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Form. 990-PF

Return of Private Foundation

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

OMB No 1545-0052

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. ▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf

Fc	or cal	endar year 2015 or tax year beginning			, 2015	and ending	1		, 20	
1	lame o	of foundation THE HOLDEN FAMILY FO	UNDAT	ION			A	Employer identifi	cation number	
	C/O	BRENT L HOLDEN					- }	46-160613	8	
7	lumbe	r and street (or P O box number if mail is not delivered	to street a	eddress)		Room/suite	suite B Telephone number (see instructions)			
	14 0	PELICAN CREST DR.						(949) 72	1-1233	
		town state or province country and ZIP or foreign pos	tal code			L	+	(343) 72	1-1233	
	ity or	town state of province country and zir or loreign pos	iai wue				l _c	If everyther applies	ation is	
							١٠	If exemption application pending, check here		
		PORT COAST, CA 92657			· · · · · · · · · · · · · · · · · · ·		4		,	
G	Che	ck all that apply Initial return		Initial return	of a former p	oublic charity	/ p	1 Foreign organiza	tions, check here	
		Final return		Amended re	turn			2 Foreign organiza		
		Address change		Name chang	е			85% test check to computation		
Н	Che	ck type of organization X Section 501(c)(3) ex	empt private	foundation		┨_	•		
1		ection 4947(a)(1) nonexempt charitable trust		ther taxable pr		tion	[n status was terminated	
~!~ 				nethod X C		rual	┥_			
•		· —	ther (sp		u311 //.cc	,, uu i			in a 60-month termination	
		· · · · · · · · · · · · · · · · · · ·		d) must be on ca	ch hacie l		-{	anger section sor(b)(1)(b), check flate .	
r		Analysis of Revenue and Expenses (The	oranni (c	i) musi be on ca.	l basis)				(d) Disbursements	
L	aiti	total of amounts in columns (b), (c), and (d)		Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable	
		may not necessarily equal the amounts in	ex	penses per books	incon	ne		ıncome	purposes	
-		column (a) (see instructions))							(cash basis only)	
Į	1	Contributions gifts grants, etc received (attach schedule) .		6,435.						
	2	Check I if the foundation is not required to attach Sch B								
ļ	3	Interest on savings and temporary cash investments.								
	4	Dividends and interest from securities		50,789.	5	0,789.				
	5a	Gross rents			1			-		
	b	Net rental income or (loss)								
<u>o</u>		Net gain or (loss) from sale of assets not on line 10		-61,613.						
ᆵ		Gross sales price for all 1,401,628.					-			
evenue	7	Capital gain net income (from Part IV, line 2) ,								
~	8	Net short-term capital gain								
		Income modifications		······································						
		Gross sales less returns			 					
	.	Less Cost of goods sold .								
		Gross profit or (loss) (attach schedule)					_		 	
	11	Other income (attach schedule) ATCH, 1		2,000.						
	12	Total. Add lines 1 through 11		-2,389.	5	0,789.				
-	13			0.	<u>-</u>	3,733.			 	
Š		Compensation of officers, directors, trustees, etc							 -	
penses	14	Other employee salaries and wages	ļ		 				 	
<u>-</u>	15	Pension plans_employee-benefits	 		 				 	
X	Ioa	Legal fees (attach schemle MED.	 		 				 	
ە	ь	Accounting fees (attach schedule)	 	6 400	 				 	
₹	C	Other de essional (ees) (aftach fe fe de le	 	6,400.	 					
Ę	17	Interest	ļ		ļ				ļ <u>. — — — — — — — — — — — — — — — — — — — </u>	
ij	18	Taxes (attach-schedule) (see Instructions).			_				 	
Ē	19	Depreciation (atlacti sabedule) and depletion.	ļ. <u></u> .						<u> </u>	
ġ	20	Occupancy	 		ļ				<u> </u>	
70	21	Travel, conferences, and meetings	L						<u> </u>	
and Administrative	22	Printing and publications								
þ	23	Other expenses (attach schedule) ATCH .3		34,089.	3	1,534.			20	
¥.	23 24 25	Total operating and administrative expenses.								
er	{	Add lines 13 through 23		40,489.	3	1,534.			20	
o	25	Contributions, gifts, grants paid		125,000.				- <u> </u>	125,000	
_	26	Total expenses and disbursements Add lines 24 and 25		165,489.	3	1,534.			125,020	
_	27	Subtract line 26 from line 12			<u> </u>				 	
	1	Excess of revenue over expenses and disbursements]	-167,878.	}					
	1	Net investment income (if negative, enter -0-)			1	.9,255.			 	
	ı	Adjusted net income (if negative, enter -0-).		·	 				 	
			1							

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Part II		Attached schedules and amounts in the	Beginning of year	End o	of year	
Fal	U.	Balance Sheets description column should be for end-of-you amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing ,	31,000.	55,480.	55,480.	
2		Savings and lemporary cash investments	1 101 001	103,905.	103,905	
		Accounts receivable				
		Less allowance for doubtful accounts ▶				
		Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
٠ ا		Grants receivable				
6	6	Receivables due from officers, directors, trustees, and oth	er			
		disqualified persons (attach schedule) (see instructions)				
7	7	Other notes and loans receivable (attach schedule)		·		
ļ		Less allowance for doubtful accounts ▶				
श्र		Inventories for sale or use				
9	_	Prepaid expenses and deferred charges				
_		investments - U.S. and state government obligations (attach schedule).				
Ì	b	Investments - corporate stock (attach schedule)				
1		Investments - corporate bonds (attach schedule)				
11	1	Investments - land, buildings, and equipment basis				
}		Less accumulated depreciation (attach schedule)				
12	2	Investments - mortgage loans				
1:		Investments - other (attach schedule) ATCH 4		2,523,429.	2,467,988.	
14	4	Land, buildings, and equipment basis				
1		Less accumulated depreciation (attach schedule)				
1:	5	Other assets (describe)	T		
10		Total assets (to be completed by all filers - see t	he			
		instructions Also, see page 1, item I)	2,850,692.	2,682,814.	2,627,373.	
1		Accounts payable and accrued expenses				
11	8	Grants payable				
S 19	9	Deferred revenue				
iabilities	0	Loans from officers, directors, trustees, and other disqualified persons.				
요 2	1	Mortgages and other notes payable (attach schedule)				
<u>ت</u> 2:	2	Other liabilities (describe)			
2:	3	Total liabilities (add lines 17 through 22)	. 0.	0.		
		Foundations that follow SFAS 117, check here . ▶				
alances		and complete lines 24 through 26 and lines 30 and 3	B1.		!	
E 2	4	Unrestricted				
19 2:	5	Temporarily restricted				
	6	Permanently restricted				
or Fund		Foundations that do not follow SFAS 117,	<u>x</u>]		-	
۳		check here and complete lines 27 through 31.				
0 2	7	Capital stock, trust principal, or current funds	· <u></u>	<u> </u>		
3 2	8	Paid-in or capital surplus, or land, bldg , and equipment fund				
Assets	9	Retained earnings, accumulated income, endowment, or other funds.		2,682,814.		
<u>∓</u>	0	Total net assets or fund balances (see instructions)	2,850,692.	2,682,814.		
2 S 3	1	Total liabilities and net assets/fund balances (s				
		instructions)		2,682,814.		
		Analysis of Changes in Net Assets or Fund B	alances			
	Tota	al net assets or fund balances at beginning of year - P			_	
2	Tota end	al net assets or fund balances at beginning of year - P I-of-year figure reported on prior year's return)		1	2,850,692.	
	Tota end Ent	al net assets or fund balances at beginning of year - P I-of-year figure reported on prior year's return) er amount from Part I, line 27a			2,850,692. -167,878.	
3	Tota end Ent Oth	al net assets or fund balances at beginning of year - P l-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize) ▶		1 2 3	-167,878.	
3 4	Tota end Ent Oth Add	al net assets or fund balances at beginning of year - Pil-of-year figure reported on prior year's return)er amount from Part I, line 27aer increases not included in line 2 (itemize)		1 2 3 4		
3 4 4 5	Total end Ent Oth Add Dec	al net assets or fund balances at beginning of year - P l-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize) ▶		1 2 3 4 5 5	-167,878.	

1 0111 990-F1 (2013)				 	Page 3	
Part IV Capital Gains	and Losses for Tax on Inv	restment Income				
(a) List and	describe the kind(s) of property sold	(e g , real estate,	(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold	
2-story br	2-story brick warehouse, or common stock, 200 shs MLC Co)					
1a PUBLICLY TRADED S	ECURITIES		D Donation D	(mo, day, yr) VARIOUS	VARIOUS	
		*· *** *** *** ***		VARTOOS	VARIOUS	
<u>b</u>			<u> </u>	<u> </u>	 	
<u>C</u>				! 		
d						
е						
110	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	oss)	
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini		
a 1,401,628		1,463,241	-61	,613		
		1,463,241	() L			
_b		-				
С			ļ			
d		<u></u>				
е		<u> </u>	<u> </u>			
Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69	(h)	Gains (Col (h) g	ain minus	
	(ı) Adjusted basis	(k) Excess of col (i)		(k), but not less		
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co		
						
a			 			
<u>b</u>			ļ			
С						
d		<u> </u>				
е				-		
		f gain, also enter in Part I, line 7				
Capital gain net income d	or (net canital loss)	f (loss), enter -0- in Part I, line 7	2		-61,613.	
3 Net short-term capital ga	`	,			01,010.	
	in or (loss) as defined in sections					
=		structions) If (loss), enter -0- in $\}$			_	
Part I, line 8		<u> </u>	3		0.	
Part V Qualification L	<u> Jnder Section 4940(e) for Re</u>	educed Tax on Net Investment I	ncome			
	the section 4942 tax on the distr not qualify under section 4940(e)	butable amount of any year in the b Do not complete this part	ase perio	d'7	Yes X No	
1 Enter the appropriate am	ount in each column for each ye	ar, see the instructions before making	ng any ent	ries		
(a)	(b)	(c)	ľ	(d)		
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution r (col (b) divided by		
2014	149,553.	3,111,898.	 	(cor (b) divided b	0.048058	
	50,000.		 	 -		
2013	NONE	2,955,164.	 		0.016920	
2012	NONE	2,956,970.	ļ			
2011		<u> </u>	<u> </u>			
2010						
2 Total of line 1, column (d)		2		0.064978	
		de the total on line 2 by 5, or by the	-			
_					0.021659	
number of years the four	idation has been in existence if le	ess than 5 years	3		0.021039	
4 Enter the net value of no	ncharitable-use assets for 2015	from Part X, line 5	4	2,	804,918.	
5 Multiply line 4 by line 3.			5		60,752.	
3 Multiply line 4 by line 3.		· · · · · · · · · · · · · · · · · · ·				
	. (40/ (5)) (67)		6		193.	
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	• -			
					60 04E	
7 Add lines 5 and 6			7		60,945.	
			1			
8 Enter qualifying distributi	ons from Part XII, line 4		8		125,020.	
		x in Part VI, line 1b, and complete		using a 1% ta	x rate See the	
Part VI instructions		<u> </u>	•	<u>-</u>		
JSA				Forn	990-PF (201	
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					2	

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Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"

Enter the states to which the foundation reports or with which it is registered (see instructions)

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X

Х

7

8b

Х

Pai	t VII-A	Statements Regarding Activities (continued)			
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning	g of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11	1	Х
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<u> </u>		
		nad advisory privileges? If "Yes," attach statement (see instructions)	12		х
13		foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
-		address N/A			
14		ks are in care of BRENT & CHERYL HOLDEN Telephone no 949-721	-123	3	
		at ▶ 34 PELICAN CREST DRIVE NEWPORT BEACH, CA ZIP+4 ▶ 92657			
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	T
		er the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
		ank, securities, or other financial account in a foreign country?	16	1	х
		e instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	_	ign country ▶			ĺ
Pa	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Fo	rm 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a		the year did the foundation (either directly or indirectly)			
	-	age in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
		row money from, lend money to or otherwise extend credit to (or accept it from) a]		
		qualified person?			
		nish goods, services or facilities to (or accept them from) a disqualified person?		i	
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Tran	nsfer any income or assets to a disqualified person (or make any of either available for			
	the	benefit or use of a disqualified person)?			
	(6) Agr	ee to pay money or property to a government official? (Exception Check "No" if the			}
	four	ndation agreed to make a grant to or to employ the official for a period after			
	tern	nination of government service, if terminating within 90 days)		1	1
t	If any	answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	
	section	53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N	/ A
	Organiz	ations relying on a current notice regarding disaster assistance check here	1		
c	Did the	e foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	İ		
	were no	it corrected before the first day of the tax year beginning in 2015?	1c	ļ	X
2	Taxes	on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operatir	ng foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ	ļ	ļ
а	At the	end of tax year 2015, did the foundation have any undistributed income (lines 6d and			1
	6e, Pari	XIII) for tax year(s) beginning before 2015?			
	If "Yes,"	list the years			
t	Are the	ere any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	1
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
		stisted, answer "No" and attach statement - see instructions)	2b	N/	A
C	: If the p	provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1	[
	-				
3a		e foundation hold more than a 2% direct or indirect interest in any business enterprise			
	•	ime during the year?		ł	ļ
ľ		" did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or		ļ.	
		fied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	ł		ŀ
		ssioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
)-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	2 h	.,	J,
4-		ion had excess business holdings in 2015)	3b	N/	X
		e foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? e foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	├	
		ble purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		x
	J. Id. Rat	Parameter and the second control of the second seco		A DE	/2015

Par	t VII-B Sta	atements Regarding Activities	for Which Form 4	720 May Be Requ	uired (continued)		
5 a	During the year	did the foundation pay or incur any amou	int to				
	(1) Carry on pro	opaganda, or otherwise attempt to influe	nce legislation (section	4945(e))?,,	Yes X No		1 1
	(2) Influence th	ne outcome of any specific public ele-	ction (see section 49	955), or to carry on			
	• •	ndirectly, any voter registration drive?	•	•			
		rant to an individual for travel, study, or of					
	(4) Provide a g	grant to an organization other than a	charitable, etc., orga	inization described in	'		
		5(d)(4)(A)? (see instructions)					
	` '	any purpose other than religious, ch or for the prevention of cruelty to children		•			
b	and the state of t						
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?						
	Organizations r	elying on a current notice regarding disas	ter assistance check h	ere , , ,	>		
С	If the answer	is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	ax		1 1
	because it main	ntained expenditure responsibility for the g	rant?		Yes No	,	
	If "Yes," attach	the statement required by Regulations sec	tion 53 4945-5(d)				
6a		ation, during the year, receive any fun		ctly, to pay premium	18		1 1
		enefit contract?	•		Yes X No	,	
b		tion, during the year, pay premiums, dire			ct?	6 b	x
	If "Yes" to 6b, fi	•	, , ,				
7 a	At any time dur	ing the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?	Yes X No	,	1 1
b	•	e foundation receive any proceeds or have	•	•		7 b	N/A
Par	t VIII Info	rmation About Officers, Director	s, Trustees, Four	ndation Managers	, Highly Paid Emp	loyees,	
		Contractors s, directors, trustees, foundation m	vanagere and their	compareation (see	inetructions)		
			(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expen	se account,
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	emptoyee benefit plans and deferred compensation		lowances
ATC	1 5			0.	0.		0.
	 _						
2	Compensation "NONE."	n of five highest-paid employees	(other than those	included on line		ons). If n	one, enter
(a)	Name and address	s 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) Expens other all	se account, lowances
	NONE						
			ļ				
				i			
Total	number of oth	er employees paid over \$50,000	<u> </u>	<u></u>	<u> ▶</u>		
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Total. Add lines 1 through 3 . .

Form 990-PF (2015) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes 1a 2,692,896 a Average monthly fair market value of securities 154,736 1b c Fair market value of all other assets (see instructions) 1c 1d 2,847,632. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) _______1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 2,847,632. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 42,714 2,804,918 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 140,246. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ and do not complete this part) 140.246. Minimum investment return from Part X, line 6 2a Tax on investment income for 2015 from Part VI, line 5 2a Income tax for 2015 (This does not include the tax from Part VI). 2b 193. 140,053. Distributable amount before adjustments Subtract line 2c from line 1 4 5 140,053. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, 140,053. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 125,020. 1a b Program-related investments - total from Part IX-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 a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3h Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 125,020. 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) 193. Adjusted qualifying distributions. Subtract line 5 from line 4 6

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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qualifies for the section 4940(e) reduction of tax in those years

Part 2	Undistributed Income (see instri	uctions)			
		(a)	(b)	(c)	(d)
1 Dis	stributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
line	e7				140,053.
	distributed income, if any, as of the end of 2015				
	ter amount for 2014 only,			108,561.	
	at for prior years 20 13 ,20 12 ,20 11				
3 Ex	cess distributions carryover, if any, to 2015	ļ			
	om 2010				
	om 2011				
	om 2012			}	
	om 2013			j	
	om 2014	0.1			
	otal of lines 3a through e				
	valifying distributions for 2015 from Part XII, e 4 ▶ \$125,020.				
а Ар	plied to 2014, but not more than line 2a			108,561.	
	oplied to undistributed income of prior years lection required - see instructions)				
	eated as distributions out of corpus (Election quired - see instructions)				
	oplied to 2015 distributable amount				16,459.
e Re	emaining amount distributed out of corpus				
	cess distributions carryover applied to 2015.				
	an amount appears in column (d), the same nount must be shown in column (a)				
	nter the net total of each column as				
in	dicated below:				
a Co	orpus Add lines 3f, 4c, and 4e Subtract line 5				
	or years' undistributed income Subtract				
lın c En	e 4b from line 2b				
	come for which a notice of deficiency has		,		
	en issued, or on which the section 4942(a)				
	chas been previously assessed				
	ibtract line 6c from line 6b Taxable nount - see instructions				
e Ur	idistributed income for 2014. Subtract line				
	from line 2a Taxable amount - see				
	ndistributed income for 2015. Subtract lines in and 5 from line 1. This amount must be				
	stributed in 2016		·		123,594.
7 Ar	mounts treated as distributions out of corpus				
to	satisfy requirements imposed by section				
17	0(b)(1)(F) or 4942(g)(3) (Election may be				
re	quired - see instructions)				
	cess distributions carryover from 2010 not oplied on line 5 or line 7 (see instructions)				
	cess distributions carryover to 2016.				-
Su	ubtract lines 7 and 8 from line 6a	0.			
10 Ar	nalysis of line 9				
	cess from 2011				
	cess from 2012				
	cess from 2013			į	
	ccess from 2014				
e Ex	cess from 2015	L			5 990-DE (2015

c Any submission deadlines

Form 990-PF (2015)

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

b The form in which applications should be submitted and information and materials they should include

orm 990-PF (2015)	an (continued)			Page
art XV Supplementary Informati	Ouring the Year or Appl	oved for E	itura Paymont	
Recipient	If recipient is an individual	Foundation	nure Fayment	·
3 Grants and Contributions Paid I Recipient Name and address (home or business	show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
•				
ATCH 6				
		1		
				•
Total			▶ 3a	125,00
b Approved for future payment				
			i	
			İ	
		1		
]		
Total			▶ 3b	
				Form 990-PF (2

Page 12

Part XVI	-A Analysis of Income-Prod	ucing Act	ivities				
	amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)	
-		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
-	service revenue			 		(See instructions)	
				 			
_							
				 			
			·- ·- ·- ·- ·- · · · · · · · · · · · ·				
f					-		
	and contracts from government agencies			-			
_	-			- 		2,000	
	ship dues and assessments						
	ds and interest from securities			14	50,789.		
	tal income or (loss) from real estate						
	-financed property						
	debt-financed property						
	al income or (loss) from personal property.						
	vestment income						
	loss) from sales of assets other than inventory			18	-61,613.		
	ome or (loss) from special events · · ·						
	rofit or (loss) from sales of inventory						
11 Other re	evenue a						
b							
С							
d							
е		ļ	<u> </u>				
	Add columns (b), (d), and (e)				-10,824.	2,000	
	dd line 12, columns (b), (d), and (e)				13	-8,824	
	heet in line 13 instructions to verify calc						
Part XVI	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses		
Line No.	Explain below how each activit	-					
▼	accomplishment of the foundation	on's exemp	ot purposes (other than	by providing	funds for such purpose	s) (See instructions)	
2	DUES ASSESSED BY BOAR	D OF DIE	ECTORS FOR MEMBE	ERSHIP II	J		
	CORPORATION WHICH INC						
	AND VOTE ON ALL FOUND						
· · · · · · · · · · · · · · · · · · ·							
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			·				
							
	<u> </u>						

		Exempt Org.	anizations									
		organization dire									Ye	s No
		ion 501(c) of the 0	Code (other than	section 501	1(c)(3) org	anization	s) or in se	ection 527,	relating to p	olitical		
	_	rations?										
		ers from the report	_									
		sh										$\frac{x}{x}$
_		ransactions						• • • • • •		<u>1</u>	3(2)	
			oncharitable eve	mnt organiza	ation							x
12) Dur	es of assets to a r chases of assets	from a noncharit	ahle evemnt	organizatio	 .n				11	1(1)	$\frac{1}{x}$
13	., . a. B) Rer	ntal of facilities, eq	upment or other	r assets	organizatio	"				1	1/2)	$\frac{1}{x}$
(4) Rei	mbursement arran	gements							1	1(4)	 x
(s) Loa	ans or loan guarant	ees							11	1(5)	X
(ε	i) Per	formance of servi	ces or membersl	hip or fundra	aising solicit	tations	 			1	2(6)	X
		g of facilities, equip									1c	Х
d If	the a	answer to any of	the above is "Ye	es," complet	te the folio	owing so	hedule C	Column (b)	should alwa	ys show t	ne fair	market
va	alue c	of the goods, othe	r assets, or serv	rices given b	by the repo	orting for	undation	If the found	dation receive	ved less th	an fair	market
V	alue ii	n any transaction	or sharing arran	gement, sho	ow in colui	mn (d) th	ne value o	of the good	s, other ass	ets, or ser	rices r	eceived
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable e	exempt organiz	ation		ription of trans	fers, transaction	is, and sharing	arrange	ments
		N/A					N/A					
		<u>-</u>	_			-						
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			<u> </u>									
		foundation directly									. r	
		ed in section 501(ther than se	ection 501(c)(3)) or	ın section	5277		L	Yes	X No
<u>b it</u>	"Yes	" complete the fol (a) Name of organiza										
		(a) Name or organiza	lion	(0)) Type of orga	nization			(c) Description	of relationship		
-						-						
								-				
							•					
	Under	penalties of penjury I de	clare that I have exam	ined this return.	including acco	mpanying so	hedules and s	statements and	to the best of m	y knowledge a	ind belief	, it is true,
Sign	correc	t, and complete Declaration	of preparer (other than t				oreparer has an	ny knowledge	F.			
Here	X			5	17-	16	PRESI	DENT	Ma wi		iscuss (f rer show	
nere	Sign	nature of officer or truste	e	Date	•		Title		(se	e instructions)?	X Ye	s No
	<u> </u>	1=			5							
Paid		Print/Type preparer's		Prepare	signature	Mar	caus	Date /	Check	If PTI		
. a.a Prepa	100	JEFF J SACCA						5/16/	self-en		1390)40
-			PRICEWATERHO		·				Firm's EIN	13-400	8324	
Use C	лпу	i	01 SOUTH FI	/ / /	REET					010 07-		
		<u>_</u>	LOS ANGELES,	CA (X	 		900	1/	Phone no	213-356	-6000	

Schedule B

(Form 990, 990-EZ,

Schedule of Contributors

OMB No 1545-0047

or 990 PF) Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Department of the Treasury

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

Employer identification number Name of the organization THE HOLDEN FAMILY FOUNDATION 46-1606138 C/O BRENT L HOLDEN

Organization type (check on	e)
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
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special Rules	
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990. Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one g the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III
contributor, during contributions total during the year fo General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one go the year, contributions exclusively for religious, charitable, etc., purposes, but no such led more than \$1,000. If this box is checked, enter here the total contributions that were received in an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the lies to this organization because it received nonexclusively religious, charitable, etc., contributions in more during the year
Caution. An organization the	at 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 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Contradict D (r contradict contra	Page
Name of organization THE HOLDEN FAMILY FOUNDATION	Employer identification number
C/O BRENT L HOLDEN	46-1606138

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1_	BRENT AND CHERYL HOLDEN 34 PELICAN CREST DR. NEWPORT COAST, CA 92657	\$ 6,435.	Person X Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

Name of organization THE HOLDEN FAMILY FOUNDATION C/O BRENT L HOLDEN

Employer identification number

46-1606138

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \\$	

	(Form 990-990-EZ, or 990-PF) (2015) rganization THE HOLDEN FAMILY FOUNDA	TION	P.ige 4 Employer identification number
•	C/O BRENT L HOLDEN		46-1606138
Part III	(10) that total more than \$1,000 for th	e year from any one cont ns completing Part III, enter year (Enter this information	ons described in section 501(c)(7), (8), or ributor. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc., once. See instructions.) ▶ \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) Na			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
			

JSA 5E1255 3 000

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES

PER BOOKS 2,000.

DESCRIPTION MEMBERSHIP DUES

TOTALS

2,000.

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE

AND

EXPENSES

PER BOOKS

TAX PREPARATION FEES

DESCRIPTION

6,400.

TOTALS

6,400.

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EXPENSES
OTHER
1
_
PART
990PF.
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CHARITABLE PURPOSES	20.	20.
NET INVESTMENT INCOME 31.534.		31,534.
REVENUE AND EXPENSES PER BOOKS	2,500.	34,089.
DESCRIPTION RANK FFFS	CALIFORNIA SECRETARY OF STATE FEDERAL TAX LIABILITY CALIFORNIA TAXES AND FEES	TOTALS

20.

20.

ATTACHTENT C PAGE 23

+ 1:(E, -);:::4

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

MAINSTAY CONVERTIBLE FUND	T ROWE PRICE ST BOND FUND	ARTISAN MID CAP FUND	GOLDMAN SACHS COMMODITY STRAT	VANGUARD 500 INDEX ADMIRAL	OPPENHEIMER DEVELOPMENT MKT I	PRINCIPAL REAL ESTATE SEC INST	DODGE & COX INTERNATIONAL STK	PRINCIPAL MIDCAP FUND CLASS IN	TEMPLETON EMERGIN MARKETS SMAL	CREDIT SUISSE COMMODITY RETURN
MAINSTAY	T ROWE P	ARTISAN	GOLDMAN	VANGUARD	OPPENHEI	PRINCIPA	DODGE &	PRINCIPA	TEMPLETO	CREDIT S

TOTALS

2,467,988.

2, 523, 429.

ENDING <u>FMV</u>	104,853. 597,373. NONE 717,439. NONE 240,188. 321,599. 354,947. 72,281. 59,308.
ENDING BOOK VALUE	120,099. 604,330. NONE NONE 653,000. 211,000. 394,000. 391,000. 75,000.

ATTACHIENT E PAGE 25

OUNDATION	
FAMILY F	
HOLDEN	
TH FI	

FORM 990PE, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה ה	4TT+C-1/21,T 5
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	E (PENSE ACCT AND OTHER ALLOWANCES
BRENT HOLDEN 34 PELICAN CREST DR. NEWPORT COAST, CA 92657	PRESIDENT / CFO / DIRECTOR 1.00	Ċ		.0
CHERYL HOLDEN 34 PELICAN CREST DR. NEWPORT COAST, CA 92657	V.P. / SECRETARY / DIRECTOR 1.00	O		Ö
	GRAND TOTALS	0	.0	• 0

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GRANIS AND CONTRIBUTIONS PAID DURING THE YEAR	1
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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 5,000 PC SUPPORT ITS MISSION	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 15,000 SUPPORT ITS MISSION	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 15,000 SUPPORT ITS MISSION	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 10,000 SUPPORT ITS MISSION	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 10,000 PC SUPPORT ITS MISSION	N/A TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND 25,000 SUPPORT ITS MISSION
RELATIONSHIP TO SUBSTANTIA AND FOUNDATION STATUS OF R	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC
RECIPIENT NAME AND ADDRESS	BOYS & GIRLS CLUB 295 E YALE LOOP IRVINE, CA 92604	HUMAN OPTIONS P O. BOX 53745 IRVINE, CA 92619	ORANGEWOOD FOUNDATION 1575 E 17TH STREET SANTA ANA, CA 92705	ST JUDE CHILDREN'S HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	THOMPSON FOUNDATION FOR AUTISM 2718 FORUM BLVD STE 3A COLUMBIA, MO 65203	ACADEMY OF BUSINESS LEADERSHIP 2244 WALNUT GROVE AVE QUAD 2A

ATTACHMENT 6 PAGE 26

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46-1606138

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YFAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

N/A PC

PURPOSE OF GRANT OR CONTRIBUTION

TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND SUPPORT ITS MISSION

10,000

AMOUNT

ATTACHMENT 6 (CONT'D)

TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND SUPPORT ITS MISSION

N/A PC

N/A PC

SERVING PEOPLE IN NEED 151 KALMUS DRIVE, #H-2 COSTA MESA, CA 92626

N BROOKFIELD, MA 01535

VALLEY VIEW SCHOOL

PO BOX 338

SANTA ANA, CA 92706 1901 N FAIRVIEW ST

SAMUELI ACADEMY

25,000

TO PROVIDE FUNDS FOR THE ENTITY'S OPERATIONS AND

SUPPORT ITS MISSION

10,000

TOTAL CONTRIBUTIONS PAID

125,000

ATTACHMENT 6

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