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# Form **990-PF**

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

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

G Check all that apply:   Install return	Fo	r cal	endai	r year 2009, or t	ax year beginni	ng		, 2009	, and ending			,	
Use the   HOLDEN FAMILY FOUNDATION Otherways   20365 KRIGHTSBRIDGE ROAD   B   Tours	G Check all that apply: Initial return Init					ial Return of a former public charity				Final return			
INSTALLED RANILLY FOUNDATION Difference, 2036 5 KRICHTSRETIGE ROAD prints EXCELSIOR, NN 55331    College	Amended return				Address change Nan			Nam	ame change				
A		lce t	he		<del></del>			<del></del>	<u>-</u> <u>-</u>		A	Employer identification nu	ımber
## CERCISION, MN 55331  ## Check type of organization   X  Section 50 (c)(S) exempl private foundation   Section 4947(0)(1) increaseing charinable first   Other traceble private foundation   Far matter fuller of all private in private private foundation   The matter fuller of all private in priva	IRS label. HOLDEN FAMILY FOUNDATION									1		41-1774925	
so type    Comment	Ot					ROAD				- 1	В	Telephone number (see the	e instructions)
See Specific instructions  H Check type of organization   X   Section 501 (c)(3) exempt private foundation   D	(			EXCELSIOR,	MN 55331					Ì		952-474-8179	
Care	See	e Spe	cıfic							T.	С		
Foreign organization   Section 50 (c)(3) exempt private foundation   Section 60 (c)(4) exempt   Section 60 (c)(4)   Section 60 (c)   Section	Ins	truct	ions.							L			· -
Section 4947(a)(1) nonexempt charitable trust   Other taxable private (bundation   Improve   I	Н	C	heck	type of organiza	ation X Sec	tion 50	1(c)(3) exe	mpt private	foundation			• • •	
Farr market value of all assets at end of year of the control from Part IV, column (i), milk column (ii), milk column (ii), milk column (iii), milk column (iiii), milk column (iiiii), milk column (iiii), milk column (i		Ī	_	• •						ation		here and attach computat	ion 🕨 📗
(International Column (c), line 10)  Ps	T	Fá									Ε	If private foundation statu	is was terminated
Part   Analysis of Revenue and   Column (d) must be on cash basis   Column (d) Disbursement	_	(f	rom Pa	rt II, column (c), line	9 16)						_		
Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (b), (c), and (d) may not necessarily equal the amounts in column (b), (c), and (d) may not necessarily equal the amounts in column (b), (c), and (d) may not necessarily equal the amounts in column (b) (cash basis only) (cash ba		<b>►</b> \$		535	.106.	(Part I			n cash basis )	,	r		
Canal Compensation   Canal C	Pa	<del>rt İ</del>	· Aı			<u> </u>					. 1		T
Columns (b), (c), and (d) may not necess sarily equal the amounts in column (a) (see the instructions)	<u></u>					s ın					it		
Sarily equiat the amounts in column (a)   (cash basis only)			co	lumns (b), (c), a	and (d) may not	neces-	CAPELISES	s per books	111001	110	ı	IIICOITIE	
1   Contributions, drifts, grants, etc. received (att scrit)   20,000       2   C         The learned is not ret to last Sch B       3   Interest on savings and temporary cash investments                 4   Dividends and interest from securities               5   Gross rents                         6   R   Gross from sale of assets not on line 10               7   Capital gain net viscome (from Pat IV, line 2)                           8   R   Gross section in the second of the seco						ın (a)			İ				
2	_		1			(att sch)		20 000		-	-		1
Interest On savings and temporary and temporary and homeometric flow social homeometric flows social flows and interest from socialities   15,221			2	— ·	-			20,000.		<del></del>		•	2 20
Cash investments								· · · · ·			+	<u>``</u>	
Sa Gross rents b Net sental monome or (loss) Fee B Net gand/toss) from sale of assets not on line 10 b Gross sales pince for all control of the control of t			•	cash investmen	nts	, a. y		112.		112	2.	N/A	
Description   Description	3		4	Dividends and inter	rest from securities			15,221.	1	5,22	1.		
R   R   S   S   S   S   S   S   S   S	ó												ř 1.12
Comparison of the comparison	•		D										
assets on line 6a Net short-term capital gain   Income modifications      2 !	R				line 10			· .					
7   Capital gain net income (fire Part IV, line 2)   8   N   Net Short-term capital gain   10   10   10   10   10   10   10   1			b		rali								
Part   Part			7		ome (from Part IV, Irr	e 2)						+ +	
10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales less   10 a Gross sales   10 a Gross sales   10 a Gross sales   11 a Gross profit (loss) (att sch)   11 o Other income (attach schedule)   12   13 a Gross paras and wages   13 a Gross paras and wages   14 o Other morphoyee salaries and wages   15 Pension plans, employee benefits   16 a Legal fees (attach scholle)   SEE ST 1   10 a Gross paras   1	• !	N	8	Net short-term	capital gain		, , , ,						1
10 a continue and each each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each continue and each					ations			·		-			
b Less Cost of conds sold   c Gross profit/Vioss) (att sch)		_	10 a	Gross sales less returns and				•	•		١,	• 1	
Total Add lines 1 through 11   35,333   15,333	=						<b></b>				-		
11 Other income (attach schedule)   12   Total. Add lines 1 through 11   35,333.   15,333.     13   Compensation of officers, trustees, etc   0.	2		-	goods sold	L						<u>.  </u>	· · · · · · · · · · · · · · · · · · ·	* .
12   Total. Add lines 1 through 11   35,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   14,333.   15,333.			•		• ,						_		
12   Total. Add lines 1 through 11   35,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   15,333.   14,333.   15,333.	2)		11	Other income (	attach schedule	)					Ì		1
13   Compensation of officers, directors, trustees, etc   14   Other employee salaries and wages   15   Pension plans, employee benefits   16a Legal fees (attach schedule)   SEE ST   2   855.   427.   428.   428.	ע		12	Total Add lines	- 1 Novemb 11			25 222		<u> </u>	$\dashv$	<del></del>	, , , , , , , , , , , , , , , , , , , ,
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE ST 1 5,000. 2,500. 2,500. 2,500.  b Accounting fees (attach sch) SEE ST 2 855. 427. 428.  c Other prof fees (attach sch)  17 Interest Action SEE ST 3 351.  18 Depreciation (attach Sch) SEE STM 3 351.  19 Depreciation (attach Sch) SEE STM 3 351.  20 discharace 2010 SEE STM 3 351.  21 Travel, conferences, and meetings 2 Printing and publications 2 Contributions, gifts, grants paid PART XV 26,000. 26,000. 26,000. 26,000. 26,000. 26,000. 26,000. 26,000. 27									1	<u>5,333</u>	<del>3 .  </del>		
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16a Legal fees (attach schedule)   SEE ST 1   5,000   2,500				, ,	•	fito		<del></del>			$\dashv$	<del></del>	<del>                                     </del>
b Accounting fees (attach sch)  b Accounting fees (attach sch)  c Other prof fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  The Accounting fees (attach sch)  SEE STM  The Accounting fees (attach sch)  The Accounting fee								E 000		2 500	+		2 500
c Other prof fees (attach sch)  The profess		Ď							·			<del></del>	
The state of the s		1				31 Z		655.		42	<del>' : </del>	<del></del>	428.
Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV 26,000.  Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter 0-)  C Adjusted net income (if negative, enter 0-)  C Adjusted net income (if negative, enter 0-)  C Adjusted net income (if negative, enter 0-)	0	N			•						-	<del></del>	
Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid PART XV 26,000.  Total expenses and disbursements. Add lines 24 and 25 32,343.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)	P	ş	12	RECEIVE	D. d. d	rm 2		2 [ ]			$\dashv$	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Ordenpaired 2010  In Travel, conferences, and meetings  Printing and publications  22 Printing and publications  23 Orbit expenses (attach schedule)  SEE STATEMENT 4  137.  24 Total operating and administrative expenses. Add lines 13 through 23  25 Contributions, gifts, grants paid PART XV  26,000.  Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements.  b Net investment income (if negative, enter -0.)  C Adjusted net income (if negative, enter -0.)  C Adjusted net income (if negative, enter -0.)	R	Ř	19	Depreciation (a	Hach C	TH 2		331.			$\dashv$		ļ
Victorial Conferences, and meetings 20 Charlespances (altach schedule) 21 Contracting and administrative expenses. Add lines 13 through 23 contributions, gifts, grants paid PART XV 26,000.  25 Contributions, gifts, grants paid PART XV 26,000.  26 Total expenses and disbursements. Add lines 24 and 25 32,343. 2,927. 29,065.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter 0.) 12,406.  C Adjusted net income (if negative, enter 0.)	Ŧ	îll	7	sch) and deplet	tion IOI						- ]		
A P Printing and publications  22 Printing and publications  23 Other expenses (attach schedule)  SE STATEMENT 4  137.  24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV  26 Total expenses and disbursements. Add lines 24 and 25  Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0.)  C Adjusted net income (if negative, enter -0.)  C Adjusted net income (if negative, enter -0.)	Ň		<b>≃</b> 20	Odelbadc# ∠l	וארן טונ						_		<del></del>
22 Printing and publications 23 Other expenses (altach schedule)  SEE STATEMENT 4  137.  24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV  26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements.  b Net investment income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)	G	E	21	Travel, confered	nces, and meeti	ngs							
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26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		S								2,927	<u>' -  </u>	<u> </u>	3,065.
Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)				· <del>-</del>	-			∠6,000.			+	·	26,000.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)		İ	26	Add lines 24 an	a <b>no disbursen</b> nd 25	ents.		32 3/13		2 927	,		20 065
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and disbursements 2,990.  b Net investment income (if negative, enter -0.)  C Adjusted net income (if negative, enter -0.)		ł				ses							
C Adjusted net income (if negative, enter 0-)								2,990.					
,			b	Net investment inco	me (if negative, entei	·-0-).	٠.		12	2,406	<u>5.</u> [		
		$\perp$		Adjusted net income	e (if negative, enter	)-)		•	,		$oldsymbol{oldsymbol{oldsymbol{oldsymbol{\Box}}}$		1

<u> </u>	. 11.	Attached schedules and amounts in the description	Beginning of year	I	of year
Pan	. 11	Balance Sheets Column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	ī	Cash — `non-interest-bearing	2,399.	6,056.	6,055.
	2	Savings and temporary cash investments	62,583.	46,925.	46,925.
	3	Accounts receivable			25 172-1174
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable	La art a some Forest Learness of		
	l	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)	المناسبة المناسبة المناسبة المناسبة	مراعد المتعلقة المتعل	
A		Less: allowance for doubtful accounts ▶			
š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
S		a Investments — U.S. and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule) STATEMENT 5	406,030.	421,021.	482,126.
	•	c Investments — corporate bonds (attach schedule)			19 17
	11	Investments — land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis.		المنت المناسلة	
		Less: accumulated depreciation (attach schedule)			
	15 16	Total assets (to be completed by all filers -	471 012	474 000	525 106
<del></del>		see instructions. Also, see page 1, item l).	471,012.	474,002.	535,106.
ī,	17	Accounts payable and accrued expenses			これ、 といいは、 おきかは なる
A B	18	Grants payable			學。特別是一個
ĭ	19 20	Deferred revenue			(1) 注意 [[]
Ļ	21	Mortgages and other notes payable (attach schedule)		<del></del>	
Ť.	22	Other liabilities (describe		<del></del>	
F	22	Other habilities (describe		<u> </u>	
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted	471,012.	474,002.	经营业 一
N F E U T N	25	Temporarily restricted			·注意表表表表
D	26	Permanently restricted			
ASSETS		Foundations that do not follow SFAS 117, check here Land complete lines 27 through 31.	÷7		
E L	27	Capital stock, trust principal, or current funds	-1		
ŚΝ	28	Paid-in or capital surplus, or land, building, and equipment fund			
C F	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see the instructions)	471,012.	474,002.	
	31	Total liabilities and net assets/fund balances (see the instructions)	471,012.	474,002.	
Part	<u> </u>	Analysis of Changes in Net Assets or Fund Balance	es		
1	Total end-	net assets or fund balances at beginning of year — Part II, colu- of-year figure reported on prior year's return).	mn (a), line 30 (must a	gree with	471,012.
		r amount from Part I, line 27a		2	2,990.
		increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	474,002.
		ases not included in line 2 (itemize).		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 <b>6</b>	474,002.

(a) List and describ	be the kind(s) of property sold (e.g., ruse, or common stock, 200 shares ML	eal estate, C Company)	b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A		<del></del>		<del>                                     </del>	
b					
c					
d	<del></del>		·		
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
e					
Complete only for assets show	wing gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i over column (j), if any	t t	gain minus column (I han -0-) or Losses (fi	k), but not less rom column (h))
a					
b					
С	_				
d					
ее					<del> </del>
2 Capital gain net income or (ne	et capital loss).    If gain, also   If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6):			
If gain, also enter in Part I, lin	e 8, column (c) (see the instructions)	If (loss), enter -0-	3		
Part V Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investmen	t Income		•
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable am ilify under section 4940(e). Do not col in each column for each year; see the	nplete this part.	·	Yes	X No
(a)  Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c)  Net value of noncharitable-use asset		(d) Distribution Jumn (b) divided	
beginning in)				diriir (b) divided	
2008	18,703.	531,	278.	<u>.</u>	0.035204
2007	27,662.		698.		0.045670
2006	23,100.		265.		0.042287
2005	17,837.		319.		0.037291
2004	19,189.	426,	644.	<del>,</del>	0.044977
2 Total of line 1, column (d)			2		0.205429
3 Average distribution ratio for the number of years the foundation	he 5-year base period — divide the to n has been in existence if less than 5	tal on line 2 by 5, or by the years	3		0.041086
4 Enter the net value of nonchar	ntable-use assets for 2009 from Part	X, line 5	4		438,562.
5 Multiply line 4 by line 3			5		18,019.
6 Enter 1% of net investment in	come (1% of Part I, line 27b) .		6		124.
7 Add lines 5 and 6			. 7		18,143.
8 Enter qualifying distributions fi	rom Part XII, line 4 .		8		29,065.
If line 8 is equal to or greater to Part VI instructions	than line 7, check the box in Part VI, I	ine 1b, and complete that par	rt using a 19		
BAA				Form	990-PF (2009)

Forr	m 990-PF (2009) HOLDEN FAMILY FOUNDATION	41-1774	4925		Page 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see the i	nstruction		
	a Exempt operating foundations described in section 4940(d)(2), check here		2.4	ر ز ف	
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)	}			
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	-   1	ł		124.
	check here ► X 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).		7.63		3
		ľ	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	في أوا وأن أوار أوار	والمرابط المالي . المنطق أوالي ا
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3			124.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -	0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			124.
6	Credits/Payments		1. 3.7		· (1)
i	a 2009 estimated tax pmts and 2008 overpayment credited to 2009		2.5 %		
1	b Exempt foreign organizations — tax withheld at source			ار در از در در در در در در در در در در در در در	
	c Tax paid with application for extension of time to file (Form 8868) 6c				X
	d Backup withholding erroneously withheld		2 mg 2 mg		
7	Total credits and payments. Add lines 6a through 6d	. 7			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here If Form 2220 is attached	. 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. ▶ 9			124.
10	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 2010 estimated tax	▶ 11			
Par	t VII-A Statements Regarding Activities				
1:	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	d it	يَّهِ عَالِمُ	🖫 Yes	+
	participate or intervene in any political campaign?	•	· ·   _1	a	X
l	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		. 1	b	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materia	als nuhlishe	ئن ا	1 17 2	3262
	or distributed by the foundation in connection with the activities	no publishe	130		4
(	Did the foundation file Form 1120-POL for this year?.		1	С	Х
•	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ij		- "é-"è-"
	(1) On the foundation \$ 0. (2) On foundation managers \$		<u>0. j</u>		155
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp foundation managers ▶ \$ 0.	osed on	, and		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	التعاديد استد	X
-	If 'Yes,' attach a detailed description of the activities	•• •	7-7	\$ #3.5°	13.30
_			7. Per 1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	rticles es	3	Insel Philippin	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4		X
	of 'Yes,' has it filed a tax return on Form 990-T for this year?		4		I/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year? .		. 5		Х
	If 'Yes,' attach the statement required by General Instruction T		- X	14 97	1.24
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1.4.	- Air.	
	By language in the governing instrument, or		[	3	1
	By state legislation that effectively amends the governing instrument so that no mandatory directions t	hat conflict	ر دند.	14	
	with the state law remain in the governing instrument?	nai cominci	. 6	X	
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		. 7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)	<b>&gt;</b>			£4.
	MN		_   , , ,		11:
H	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ــــــــــــــــــــــــــــــــــــــ		المستعدد
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		_8_	b X	Ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)	(3) or 4942	(1)(5)	فتناث	
-	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' contains the foundation within the meaning of section 4942(j) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)?	nplete Part	<i>XiV</i> 9	—	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to	heir names			,,
BAA	and addresses.		10 Form 9	90-PF	(S008)
			1 01111 3	JU-FF	(5000)

Form 990-PF (2009) HOLDEN FAMILY FOUNDATION	41-	177492	5	F	<sup>2</sup> age <b>5</b>
Part VII-A. Statements Regarding Activities Continued			,		
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 acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		x
13 Did the foundation comply with the public inspection requirements for its annual returns and exen	nption applica	tion? .	13	Х	
14 The books are in care of ► H. JANIS HOLDEN Telep	ohone no	952-4	74-8	 1 7 9	
Located at ► 20365 KNIGHTSBRIDGE ROAD EXCELSIOR MN ZIP +	+4 <b>►</b> <u>553</u>				
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check	1	. ,	N/A	►	
and enter the amount of tax-exempt interest received or accrued during the year.		15			N/A
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u>d</u>				
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
<ul><li>1 a During the year did the foundation (either directly or indirectly):</li><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li></ul>	Yes	X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		XNo			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes Yes	X No	[ *		D 15
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	-		
		23 110	12	الم المراجعة المراجعة	
(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)?	Yes	XNo	7.		
(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.)	Yes	XNo	7		
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions describe Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the insti	d in ructions)? .		1 b	N	/A
Organizations relying on a current notice regarding disaster assistance check here	▶	$\cap$ 1		1.7.	<del></del>
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted a that were not corrected before the first day of the tax year beginning in 2009?	acts,		1 c	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			1.53	1. 18. 14. 12. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	三
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes	XNo			
If 'Yes,' list the years ► 20 , 20 , 20 , 20			,	35	
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4 <b>all</b> years listed, answer 'No' and attach statement — see the instructions.)	942(a)(2) to		2b	N	/ <u>A</u>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year	ars here	[;			- <del>-</del>
► 20 , 20 , 20		;		42.12. 24.4	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No	3.3		1
b If 'Yes,' did it have excess business holdings in 2009 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 approximately the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)	tion roved or o		3b	N	A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		[	4a		x
<b>b</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 2009?			4b		X

• 2

Form **990-PF** (2009)

Form 990-PF (2009) HOLDEN FAMILY FOU		4700.14		74925 Page
Part VII-B   Statements Regarding Activit	ies for Which Forr	n 4720 May Be Reg	uired (continued)	
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attem	· ·	on (section 4945(e))?	. Tyes X	No
(2) Influence the outcome of any specific pub	olic election (see sectio			
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		purposes?	Yes X	-
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc, c i 4940(d)(2)? (see instr	organization described (uctions)	Yes X	] No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientifi on of cruelty to children	c, literary, or or or animals?	Yes X	] No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the exception disaster assistance	otions	5b N/A
Organizations relying on a current notice rega	irding disaster assistan	ce check here		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?.	•	N/A. Yes	No Control of the con
6a Did the foundation, during the year, receive all on a personal benefit contract?	ny funds, directly or inc	directly, to pay premium	s Yes X	No Significant
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indired	ctly, on a personal bene	fit contract?	6b X
7a At any time during the tax year, was the found	dation a party to a prof	nibited tax shelter transa	ection? Yes X	No A A A A A A A A A A A A A A A A A A A
<b>b</b> If yes, did the foundation receive any proceed	· •			7b N/A
Part VIII 4 Information About Officers, D				
and Contractors	··			
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(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 account, other allowances
H. JANIS HOLDEN	PRES/TREAS 1.00	0.	0.	0.
EXCELSIOR, MN	1.00			
HELEN HOLDEN	VICE PRESIDE	0.	0.	0.
EXCELSIOR, MN	1.00			1
MARY LOU HOLDEN	SECRETARY	0.	0.	0.
EXCELSIOR, MN	1.00			Í
Enclided, III				
2 Compensation of five highest-paid employee				
(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 account, other allowances
NONE				
Total number of other employees paid over \$50,000	TEEA0306L 0	7/06/09		0 Form <b>990-PF</b> (2009)

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0.

Form 990-PF (2009)

Total. Add lines 1 through 3 .

BAA

Form 990-PF (2009)

see instructions.)	Jieigii io	unuations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  a Average monthly fair market value of securities	1 a	385,099.
<b>b</b> Average of monthly cash balances	1 b	60,142.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	445,241.
e 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	445,241.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,679.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	438,562.
6 Minimum investment return. Enter 5% of line 5	6	21,928.
Part XI Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private oper and certain foreign organizations check here ► and do not complete this part XI and do not complete this part XI and do not complete this part XI and do not complete this part XI and do not complete this part XI and X		ındatıons
1 Minimum investment return from Part X, line 6	1	21,928.
2a Tax on investment income for 2009 from Part VI, line 5 . 2a 124.		
b Income tax for 2009 (This does not include the tax from Part VI) 2b		
c Add lines 2a and 2b	2 c	124.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	21,804.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	21,804.
6 Deduction from distributable amount (see instructions)	6	<del>-</del>
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	21,804.
Part XII Qualifying Distributions (see ınstructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		29,065.
<b>b</b> 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: a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	,
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	29,065.
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	124.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	28,941.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years	her the fou	undation

Part'XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				21,804.
2 Undistributed income, if any, as of the end of 2009: a Enter amount for 2008 only			12,764.	
<b>b</b> Total for prior years: 20, 20, 20	19.00 TO 1.5 mg.	0.	- and the little	き、とうことからるとはなる
3 Excess distributions carryover, if any, to 2009:			- F	医血管溶液
a From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
<b>d</b> From 2007				· · · · · · · · · · · · · · · · · · ·
<b>e</b> From 2008				
f Total of lines 3a through e	0.	T-20		· 1000 1000 1000 1000 1000 1000 1000 10
4 Qualifying distributions for 2009 from Part				
XII, line 4. ► \$29,065.			ري الملام 	
a Applied to 2008, but not more than line 2a	- <u>(1)                                   </u>		12,764.	
<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 .	- 1 feet 1 mars			16,301.
e Remaining amount distributed out of corpus	0.			門は対けがいい
<b>5</b> Excess distributions carryover applied to 2009 .	0.		・ 治・気に関する 海に	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	王经常 语代验证			
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	0.			17 1 20 10 10 10 10 10 10 10 10 10 10 10 10 10
<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	A staffer yar.	0.		
d Subtract line 6c from line 6b. Taxable		_		<b>国内的工作。</b>
amount - see instructions		0.	<u> 1973年127年70年第</u> 3	The later of the later of the
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Hadistributed income for 2000. Cultiment limes			المنتان المنتان المنتان المناسلة	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				5,503.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
(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	0.			
10 Analysis of line 9.		- ,		
a Excess from 2005		** ***	7.	
b Excess from 2006				
c Excess from 2007		}		1
d Excess from 2008.	, , , , , , , , , , , , , , , , , , ,	The second		
e Excess from 2009.				

Form 990-PF (2009) HOLDEN FAMILY FOUNDATION

41-1774925

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Name and address (home or business)  a Paid during the year  SEE STATEMENT 7	<ul> <li>Recipient</li> </ul>	show any relationship to	Foundation	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 7  Total	Name and address (home or business)	substantial contributor	recipient	contribution	rimount
Total	Name and address (home or business)  a Paid during the year	any foundation manager or substantial contributor	status of recipient	contribution	Amount
				. ► 3a	26,000.
Total					

Part XVI-A	Analy	sis of	Income	-Producino	Activities
raflavia	MIIAI	7515 UI	III COIII C	•Frouucing	HUUVIUES

(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
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lculations )				
Accompli	ishment of Exemp	Purpo	oses	
	alculations.)  Accompliance	Accomplishment of Exempt	Accomplishment of Exempt Purpo	14 15,221.

•	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)
N/A	
	<u> </u>
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12 12

Part XVII	nformation Regarding	Transfers To	and T	ransactions a	and I	Relations	hips \	With No	ncharita	ıble
E	Exempt Organizations						-			

-				<del></del>						
	desc	he organization direct ribed in section 501(c ing to political organiz	) of the Code (	engage in any o other than section	on 501(c)(3) org	with any o	ther organizati i) or in section	ion 527,		Yes No
		sfers from the reporti		o a noncharitable	e exempt organ	nzation of:				
	(1)	Cash			,				. 1a(1)	X
	(2)	Other assets							1 a (2)	X
	<b>b</b> Othe	r transactions:								
	(1)	Sales of assets to a n	oncharitable ex	empt organization	on				. 1b(1)	X
	(2) F	Purchases of assets fi	rom a noncharit	able exempt org	ganization				1 b (2)	X
	(3) F	Rental of facilities, eq	uipment, or oth	er assets					1 b (3)	X
	(4) F	Reimbursement arrang	gements						1 b (4)	X
	(5) L	oans or loan guarant	ees						1 b (5)	X
	(6) F	Performance of servic	es or members	hip or fundraisin	g solicitations	,			1 b (6)	X
	c Shar	ing of facilities, equip	ment, mailing li	sts, other assets	s, or paid empl	oyees .			1c	X
	the g any t	e answer to any of the goods, other assets, o ransaction or sharing	r services giver arrangement, s	by the reporting	g foundation If <b>(d)</b> the value of	the foundathe goods	ation received s, other assets	less than fair r , or services re	narket value in ceived.	
	) Line no.	(b) Amount involved	(c) Name	of noncharitable exe	mpt organization	(d)	Description of tra	insfers, transactions	s, and sharing arra	ngements
N	<u>/A</u>									
_		<u> </u>								
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		e foundation directly or ribed in section 501(c) s,' complete the follo	wing schedule.	<del></del> -			exempt organ 527? .	izations	Yes	i X No
_	<del></del>	(a) Name of organiza	ation	<b>(b)</b> Typ	e of organization	on	(	c) Description of	of relationship	
<u>N</u>	<u>/A</u>									
				<b></b>						
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s	Under pen- complete	alties of perjury, I declare the Declaration of preparer (othe	at I have examined the result of the result	os return, including ac duciary) is based on a	ccompanying schedu ill information of whi	lles and staten ch preparer ha	nents, and to the bas any knowledge	est of my knowledge  PRES/T		e, correct, and
SIGN	Sign	ature of officer or trustee				Date		Title		
- 1	Paid	Preparer's signature	2.1	Men	00:	Date 5	- 4- 18	Check if self-	Preparer's Identify (See Signature in	
HERE	Pre-		CEDIT 5 CC	TIADON DIT		<u> </u>	, ,0	employed	P00311145	<del></del>
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-	Only	employed), 655			TE 517		<del></del>	<b>-</b>	(0E0) 00T	0250
BA	A	ZIP code EDI	NA, MN 554	33		<del></del>	<del></del> _	Phone no	(952) 927 Form <b>99</b>	-8350 0-PF (2009)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number				
HOLDEN FAMILY FOUNDATION		41-1774925				
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					
F 000 DF	V 501/07/2) avanual avanual favordation					
Form 990-PF	X 501(c)(3) exempt private foundation	armata fariadation				
	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 GNote: Only a section 501(c)(7), (8), or (10) org	eneral Rule or a Special Rule anization can check boxes for both the General Rule and	d a Special Rule. See instructions				
General Rule —						
For an organization filing Form 990, 990-E2 contributor. (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or mi	ore (in money or property) from any one				
Special Rules —						
509(a)(1)/170(b)(1)(A)(vi) and received from any	form 990 or 990-EZ, that met the 33-1/3% support test of one contributor, during the year, a contribution of the greater or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
For a section 501(c)(7), (8), or (10) organiz aggregate contributions of more than \$1,00 prevention of cruelty to children or animals	ation filing Form 990 or 990-EZ, that received from any 0 for use <i>exclusively</i> for religious, charitable, scientific, . Complete Parts I, II, and III	one contributor, during the year, literary, or educational purposes, or the				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc, purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.						
Coution: An organization that is not asserted by	the Coperal Bule and/or the Special Bules does not file	Schodulo P (Form 900, 900 F7, or				
Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						
BAA For Privacy Act and Paperwork Reduction for Form 990, 990EZ, or 990-PF.	on Act Notice, see the Instructions Scho	edule B (Form 990, 990-EZ, or 990-PF) (2009)				

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org		1 ' -	r identification number 774925
	FAMILY FOUNDATION	1311	774720
	Contributors (see instructions.)	· · · · · · · · · · · · · · · · · · ·	7.6
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	H. JANIS HOLDEN		Person X Payroll
	20365_KNIGHTSBRIDGE_ROAD	\$20,000.	Noncash
	EXCELSIOR, MN 55331		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
RΔΔ	TEEA0702L 06/23/09	Schedule B (Form 990	. 990-EZ, or 990-PF) (2009)

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chedule <b>B</b> (F	orm 990, 990-EZ, or 990-PF) (2009)		Page	1 of	1	of Part II
ame of organizati				Employer ide	ntification nu	ımber
HOLDEN FA	MILY FOUNDATION			41-1774	1925	
Part II = No	oncash Property (see instructions.)					
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see inst	c) estimate) tructions)	Date r	d) eceived
N/	'A					
		\$				
(a) No. from Part I	(b)  Description of noncash property given		FMV (or (see inst	c) estimate) tructions)	Date re	d) eceived
		\$_				
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see inst	c) estimate) ructions)	Date re	d) eceived
		\$_	<del></del>			
(a) No. from Part I	(b) Description of noncash property given		FMV (or ( (see inst	c) estimate) ructions)	(i Date re	d) eceived
				:		
		\$_				
(a) lo. from Part I	(b) Description of noncash property given		FMV (or e (see inst	c) estimate) ructions)	(c Date re	d) eceived

(a) No. from Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

(d) Date received

(c) FMV (or estimate) (see instructions)

(b)
Description of noncash property given

Name of organization

Employer identification number

HOLDEN FAMILY FOUNDATION

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41-1774925

Part III	<u>] Exclusively</u> religious, cnaritable, e organizations aggregating more tl	etc, individual contribution than \$1,000 for the year.((	omplete cols (a) th	501(C)(/), (8), or (10) nrough (e) and the following	a line entry.)		
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of exclusively religious, o	charitable, etc.		N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift i	is held		
Tutti	N/A						
	Transferee's name, addres	Relations	Relationship of transferor to transferee				
(a) No. from	(b)	(c)		(d)			
Part I	Purpose of gift	Use of gift		Description of how gift i	s neid		
		(e)					
	Transferee's name, addres	ship of transferor to transfe	eree				
					-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is	s held		
				•			
	Transferee's name, addres	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is h			
		(e) Transfer of gift					
	Transferee's name, addres:	s, and ZIP + 4	Relations	hip of transferor to transfe	ree		
	<del></del>						
				<del></del>			

FEDERAL STATEMENTS	PAGE 1
HOLDEN FAMILY FOUNDATION	41-1774925
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  • \$ 5,000. \$ 2,500.  TOTAL \$ 5,000. \$ 2,500.	(D) CHARITABLE PURPOSES \$ 2,500. \$ 2,500.
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  . \$ 855. \$ 427. TOTAL \$ 855. \$ 427.	(D) CHARITABLE PURPOSES \$ 428. \$ 428.
(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  \$ 351. TOTAL \$ 351. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
112.	(D) CHARITABLE PURPOSES  \$ 25. 112. \$ 137.
	(A) (B) NET ADJUSTED NET INVESTMENT ADJUSTED NET INCOME  **5

2009

## **FEDERAL STATEMENTS**

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**CLIENT 30110** 

**HOLDEN FAMILY FOUNDATION** 

41-1774925

#### STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS  ADC TELECOMMUNICATIONS ALCATEL- LUCENT AT & T INC. CENTERPOINT ENERGY COMCAST CORP CL A COMMSCOPE INC FIRSTENERGY CORP VALEANT PHARMACEUTICALS PINNACLE WEST CAPITAL CORP RRI ENERGY INC COM UNION PACIFIC CORP XCEL ENERGY AIR FRANCE MERCK AND CO. RAYTHEON CO WELLS FARGO INTEL CORP ALLETE BANK AMER CORP BB&T CORP GLAXOSMITHKLINE PLC T C F FINANCIAL CORP VERIZON COMMUNICATIONS			VALUE
	TOTAL	\$ 421,021.	\$ 482,126.

#### STATEMENT 6 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

H. JANIS HOLDEN

CARE OF:

STREET ADDRESS:

20365 KNIGHTSBRIDGE RD

CITY, STATE, ZIP CODE: TELEPHONE:

EXCELSIOR, MN 55331

FORM AND CONTENT:

FORMAL OR INFORMAL LETTER AND BROCHURE OR OTHER

INFORMATION ON CHARITY

SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS: NO

NONE NONE

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## **FEDERAL STATEMENTS**

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**CLIENT 30110** 

#### **HOLDEN FAMILY FOUNDATION**

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### STATEMENT 7 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
EMERGENCY FOOD SHELF NETWORK 8501 54TH AVE NORTH NEW HOPE, MN 55428	NONE	PUBLIC	EMERGENCY ASSISTANCE	\$ 3,000.
SALVATION ARMY 2024 LYNDALE AVE N MINNEAPOLIS, MN 55411	NONE	PUBLIC	EMERGENCY ASSISTANCE	3,000.
COURAGE CENTER 3915 GOLDEN VALLEY RD GOLDEN VALLEY, MN 55422	NONE	PUBLIC	EMERGENCY ASSISTANCE	2,000.
COMMUNITY EMERGENCY SERVICE 1900 11TH AVE S MINNEAPOLIS, MN 55404	NONE	PUBLIC	EMERGENCY ASSISTANCE	2,500.
CHILDREN'S HOME SOCIETY OF MN 1605 EUSTIS ST ST. PAUL, MN 55108	NONE	PUBLIC	EMERGENCY ASSISTANCE	2,000.
TC HABITAT FOR HUMANITY 3001 4TH ST SE MINNEAPOLIS, MN 55414	NONE	PUBLIC	EMERGENCY ASSISTANCE	2,000.
NATURE CONSERVANCY OF MN 1101 W. RIVER ROAD PARKWAY MINNEAPOLIS, MN 55415	NONE	PUBLIC	EMERGENCY ASSISTANCE	1,500.
VIKING COUNCIL BOY SCOUTS 5300 GLENWOOD AVE MINEAPOLIS, MN 55422	NONE	PUBLIC	EMERGENCY ASSISTANCE	1,000.
LUTHERAN SOCIAL SERVICES 2485 COMO AVE ST PAUL, MN 55108	NONE	PUBLIC	EMERGENCY ASSISTANCE	3,000.
HUMANE SOCIETY OF HENNEPIN CTY 845 MEADOW LANE GOLDEN VALLYE, MN 55422	NONE	PUBLIC	EMERGENCY ASSISTANCE	1,500.
METRO HOPE MINISTRIES 2739 CEDAR AVE S MINNEAPOLIS, MN 55407	NONE	PUBLIC	EMERGENCY ASSISTANCE	1,500.
MINNESOTA LAND TRUST 2356 UNIVERSITY AVENUE W., #240 ST. PAUL, MN 55114	NONE	501C3	EMERGENCY ASSISTANCE	1,000.

State of the

2009

## **FEDERAL STATEMENTS**

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**HOLDEN FAMILY FOUNDATION** 

41-1774925

STATEMENT 7 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRANT		 AMOUNT
INTERNATIONAL HABITAT FOR HUMANITY 270 PEACHTREE ST NW, #1300 ATLANTA, GA 30303	NONE	501C3	EMERGENCY ASSISTANCE		\$ 1,000.
LOAVES AND FISHES 1917 LOGAN AVENUE S MINNEAPOLIS, MN 55403	NONE	501C3	EMERGENCY ASSISTANCE		1,000.
				TOTAL	\$ 26,000.