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

OMB No. 1545-0047 Open to Public Inspection

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.

For	calend	dar year 2023 or tax year beginning ,	and ending				
N	ame of f	oundation			A Empl	loyer identification nur	nber
_					0.0	1 600 500	
<u></u>	<u>lerj</u>	ent Foundation and street (or P.O. box number if mail is not delivered to street		/ · it -		-1623599	
		in Street SE, Suite 300	address) Ro	oom/suite		hone number (see instr L - 4 9 5 - 0 9 4 4	ucuons)
C	ity or tov	wn, state or province, country, and ZIP or foreign postal code					
N	íinn	eapolis MN 55414			C If exe	emption application is pe	nding, check here
			ırn of a former public	charity	D 1. Fo	reign organizations, che	eck here
		Final return Amended	l return	•	2. Fo	reign organizations mee	etina the
		Address change Name ch	ange			% test, check here and	
н	Check t	type of organization: X Section 501(c)(3) exempt priva	te foundation		E If priv	vate foundation status w	as terminated under
ì		n 4947(a)(1) nonexempt charitable trust Other taxab				on 507(b)(1)(A), check h	
I F		rket value of all assets at J Accounting method:		rual	F If the	foundation is in a 60-mo	onth termination
		ear (from Part II, col. (c), Other (specify)				r section 507(b)(1)(B), c	
	ne 16)	\$ 99,735 (Part I, column (d), mus					
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Not in	(actment	(a) Adjusted not	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily eq the amounts in column (a) (see instructions).)	ual expenses per books	(b) Net invinco		(c) Adjusted net income	purposes
							(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	68,000				
	3	Check if the foundation is not required to attach Sch. B					
	4	Interest on savings and temporary cash investments Dividends and interest from securities					
	5a						
a)	b	Gross rents Net rental income or (loss)					
ž	6a	Net gain or (loss) from sale of assets not on line 10					
ē	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
_	8	Net short-term capital gain			-	0	
	9	Income modifications					
	10a	Gross sales less returns and allowances	To 2				
	b	Less: Cost of goods sold	1				
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	68,000		0	0	
ès	13	Compensation of officers, directors, trustees, etc.	0				
Expense	14	Other employee salaries and wages					
ğ	15	Pension plans, employee benefits					
_	16a	Legal fees (attach schedule)					
Ş	b	Accounting fees (attach schedule) Stmt 1	1,225		612		613
ati	С	Other professional fees (attach schedule)					
st	17	Interest					
Ξ	18	Taxes (attach schedule) (see instructions)					
and Administrative	19	Depreciation (attach schedule) and depletion					
Ă	20	Occupancy					
Б	21	Travel, conferences, and meetings					
	22	Printing and publications Other expenses (att. sch.) Stmt 2	25		12		13
ij	23 24	Total operating and administrative expenses.	25		12		13
rat	24	A -l -l II 40 H	1,250		624	o	626
Operating	25	O - 125 P - 2 - 25	40,100		024	U	40,100
0	26	Total expenses and disbursements. Add lines 24 and 25	41,350		624	0	40,726
	27	Subtract line 26 from line 12:	11,330		7 <u>-</u> 1	V ₁	30,720
	a	Excess of revenue over expenses and disbursements	26,650				
	b	Net investment income (if negative, enter -0-)	-,-30		0		
	C	Adjusted net income (if negative, enter -0-)				0	

I	Part l			End o	f year
		should be for end-of-year amounts only. (See instruction	(a) book value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	73,085	99,735	99,735
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		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 (att. schedule)			
		Less: allowance for doubtful accounts 0			
တ	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		\	
		Less: accumulated depreciation (attach sch.)			
	12	Investments — mortgage loans			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the			
		instructions. Also, see page 1, item I)	73,085	99,735	99,735
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>ë</u>	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			
┙	23	Total liabilities (add lines 17 through 22)	0	0	
ß		Foundations that follow FASB ASC 958, check here			
nces		and complete lines 24, 25, 29, and 30.			
au	24	Net assets without donor restrictions	73,085	99,735	
Ва	25	Net assets with donor restrictions			
ğ		Foundations that do not follow FASB ASC 958, check here			
Net Assets or Fund Bala		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds			
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
se	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	Total net assets or fund balances (see instructions)	73,085	99,735	
et	30	Total liabilities and net assets/fund balances (see			
_		instructions)	73,085	99,735	
	Part I			T T	
1		net assets or fund balances at beginning of year — Part II, column (a), line 29	-	_	50.00
_		of-year figure reported on prior year's return)			73,085
		r amount from Part I, line 27a			26,650
		r increases not included in line 2 (itemize)			00 705
		lines 1, 2, and 3			99,735
		eases not included in line 2 (itemize)			99,735
р	ıotal	net assets or fund balances at end of year (line 4 minus line 5) — Part II, colu	ιιιι (ɒ), ιιπe ∠9	6	

Pa	art IV Capital Gains ar	<u>nd Losses for Tax on Investi</u>	ment Income			
	(a) List and describe the k 2-story brick wareho	ind(s) of property sold (for example, real euse; or common stock, 200 shs. MLC Co.	estate,)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A					
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale	(h) Gain ((e) plus (f)	or (loss) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets showin	g gain in column (h) and owned by th	e foundation on 12	/31/69.	(I) Gains (Col.	(h) gain minus
	(i) FMV as of 12/31/69	(i) Adjusted basis (k) Evoes of col (i)				
а						
b						
С						
d						
е						
2	Capital gain net income or (net	If (loss), enter -0-	in Part I, line 7		2	
3	. •	loss) as defined in sections 1222(5) a 8, column (c). See instructions. If (los	` '			
	<u> </u>				3	
Pa		ed on Investment Income (S		, 4940(b), or 49	48—see instruc	ctions)
1a	Exempt operating foundations	described in section 4940(d)(2), chec	k here and en	ter "N/A" on line 1.		
	Date of ruling or determination	letter: (attach cor	y of letter if neces	ssary — see instru	ctions) 1	
b		enter 1.39% (0.0139) of line 27b. Exe				
	4% (0.04) of Part I, line 12, col.	(b)				
2		tic section 4947(a)(1) trusts and taxal		y; others, enter -0-)	2	0
3	Add lines 1 and 2				3	
4	Subtitle A (income) tax (domes	tic section 4947(a)(1) trusts and taxa	ble foundations onl	y; others, enter -0-)	4	0
5		ome. Subtract line 4 from line 3. If ze			5	0
6	Credits/Payments:					
а	2023 estimated tax payments a	and 2022 overpayment credited to 20	23 6	a		
b	Exempt foreign organizations -	tov withhold at accurac	61	b		
С		tension of time to file (Form 8868)		С		
d	Backup withholding erroneousl		. م	d		
7	Total credits and payments. Ac	ld lines 6a through 6d			7	
8		yment of estimated tax. Check her	if Form 2220 is atta	ached	8	
9		and 8 is more than line 7, enter amo u	4			
10		than the total of lines 5 and 8, enter			40	
11	Enter the amount of line 10 to l	pe: Credited to 2024 estimated tax	•	Refunde		

Form **990-PF** (2023)

4	During the toy year did the foundation statement is influence any national state or lead legislation as did it		Vaa	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4-	Yes	No X
	participate or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	46		v
	instructions for the definition	1b		X
	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.	4 -		v
C	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.\$			37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			37
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		_X_
b -	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		17
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by <i>General Instruction T</i> .			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_	37	
_	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	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. MN			
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 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 year 2023 or the tax year beginning in 2023? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		X
10	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 section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address www.merjentfoundation.org			
14	The books are in care of Jessica Caruso Telephone no. 231-4	95-	094	4
	1 Main Street SE, Suite 300			
4-	Located at Minneapolis MN ZIP+4 55414	<u>.</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			Ш
40	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority	40	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country		0 DE	

Pa	art VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(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)?	1a(5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		X
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_	were not corrected before the first day of the tax year beginning in 2023?	1d		
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 2023, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			37
	tax year(s) beginning before 2023? If "Yes," list the years	2a		X
L	20 , 20 , 20 , 20 , 20			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement — see instructions.)	26		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
C	20 , 20 , 20 , 20			
3a				
Ju	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or	- Ou		
-	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 2023.) N/A	3b		
4a				
	purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			_
	its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			
	in 2023?	4b		Х

Form **990-PF** (2023)

Pa	art VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)								
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 4945(e))?	5a(1)		X					
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or								
	indirectly, any voter registration drive?	5a(2)		X					
		5a(3)		X					
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)								
	(4)(A)? See instructions	5a(4)		X					
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for								
		5a(5)		X					
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described								
	in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions N/A	5b							
С	Organizations relying on a current notice regarding disaster assistance, check here								
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it								
	maintained expenditure responsibility for the grant? N/A	5d							
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).								
6a									
_	benefit contract?								
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		X					
	If "Yes" to 6b, file Form 8870.	_		77					
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		X					
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A	7b							
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	_		X					
D	excess parachute payment(s) during the year? art VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emp	8							
r	Contractors	лоуе	;es,	anu					
1 1	List all officers, directors, trustees, and foundation managers and their compensation. See instructions.								
	(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) employee benefit plans and deferred compensation or employee compensation enter -0-)		oense ad r allowa						
Se	ee Statement 3								
2	Compensation of five highest-paid employees (other than those included on line 1 — see instructions). If none, enter "NONE."								
	(d) Contributions to								
	(a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Commensation		oense ad r allowa						
. NO	ONE .								
	······································								
Tota	Il number of other employees paid over \$50,000			0					
	··								

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part VIII-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A All other program-related investments. See instructions.

Form **990-PF** (2023)

Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 1a Average of monthly cash balances C Fair market value of all other assets (see instructions) Total (add lines 1a, b, and c) 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 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see Net value of noncharitable-use assets. Subtract line 4 from line 3 5 Minimum investment return. Enter 5% (0.05) of line 5. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) 4,718 Minimum investment return from Part IX, line 6 Tax on investment income for 2022 from Part V, line 5 Income tax for 2022. (This does not include the tax from Part V.) **2b** Add lines 2a and 2b С Distributable amount before adjustments. Subtract line 2c from line 1 4,718 3 Recoveries of amounts treated as qualifying distributions 4 5 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 1a 40,726 Program-related investments — total from Part VIII-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4

Form **990-PF** (2023)

P	art All Undistributed income (see instructions	5)			
		(a)	(b)	(c)	(d)
_		Corpus	Years prior to 2022	2022	2023
1	Distributable amount for 2023 from Part X, line 7				4,718
2	Undistributed income, if any, as of the end of 2023:				
	Enter amount for 2022 only				
	Total for prior years:20 , 20 , 20 Excess distributions carryover, if any, to 2023:				
3	F==== 0040				
	From 2018 7,065				
	F 0000 21 271				
	From 2024 20 010				
	From 2022				
	Total of lines 2s through s	96,234			
4	Qualifying distributions for 2023 from Part XI,	00,202		4	
•	line 4: \$ 40,726				
а	Applied to 2022, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required — see instructions)				
С	Treated as distributions out of corpus (Election				
	required — see instructions)			1	
d	Applied to 2023 distributable amount			, ·	4,718
	Remaining amount distributed out of corpus	36,008	1 4		
5	Excess distributions carryover applied to 2023				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	132,242			
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	7			
d	Subtract line 6c from line 6b. Taxable				
	amount — see instructions				
е	Undistributed income for 2022. Subtract line				
	4a from line 2a. Taxable amount — see				
_	instructions				
Ť	Undistributed income for 2023. Subtract lines				
	4d and 5 from line 1. This amount must be				0
_	distributed in 2024				U
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 and instructions)				
8	Excess distributions carryover from 2018 not				
Ü	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2024.				
•	Subtract lines 7 and 9 from line 6a	132,242			
10	Analysis of line 9:	- , = - -			
a	Excess from 2019 7,065				
b	Excess from 2020 21,371				
С	Excess from 2021 20,818				
d	Excess from 2022 46,980				
_	Excess from 2023 36, 008				

Pa	art XIII Private Operating Fo	oundations (see	instructions and f	Part VI-A, questio	n 9)	
1a	If the foundation has received a ruling	or determination lette	r that it is a private op	erating		
	foundation, and the ruling is effective for	or 2023, enter the dat	e of the ruling			
b	Check box to indicate whether the four	ndation is a private op	erating foundation de	escribed in section 49	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u>, , , , , , , , , , , , , , , , , , , </u>	
	income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
	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					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
J	alternative test relied upon:					
а	"Assets" alternative test — enter:					
а	(1) Value of all assets					
	• • • • • • • • • • • • • • • • • • • •					
	(2) Value of assets qualifying under					
h	section 4942(j)(3)(B)(i)	2/0				
b	"Endowment" alternative test — enter					
	of minimum investment return shown in					
_	Part IX, line 6, for each year listed					
С	"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	4				
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					<u> </u>
Pa	art XIV Supplementary Info			if the foundation	n had \$5,000 or	more in assets at
	any time during the		uctions.)			
1	Information Regarding Foundation I					
а	List any managers of the foundation w					ו
	before the close of any tax year (but or	nly if they have contrib	outed more than \$5,0	00). (See section 507	(d)(2).)	
	Merjent, Inc.					
b	List any managers of the foundation			• •	an equally large po	ortion of the
	ownership of a partnership or other en	tity) of which the foun	dation has a 10% or ເ	greater interest.		
	N/A					
2	Information Regarding Contribution		• • • • •	•		
		•	•	itable organizations a	•	
	unsolicited requests for funds. If the fo	_	grants, etc., to individ	duals or organizations	under other condition	ns,
	complete items 2a, b, c, and d. See ins					
а	The name, address, and telephone nu	mber or email addres	s of the person to who	om applications shoul	d be addressed:	
	N/A					
b	The form in which applications should	be submitted and info	rmation and materials	s they should include:		
	N/A					
С	Any submission deadlines:					
	N/A					
d	Any restrictions or limitations on award	ls, such as by geogra	phical areas, charitab	le fields, kinds of insti	tutions, or other	

factors: **N/A**

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 2023 - Scholarships, Purdue Univ 128 Memorial Mall Scholarship West Lafayette IN 47907 3,500 2023 - Scholarship, UW Steven Pt 1108 Fremont St Stevens Point WI 54481 Scholarship 2,500 2023 - Scholarship, Bryn Mawr Collg 101 N Merion Ave Bryn Mawr PA 19010 Scholarship 2,500 East Pennsboro Education Fdn 890 Valley St Enola PA 17025 2,000 Charitable Every Meal 2723 Patton Rd Roseville MN 55113 Charitable 2,500 Feeding our Community Partners 2120 W Howard Dr North Mankato MN 56003 Charitable 2,500 Fond du Lac Tribal & Comm College 2101 14th St Cloquet MN 55720 Charitable 1,000 Hunger Impact Partners 111 3rd Ave S #190 Minneapolis MN 55401 Charitable 2,000 Kaitlyn's Kloset 4180 Lexington Ave S Eagan MN 55123 Charitable 2,000 Kids Meals, Inc 330 Garden Oaks Blvd Houston TX 77018 Charitable 8,000 Total 3a 40,100 **b** Approved for future payment N/A **Total**

F	Part XV-A	Analysis of Income-Producing Ac	ctivities				
Ent	er gross amo	ounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(a)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue:			0000		(See instructions.)
	a						
	_						
	e f						
		d contracts from government agencies					
2		dues and assessments					
		avings and temporary cash investments					
		nd interest from securities					
		come or (loss) from real estate:					
		anced property					
	b Not debt	-financed property					
6	Net rental in	come or (loss) from personal property					
		ment income					
		s) from sales of assets other than inventory					
		or (loss) from special events					
		or (loss) from sales of inventory					
11	Other reven	· ·					
	۵	•					
	и е						
12		d columns (b), (d), and (e)		C)	0	0
		* * * * * * * * * * * * * * * * * * * *				13	0
		in line 13 instructions to verify calculations.)					
	art XV-B	Relationship of Activities to the A	ccomplish	nment of Exemp	t Purp	oses	
	Line No.	Explain below how each activity for which incom of the foundation's exempt purposes (other than					the accomplishmen
	N/A		processing.		/- (
_							

orm 99		23) Merjent					-1623599				je 13
Part			garding T	ransfers To a	nd Transaction	ons and l	Relationships Wit	h Nonchar	itable	Exe	emp
4 5:		<u>Organizations</u>	P O		·					Vaa	NI -
	_	anization directly or ir 01(c) (other than sec				_				Yes	No
	ganization	() (11011 50 1(6)(3	o) organizations) c	or in section 527,	relating to p	Ollical				
	-	om the reporting four	ndation to a i	noncharitable eve	mnt organization	of:					
	Cash	· -			· -				1a(1)		X
• •		ssets							1a(2)		X
b Ot	her trans	actions:									
		f assets to a nonchar	itable exemp	ot organization					1b(1)		Х
					ation				1b(2)		Х
(3)) Rental o	of facilities, equipmen	it, or other a	ssets					1b(3)		X
(4)) Reimbu	rsement arrangemen	ts						1b(4)		X
(5)) Loans o	r loan guarantees							1b(5)		X
(6)) Perform	ance of services or n	nembership	or fundraising soli	icitations				1b(6)		X
c Sh	naring of f	acilities, equipment, ı	mailing lists,	other assets, or p	aid employees .				1c		X
							ould always show the fa				
va	lue of the	goods, other assets,	or services	given by the repo	rting foundation.	If the founda	ation received less than	n fair market			
va	lue in any	transaction or sharir	ng arrangem	ent, show in colur	mn (d) the value o	of the goods	s, other assets, or servi	ces received.			
	ine no.	(b) Amount involved	(c) Name	of noncharitable exemp	pt organization	(d) De	scription of transfers, transaction	ons, and sharing ar	rangeme	ents	
N/A											
						<u> </u>					
					 						
2a le	the found	ation directly or indire	actly affiliate	d with or related t	to one or more to	av-evemnt o	rganizations				
		section 501(c) (other	-		•	ax-exempt o	rganizations]	Ve	s X	No
		nplete the following s		011 00 1(0)(0)) 01 111						.0 [11	,
) Name of organization	oriodalo.	(b) Type of or	rganization		(c) Description of	relationship			
N/		, 3		(4) 31	3		(-)	· · · · · · · · · · · · · · · · · · ·			
			>						-		
	Under per	nalties of perjury, I declare	that I have exam	mined this return, inclu	ding accompanying so	chedules and s	tatements, and to the best of	my knowledge and	belief,	it is true	e,
	correct, ar	nd complete. Declaration o	r preparer (otne	r tnan taxpayer) is bas	ed on all information of	or wnich prepar	er nas any knowledge.	May the IRS disc	uss this r	eturn	
Sign								with the preparer			٦ ,,,
Here								See instructions.	X	i es	No
							Treasurer			_	
	Signature	of officer or trustee			Date	Ti	tle				
	Print/Ty	pe preparer's name			Preparer's signature		^	Date		Check	if
Paid						_	Peter Maddalone			self-em	ployed
	Pete	r Maddalena			Peter Madd	lalena	, come	04/16	/24		

Cummings, Keegan & Co., P.L.L.P.
600 Highway 169 S Ste 1400
Saint Louis Park, MN 55426-1218

41-1227298 952-345-2500 Form **990-PF** (2023)

P01273918

PTIN

Firm's EIN

Phone no.

Preparer

Use Only

Firm's name

Firm's address

Part XIV **Supplementary Information** (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year No Kid Hungry 1030 15th St NW Washington DC 20005 Charitable 7,000 Second Harvest Heartland 7101 Winnetka Ave N Brooklyn Park MN 55428 Charitable 2,250 St William Catholic School 1822 Ravine St Charitable Janesville WI 53548 350 The Food Group MN 8501 54th Ave N Minneapolis MN 55428 Charitable 2,000 Total 3a **b** Approved for future payment N/A Total

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total		Net Investment		Adjusted Net		l 	Charitable Purpose	
Tax Prep Fees	\$	1,225	\$	612	\$			\$	613
Total	\$	1,225	\$	612	\$		0	\$	613

Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	T	Total		Net Investment		Adjusted Net		aritable ırpose
Expenses	\$		\$		\$		\$	
MN Filing Fee		25		12				13
Total	\$	25	\$	12	\$	0	\$	13

Statement 3 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Melissa Dellwo 1 Main Street SE Minneapolis MN 55414	President	0.50	0	0	0
Kari Krause 1 Main Street SE Minneapolis MN 55414	Secretary	0.50	0	0	0
Jessica Caruso 1 Main Street SE, Suite 300 Minneapolis MN 55414	Treasurer	0.50	0	0	0
Bill Harding 1 Main Street SE Minneapolis MN 55414	Board Member	0.50	0	0	0
Lacy Lepisto 1 Main Street SE	Board Member	0.50	0	0	0

Federal Statements

Statement 3 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address	Title	Average _Hours_	Compensation	Benefits	Expenses
Minneapolis MN 55414					
Mark Cline 1 Main Street SE Minneapolis MN 55414	Board Member	0.50	0	0	0
Scott Beard 1 Main Street Minneapolis MN 55414	Board Member	0.50	0	0	0

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Schedule B (Form 990) (2023)

Employer identification number

2023

83-1623599 Merjent Foundation 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 X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _____ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Employer identification number

83-1623599 Merjent Foundation Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 1 Merjent, Inc. 800 Washington Ave N Person **Payroll** Suite 315 68,000 Noncash MN 55401 Minneapolis (Complete Part II for noncash contributions.) (c) (a) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

C2

Mail To:

Minnesota Attorney General's Office Charities Division 445 Minnesota Street, Suite 1200 St. Paul, MN 55101-2130

Website Address:

www.ag.state.mn.us/charity

STATE OF MINNESOTA CHARITABLE ORGANIZATION ANNUAL REPORT FORM

(Pursuant to Minn. Stat. ch. 309)

Legal Name of Organization Merjent Foundation	on	
Federal EIN: 83-1623599	Fiscal Year-End: 12/31/20	23
	mm/dd/yyyy	
	Did the organization's fiscal year-end cha	ange? Yes X No
Mailing Address:	Physical Address:	
Jessica Caruso	Jessica Caruso	
Contact Person	Contact Person	
1 Main Street SE, Suite 300	1 Main Street SE, Suite	300
Street Address	Street Address	
Minneapolis MN 55414	Minneapolis	MN 55414
City, State, and Zip Code	City, State, and Zip Code	
600 014 5055	200 011 -0	
608-214-7355 Phone Number	608-214-7355 Phone Number	
Priorie Number	Phone Number	
Email Address	Email Address	
1. Organization's website: www.merjentfoundat	ion.org	
2. List all of the organization's alternate and former names	s (attach list if more space is needed)).
		Alternate Former
		Alternate Former
3. List all names under which the organization solicits con	tributions (attach list if more space is	needed).
Merjent Foundation	·	,
4 1 11 2 11 11 11 11 11 11 11 11 11 11	1 0474 V	
4. Is the organization incorporated pursuant to Minn. Stat.	cn. 31/A Yes X No	
5. Total amount of contributions the organization received	from Minnesota donors: \$	68,000
6. Has the organization's tax-exempt status with the IRS of ☐ Yes ☒ No If yes, attach explanation.	changed?	
7. Has the organization significantly changed its purpose(s) or program(s)?	

CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

8.	Has the organization been denied the right to solicit contributions by any court or government agency? Yes X No If yes, attach explanation.				
9.	Does the organization use the services of a professional fundraiser (outside solicitor or consultant) to solicit contributions in Minnesota? Yes X No				
	If yes, provide the following information for each (attach list if more space is needed):				
	Name of Professional Fundraiser	Compensation			
	Street Address	City, State, and Zip C	ode		
10.	If yes, is the organization required to file an audit? Note: An organization that has total revenue of more to accordance with generally accepted accounting princi donated food to a nonprofit food shelf may be exclude subsequent distribution at no charge and is not resold	than \$750,000 is required to ples by an independent CPA od from the total revenue if th cation or its related organizat	or LPA. The value of e food is donated for		
	If yes, provide the following information for the five highest paid individuals:				
	Name and title	Compensation*	Other compensation		

^{*}Compensation is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. See Minn. Stat. § 309.53, subd. 3(i) and Minn. Stat. § 317A.011 for definitions.

CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

SECTION B: Financial Information

This section must be completed by organizations that file an IRS Form 990-EZ, 990-PF, or 990-N. Organizations that file an IRS Form 990 may skip Section B and go directly to Section C.

INCOME	
1. Contributions Received	\$ 68,000 1
2. Government Grants	\$ 2
3. Program Service Revenue	\$ 3_
4. Other Revenue	\$ 4
5. TOTAL INCOME	\$
EXPENSES	
6. Program Expenses	\$ 40,100 6
7. Management & General Expenses	\$ 1,250 7
8. Fund-raising Expenses	\$ 8
9. TOTAL EXPENSES	\$ 41,3509
10. EXCESS or DEFICIT (Line 5 minus Line 9)	\$ <u>26,650</u> 10
ASSETS	
11. Cash	\$ 99,735 11
12. Land, Buildings & Equipment	\$
13. Other Assets	\$
14. TOTAL ASSETS	\$ 99,735 ₁₄
LIABILITIES	
15. Accounts Payable	\$ 15
16. Grants Payable	\$ 16
17. Other Liabilities	\$ 17
18. TOTAL LIABILITIES	\$ <u> </u>
FUND BALANCE/NET WORTH (Line 14 minus Line 18)	\$ 99,735

CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

83-1623599

Section B (continued): Statement of Functional Expenses

This expense statement must be prepared in accordance with generally accepted accounting principles. Each column must be completed, and Columns B, C, and D must equal Column A. The amount on Line 25, Column A must match Line 17 of IRS Form 990-EZ or Line 26 of IRS Form 990-PF.

	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	· otal oxpolloss	expenses	general expenses	expenses
1. Grants and other assistance to governments and organizations in the U.S.	40,100	40,100		
2. Grants and other assistance to individuals in the U.S.				
3. Grants and other assistance to governments, organizations, and individuals				
outside the U.S.				
4. Benefits paid to or for members				
5. Compensation of current officers, directors, trustees, and key employees				
6. Compensation not included above, to disqualified persons (as defined unde	r			
section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7. Other salaries and wages				
8. Pension plan contributions (include section 401(k) and section 403(b)				
employer contributions)				
9. Other employee benefits				
10. Payroll taxes				
11. Fees for services (non-employees):				
a. Management				
b. Legal				
c. Accounting	1,225	613	612	
d. Lobbying				
e. Professional fundraising services				
f. Investment management fees				
g. Other				
12. Advertising and promotion				
13. Office expenses				
14. Information technology				
15. Royalties				
16. Occupancy				
17. Travel				
18. Payments of travel or entertainment expenses for any federal, state, or local public officials				
19. Conferences, conventions, and meetings				
20. Interest				
21. Payments to affiliates				
22. Depreciation, depletion, and amortization				
23. Insurance				
24. Other expenses. Itemize expenses not covered above. Expenses labeled				
miscellaneous may not exceed 5% of total expenses (Line 25).				
a. MN filing fees	25	13	12	
b.				
c.				
d.				
25. Total functional expenses. Add lines 1 through 24d.	41,350	40,726	624	
26. Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in Column B joint costs from a combined educational campaign and fundraising solicitation				

Date

CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

Section C: Board of Directors Signatures and Acknowledgment

The form must be executed pursuant to a resolution of the board of directors, trustees, or managing group and must be signed by two officers of the organization. See Minn. Stat. § 309.52, subd. 3.

We, the undersigned, state and acknowledge that we	are duly constituted officers of this organization,			
being the Treasurer (Title) and	President (Title) respectively, and that			
we execute this document on behalf of the organization pເ	ursuant to the resolution of the			
(Board of Directors, Tr	ustees, or Managing Group) adopted on t <u>he</u>			
day of , 20 , approving the contents of	, 20 , approving the contents of the document, and do hereby certify that the			
(Board of Directors, Tr	rustees or Managing Group) has assumed, and			
will continue to assume, responsibility for determining mat	ters of policy, and have supervised, and will continue			
to supervise, the operations and finances of the organizati	on. We further state that the information supplied is			
true, correct and complete to the best of our knowledge.				
Jessica Caruso	Melissa Dellwo			
Name (Print)	Name (Print)			
Signature	Signature			
Olgriature	Oignature			
Treasurer	President			
Title	Title			

Date