₀m **930-P**F

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

1912

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

	r calen	dar year 2019 or tax year beginning Augus	t 19 , 201	9, and e		December 31	, 2 0 19
The	a Mark s	and Mimi Jergens Charitable Foundation				84-2771985	
		street (or P O box number if mail is not delivered to street address)	Roon	n/suite	B Telephon	e number (see instruct	ions)
186	55 Terry	v Lane				406-370-6563	
City	or town,	, state or province, country, and ZIP or foreign postal code	<u> </u>		C If exempt	ion application is pend	
Vic	ior, MT	59875				or approaches to post-	
			n of a former public	charity	D 1. Foreign	n organizations, check	here ▶ □
	;	☐ Final return ☐ Amended		·		n organizations meeting	_
	,	Address change Name cha	nge	,		here and attach comp	
H	Check	type of organization.	rivate foundation	a		foundation status was	terminated under
	Section	on 4947(a)(1) nonexempt charitable trust 🔲 Other tax	kable private found	dation	section 5	07(b)(1)(A), check here	▶ 🗆
ı		narket value of all assets at J Accounting method	l: 🗹 Cash 🗌 A	ccrual	F If the four	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), chec	k here ▶ 🗌
	line 16		e on cash basis.)	لــــــ			
F	art I	Analysis of Revenue and 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		investment come	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
ফু	1	Contributions, gifts, grants, etc., received (attach schedule)	49.100	10.0			
CANNED	2	Check ► ☐ If the foundation is not required to attach Sch. B					
Ž	3	Interest on savings and temporary cash investments			6		
í	4	Dividends and interest from securities			62	SEP 2 1 2020	
Ö	5a	Gross rents			<u> @</u>		5-12 III
	b	Net rental income or (loss)	woodman ann human na a straighter	3/433			
MAR 0 82022	6a	Net gain or (loss) from sale of assets not on line 10			15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	b	Gross sales price for all assets on line 6a		100			
	7	Capital gain net income (from Part IV, line 2)	and property of the		O Section of the section		
<u>س</u>	8	Net short-term capital gain		74.5		0	
<u> </u>	9	Income modifications		77	Tobales Tunumillanian.	indepoint of the water to him to a second of the	
, ~	10a	Gross sales less returns and allowances			Market - Cont	esaeneminadorismondifición (Allendorismon)	
	b	Less: Cost of goods sold		347445703			7165462312546378432
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)			Para Maria		
	12	Total. Add lines 1 through 11	49 100	-			
_	13	Compensation of officers, directors, trustees, etc.	49,100	<u> </u>			litar da se promovini della distrib
Expenses	14	Other employee salaries and wages					
ű	15	Pension plans, employee penetrish CORRES				 	
ğ	16a	Legal fees (attach schedule): OSC - 02		REC	EIVEL	7	
_	b	Legal fees (attach schedule)		1	 	70	
.≚	С	Other professional fees (attach sandalle)		, ·	\		
ī	17	interest	6	APR_	1 3 2021	J	
is	18	Taxes (attach schedule) (see instructions)				8	
Ē	19	Depreciation (attach schedule) and depletion		OGD	EN TI	<u> </u>	
Ā	20	Occupancy	<u> </u>	902	<u> </u>		· · · · · · · · · · · · · · · · · · ·
ğ	21	Travel, conferences, and meetings			,		
<u> </u>	22	Printing and publications				-	
ing	23	Other expenses (attach schedule)	290	1		7 .	290
ati	24	Add lines 13 through 23	290		_	· ·	_
Operating and Administrative	25	Contributions, gifts, grants paid	6,120	V. 10			6,120
ō	26	Total expenses and disbursements. Add lines 24 and 25	6,410	ag call age	V Charlest Control of the Control of	CASA PARTIES AND A CONTRACTOR OF THE PARTIES AND A CONTRACTOR OF THE PARTIES AND A CONTRACTOR OF THE PARTIES A	6,410
_	27	Subtract line 26 from line 12	0,410	PS OF			5,410
	а	Excess of revenue over expenses and disbursements	42,690				
	Ь	Net investment income (if negative, enter -0-)	3.453-248230Q	2-2/2/02/02/02/0	, , , , , , , , , , , , , , , , , , ,		CHARLEMAN
	C	Adjusted net income (if negative, enter -0-)		製建築計	25 Y 17 TA		

XI

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2019)

Cat No 11289X

Pa	ırt 🗓	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
•		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		42,690	42,690
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	anin danahalan di 1977 di 1972 di 1972 Anglia di 1972	The Carles of the Control of the Con	
•		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶		* /- June 4-200 - 120 -	253141555111441201
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	Malanana Allanas (1900) (1900) (1900)		
		Less. allowance for doubtful accounts ▶		•	
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶	The state of the s		
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			-
	14	Land, buildings, and equipment basis ▶	none conserve regarding the facility and		
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the		,	
		instructions. Also, see page 1, item I)		42,690	42,690
	17	Accounts payable and accrued expenses			
10	18	Grants payable	,	-	2142572574
ě	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			TO PERSONAL PROPERTY OF THE PARTY OF THE PAR
iab	21	Mortgages and other notes payable (attach schedule)			对对这种保护。
_	22	Other liabilities (describe ►)			建工工作的
	23	Total liabilities (add lines 17 through 22)	,		- Light Action of the Committee
S		Foundations that follow FASB ASC 958, check here ► ✓			
Balances		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions		42,690	
Ва	25	Net assets with donor restrictions			
ק	İ	Foundations that do not follow FASB ASC 958, check here ▶			
בַּ		and complete lines 26 through 30.			
Ĭ	26	Capital stock, trust principal, or current funds			STATE STATE OF
Net Assets or Fun	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
šet	28	Retained earnings, accumulated income, endowment, or other funds		<u> </u>	37405 Nr. 223.05
Ş	29	Total net assets or fund balances (see instructions)		42,690	
it/	30	Total liabilities and net assets/fund balances (see			
ž		instructions)		42,690	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	Il net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	st agree with	
		-of-year figure reported on prior year's return)			0
2		er amount from Part I, line 27a			42,690
3		er increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	42,690
5	Deci	reases not included in line 2 (itemize) ▶		5	
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29 6	42,690

Part	V Capital Gains and	d Losses for Tax on Investr	nent Income					
:		nd(s) of property sold (for example, real e ise, or common stock, 200 shs MLC Co	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)			
1a	N/A							
b					_			
<u>C</u>								
<u>d</u>								
<u>е</u>								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	(h) Gain or (loss) ((e) plus (f) minus (g))			
<u>a</u>								
<u> </u>								
<u>с</u>			· ·					
<u>d</u>								
е	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/60				
	Complete only for assets site		i			l (h) gain minus it less than -0-) or		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		from col (h))		
a								
<u>b</u>								
<u>C</u>								
<u>d</u>								
е			<u></u>					
2	Capital gain net income o		also enter in Pa), enter -0- in Pa		2			
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	uctions. If (loss)					
				<i>)</i>	3			
Part		ler Section 4940(e) for Reduvate foundations subject to the						
If sect	tion 4940(d)(2) applies, leav				4	Yes □ No		
	s," the foundation doesn't o	qualify under section 4940(e). Do	o not complete t	his part.		. Tes [] No		
1		ount in each column for each ye	ar; see the instri	uctions before m				
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	ns Net value o	(c) f noncharitable-use a	ssets Dis	(d) stribution ratio divided by col. (c))		
	2018							
	2017							
	2016							
	2015				<u> </u>			
	2014					<u>.</u>		
								
2	Total of line 1, column (d)				. 2	·····		
3		for the 5-year base period—di oundation has been in existence						
4	Enter the net value of non	acharitable-use assets for 2019	from Part X, line	5	. 4			
5	Multiply line 4 by line 3				. 5			
6	Enter 1% of net investme	nt income (1% of Part I, line 27t	o)		. 6			
7	Add lines 5 and 6				. 7			
8		ons from Part XII, line 4						
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box i	n Part VI, line 1b	o, and complete	that part using a	1% tax rate. See the		

	0-PF (2019)			age 4	
Part		instru	ıctio	ns)	
. 1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1% of Part I, line 27b			4	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0	
3 4	Add lines 1 and 2				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			<u>_</u>	
6	Credits/Payments:	HPHIPH			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a				
b	Exempt foreign organizations—tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
_d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d				
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10				
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax Refunded 11				
	VII-A Statements Regarding 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 any political campaign?	1a	Yes	No ✓	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		→	
	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.				
c	Did the foundation file Form 1120-POL for this year?	1c	10° 505	Creati	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	BEET!			
е	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
Ū	on foundation managers. ► \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		APREMIER I	
	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			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		√	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	L		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	S SANGERO	AND THE REPORT AND	
6	If "Yes," attach the statement required by <i>General Instruction T</i> . Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
0	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			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	描言	737		
	Montana				
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) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	→		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	F EE			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		,		,
10	complete Part XIV	9	-		•
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	✓		

Fart	Statements Regarding Activities (continued)	Fall 100007-30002		
٠			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		,
13	person had advisory privileges? If "Yes," attach statement. See instructions	12		
10	Website address ► N/A	. 10		
14		6-370-6	563	• • • • •
		9875-96	97	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	res	NO ✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	3		
	the foreign country ►	14.5		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	2005415	V I	
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly):		Yes	No
Ia	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		4.7	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes . No		. 77	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No (5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No", if the			
	foundation agreed to make a grant to or to employ the official for a period after			
b	termination of government service, if terminating within 90 days.)			
D	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		e Mari	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2019?	1c	poekto Pir	Patroffinad
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		46	
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	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			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b	1000 C	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		✓

್ಝPart	°VII-B	Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	e d (contii	nued)		
√5a	During	the year, did the foundation pay or incur	any am	ount to.				·		Yes No	_
•		ry on propaganda, or otherwise attempt t		-			•	☐ Yes	✓ No		I
		uence the outcome of any specific public		on (see secti	on 495	5), or to ca	arry on,				
		ectly or indirectly, any voter registration dr						☐ Yes	✓ No		H
		vide a grant to an individual for travel, stu		,				☐ Yes	✓ No		
		vide a grant to an organization other than tion 4945(d)(4)(A)? See instructions		rıtable, etc., .	-			Yes	☑ No		
	pur	vide for any purpose other than religious poses, or for the prevention of cruelty to c	children	or animals?				□Yes	☑ No		
b	If any a ın Regi	answer is "Yes" to 5a(1)-(5), did any of th ulations section 53.4945 or in a current no	ne trans itice reg	sactions fail t garding disas	o qualit ter assi	y under the stance? Se	e excep ee instri	otions des	cribed	5b	
	Organi	zations relying on a current notice regardi	ng disa	ster assistan	ce, che	ck here .			``		
C		inswer is "Yes" to question 5a(4), does t			10		the tax				H
	becaus	e it maintained expenditure responsibility	for the	grant?	. N	#···		☐ Yes	☐ No		
		" attach the statement required by Regula									
6a		foundation, during the year, receive any					emiums	_			H
	•	ersonal benefit contract?						∐ Yes	_ ☑ No	ADDRESS OF THE PERSON NAMED IN COLUMN 1	
b		foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b / /	M
7a		' to 6b, file Form 8870. time during the tax year, was the foundation	o narti	to a probibit	nd tay o	haltar tranc	action?	□ voo	□No		
		" did the foundation receive any proceed:	-						_	7b	
8		oundation subject to the section 4960 ta		-				ansaction			M
•		eration or excess parachute payment(s) du						□Yes	√ No		
Par	t VIII	Information About Officers, Direc								the different distribution for second	323
_		and Contractors					•	•			
1	List all	officers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation. S	ee instru	ictions	j. r	_
		(a) Name and address	hou	e, and average rs per week ed to position	i (lf r	mpensation iot paid, ter -0-)	emplo	Contributions yee benefit erred compe	plans	(e) Expense account other allowances	
Mark J	lergens										_
1865 T	erry Lan	e, Victor, MT, 59875	2			0			0		0
Mimi J	ergens	•••••									
		e, Victor, MT, 59875	1			. 0			0		0
	Jergens										
500 Fa	untleroy	Way, #304, Seattle, WA	1			0			0		0
		1									
2	Compo	ensation of five highest-paid employee	es (oth	er than thos	se incli	uded on li	ne 1—:	see instr	uction	s). If none, ente	- r
	(a) Name a	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	sation	(d) Contribution (d) Co	benefit leferred	(e) Expense account other allowances	
None											
											_
											_
											
										<u> </u>	_
											
											-
			•								
Total	number	of other employees paid over \$50,000 .							. •		-
		z. zs. dpioyeco paid over 400,000 .	• •	· · · · ·		· · · ·	• •	<u> </u>	• -		_

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empand Contractors (continued)	ployees,
`3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE.	"
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
	number of others receiving over \$50,000 for professional services	
	IX-A Summary of Direct Charitable Activities	
Lis	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Scholarships	
		2,000
2	charitable gifts to non-profit agencies	
		•
_		4,120
3		
4		
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	None	
2		
All	other program-related investments. See instructions	
3		
		-
lota	. Add lines 1 through 3	000 DF

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part		oundation	าร
	and certain foreign organizations, check here ▶ 📈 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		······
	line 1	7	
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	6,410
b	Program-related investments—total from Part IX-B	1b	0,410
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	6,410
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	0,410
·	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	y whether	the foundation

Part ^e	XIII Undistributed Income (see instruction	ons)			
•		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				
2 a	Undistributed income, if any, as of the end of 2019			and the state of t	
b	Total for prior years 20, 20, 20		0		
· 3 a	Excess distributions carryover, if any, to 2019: From 2014				
b	From 2016				
d e	From 2017				
f 4	Total of lines 3a through e	0			
· a	line 4. ► \$ 6,410 Applied to 2018, but not more than line 2a.			justiniponys, was conser subject of protestitions, which	
b	Applied to undistributed income of prior years (Election required—see instructions)	A Comment of the Comm	· O		
C	Treated as distributions out of corpus (Election required—see instructions)	0			
d e	Applied to 2019 distributable amount Remaining amount distributed out of corpus	6,410			
5.	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			- "I" "I" "I"
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,410			
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	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				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				,
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2015				
b	Excess from 2016				
C	Excess from 2017	midratum irradionalii ildingrootsi seeta.			
d	Excess from 2018				
e	Excess from 2019				

,Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A guestion 9)	
	If the foundation has received a ruling				<u> </u>	
	foundation, and the ruling is effective fo				A	2010
b	Check box to indicate whether the fou	*	•			(19, 2019 (3) or
2a	Enter the lesser of the adjusted net	Tax year	perating roundar	Prior 3 years	,c.ioii 💽 4942(j)	(3) Or 4942()(3)
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return-from Part X for each year listed			(0) 2017	(4) 2010	
h	85% of line 2a	0		2	<u> </u>	0
	Qualifying distributions from Part XII,			,		
•	line 4, for each year listed	6 410				
d	Amounts included in line 2c not used directly for active conduct of exempt activities	6,410				6,410
	•					_
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	6,410				6,410
3	Complete 3a, b, or c for the alternative test relied upon					5,710
а	"Assets" alternative test—enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
С	"Support" alternative test—enter				-	
	(1) Total support other than gross investment income (interest, dividends, fents, 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					
D 4	(4) Gross investment income	/0 !				<u> </u>
Part		• •	•	ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		IS.)	<u> </u>		
1 a	Information Regarding Foundation List any managers of the foundation before the close of any tax year (but of	who have contribu				by the foundation
		only if they have co	mimbated more th	an \$5,000). (See Si	ection 507 (a)(2).)	
	nd Mimi Jergens List any managers of the foundation	who own 100/ or	more of the eter	ok of a corneration	/or on oqually la	rae portion of the
J	ownership of a partnership or other e					rgo portion of the
BI/A	ownership or a partitioner per out of	inity) or willow the	iodilodiloli ilas a	1070 or greater inte	Ji Odi.	
<u>N/A</u> 2	Information Regarding Contribution Check here ▶ ☐ If the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in	only makes controundation makes	butions to prese	lected charitable of		
а	The name, address, and telephone no	umber or email add	dress of the person	n to whom applica	tions should be a	ddressed.
N/A						
b	The form in which applications should	d be submitted and	Information and	materials they sho	uld ınclude:	
N/A						
С	Any submission deadlines					
N/A d	Any restrictions or limitations on av	vards, such as by	geographical ar	eas, charitable fie	elds, kinds of ins	titutions, or other
N/A	factors					

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or status of Amount contribution recipient Name and address (home or business) Paid during the year building fund 750 **Victor Volunteer Fire Department Hospice of Dayton** memorial 100 100 electricity for indigents locally **Energy Share of Montana** 165 Ravalli County Museum program support Soroptimists of Hamilton program suppoprt 105 **Rotary International** polio plus program 1,000 2,000 scholarships **Hamilton Rotary Foundation** 500 **Hamilton Rotary Foundation** backpack program **Daly Hospital Foundation** program support 1,000 SAFE program support 200 **Rocky Mountain Elk Foundation** program support 100 gift card for SAFE Christmas prog 50 **KMart** gift card for SAFE Christmas prog **Super One grocery** 50 6,120 Approved for future payment None

Par	t XV	Analysis of Income-Producing Ac	tivities				
nte	gros	s amounts unless otherwise indicated.		(b)	Excluded by secti	on 512, 513, or 514 (d)	Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions.)
1	_	ram service revenue:					,
	a _						
	b _						
	c _ d				<u> </u>		
	ч е						
	- f			-			
	g F	ees and contracts from government agencies					
2		bership dues and assessments					
3	Inter	est on savings and temporary cash investments					
4	Divid	dends and interest from securities					
5	Neti	rentál incôme or (loss) from real estate:				lessikjentaaniddigaagerynager igases germanniddigalethilderessynger eeste	
		Debt-financed property					
		Not debt-financed property					
		rental income or (loss) from personal property			ļ		
		er investment income					
		or (loss) from sales of assets other than inventory					-
		income or (loss) from special events					
		ss profit or (loss) from sales of inventory	<u> </u>				
11	_	er revenue. a	-				
	b _						
					 		-
	_						
	d_						
12	e _						
	e _ Subt	total. Add columns (b), (d), and (e)				13	
13	e _ Subt	total. Add columns (b), (d), and (e)) (
13 See	e _ Subt Tota work	total. Add columns (b), (d), and (e)	ıs.)				C
13 See Par Lin	e _ Subt Tota work	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(
13 See Pai	e _ Subt Tota work t XV e No.	total. Add columns (b), (d), and (e)	ıs.) \ccomplishm	ent of Exemp	ot Purposes	13	(

,Part	XVII	Information Organization		insfers to and Tra	nsactions and	Relationshi	ps With N	oncharitab	le Exem	pt
1 a	in sectorganized Transfe	tion 501(c) (o cations?	ther than section	engage in any of the solution	itions) or in se	ction 527, re			Yes N	
b	(2) Oth Other t (1) Sale (2) Pur (3) Rer (4) Rer (5) Loa	ner assets . ransactions. es of assets to chases of asset ntal of facilities, mbursement arans or loan gua	a noncharitable exits from a noncharitequipment, or otherangements rantees	kempt organization Itable exempt organi Iter assets	zation			1a(2 1b(1 1b(2 1b(3 1b(4 1b(5)		′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′
c d	If the a	inswer to any of the goods, of	of the above is "Y ther assets, or sen	lists, other assets, or es," complete the for vices given by the re gement, show in col	ollowing schedule eporting foundate	e. Column (b) on. If the found	should alwa	ays show the	ı faır mark	et
(a) Line	Is the		ectly or indirectly	affiliated with, or resection 501(c)(3)) or ii	lated to, one or		mpt organi	zations	rangements /es ✓ N	
b			following schedul					of relationship		_
Sign	correct,	penalties of perjury, I and complete Decl	aration of preparer (other	ned this return, including actithan taxpayer) is based on a	Il information of which p	and statements, and	d to the best of welledge	my knowledge and May the IRS disc with the preparer See instructions	cuss this retu	rn 17
Paid Prep Use	arer Only	Print/Type preparer Firm's name		Preparer's signature		Date		The print of the p		_

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

The Mark and Mimi Jergens Charitable Foundation

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2019

Employer identification number 84-2771985

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 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 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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, 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

990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Name of organization
The Mark and Mimi Jergens Charitable Foundation

Employer identification number 84-2771985

Part I	Contributors (see instructions).	Use duplicate copies of Part	I if additional space is needed.
Parti	Contributors (see instructions).	Ose duplicate copies of Fart	i il additional space is need

(a) . No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Mark and Mimi Jergens 1865 Terry Lane Victor, MT 59875-9697	\$49,100	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
······		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization
The Mark and Mimi Jergens Charitable Foundation

Employer identification number 84-2771985

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	■N/A∌	\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

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ne bf or	ganization		Employer identification numl		
	nd Mimi Jergens Charitable Foundation		84-2771985		
rt III	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the years.	e year from any one contribuns completing Part III, enter the vear. (Enter this information once	ns described in section 501(c)(7), (8), or itor. Complete columns (a) through (e) and total of exclusively religious, charitable, educe. See instructions)		
) No.	Use duplicate copies of Part III if addition				
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	:N/A				
		(e) Transfer of gift			
Ì					
-	Transferee's name, address, and	ZIP + 4 Re	lationship of transferor to transferee		
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, 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		
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
) No.	(b) Diversor of with	(a) Hop of mift	(d) Description of hour wife in hal		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel		

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee