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# Form 990-PF

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

Department of the Treasury Internal Revenue Service

For calendar year 2009, or tax year beginning

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

, 2009, and ending

OMB No 1545 0052	
2009	
return	
r	
tructions)	
nding, check here ere the 85% test, check	
as terminated neck here onth termination neck here	
(d) Disbursement for charitable purposes	

<b>G</b> Cr	''' ⊣	al Return of a former pu	· · · ·	لحبا	al return
	Amended return	Address cl		e change  A Employer identification num	-ho-
Use		NT .	l'		nder
IRS la Other		)IN	<u> </u>	20-3806143	
pri	ont GERING, NE 69341		1'	Telephone number (see the	•
or ty	μ <del>ε</del> .   '		L.	(308) 635-121	
See Sp Instruc				If exemption application is	· •
				1 Foreign organizations, chec	
H (		(c)(3) exempt private for		2 Foreign organizations meet here and attach computation	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable tri			E If private foundation status	
		ounting method X Ca	ish Accrual '	under section 507(b)(1)(A)	
		Other (specify)		F If the foundation is in a 60-	
<u>► :</u>		column (d) must be on	cash basıs )	under section 507(b)(1)(B)	, check here
Part		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable
	sarily equal the amounts in column (a)				purposes (cash basis only)
	(see the instructions) )				(casir basis orily)
	1 Contributions, gifts, grants, etc, received (att sch)				
	2 Ck X if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	78.	78	78.	
	4 Dividends and interest from securities	1,475.	1,475		
	5a Gross rents	=/	_, _, _		***************************************
	<b>b</b> Net rental income or (loss)				
R	6a Net gain/(loss) from sale of assets not on line 10				
E V	<b>b</b> Gross sales price for all assets on line 6a				
Ě	7 Capital gain net income (from Part IV, line 2)				
N	8 Net short-term capital gain				
U	9 Income modifications		*************		
_	10 a Gross sales less returns and allowances	Ī			
	h Less Cost of				
	goods sold	<del>-</del>			·
	c Gross profit/(loss) (att sch)  11 Other income (attach schedule)	<del>-</del>			
	Tr Other Income (attach schedule)	i			
	12 Total. Add lines 1 through 11	1,553.	1,553	1,553.	
	13 Compensation of officers, directors, trustees, etc	0.	1,555	1,333.	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits			,	
А	16 a Legal fees (attach schedule)				
D	Accounting fees (attach sch) SEE ST 1	250.	250	250.	
ï N	Other prof fees (attach sch)				<del>"</del> '
Ρĺ	197 Interest				
ET	18 <sup>H</sup> Taxes (attach schedule)(see instr.) SEE STM 2	27.	27	27.	
À À	197 Depreciation (attach				
	sch) and depletion Occupancy				<u> </u>
N V G E	21 Travel, conferences, and meetings				
	22 Printing and publications.		<u> </u>	<del>-</del>	
A E N X D P	23 Other expenses (attach schedule)				
E N	SÈE STATEMENT 3	13.	13	13.	
Š	724 Total operating and administrative				
Š	expenses. Add lines 13 through 23	290.	290	290.	
	325 Contributions, gifts, grants paid STMT 4	500.			500.
ار از از باز ا	26 Total expenses and disbursements.	790.	290	290.	500.
<u> " " "                               </u>	Add lines 24 and 25 27; Subtract line 26 from line 12:	130.	290	290.	
3	Adexcessiof revenue over expenses	ŧ		1	
I NO	V And disbursements	763.			
'	<b>b</b> Net investment income (if negative, enter 0)		1,263		
	C Adjusted net income (if negative, enter 0)		***************************************	1,263.	
BAA	For Privacy Act and Paperwork Reduction Act	Notice, see the instruct	ions. Ti	EEA0504L 02/02/10	Form <b>990-PF</b> (2009)

20	2	$\sim$	$\sim$	~1	43
/11	- <	×	11	n I	4

Page 2

Dod	***	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	f year
Part	# 1	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	15,861.	15,162.	15,162.
	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 the instructions)			
_	7	Other notes and loans receivable (attach sch).			
A		Less allowance for doubtful accounts ▶			
Š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
Ś	10 a	a Investments – U.S. and state government obligations (attach schedule)			
	t	nvestments — corporate stock (attach schedule)			
	•	: Investments — corporate bonds (attach schedule)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)	37,378.	38,840.	34,239.
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	`	-, -,		
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	53,239.	54,002.	49,401.
L	17	Accounts payable and accrued expenses			,
I	18	Grants payable		-	
A B	19	Deferred revenue			
ŀ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe			
Ė		Tablification (add because 22)	0.	0.	
<u> </u>	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here   X  X	<u> </u>	0.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted	53,239.	54,002.	
T N	25	Temporarily restricted	_		
A D	26	Permanently restricted			
A B A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds.		_	
R S	30	Total net assets or fund balances (see the instructions)	53,239.	54,002.	
	31	Total liabilities and net assets/fund balances (see the instructions).	53,239.	54,002.	
Part	III I	Analysis of Changes in Net Assets or Fund Balance		, , , , , , , , , , , , , , , , , , , ,	
				ae with	
'		I net assets or fund balances at beginning of year – Part II, colur of-year figure reported on prior year's return)	iii (a), iiiie so (iiiusi agii	1	53,239.
2		r amount from Part I, line 27a		2	763.
3	Other	increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3	<del></del>	4	54,002.
5	Decre	ases not included in line 2 (itemize)		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), line	30 6	54,002.

(a) List and desc	t Losses for Tax on Investmen ribe the kind(s) of property sold (e.g., r ouse; or common stock, 200 shares ML	eal estate,	(b) How acq P — Purcha D — Donat	ase	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A			D Dorida			
b						
с						
d						
e		<del></del>		i		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sale			(h) Gain or (e) plus (f) m	
a						
b	-					
d						<del></del>
e			<del>-</del>			
	wing gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Colu	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		ga tha	ain minus column (k in -0-) or Losses (fr	), but not less
a				•		
<u>b</u>						
c						
d				-		
e		<u> </u>		Т		
2 Capital gain net income or (n	et capital loss).	enter in Part I, line 7 ter -0- in Part I, line 7	·	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	and (6).				
ın Part I, line 8	ne 8, column (c) (see the instructions).		·	3		
	er Section 4940(e) for Reduce te foundations subject to the section 49			ne	N/A	
	this part blank. ection 4942 tax on the distributable amo alify under section 4940(e) Do not com		period?		Yes	No
1 Enter the appropriate amount	in each column for each year, see the	instructions before making a	iny entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(colu	( <b>d)</b> Distribution mn (b) divided	
2008					•	•
2007						
2006						
2005						
2004		l		1	•	
2 Total of line 1, column (d)				2		
3 Average distribution ratio for number of years the foundation	the 5-year base period – divide the tota on has been in existence if less than 5	al on line 2 by 5, or by the years		3		
4 Enter the net value of noncha	aritable-use assets for 2009 from Part X	K, line 5		4		
5 Multiply line 4 by line 3				5	<u> </u>	
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		
8 Enter qualifying distributions	from Part XII, line 4			8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, I	ine 1b, and complete that pa	rt using a 1	% tax	rate See the	

Form 990-PF (2009)

orm 990-PF (2009) HOLLIDAY FAMILY FOUNDATION	20-38	06143		Pa	age -
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see the	instruction	s)		
1a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1					
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,		1			<u>25</u>
check here    ☐ and enter 1% of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_			^
foundations only Others enter -0-)		2			0 25
3 Add lines 1 and 2	_	3			<u>23</u> 0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	′ <b>—</b>	4   5			25
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>	<b>)</b>			23
6 Credits/Payments	ĺ				
a 2009 estimated tax pmts and 2008 overpayment credited to 2009  b Exempt foreign organizations — tax withheld at source  6b					
2 ZAONIDI TOTO GATALLE TOTO CONTRACTOR CONTR					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld  6d	─┤.	.			Λ
7 Total credits and payments Add lines 6a through 6d	<u> </u>	7			0
8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached	_	<u> </u>			25
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>P</b> 3				25
O Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10 10				
1 Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded	<u>►</u> 1	<u> </u>			
art VII-A   Statements Regarding Activities		1	<del></del> 1,	, 1	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	ıt		1a	'es	No X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b		Х
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any material	ls publish	<b>—</b>	-		
or distributed by the foundation in connection with the activities	•				
c Did the foundation file Form 1120-POL for this year?		<u> </u>	1 c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
(1) On the foundation	sed on	0.			
foundation managers $\blacktriangleright$ \$ 0.	Jaca on			1	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		İ	2	Ĭ	Х
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, a	rticles				
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the chang	95		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Χ
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4Ь	N	<u>/A</u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
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.				I	
By language in the governing instrument, or				ı	
By state legislation that effectively amends the governing instrument so that no mandatory directions to	hat conflic	it	ا	х	
with the state law remain in the governing instrument?			_	<del>↑</del>	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		-	<del>-  -</del>	<del>^</del>	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions) N/A		_			
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			8ь	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)	(3) or 4942	2()(5)			
for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' co	nplete Pa	rt XIV	9	$\dashv$	<u> X</u>
O Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing and addresses	heir name	es   1	0		Х
AA	-		n <b>990</b>	PF (	วกก

Par	VII-A	Statemen	ts Regar	ding Acti	vities Con	tınued							
11	At any t	time during th he meaning o	e year, did f section 5	the foundat 12(b)(13)? If	ion, directly 'Yes', attach	or indirectly, schedule (s	, own a controlle see instructions	ed entity			11		Х
12		foundation ac 17, 2008?	cquire a dii	rect or indire	ct interest in	any applica	ble insurance co	ontract before			12		X
13	Did the	•	mply with	the public in	spection req		or its annual retu	urns and exempt	ion applicati	on?	13	Χ	-
14	The boo	oks are in care I at ► 303			LIDAY			Teleph ZIP +	none no ► 4 ► 693		635-	121	4
15								<b>041</b> – Check her		241	N/A		FT-
13		er the amoun						D41 — Check her		15	11/11		N/A
Parl		•						Be Required				_	
·		<del></del>					exception appli					Yes	No
1 a		the year did th											
	(1) Eng	gage in the sa	le or exch	ange, or leas	sing of prope	rty with a di	squalified perso	n?	Yes	X No		1	
		row money froughtful		noney to, or	otherwise ex	tend credit t	o (or accept it f	rom) a	Yes	XNo			
	(3) Fur	nish goods, s	ervices, or	facilities to	(or accept th	em from) a	disqualified pers	son?	Yes	X No			
	(4) Pay	compensation	on to, or pa	ay or reimbui	rse the exper	nses of, a di	squalified perso	n?	Yes	X No			
	<b>(5)</b> Tra	nsfer any inco the benefit or	ome or ass use of a c	sets to a disc disqualified p	ualified pers erson)?	on (or make	any of either a	vaılable	Yes	XNo			
	foui		d to make	a grant to o	r to employ t	he official fo	<b>ption.</b> Check 'N r a period after		Yes	XNo			
b								tions described i			1ь	N	/A
	Organiz	ations relying	on a curre	ent notice re	garding disas	ter assistan	ce check here		•	► 🗌			
c		foundation er re not correct						nan excepted act	ts,		1c		Χ
2		on failure to di operating foui					for years the for	undation was a					
а		end of tax yea Part XIII) for					ed income (lines	s 6d	Yes	XNo			
	If 'Yes,'	list the years	▶ 20	, 20 <u>_</u> _	, 20	, 20						1	
Ь	(relating	to incorrect	valuation o	of assets) to	the year's ur	idistributed i	ncome? (If app	ins of section 494 lying section 494	42(a)(2)  2(a)(2) to				/-
	_	s listed, answ					•	24 (-1.1)	- 1		2b	N	/ A
c		, 20			eing applied	to <b>any</b> of the	e years listed in	2a, list the years	s nere				
3a		foundation hose se at any time			ect or indirec	t interest in	any business		Yes	X No			
b	or disque by the (	ialified persor Commissioner	ns after Ma runder sed 0-, 15-, or	ay 26, 1969, ( ction 4943(c) 20-year first	(2) the lapse (7)) to dispos phase holdir	of the 5-yea se of holding ng period? (()	r period (or long is acquired by q	by the foundation by the foundation becomes, or bequest, or form 4720, to	on ved r		3b	N	/A _
<b>4</b> a		foundation in le purposes?		g the year ar	iy amount in	a manner th	nat would jeopar	rdize its			<b>4</b> a		Х
b	jeopard		ble purpos	e that had n			cember 31, 196 opardy before t				4ь		Х
												DE /	

Form **990-PF** (2009)

Form 990-PF (2009) HOLLIDAY FAMILY FO	DUNDATION		20-380	06143	Page 6
Part VII-B   Statements Regarding Activit	ies for Which Forr	n 4720 May Be Rec	uired (continued)		
5a During the year did the foundation pay or incu	any amount to				
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other sımılar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instrui	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5ь	N/A
Organizations relying on a current notice regains	ding disaster assistance	e check here	▶		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsing 'Yes,' attach the statement required by Regulations.	sibility for the grant?		N/A Yes	No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes X		
b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6Ь	X
If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found	ation a party to a archit	nited tay challer brances	tion? Yes X	No	
<b>b</b> If yes, did the foundation receive any proceeds				7b	N/A
Part VIII Information About Officers, D				1	
and Contractors		,			
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
SEE STATEMENT 5					
		0.	0.		0.
			<del></del>		
2 Compensation of five highest-paid employees	(other than those inclu	ıded on line 1– see inst	ructions). If none, ente	'NONE.'	
(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) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
NONE					
		-			
		-			
<b>—</b>	1	<u> </u>	<b>-</b>	<del> </del>	
Total number of other employees paid over \$50,000			<u> </u>	L	0 BE (2000
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Total. Add lines 1 through 3

BAA

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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 0 Total number of others receiving over \$50,000 for professional services. Part IX-A 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses 2 Part IX-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 All other program-related investments. See instructions

Pa	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.		
	a Average monthly fair market value of securities	1a	37,568.
- 1	Average of monthly cash balances	1b	15,512.
•	Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1d	53,080.
	e 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	53,080.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	796.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	52,284.
6	Minimum investment return. Enter 5% of line 5	6	2,614.
Pa	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	rating f	
	and certain foreign organizations check here ► and do not complete this pa	art.)	
1	Minimum investment return from Part X, line 6	1	2,614.
2	a Tax on investment income for 2009 from Part VI, line 5		
1	Income tax for 2009. (This does not include the tax from Part VI.)	]	
(	Add lines 2a and 2b	2c	25.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,589.
4	Recoveries of amounts treated as qualifying distributions	4	•
5	Add lines 3 and 4	5	2,589.
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	2,589.
Pai	TXII Qualifying Distributions (see instructions)	1	
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	500.
ŀ	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.  Suitability test (prior IRS approval required)	3a	
i	Cash distribution test (attach the required schedule)	3Ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether ouglifies for the section 4940(e) reduction of tax in those years.	er the fo	undation

Form 990-PF (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
Distributable amount for 2009 from Part XI, line 7				2,589.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005				
c From 2006				
d From 2007 2, 075.				
e From 2008 1,898. f Total of lines 3a through e	3,973.			
4 Qualifying distributions for 2009 from Part	3,573.			
XII, line 4. ► \$ 500.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</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 2009 distributable amount				500.
e Remaining amount distributed out of corpus	0.			2 000
5 Excess distributions carryover applied to 2009.  (If an amount appears in column (d), the	2,089.			2,089.
same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,884.			
<b>b</b> Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed 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		0		
amount – see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
ille Za. Taxable allibum — See instructions				
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	_			
(see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	1,884.			
10 Analysis of line 9				
a Excess from 2005				
<b>b</b> Excess from 2006	]		<u>.</u>	
c Excess from 2007	_			
d Excess from 2008 1,884.	1		•	
e Excess from 2009	L	<u> </u>		Farm 800 PF (2000)

Form 990-PF (2009) HOLLIDAY FAMILY				20-3806143	Page 10
Part XIV Private Operating Foundati					N/A
1a If the foundation has received a ruling or c is effective for 2009, enter the date of the	ruling		-	^\	1
<b>b</b> Check box to indicate whether the foundat		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	42.000	Prior 3 years	T (1) 0000	(a) <b>T</b> . 4 . 1
investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a					
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test - enter					
(1) Value of all assets				<u> </u>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<u> </u>			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter		ľ			
(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)(8)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	<u></u>		1	1	
Part XV   Supplementary Information assets at any time during the	(Complete this ne vear – see i	s part only if the nstructions.)	e organization l	had \$5,000 or mo	re in
Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have NONE	ave contributed mi contributed more	than \$5,000) (See	section 507(d)(2).)		
<b>b</b> List any managers of the foundation who capartnership or other entity) of which the NONE	own 10% or more o foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equa est	illy large portion of the	ownership of
2 Information Regarding Contribution, Gran Check here In the foundation only in requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	to preselected cha	ritable organizations		
a The name, address, and telephone number	er of the person to	whom applications s	should be addressed	i	
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	Is they should include	de	
c Any submission deadlines					· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on awards, s	such as by geograp	ohical areas, charita	ble fields, kinds of i	nstitutions, or other fa	ctors.

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	recipient	COMMISSION						
Name and address (home or business)  a Paid during the year	substantial contributor	Тестриен							
Total			<u>► 3a</u>						
b Approved for future payment  Total			<b>▶</b> 3k						

## Part XVI-A Analysis of Income-Producing Activities

	amounts unless otherwise indicated.	1	ed business income	<del></del>	section 512, 513, or 514	
1 Progr	am service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)
	ani service revenue:		<u>.</u> .	code		(see the instructions)
		1		1	· · · · · · · · · · · · · · · · · · ·	
f				<del>                                     </del>	_	
•	and contracts from government agencies			+ +	-	
	pership dues and assessments			1.4	78.	
	t on savings and temporary cash investments ends and interest from securities			14	1,475.	
	ental income or (loss) from real estate			+	1,413.	
	financed property			+ +		
	ebt-financed property					
	ntal income or (loss) from personal property			<del>                                     </del>		
	investment income					
8 Gain or	(loss) from sales of assets other than inventory					
9 Net ır	ncome or (loss) from special events					
0 Gross	s profit or (loss) from sales of inventory					
1 Other	revenue					
a						
					<u> </u>	
c		-				
d						
e					1 550	
	otal Add columns (b), (d), and (e)				1,553.	1 552
	Add line 12 columns (h) (d) and (e)				13	1,553
	. Add line 12, columns (b), (d), and (e)	Jaulations \				
ee works	heet in the instructions for line 13 to verify ca					
ee works			ishment of Exem	pt Purpose	?S	
ee works art XVI- ine No.	B Relationship of Activities to the	e Accompl				o the
ee works art XVI- ine No.	heet in the instructions for line 13 to verify ca	e Accompl				o the instructions )
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art XVI-	B Relationship of Activities to the	e Accompl				o the instructions )

HOLLIDAY FAMILY FOUNDATION 20-3806143 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations No Yes Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1a(1) (2) Other assets X 1a (2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization. 1b (2) (3) Rental of facilities, equipment, or other assets 1b (3) (4) Reimbursement arrangements 1b (4) (5) Loans or loan guarantees 1b (5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees Х 1 c d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b If 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I decomplete Declaration of preg that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Signature of officer or truste Title Preparer's Identifying number (See Signature in the instrs) Preparer's Check if HERE Paid signature employed ► X N/A Preparer's Use Firm's name (or yours if self employed), address, and ZIP code DANA F COLE & COMPANY N/A P.O. BOX 2009

Only

SCOTTSBLUFF,

(308) 632-4400

Phone no

NE 69363-2009

2009	FEDERAL STATEMENTS	PAGE 1
	HOLLIDAY FAMILY FOUNDATION	20-3806143
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 250. \$ 250. \$ 250. TOTAL \$ 250. \$ 250. \$ 250.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES	(A) (B) NET (C)  EXPENSES INVESTMENT ADJUSTED  PER BOOKS INCOME NET INCOME  \$ 27. \$ 27. \$ 27.  TOTAL \$ 27. \$ 27.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  TOTAL \$ 0. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GR  CASH GRANTS AND ALLOCATIONS CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONAMOUNT GIVEN:	SUMMIT CHRISTIAN COLLEGE 2025 21ST STREET GERING, NE 69341 NONE NEE: NON PROFIT ORGANIZATION	\$ 500.

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## **FEDERAL STATEMENTS**

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**HOLLIDAY FAMILY FOUNDATION** 

20-3806143

#### STATEMENT 5 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTE		CONTRI- BUTION TO EBP & DC	
R BRENTON HOLLIDAY, JR. 3030 DEER HAVEN DRIVE GERING, NE 69341	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.
SUSAN HOLLIDAY 3030 DEER HAVEN DRIVE GERING, NE 69341	DIRECTOR 0	0.	0.	0.
PHILLIP HOLLIDAY 660 21ST STREET GERING, NE 69341	DIRECTOR 0	0.	0.	0.
BRYAN HULBERT 1550 GENTRY BOULEVARD GERING, NE 69341	SECRETARY 0	0.	0.	0.
MARK MCCARTHY 821 WEST 18TH STREET SCOTTSBLUFF, NE 69361	TREASURER 0	0.	0.	0.
WYATT G. SURBER 1705 BEVERLY BOULEVARD GERING, NE 69341	DIRECTOR 0	0.	0.	0.
	TOTA	L \$ 0.	\$ 0.	\$ 0.