9) | 81-07 N/A | 56743 Page 10 |
|---|----------------------------|-----------------------------|-----------------------------|------------------------------|----------------------|
| | - | | 1, question 5) | N/A | |
| 1 a If the foundation has received a ruling or foundation, and the ruling is effective for | | | | | |
| b Check box to indicate whether the found | | | | 4942(j)(3) or 49 | 942(j)(5) |
| [| | g toutidation described in | Prior 3 years |] 4942(J)(3) UI 48 | 142(J)(3) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2024 | (b) 2023 | (c) 2022 | (d) 2021 | (e) Total |
| income from Part I or the minimum | (a) 2027 | (0) 2020 | (6) 2022 | (u) 2021 | (e) Iotai |
| investment return from Part IX for | | | | | |
| each year listed | | | | | |
| b 85% (0.85) of line 2a | | | | | |
| c Qualifying distributions from Part XI, | | | | | |
| line 4, for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 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) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| shown in Part IX, line 6, for each year | | | | | |
| listed | | | | | |
| c "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 XIV Supplementary Infor | | | the foundation | had \$5,000 or moı | e in assets |
| at any time during th | ne year-see instri | uctions.) | | | |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation who | | | ibutions received by the | foundation before the clos | e of any tax |
| year (but only if they have contributed m | iore than \$5,000). (See s | ection 507(d)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation who | | | or an equally large portion | on of the ownership of a pa | rtnership or |
| other entity) of which the foundation has | s a 10% or greater interes | t. | | | |
| NONE | | | | | |
| 2 Information Regarding Contribution | on, Grant, Gift, Loan, | Scholarship, etc., Pro | ograms: | | |
| | • | • | • | s not accept unsolicited red | quests for funds. If |
| the foundation makes gifts, grants, etc., | to individuals or organiza | tions under other condition | ons, complete items 2a, | b, c, and d. | |
| a The name, address, and telephone numb | per or email address of th | e person to whom applica | ations should be address | sed: | |
| | | | | | |
| b The form in which applications should be | e submitted and informat | ion and materials they sh | ould include: | | |
| c Any submission deadlines: | | | | | |

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

| Supplementary information | · · · · · · · · · · · · · · · · · · · | | | |
|---|--|--------------------------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the Ye | | Payment | | |
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | or substantial contributor | rooipioni | | |
| | | | | |
| AC IMMUNE SA | NONE | PC | BIOMEDICAL RESEARCH | |
| EPLF INNOVATION PARK LAUSANNE, SWITZERLAND 8006 | | | | 130,000. |
| | | | | |
| ADX NEUROSCIENCES | NONE | PC | BIOMEDICAL RESEARCH | |
| TECHNOLOGIEPARK ZWIJNAARDE 6 GENT VLAANDEREN, BELGIUM 9052 | | | | 111,075. |
| | | | | |
| ATALANTA THERAPEUTICS | NONE | NC | BIOMEDICAL RESEARCH | |
| 51 SLEEPER ST 7TH FLOOR BOSTON, MA 02110 | | | | 130,000. |
| | | | | |
| BAYLOR COLLEGE OF MEDICINE | NONE | PC | BIOMEDICAL RESEARCH | |
| 1 BAYLOR PLAZA HOUSTON, TX 77030 | | | | 265,020. |
| | | | | |
| BRAINEVER PHARMA | NONE | PC | BIOMEDICAL RESEARCH | |
| 74 RUE DU FAUBOURG SAINT-ANTOINE PARIS, FRANCE 75012 | | | | 129,850. |
| Total SEE CON | TINUATION SHEE | T(S) | 3a | 18,048,427. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total | | | | 0. |

Part XV-A **Analysis of Income-Producing Activities**

| Enter gross amounts unless otherwise indicated. | Unrelate | d business income | | ed by section 512, 513, or 514 | (e) |
|---|------------------|-------------------|---------------|--------------------------------|-------------------|
| Zinoi gross amounts amous strior mos maisateur | _ (<u>a</u>) | (b) | (c) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | Business code | Amount | sion code | Amount | function income |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 2,201,600. | |
| 5 Net rental income or (loss) from real estate: | | | | , , | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 1,641,294. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0 | | 3,842,894. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 3,842,894. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|----------|--|
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Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) | | | | | | | | Yes | No | |
|-------|--|--------------------------------------|---------------------------|-----------------------|----------------------|----------------------|--------------------------|-----------------------------|----------------------------------|-----------|--------|
| • | | an section 501(c)(3) organi | | | | = | JII uosonbou III sooi | 1011 30 1(0) | | | |
| а | • | from the reporting founda | • | - | | - | | | | | |
| - | | 1 | | | | | | | 1a(1) | | х |
| | | r assets | | | | | | | | | Х |
| b | | nsactions: | | | | | | | | | |
| | (1) Sale: | s of assets to a noncharitab | ole exempt organizat | ion | | | | | 1b(1) | | Х |
| | | hases of assets from a non | | | | | | | | | Х |
| | | al of facilities, equipment, o | | | | | | | | | Х |
| | | nbursement arrangements | | | | | | | | | X |
| | (5) Loar | is or loan guarantees | | | | | | | 1b(5) | | X |
| | (6) Perf | ormance of services or mer | mbership or fundrais | ing solicitatio | ns | | | | 1b(6) | | X |
| C | Sharing o | of facilities, equipment, mai | iling lists, other asse | ts, or paid em | ployees . | | | | 1c | | X |
| d | | wer to any of the above is ' | | - | | | - | - | | ets, | |
| | | es given by the reporting fo | | | ed less tha | n fair market valu | ie in any transaction | or sharing arrangen | nent, show in | | |
| | | d) the value of the goods, o | | | | | | | | | |
| (a)∟i | ne no. | (b) Amount involved | (c) Name of | noncharitable | e exempt o | rganization | (d) Description | n of transfers, transaction | ns, and sharing arr | angemer | nts |
| | | | | N/A | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | - | | | | | | | | | | |
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| | | | | | | | | | | | |
| 2a | Is the fou | indation directly or indirect | ly affiliated with, or r | elated to, one | or more to | ax-exempt organi | zations described | | | | |
| | in section | n 501(c) (other than section | n 501(c)(3)) or in sec | ction 527? | | | | | Yes | X | No |
| b | If "Yes," c | omplete the following sche | | | | | | | | | |
| | | (a) Name of orga | anization | | (b) Type | of organization | | (c) Description of re | lationship | | |
| | | N/A | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Und | er penalties of perjury, I declare | that I have examined this | e return includin | g accompan | ving schedules and s | statements, and to the h | nest of my knowledge | | | |
| Sig | | belief, it is true, correct, and con | | | | | | | May the IRS or return with th | | |
| He | re | | | | 1 | | TREASURI | 7D | x Yes | ? See ins | str. |
| | | nature of officer or trustee | | | I Da ⁱ | to. | Title | <u> </u> | Yes | · L | 」 No |
| | July | Preparer's name | | Preparer's si | | | Date | Check if | PTIN | | |
| | | . Toparor o marrio | | , roparor 5 5 | ignataro | | | self-employed | | | |
| Pa | id | PATRICK J. N | MARTTN | ₽AͲR T <i>C</i> ' | K J. | MARTIN | 05/14/25 | 1,-9 | P00283 | 486 | |
| | eparer | Firm's name KAHN | | | | | CO/14/20 | Firm's EIN 05 | -040938 | | |
| | e Only | | ,, | | | ., | | | 3 2 3 3 3 0 | - | |
| | , | Firm's address 951 | NORTH MA | IN STR | EET | | | | | | |
| | | | VIDENCE, | | | | | Phone no. 403 | 1-274-2 | 001 | |
| | | | | | | | | | Form 99 | | (2024) |

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor CASE WESTERN RESERVE UNIVERSITY NONE PC BIOMEDICAL RESEARCH 2103 CORNELL ROAD CLEVELAND, OH 44106 130,000. CHILDREN'S HOSPITAL OF PHILADELPHIA NONE PC BIOMEDICAL RESEARCH 3401 CIVIC CENTER BLVD PHILADELPHIA, PA 19104-4319 249,468. COLUMBIA UNIVERSITY BIOMEDICAL RESEARCH NONE PC 650 WEST 168TH STREET NEW YORK, NY 10032 517,118. COMMISSARIAT L'NERGIE ATOMIQUE ET NONE PC BIOMEDICAL RESEARCH AUX NERGIES ALTERNATIVES (CEA) 25 RUE LEBLANC PARIS, FRANCE 75015 120,000. CONSEJO SUPERIOR DE INVESTIGACIONES NONE PC BIOMEDICAL RESEARCH CIENTFICAS SERRANO 117 MADRID, SPAIN 28006 260,000. DIGNITY HEALTH - ST. JOSEPH'S NONE PC BIOMEDICAL RESEARCH HOSPITAL AND MEDICAL CENTER 350 W. THOMAS ROAD PHOENIX, AZ 85013 964,670. EMORY UNIVERSITY NONE PC BIOMEDICAL RESEARCH 201 DOWMAN DR NE ATLANTA, GA 30322 384,132. GEORGETOWN UNIVERSITY NONE PC BIOMEDICAL RESEARCH 37TH AND O STREETS, NW WASHINGTON, DC 20057 120,267. GLADSTONES INSTITUTES NONE ÞС BIOMEDICAL RESEARCH 1650 OWENS STREET SAN FRANCISCO, CA 94158 146,762. HARVARD UNIVERSITY NONE ÞС BIOMEDICAL RESEARCH MASSACHUSETTS HALL CAMBRIDGE, MA 02138 125,000.

Total from continuation sheets

17,282,482.

Part XIV Supplementary Information

| Part XIV Supplementary Information Grants and Contributions Paid During the | | | | |
|---|--|--------------------------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, | | | |
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipioni | | |
| HEBREW UNIVERSITY OF JERUSALEM | NONE | PC | BIOMEDICAL RESEARCH | |
| MOUNT SCOPUS CAMPUS | | | | |
| JERUSALEM, ISRAEL 9190501 | | | | 129,979. |
| ICAHN SCHOOL OF MEDICINE AT MOUNT | NONE | PC | BIOMEDICAL RESEARCH | |
| SINAI | | | | |
| 1 GUSTAVE L LEVY PL | | | | |
| NEW YORK, NY 10029 | | | | 125,053. |
| | | | | |
| INSTITUT PASTEUR | NONE | PC | BIOMEDICAL RESEARCH | |
| 209-211 RUE DE VAUGIRARD | | | | |
| PARIS, FRANCE 75015 | | | | 129,274. |
| | | | | |
| INSTITUTO ROOSEVELT | NONE | PC | BIOMEDICAL RESEARCH | |
| CALLE 100 # 47A-01 | | | | |
| BOGOTA, COLOMBIA | | | | 82,905. |
| | | | | |
| INTERNATIONAL CENTRE FOR GENETIC ENGINEERING AND BIOTECHNOLOGY | NONE | NC | BIOMEDICAL RESEARCH | |
| ARUNA ASAF ALI MARG | | | | |
| NEW DELHI, INDIA 110067 | | | | 119,995. |
| | | | | |
| | | | | |
| ITALIAN INSTITUTE OF TECHNOLOGY VIA MOREGO 30 | NONE | PC | BIOMEDICAL RESEARCH | |
| GENOVA, ITALY 16163 | | | | 121,950. |
| , | | | | , |
| | | | | |
| JOHNS HOPKINS UNIVERSITY | NONE | PC | BIOMEDICAL RESEARCH | |
| 3400 N. CHARLES STREET BALTIMORE, MD 21218 | | | | 580,000. |
| EMILINORI, MD 21210 | | | | 300,000: |
| | | | | |
| KANSAS CITY UNIVERSITY | NONE | NC | BIOMEDICAL RESEARCH | |
| 1750 INDEPENDENCE AVE | | | | 100 000 |
| KANSAS CITY, MO 64106 | | | | 120,000. |
| | | | | |
| KU LEUVEN | NONE | PC | BIOMEDICAL RESEARCH | |
| OUDE MARKT 13 | | | | |
| LEUVEN, BELGIUM 3000 | | | | 361,897. |
| LEIBNIZ-FORSCHUNGSINSTITUT FUR | NONE | PC | BIOMEDICAL RESEARCH | |
| MOLEKULARE PHARMAKOLOGIE | | | | |
| ROBERT ROSSLE STRABE | | | | |
| BERLIN, GERMANY 13125 | | | | 130,000. |
| Total from continuation sheets | | | | |

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient LUDWIG-MAXIMILIANS UNIVERSITY NONE PC BIOMEDICAL RESEARCH PROFESSOR-HUBER-PLATZ 2 MUNICH, GERMANY 80539 260,000. MASSACHUSETTS GENERAL HOSPITAL NONE PC BIOMEDICAL RESEARCH 55 FRUIT STREET BOSTON, MA 02114 670,046. MAYO CLINIC - JACKSONVILLE FLORIDA BIOMEDICAL RESEARCH NONE PC 4500 SAN PABLO ROAD SOUTH JACKSONVILLE, FL 32224 321,754. MCGILL UNIVERSITY NONE PC BIOMEDICAL RESEARCH 845 SHERBROOKE ST W MONTREAL, QUEBEC, CANADA 4MAOGA 53,570. NATIONAL INSTITUTE OF HEALTH (NIH) NONE GOV BIOMEDICAL RESEARCH 9000 ROCKVILLE PIKE BETHESDA, MD 20892 130,000. NEURAL STEM CELL INSTITUTE NONE PC BIOMEDICAL RESEARCH 1 DISCOVERY DR RENSSELAER, NY 12144-3448 49,828. NEURO DEX NONE PC BIOMEDICAL RESEARCH 38 PARK AVENUE EXT ARLINGTON, MA 02474 126,150. NEW YORK GENOME CENTER NONE PC BIOMEDICAL RESEARCH 101 6TH AVENUE NEW YORK, NY 10013 1,177,046. N-LOREM FOUNDATION NONE ÞС BIOMEDICAL RESEARCH 2888 LOKER AVE E CARLSBAD, CA 92010 500,000. NORTHWESTERN UNIVERSITY NONE ÞС BIOMEDICAL RESEARCH 10 ROCKEFELLER PLAZA, #800 NEW YORK, NY 10111 194,977. Total from continuation sheets

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient OREGON HEALTH AND SCIENCE UNIVERSITY NONE PC BIOMEDICAL RESEARCH 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR 97239 60,000. PARIS BRAIN INSTITUTE (ICM) NONE PC BIOMEDICAL RESEARCH CS 21414, CEDEX 13 PARIS, FRANCE 75646 130,520. PROSETTA BIOSCIENCES BIOMEDICAL RESEARCH NONE NC 650 5TH STREET SAN FRANCISCO, CA 94107 140,000. PURDUE UNIVERSITY NONE PC BIOMEDICAL RESEARCH 610 PURDUE MALL WEST LAFAYETTE, IN 47907 60,000. REGENERON PHARMACEUTICALS NONE PC. BIOMEDICAL RESEARCH 2425 MATHESON BOUELVARD EAST SUITE 726 MISSISSAUGA, CANADA L4W 5K4 99,759. SHEBA MEDICAL CENTER NONE PC BIOMEDICAL RESEARCH 2 DERECH SHEBA RAMAT GAN, ISRAEL 5266202 100,000. ST. LOUIS UNIVERSITY NONE PC BIOMEDICAL RESEARCH 1 N GRAND BLVD ST. LOUIS, MO 63103 125,000. STANFORD UNIVERSITY NONE PC BIOMEDICAL RESEARCH 450 SERRA MALL STANFORD, CA 94305 382,151. SWISS FEDERAL INSTITUTE OF TECHNOLOGY NONE ÞС BIOMEDICAL RESEARCH BRAIN MIND INSTITUTE SV 2511 UPMCABE LAUSANNE, SWITZERLAND VD 1015 539,981. TEL-AVIV UNIVERSITY NONE PC BIOMEDICAL RESEARCH RAMAT AVIV TEL AVIV, ISRAEL 6997801 140,000. Total from continuation sheets

Part XIV Supplementary Information

| Part XIV Supplementary Informati | | | | |
|--|---|----------------------|----------------------------------|--|
| 3 Grants and Contributions Paid During the | If recipient is an individual, | | | |
| Recipient Name and address (home or business) | show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| THE GERMAN CENTER FOR | or substantial contributor | recipient PC | BIOMEDICAL RESEARCH | |
| NEURODEGENERATIVE DISEASES | NONE | | BIOMEDICKE KEDEKKEN | |
| ERKRANKUNGEN | | | | |
| VENUSBERG CAMPUS 1 GEBAUDE 990 | | | | |
| BONN, GERMANY 53127 | | | | 230,000. |
| | | | | |
| THE TACKGON LADODAMODY | NONE | PC | DIOMEDICAL DEGEARCH | |
| THE JACKSON LABORATORY 00260 COLLECTION CENTER DRIVE | NONE | FC | BIOMEDICAL RESEARCH | |
| CHICAGO, IL 60693 | | | | 369,940. |
| • | | | | <u>, , </u> |
| | | | | |
| THOMAS JEFFERSON UNIVERSITY | NONE | PC | BIOMEDICAL RESEARCH | |
| 901 WALNUT ST | | | | |
| PHILADELPHIA, PA 19107 | | | | 114,829. |
| | | | | |
| TRACE NEUROSCIENCE | NONE | PC | BIOMEDICAL RESEARCH | |
| 750 GATEWAY BLVD SUITE 200 | | | | |
| SOUTH SAN FRANCISCO, CA 94080 | | | | 110,000. |
| | | | | |
| FRANSLATIONAL GENOMICS RESEARCH | NONE | PC | BIOMEDICAL RESEARCH | |
| INSTITUTE 445 N 5TH ST | | | | |
| PHOENIX, AZ 85004 | | | | 125,000. |
| , | | | | , |
| | | | | |
| TRINITY COLLEGE DUBLIN | NONE | PC | BIOMEDICAL RESEARCH | |
| COLLEGE GREEN | | | | 02 620 |
| DUBLIN, IRELAND | | | | 93,628. |
| | | | | |
| TWILIGHT NEURO | NONE | PC | BIOMEDICAL RESEARCH | |
| 1013 CENTRE ROAD SUITE 403B | | | | |
| WILMINGTON, DE 19805 | | | | 118,150. |
| | | | | |
| TWIST BIOSCIENCE | NONE | PC | BIOMEDICAL RESEARCH | |
| 581 GATEWAY BLVD | NONE | | BIOMEDICKE KEDERKCH | |
| SOUTH SAN FRANCISCO, CA 94080 | | | | 100,000. |
| | | | | - |
| | | | | |
| JNIVERSIT LAVAL | NONE | PC | BIOMEDICAL RESEARCH | |
| 11 COTE DU PALAIS | | | | 21 551 |
| MONTREAL, CANADA QC G1R2J6 | | | | 34,554. |
| | | | | |
| UNIVERSITY COLLEGE LONDON | NONE | PC | BIOMEDICAL RESEARCH | |
| GOWER ST | | | | |
| LONDON, UNITED KINGDOM WC1E 6BT | | | | 665,617. |
| Total from continuation sheets | | | | |

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor UNIVERSITY OF ABERDEEN NONE NC BIOMEDICAL RESEARCH KINGS COLLEGE 260,688. ABERDEEN, UNITED KINGDOM AB24 3FX UNIVERSITY OF ALABAMA NONE PC BIOMEDICAL RESEARCH 739 UNIVERSITY BLVD TUSCALOOSA, AL 35487 263,543. UNIVERSITY OF ALBERTA BIOMEDICAL RESEARCH NONE NC 116 ST & 85 AVE EDMONTON, CANADA AB T6G 2R3 92,232. UNIVERSITY OF CALIFORNIA IRVINE NONE PC BIOMEDICAL RESEARCH 419 SOUTH CIRCLE VIEW DR IRVINE, CA 92697 260,000. UNIVERSITY OF CALIFORNIA SAN DIEGO NONE PC. BIOMEDICAL RESEARCH 9500 GILMAN DRIVE LA JOLLA, CA 92093 819,458. UNIVERSITY OF CALIFORNIA, SAN NONE PC BIOMEDICAL RESEARCH FRANCISCO 505 PARNASSUS AVE SAN FRANCISCO, CA 94143 761,472. UNIVERSITY OF EDINBURGH NONE NC BIOMEDICAL RESEARCH OLD COLLEGE SOUTH BRIDGE EDINBURGH, UNITED KINGDOM EH89YL 264,953. UNIVERSITY OF MASSACHUSETTS MEDICAL NONE PC BIOMEDICAL RESEARCH SCHOOL 55 NORTH LAKE AVENUE WORCESTER, MA 01655 368,693. UNIVERSITY OF MICHIGAN NONE ÞС BIOMEDICAL RESEARCH 500 S. STATE STREET ANN ARBOR, MI 48109 223,986. UNIVERSITY OF OXFORD NONE PC BIOMEDICAL RESEARCH OXFORD OX1 2JD OXFORD, UNITED KINGDOM 0X1 2JD 129,755.

Total from continuation sheets

| Part XIV | Supplementary Information | |
|----------|---------------------------|---|
| | | _ |

| Part XIV Supplementary Informati | on | | | |
|--|--|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the | e Year (Continuation) | _ | _ | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| | | | | |
| UNIVERSITY OF PITTSBURGH | NONE | PC | BIOMEDICAL RESEARCH | |
| 4200 FIFTH AVENUE | | | | |
| PITTSBURGH, PA 15260 | | | | 125,000. |
| | | | | |
| UNIVERSITY OF PUERTO RICO | NONE | PC | BIOMEDICAL RESEARCH | |
| PO BOX 365067 | | | | 102 200 |
| SAN JUAN, PR 00956 | | | | 103,390. |
| | | | | |
| UNIVERSITY OF SHEFFIELD | NONE | PC | BIOMEDICAL RESEARCH | |
| WESTERN BANK | | | | |
| SHEFFIELD, UNITED KINGDOM S10 2TN | | | | 227,051. |
| | | | | |
| UNIVERSITY OF STRASBOURG | NONE | PC | BIOMEDICAL RESEARCH | |
| 4 RUE BLAISE PASCAL | | | | |
| STRASBOURG, FRANCE 67081 | | | | 110,000. |
| UNIVERSITY OF ULM | NONE | PC | BIOMEDICAL RESEARCH | |
| CENTER FOR BIOMEDICAL RESEARCH | | | | |
| HELMHOLTZTRASSE 8/1 ULM, GERMANY | | | | |
| 89081 | | | | 218,000. |
| | | | | |
| UNIVERSITY OF VERMONT | NONE | PC | BIOMEDICAL RESEARCH | |
| 105 CARRIGAN DR | | | | |
| BURLINGTON, VT 05405 | | | | 77,922. |
| | | | | |
| VIB | NONE | PC | BIOMEDICAL RESEARCH | |
| RIJVISSCHESTRAAT 120 | | | | |
| GENT, BELGIUM 9052 | | | | 251,820. |
| | | | | |
| WASHINGTON UNIVERSITY | NONE | PC | BIOMEDICAL RESEARCH | |
| 1 BROOKINGS DR | | | | |
| ST. LOUIS, MO 63130 | | | | 199,876. |
| | | | | |
| WEIZMANN INSTITUTE OF SCIENCE | NONE | PC | BIOMEDICAL RESEARCH | |
| 234 HERZL STREET | | | | |
| REHOVOT, ISRAEL 7610001 | | | | 360,999. |
| | | | | |
| YALE UNIVERSITY | NONE | PC | BIOMEDICAL RESEARCH | |
| 206 ELM STREET | | | | |
| NEW HAVEN, CT 06511 | | | | 22,674. |
| Total from continuation sheets | | | | |

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Name

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

2024

TARGET ALS FOUNDATION INC

Employer identification number 81-0756743

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.

| F | Part I Required Annual Payment | | | | | | | | |
|----|--|---------|------------------------------|---------------|-------------|--------------|-------------------|-----|----------|
| | | | | | | | | | 50 244 |
| 1 | Total tax (see instructions) | | | | | | | 1 | 52,344. |
| 9. | 2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 | | | | | | | | |
| | b Look-back interest included on line 1 under section 460(b)(2) | | | | | | | - | |
| ٠ | contracts or section 167(g) for depreciation under the income | | | | 2b | | | | |
| | contracts of section for (g) for depreciation under the income | 1010 | oust motilou | | | | | - | |
| (| Credit for federal tax paid on fuels (see instructions) | | | | 2c | | | | |
| | I Total. Add lines 2a through 2c | | | | | | | 2d | |
| | Subtract line 2d from line 1. If the result is less than \$500, do | | | | | | | | |
| | does not owe the penalty | | | | | | | 3 | 52,344. |
| 4 | Enter the tax shown on the corporation's 2023 income tax retu | | | | | | | | |
| | or the tax year was for less than 12 months, skip this line and | ente | r the amount from line 3 c | n line 5 | | | | 4 | 5,671. |
| | | | | | | | | | |
| 5 | Required annual payment. Enter the smaller of line 3 or line | 4. If | the corporation is require | d to skip lii | ne 4, | | | | |
| | enter the amount from line 3 | | | | | | | 5 | 5,671. |
| ľ | Part II Reasons for Filing - Check the boxes belo even if it does not owe a penalty. See instructions. | w tha | at apply. If any boxes are o | checked, th | ie corpo | ration | must file Form 22 | 220 | |
| 6 | The corporation is using the adjusted seasonal installr | nent | method. | | | | | | |
| 7 | The corporation is using the annualized income install | | | | | | | | |
| 8 | X The corporation is a "large corporation" figuring its firs | st req | uired installment based o | n the prior | year's t | ax. | | | |
| F | Part III Figuring the Underpayment | | | | | | | | |
| | | | (a) | | (b) | | (c) | | (d) |
| 9 | 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 | 05/15/24 | 06/ | <u> 15/</u> | 24 | 09/15/ | 24 | 12/15/24 |
| 10 | Required installments. If the box on line 6 and/or line 7 | | | | | | | | |
| | above is checked, enter the amounts from Sch 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, | | 1 410 | 2 | 4 7 | - 4 | 12.0 | 0.0 | 12 006 |
| | enter 25% (0.25) of line 5 above in each column | 10 | 1,418. | | 4,7 | 54. | 13,0 | 86. | 13,086. |
| 11 | Estimated tax paid or credited for each period. For | | | | | | | | |
| | column (a) only, enter the amount from line 11 on line 15. | | | | | | | | |
| | See instructions | 11 | | | | | | | |
| | 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 | | | | | | | |
| | Add lines 11 and 12 | 13 | | | | | | | |
| | Add amounts on lines 16 and 17 of the preceding column | 14 | | | 1,4 | 18. | 26,1 | 72. | 39,258. |
| | Subtract line 14 from line 13. If zero or less, enter -0- | 15 | 0. | | | 0. | | 0. | 0. |
| | If the amount on line 15 is zero, subtract line 13 from line | | | | | | | - | |
| - | 14. Otherwise, enter -0- | 16 | | | 1,4 | 18. | 26,1 | 72. | |
| 17 | Underpayment. 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 | 1,418. | 2 | 4,7 | 5 <u>4</u> . | 13,0 | 86. | 13,086. |
| 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 | | | | | | | |
| Go | to Part IV on page 2 to figure the penalty. Do not go to Part IV | / if th | ere are no entries on line | e 17 - no p | enalty | s owe | i. | | |

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2024)

Page 2

Part IV Figuring the Penalty

| | | | (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. (C corporations with tax years ending June 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 4/15/2024 and before 7/1/2024 | 21 | | | | |
| 22 | Underpayment on line 17 x Number of days on line 21 x 8% (0.08) | 22 | \$ | \$ | \$ | \$ |
| 23 | Number of days on line 20 after 6/30/2024 and before 10/1/2024 | 23 | | | | |
| 24 | Underpayment on line 17 x Number of days on line 23 x 8% (0.08) | 24 | \$ | \$ | \$ | \$ |
| 25 | Number of days on line 20 after 9/30/2024 and before 1/1/2025 | 25 | | | | |
| 26 | Underpayment on line 17 x Number of days on line 25 x 8% (0.08) | 26 | \$ | \$ | \$ | \$ |
| 27 | Number of days on line 20 after 12/31/2024 and before 4/1/2025 | 27 | SEE | ATTACHED W | ORKSHEET | |
| 28 | Underpayment on line 17 x Number of days on line 27 x 7% (0.07) | 28 | \$ | \$ | \$ | \$ |
| 29 | Number of days on line 20 after 3/31/2025 and before 7/1/2025 | 29 | | | | |
| 30 | Underpayment on line 17 x Number of days on line 29 x *% 365 | 30 | \$ | \$ | \$ | \$ |
| 31 | Number of days on line 20 after 6/30/2025 and before 10/1/2025 | 31 | | | | |
| 32 | Underpayment on line 17 x Number of days on line 31 x *% 365 | 32 | \$ | \$ | \$ | \$ |
| 33 | Number of days on line 20 after 9/30/2025 and before 1/1/2026 | 33 | | | | |
| 34 | Underpayment on line 17 x Number of days on line 33 x *% | 34 | \$ | \$ | \$ | \$ |
| 35 | Number of days on line 20 after 12/31/2025 and before 3/16/2026 | 35 | | | | |
| 36 | Underpayment on line 17 x Number of days on line 35 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 the to line for other income tax returns | tal he | ere and on Form 1120, lin | e 34; or the comparable | 38 | \$ 2,855. |

^{*} 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 800-829-4933 to get interest rate information.

Form **2220** (2024)

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

| Name(s) | | | | Identifying N | umber |
|------------------------|--------------|-----------------|--------------------|---------------|---------|
| TARGET ALS | FOUNDATION 1 | INC | | 81-07 | 56743 |
| (A) | (B) | (C) Adjusted | (D) Number Days | (E) Daily | (F) |
| *Date | Amount | Balance Due | Balance Due | Penalty Rate | Penalty |
| | | -0- | | | |
| 05/15/24 | 1,418. | 1,418. | 31 | .000218579 | 10 |
| 06/15/24 | 24,754. | 26,172. | 92 | .000218579 | 526 |
| 09/15/24 | 13,086. | 39,258. | 91 | .000218579 | 781 |
| 12/15/24 | 13,086. | 52,344. | 16 | .000218579 | 183 |
| 12/31/24 | 0. | 52,344. | 135 | .000191781 | 1,355 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| enalty Due (Sum of Col | umn F). | | | | 2,855 |

^{*} Date of estimated tax payment, withholding credit date or installment due date.

412511 04-01-24

| FORM 990-PF | DIVIDENDS | S AND INTER | EST | FROM SECUR | ITIES S' | PATEMENT 1 |
|---|----------------------|---------------------------------|------|-------------------------------|-----------------------------------|-------------------------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| FIDELITY JP MORGAN | 2,039,016 385,634 | | 0. | 1,815,966. 385,634. | 1,815,966. 385,634. | |
| TO PART I, LINE 4 | 2,424,650 | 223,05 | 0. | 2,201,600. | 2,201,600. | |
| FORM 990-PF | | LEGAL | FE | ES | S | PATEMENT 2 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | NE' | (B) T INVEST- NT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| LEGAL COUNSEL EXPE | NSE | 43,324. | | 0. | | 43,324. |
| TO FM 990-PF, PG 1 | , LN 16A | 43,324. | | 0. | | 43,324. |
| FORM 990-PF | | ACCOUNTI | NG 1 | FEES (B) | (C) | ratement 3 |
| DESCRIPTION | | EXPENSES PER BOOKS | | T ÌNVEST- NT INCOME | ADJUSTED NET INCOME | CHARITABLE PURPOSES |
| ACCOUNTING | | 53,628. | | 0. | | 53,628. |
| TO FORM 990-PF, PG | 1, LN 16B | 53,628. | - | 0. | | 53,628. |
| FORM 990-PF | 07 | THER PROFES | SIO | NAL FEES | S | FATEMENT 4 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | (B) T INVEST- NT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| LOBBYING OTHER PROFESSIONAL INVESTMENT FEES | FEES | 210,000. 431,680. 77,119. | | 0. 0. 77,119. | | 210,000. 431,680. |
| TO FORM 990-PF, PG | 1, LN 16C | 718,799. | | 77,119. | | 641,680. |
| | = | | | | | |

| FORM 990-PF | OTHER E | XPENSES | STATEMENT 5 | | |
|--|--|-----------------------------------|-------------------------------|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| ADVERTISING AND PROMOTION OFFICE EXPENSES MEALS TELEPHONE AND INTERNET RESEARCH EXPENSES | 158,606. 150,143. 20,325. 82,159. 3,591,024. | 0. 0. 0. | | 158,606. 150,143. 20,325. 82,159. 3,591,024. | |
| TO FORM 990-PF, PG 1, LN 23 | 4,002,257. | 0. | | 4,002,257. | |

| FORM 990-PF OTHER | DECREASES IN NET ASSET | S OR FUND BALANCES | STATEMENT 6 |
|---------------------------------------|------------------------|--------------------|-------------------------|
| DESCRIPTION | | | AMOUNT |
| PRIOR PERIOD ADJUSTME UNREALIZED GAIN | CNT | | 77,024,832. 576,981. |
| TOTAL TO FORM 990-PF, | PART III, LINE 5 | | 77,601,813. |
| FORM 990-PF | CORPORATE S | | STATEMENT 7 |
| | | | |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| PUBLICLY TRADED SECUR | ITIES | 68,783,323. | 68,783,323. |
| TOTAL TO FORM 990-PF, | PART II, LINE 10B | 68,783,323. | 68,783,323. |

| | PART VII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS | | | | | |
|--|---|----------|---------------------------------|---------|--|--|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE | | |
| ALLISON JAFFIN 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| ANDY BERNDT 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| CHRIS HENDERSON 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| MANISH RAISINGHANI 244 MADISON AVE #1025 NEW YORK, NY 10016 | PRESIDENT 40.00 | 400,414. | 38,081. | 0. | | |
| KENNETH DEVANEY 244 MADISON AVE #1025 NEW YORK, NY 10016 | TREASURER 40.00 | 286,188. | 32,369. | 0. | | |
| DANIEL L. DOCTOROFF 244 MADISON AVE #1025 NEW YORK, NY 10016 | CHAIR 1.00 | 0. | 0. | 0. | | |
| JOHN DUNLOP 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| ZACH W. HALL 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| STORY LANDIS 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |
| RICHARD HARGEAVES 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. | | |

| TARGET ALS FOUNDATION INC | | | 81 | 0756743 |
|--|----------------------|----------|---------|---------|
| CAROLE HO 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| STACIE WENINGER 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| SARA SHEIKH 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| ALISA DOCTOROFF 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| BRAD S. KARP 244 MADISON AVE #1025 NEW YORK, NY 10016 | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VII | 686,602. | 70,450. | 0. |