2949114610915

Form 990-PF Department of the Treasury Internal Revenue Service

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

or occurrent and thousand as through a suitable

OMB No 1545-0052 2017

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

QUII

Open to Public Inspection

For	alend	lar year 2017 or tax year beginning , a	and ending				
Nan	ne of fou	indation			A Emple	oyer identification number	
HOLDEN FAMILY CHARITABLE FOUNDATION						-2227887	
		d street (or P O box number if mail is not delivered to street address) CAPE CENTER DRIVE	Ro	om/suite	B Telepi	hone number (see instructions	5)
		, state or province, country, and ZIP or foreign postal code			 		
		TTEVILLE NC 28304			C If exer	mption application is pending,	check here
G C	heck a		rn of a former public cl	narity	D 1. Fo	reign organizations, check he	re •
		Final return Amended				reign organizations meeting t	
		Address change Name cha			I	% test, check here and attach	
H C	hack t	type of organization X Section 501(c)(3) exempt private	<u>. </u>	~ /\-	E If privi	ate foundation status was tem	nuncted wader
			le private foundation			n 507(b)(1)(A), check here	▶ ☐
		ket value of all assets at J Accounting method	X Cash Acc	rual	F If the t	foundation is in a 60-month te	mination
		ear (from Part II, col (c), Other (specify)	00011 7.00			section 507(b)(1)(B), check h	
	e 16) i	0.50 4.50	he on cash hasis \		ł		
	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and		<u> </u>		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books		 ,		(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	69,139				
	2	Check ▶ ☐ If the foundation is not required to attach Sch. B					
Revenue	3	Interest on savings and temporary cash investments				· · · · · · · · · · · · · · · · · · ·	
	4	Dividends and interest from securities					
	5a	Gross rents		~····			
	b	Net rental income or (loss)					
	6a	Net gain or (toss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a					
ď	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications					· · · · · · · · · · · · · · · · · · ·
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold			-		
	С	Gross profit or (loss) (attach schedule)				<u> </u>	
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	69,139	 -	0	0	
Ş	13	Compensation of officers, directors, trustees, etc	0				<u> </u>
ıse	14	Other employee salaries and wages					
penses	15	Pension plans, employee benefits	<u> </u>			 	
X	16a	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule)	F				
<u> </u>	b	Accounting fees (attach schedule) STMT 1 Other professional less (attach schedule)	543			<u> </u>	
鬟	C	Other professional est attach schedule) Interest MAY 1 4 2018					
يني	17	Taxes (attach schedule (see instructions) STMT 2 Depreciation (attach schedule) and people attach STMT 3	4 220				
	18	Taxes (attach schedule) (see instructions)	4,228				
ĔΕ	19						
\$	20	Occupancy					
وَيَ	21	Travel, conferences, and meetings					
81년7 의 0 기기 제리 Administrative Ex	22	Printing and publications Other expenses (att sch) STMT 4	5,504			 -	
	23	,	3,304				
ati	24	Total operating and administrative expenses.	10,275	}	0	0	n
© E	25	Add lines 13 through 23	101,692	***************************************			101,692
_Q Q	25	Contributions, gifts, grants paid	111,967		0	0	
	26	Total expenses and disbursements. Add lines 24 and 25	111,307			<u> </u>	202/052
8	27	Subtract line 26 from line 12.	-42,828				
	a	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	12,020		0		
	b	Adjusted net income (if negative, enter -0-)	<u> </u>		<u>-</u>	0	
	C	Aujusteu net moonie (ii negative, tillei "0")	I			_	Farmer Commencer

Cash - fon-interest-beam Cash		Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
2 Savings and temporary cash investments 3 Accounts receivable ▶ 100 100 100 100 100 100 100 4 Piedges receivable ▶ 15 Grants receivable ▶ 16 Receivable de from officiers, directors, trustees, and other disqualified persons (latch schedule) (see instructions) 7 Other roles and base receivable □ □ □ □ □ □ □ □ □	_,	C dir H	should be for end-of-year amounts only (See instructions)	(a) Book Value		(c) Fair Market Value
3 Accounts receivable ► Less allowance for doubtful accounts ► Pedages receivable ► Less allowance for doubtful accounts ► Grants receivable Receivables due from officers, directors, trustees, and other disquadred persons (latical schedule) (see instructions) Receivables due from officers, directors, trustees, and other disquadred persons (latical schedule) (see instructions) Receivables due from officers, directors, trustees, and other disquadred persons (latical schedule) (see instructions) Receivables due from officers, directors, trustees, and other disquadred persons (latical schedule) Receivables due from officers de latical schedule) Receivable deposition (latical schedule) Receivable deposition (latical schedule) Receivable — Lud, fuding, and segment base ► Less accounted deposition (latical schedule) Less allowance for doubtful accounts ► Less accounted deposition (latical schedule) Less allowance for doubtful accounts ► Less accounted deposition (latical schedule) Less allowance for doubtful accounts ► Less accounted deposition (latical schedule) Less allowance for accounted deposition (latical schedule) Less allowance for doubtful accounts ► Less accounted deposition (latical schedule) Less allowance for doubtful accounts ► Less allowance for doubtful accounts ► Less allowance for doubtful accounts ► Less allowance for accounted deposition (latical schedule) Less allowance for accounted to the formation of the f	ļ	1	Cash – non-interest-bearing	55,525	12,697	12,697
Less allowance for doubtful accounts ► A Pledges recovable E Less allowance for doubtful accounts ► 6 Grants receivables due from officers, directors, trustees, and other disquelified persons (attach schedule) (see instructions) 7 Ohr rotes addes receivable due from officers, directors, trustees, and other disquelified persons (attach schedule) (see instructions) 8 Inventiones for sale or use 9 Prepare depresses and deferred charges 10 Inventiones for sale or use 10 Inventiones for sale or use 11 Inventiones for sale or use 12 Inventiones for sale or use 13 Inventiones for sale or use 14 Inventiones for sale or use 15 Inventiones for sale or use 16 Inventiones for sale or use 17 Inventiones for sale or use 18 Inventiones for sale or use 18 Inventiones for sale or use 19 Prepare depresses and deferred charges 10 Inventiones — organize stock (attach schedule) 10 Inventionets — comprase bonds (attach schedule) 11 Inventionets — organize gloans 13 Investments — other (attach schedule) 12 Inventionets — organize gloans 13 Inventionets — organize gloans 13 Inventionets — organize gloans 13 Inventionets — organize gloans 14 Inventional — organize gloans 15 Inventional — organize gloans 16 Other reasets (descence ▶ 16 Total assets (to be completed by all filters — see the instructions Also, see page 1, item 1) 17 Accounts payable and scenario — organize gloans 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgage and other notes payable (attach schedule) 22 Total all sales of payable (attach schedule) 23 Total all sales of payable (attach schedule) 24 Unrestricted 25 Temporary restricted 26 Feurnations that to not follow SFAS 117, check here and complete lines 27 through 28 and lines 30 and 31. 26 Jan 18 Jan	-	2				
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Less allowance for doubtful accounts ▶ Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7. Oher rotes addisent reveable (inschedule) ▶ Less allowance for doubtful accounts ▶ 10. 8. Prepared expenses and deferred charges 11. Investments – Use and state government obligations (statish schedule) 12. Investments – corporate bonds (attach schedule) 13. Investments – corporate bonds (attach schedule) 14. Lest, flutforp, and expensels sand schedule) 15. Investments – orthority and schedule) 16. Total assets (or be completed by all filers – see the instructions Also, see page 1, item 1) 17. Accounts payable and accrued expenses 18. Grants payable and accrued expenses 19. Deferred revenue 20. Loans from officers, directors, trustees, and other disqualified persons 21. Mortigages and other notes payable (attach schedule) 22. Charle from officers, directors, trustees, and other disqualified persons 28. Mortigages and other notes payable (attach schedule) 29. Total illabilities and est so the completed by all filers – see the instructions Also, see page 1, item 1) 20. Charle from officers, directors, trustees, and other disqualified persons 21. Accounts payable and accrued expenses 29. Total illabilities and est so the fluth of the disqualified persons 20. Total instructions that of our SFAS 117, check here and complete lines 24 through 28 and lines 30 and 31. 21. Capital sock, trust pencipal, or current funds 22. Retained earnings, accumulated income, endowment, or other funds 29. Part III. Analysis of Changes in Net Assets or Fund Balances 1 Total instances or fund balances (see instructions) 20. Total retained assets from the balances (see instructions) 353,452 310,624 310,624 310,624 310,624 350,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,452 310,624 351,4			Less allowance for doubtful accounts ▶	100	100	100
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Investments - used allows resonable (alt schedule) Lass allowance for doubtful accounts			disqualified persons (attach schedule) (see			
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5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 310,624					4	310,624
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	_				5	
	_6			(b), line 30	6	

	AMILY CHARITABLE FO		56-2227887		Page
(a) List and describe th	d Losses for Tax on Investme e kind(s) of property sold (for example, real estate, chouse, or common stock, 200 shs MLC Co)	ent income	(b) How acquired P – Purchase D – Donation	(c) Date ac	
1a N/A	· · · · · · · · · · · · · · · · · · ·		U - Donation		
b					
С					
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis bense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))
_a					
b	· · · · · · · · · · · · · · · · · · ·				
С					
				<u> </u>	
<u>e</u>			100		
Complete only for assets snowing	gain in column (h) and owned by the fo				Gains (Col. (h) gain minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ess of col (i) ol (j), if any	COI	(k), but not less than -0-) or Losses (from col. (h))
<u>a</u>	····				_
_ <u>b</u>					
<u>c</u>					
d					
<u>e</u>	If gain, also enter in	Dort Line 7		<u> </u>	
,	If (loss), enter -0- in s) as defined in sections 1222(5) and (6 column (c) See instructions. If (loss), e	j)		2	
Part I, line 8		<u></u>		3	
Part V Qualification Unc	der Section 4940(e) for Reduc	ed Tax on Net	t Investment Inco	me	
(For optional use by domestic private t	oundations subject to the section 4940	(a) tax on net inve	stment income.)		
If section 4940(d)(2) applies, leave this	s part blank				
	on 4942 tax on the distributable amoun y under section 4940(e) Do not compl	* *	base period?		Yes X No
	ach column for each year, see the instr		king any entries		
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net val	lue of noncharitable-use asse	ts	Distribution ratio (col (b) divided by col (c))
2016	39	,500	300,	682	0.131368
2015		,500	249,	270	0.14241
2014	33	,320	246,	653	0.135089
2013	27	,100	236,	602	0.114538
2012	21	,850	229,	920	0.09503
2 Total of line 1, column (d)				2	0.61844
	-year base period – divide the total on l	ine 2 by 5.0, or by	the		
_	is been in existence if less than 5 years			3	0.123689
4 Enter the net value of noncharitab	le-use assets for 2017 from Part X, line	5		4	313,81
5 Multiply line 4 by line 3				5	38,81
6 Enter 1% of net investment income	e (1% of Part I, line 27b)			6_	
7 Add lines 5 and 6	•			7	38,81

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

101,692

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

-orm	990-PF (2017) HOLDEN FAMILY CHARITABLE FOUNDATION 56-2227887			Pa	age 4
<u>Pa</u>	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	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, col (b)				
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			
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			0
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a				
b	Exempt foreign organizations – tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty 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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	· · · · · · · · · · · · · · · · · · ·	11			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		$ldsymbol{\sqcup}$	Yes	No
	participate or intervene in any political campaign?		1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	Instructions for the definition		1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				••
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/-	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b	-	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
_	conflict with the state law remain in the governing instrument?	VV.	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part	۸۷	7		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions NC				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b_	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes,"				
	complete Part XIV		9	<u> </u>	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		<u>X</u>
			orm 99	10-PF	(2017)

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	n 990-PF (2017) HOLDEN FAMILY CHARITABLE FOUNDATION 56-2227 art VII-A Statements Regarding Activities (continued)	887			Р	age :
	Statemente Regarding Activities (continued)			1	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			-	163	1.00
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			 '''	 	
	person had advisory privileges? If "Yes," attach statement See instructions			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption ap	nlication?		13	X	
	Website address ► N/A	piloduoi i			<u> </u>	
14		elephone no. I	▶ 910-5	579-	412	5
	101 SHORELINE DRIVE	•				
	Located at ▶ SUNSET BEACH NC	ZIP+4 Ì	▶ 2846	8		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here					►ſ
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other autho	ritv			Yes	No
	over a bank, securities, or other financial account in a foreign country?	•		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of				
	the foreign country					
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	ed				•••••
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			T	Yes	No
1a	During the year, did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		<u> </u>			
	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	X No			
b	If any answer is "Yes" to 1a(1)(6), did any of the acts fail to qualify under the exceptions described in Reg		٠٠٠ ليبا			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b	1	
	Organizations relying on a current notice regarding disaster assistance, check here		▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
	were not corrected before the first day of the tax year beginning in 2017?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		•			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2017?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2	•				
	all years listed, answer "No" and attach statement – see instructions.)	•	N/A	2b		L
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		•			<u> </u>
	▶ 20 , 20 , 20 , 20					
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			
ь	If "Yes." did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or					

disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2017?

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 2017)

Form 990-PF (2017)

X

N/A

3b

4a

		AMILY CHARITABLE FOUN					Page 6
Pŧ	rt VII-B Statements Re	egarding Activities for Which For	m 4720 <u>May Be F</u>	Required (cont	inued)		
5a	During the year did the foundation	n pay or incur any amount to [.]					
	(1) Carry on propaganda, or other	erwise attempt to influence legislation (section	on 4945(e))?	Y	'es X No		
	(2) Influence the outcome of any	specific public election (see section 4955),	or to carry on,				
	directly or indirectly, any vote	r registration drive?		Y	'es 🛚 X No		
	(3) Provide a grant to an individu	ial for travel, study, or other similar purpose	s?	Y	′es 🗓 No		
	(4) Provide a grant to an organiz	ation other than a charitable, etc., organizat	tion described in				
	section 4945(d)(4)(A)? See ii	nstructions		Y	'es 🗓 No		
	(5) Provide for any purpose other	r than religious, charitable, scientific, literary	y, or educational				
	purposes, or for the prevention	on of cruelty to children or animals?		Y	′es 🛚 X No		
b	If any answer is "Yes" to 5a(1)-(5	5), did any of the transactions fail to qualify i	under the exceptions of	lescribed in			
	Regulations section 53 4945 or in	n a current notice regarding disaster assista	nce? See instructions		N/A	5b	
	Organizations relying on a curren	nt notice regarding disaster assistance, chec	ck here		▶ 🗍		
С	If the answer is "Yes" to question	5a(4), does the foundation claim exemption	n from the tax				
	because it maintained expenditur	e responsibility for the grant?		N/A 🗌 Y	'es 🗌 No		
	If "Yes," attach the statement req	uired by Regulations section 53 4945-5(d)			_		
6a	Did the foundation, during the year	ar, receive any funds, directly or indirectly, t	o pay premiums				
	on a personal benefit contract?			Y	'es 🛚 No		
b	Did the foundation, during the year	ar, pay premiums, directly or indirectly, on a	personal benefit cont	ract?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, w	vas the foundation a party to a prohibited tax	x shelter transaction?	_ Y	'es 🗓 No		
b	If "Yes," did the foundation receive	e any proceeds or have any net income atti	ributable to the transac	ction?	N/A	7b	
Pŧ		out Officers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employe	es,	
	and Contractors	>					
<u>1 L</u>	ist all officers, directors, trustee	es, and foundation managers and their co	ompensation. See in	structions.			
			(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Na	ame and address	hours per week	(if not paid,	employee benefit plans and deferred		ense account, allowances
			devoted to position	enter -0-)	compensation		
RC	NALD C. HOLDEN	SUNSET BEACH	PRESIDENT	-			
10	1 SHORELINE DRIVE	NC 28468	1.00	0	0		0
CI	ARICE HOLDEN	SUNSET BEACH	SEC/TREAS				
10	1 SHORELINE DRIVE	NC 28468	1.00	0	0		0
2	Compensation of five highest-	paid employees (other than those include	ed on line 1 – see ins	tructions). If none	e, enter		
	"NONE."						
			(b) Title, and average		(d) Contributions to	(a) Eva	ense account,
	(a) Name and address of each e	employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		allowances
			devoted to position		compensation		
NO	NE						
							
				<u> </u>			
ota	I number of other employees paid	over \$50,000			>		0

Part VIII Information About Officers, Directors, Trustees, Four and Contractors (continued)		ployees,
3 Five highest-paid independent contractors for professional services. See ins	tructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE .		
		
		
		
otal number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1 N/A		
· - ,,		
	Ì	
2		
3		
		
4	•	
Part IX-B Summary of Program-Related Investments (see inst	ructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
-		
All other program-related investments. See instructions		
3	}	
otal Add lines 1 through 3		

Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 101,692 Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 101,692 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 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 5 101,692 Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Part XII

Pa	rt XIII Undistributed Income (see instructions	<u> </u>		 -	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				15,691
2	Undistributed income, if any, as of the end of 2017				
	Enter amount for 2016 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				
_	From 2012 10,354	1			
	From 2013 15,270	ŧ I			
	From 2014 20,987	1			
	From 2015 23,036	1			
	From 2016 24,466				
	Total of lines 3a through e	94,113			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 101,692				
	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)	·····			
	Applied to 2017 distributable amount		***************************************		15,691
	Remaining amount distributed out of corpus	86,001			
5	Excess distributions carryover applied to 2017				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	180,114			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount – see instructions				
е	Undistributed income for 2016 Subtract line			'	
	4a from line 2a. Taxable amount – see				
	Instructions				
T	Undistributed income for 2017 Subtract lines				
	4d and 5 from line 1. This amount must be				_
_	distributed in 2018				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)		······································	······································	
8	Excess distributions carryover from 2012 not				
_	applied on line 5 or line 7 (see instructions)	10,354			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	169,760			
0	Analysis of line 9				
а	Excess from 2013 15,270	i .			
b	Excess from 2014 20,987	i :			
C	Excess from 2015 23,036	l .			
d	Excess from 2016 24,466	l •			
е	Excess from 2017 86,001				

	990-PF (2017) HOLDEN FAMII					Page 10
	ert XIV Private Operating For				9)	
1a	If the foundation has received a ruling or			ting		
	foundation, and the ruling is effective for		_			
b	Check box to indicate whether the found		ating foundation descri		942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	(h) 2040	Prior 3 years	(4) 0044	(e)-Total
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	investment return from Part X for				· ser	1
•	each year listed					
b	85% of line 2a				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly			معر ا	1	
_	for active conduct of exempt activities	_ .			-	<u> </u>
е	Qualifying distributions made directly			27		
	for active conduct of exempt activities			<u>/</u>		
	Subtract line 2d from line 2c			<i>"</i>	-	
3	Complete 3a, b, or c for the			/		
_	alternative test relied upon: "Assets" alternative test – enter		1			
a						
	(1) Value of all assets (2) Value of assets qualifying under	_	 			
	section 4942(j)(3)(B)(i)		1			
b	"Endowment" alternative test enter 2/3	-	<i>"</i>			
Ü	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter.	97				
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	-		=		
P:	art XV Supplementary Inform	nation (Complet	e this part only if	the foundation h	ad \$5.000 or more	e in assets at
- 1	any time during the y	•	•		aa tojooo oi mor	
1	Information Regarding Foundation Ma		7.1011011			
a	List any managers of the foundation who	-	re than 2% of the total	contributions received	by the foundation	
_	before the close of any tax year (but only				•	
	RONALD C AND CLARICE	-	,,	(,·,	\$69,139
b	List any managers of the foundation who		the stock of a corporat	ion (or an equally large	e portion of the	
	ownership of a partnership or other entity		· ·		•	
	N/A	•	•			
2	Information Regarding Contribution, (Grant, Gift, Loan, Sc	holarship, etc., Progra	ams:	<u> </u>	
			to preselected charital		does not accept	
	unsolicited requests for funds If the foun		=	-		
	complete items 2a, b, c, and d See instr		. ,	<u></u>		
a	The name, address, and telephone number		of the person to whom	applications should be	addressed	
	RONALD C & CLARICE H		•			
	101 SHORELINE DRIVE		CH NC 28468			
b	The form in which applications should be					
-	IN WRITING TO INDIVI					<u></u>
c	Any submission deadlines					
	NONE					·
d	Any restrictions or limitations on awards,	such as by geograph	nical areas, charitable fi	elds, kinds of institutio	ns. or other	

factors NONE

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year CBN/ORPHANS PROMISE 977 CENTERVILLE TURNPIKE 501(C)(3) RELIGIOUS CHARITABLE/RELIGIOUS VIRGINIA BEACH VA 23463 93,700 BRUNSWICK CHRISTIAN RECOVERY CENTER P O BOX 3091 NONE NON PROFIT **ASH NC 28420** GENERAL FUND 1,000 WIDOW'S MITE P O BOX 1386 NONE 501(C)(3) SHALLOTTE NC 28459 RELIGIOUS 1,200 REHOBOTH MINISTRIES P O BOX 11049 501(C)(3) NONE RELIGIOUS/EDUCATION GOLDSBORO NC 27532 1,292 MERCY CHEFS 4240 PORTSMOUTH BLVD #402 NONE 501(C)(3) CHESEPEAKE VA 23321 **GENERAL** 1,000 LIVING FAITH INTERNATIONAL P O BOX 690 NONE 501(C)(3) CLEMMONS NC 27012 RELIGIOUS 3,500 101,692 ▶ 3a Total b Approved for future payment N/A

▶ 3b

Total

Part XVI-A Analysis of Income-Producing Analysis amounts unless otherwise indicated.		d business income	Exclude	by section 512, 513, or 514	
•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program service revenue			 -		(000 management)
a	— 	 	 		
b	— 		 		
c	_		 		
de			†		
f			 		
g Fees and contracts from government agencies			† 		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash investments			ĵ ,		
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property	533110				
6 Net rental income or (loss) from personal property			<u> </u>	·	
7 Other investment income		. <u> </u>	ļ		
8 Gain or (loss) from sales of assets other than inventory			<u> </u>		
9 Net income or (loss) from special events			ļ		-
Gross profit or (loss) from sales of inventory			<u> </u>		
1 Other revenue a			<u> </u>		
b	_		<u> </u>		
С			<u> </u>		
d					
e	_		ļ		
2 Subtotal Add columns (b) (d) and (s)					
2 Subtotal Add columns (b), (d), and (e)	<u></u>		L	0	
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>		0
Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations)	Accomplishm			13	
3 Total. Add line 12, columns (b), (d), and (e)		ent of Exempt P	urpose	13 <u> </u>	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which income	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	C
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	me is reported in c	ent of Exempt P	urpose	13	0

Part)		Information Rega	arding Tra	ansfers To and			hips Wi	th Noncharitable		<u>ye 10</u>
4 D		Exempt Organiza			• "				Type	LNa
		iñization directly or ind	_	-			cribea		Yes	No
	anızatıon	01(c) (other than secti	011 30 1 (0)(3)	organizations) or i	n section 527, it	elating to political				
_	•	om the reporting found	ation to a no	incharitable evemn	t organization o	f				
	Cash	om the reporting lound	ation to a no	inchantable exemp	t organization o	·		1	a(1)	_x_
	Other as	ssets							a(2)	X
	ner transa							<u> </u>	-1-/	
		f assets to a noncharita	able exempt	organization				141	b(1)	x
		ses of assets from a no			on			_	b(2)	X
		of facilities, equipment,						—	b(3)	X
		rsement arrangements							b(4)	X
(5)	Loans o	r loan guarantees						1	b(5)	X
(6)	Perform	ance of services or me	embership oi	r fundraising solicit	ations			1	b(6)	X
c Sh	aring of fa	acılıtıes, equipment, m	ailing lists, o	ther assets, or paid	d employees				1c	<u>x</u>
d If t	he answe	er to any of the above is	s "Yes," com	plete the following	schedule Colu	mn (b) should always	show the fa	air market		
val	ue of the	goods, other assets, o	or services g	iven by the reportin	ng foundation If	the foundation receive	ed less than	n fair market		
val	ue in any	transaction or sharing	arrangemer	nt, show in column	(d) the value of	the goods, other asse	ts, or servi	ces received.		
(a) Lu	ne no	(b) Amount involved	(c) Name	of noncharitable exemp	t organization	(d) Description	of transfers, tra	ansactions, and sharing arrar	gements	
N/A				·						
			<u> </u>				-			
			<u> </u>							
					·		_			
				·		<u> </u>	_			
					· ·· · · · · · · · · · · · · · · · · ·					
				<u> </u>						
				· · · · · · · · · · · · · · · · · · ·				····		
			<u> </u>							
			 			·····				
			 							
			 				 -			
				· -						
2a Is i	he found	ation directly or indirec	tly affiliated	with or related to	one or more tax	-exempt organizations				
		section 501(c) (other	•			oxompt organization	•	Г	Yes X	No
		nplete the following sc		00 ((0)(0)) 0: 00	0			L	,	
		a) Name of organization		(b) Type of or	rganization		(c) Descrip	otion of relationship		
N/	A									
				_					 	
	Under per	nalties of perjury, I declare the	at I have exami	ned this return, including	accompanying school all information of	edules and statements, and which preparer has any kno-	to the best of	my knowledge and belief, it	s true,	
	COTTECT, at	The Complete Deciaration of p	Acparci (other t	nan taxpayon is based	on an imorniación or	William proparer rias any kito	wicage	May the IRS discuss		ŀ
Sign)						with the preparer sh See instructions	own below?	No
lere		1176	ا ا		15/	-1/				
i	>	7001 (1) H	74		70	5/07/2018)		IDENT		
	▼ Sign:	ature of officer or trustee			Date	1	Title			
	Print/Ty	pe preparer's name			Preparer's signatu	re		Date	Check	
Paid	1				ميلادياً	- Liple alle	CPA. E			mployed
repare:	WILL	IAM TEMPLE AL					7 (7)	707.		
Jse Only	Firm's r			IPLE ALLEN		P.A.	_		07184	
	Firm's a			CENTER DRI					83386	
		FAYET	TEVILI	」E, NC 28	3304			Phone no 910-	<u> 323-0</u>	<u> </u>

Schedule B

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Name of the organization

Employer identification number

HOLDEN FAMILY	CHARITABLE FOUNDATION	56-2227887
Organization type (check one	2):	
Filers of:	Section:	
1 11010 011	occion,	
Form 990 or 990-EZ	501(c)() (enter number) organization	<i>,</i>
	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	
,	overed by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	See
General Rule		
-	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 property) from any one contributor. Complete Parts I and II. See instructions for determinable to the contributions.	
Special Rules		
regulations under sect 13, 16a, or 16b, and th	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test or ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Partial received from any one contributor, during the year, total contributions of the greater of amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts	t II, line f (1)
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any year, total contributions of more than \$1,000 exclusively for religious, charitable, scientifications of the scientification of the scie	ic,
literary, or educational	purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, an	d III
	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any year, contributions exclusively for religious, charitable, etc., purposes, but no such	y one
	ore than \$1,000. If this box is checked, enter here the total contributions that were received	
	exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the	
totaling \$5,000 or more	to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contrib e during the year	utions * \$
990-EZ, or 990-PF), but it mus	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form st answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form scertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or s	990-EZ or on its

PAGE 1 OF 1

Name of organization Employer identification number HOLDEN FAMILY CHARITABLE FOUNDATION 56-2227887 Part I Contributors (see instructions), Use duplicate copies of Part I if additional space is needed. (a) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 1 RONALD AND CLARICE HOLDEN Person 101 SHORELINE DRIVE Payroll 69,139 Noncash SUNSET BEACH NC 28468 (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll -\$ Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) Type of contribution No. Name, address, and ZIP + 4 Total contributions Person **Payroll** Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) Type of contribution No. Name, address, and ZIP + 4 Total contributions Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Adjusted Net Income 1-3 Charitable Charitable Purpose Purpose ጭ Net Investment Income Adjusted Adjusted Set ₹Ç Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees **Current Year** Depreciation Statement 3 - Form 990-PF, Part I, Line 19 - Depreciation Statement 2 - Form 990-PF, Part I, Line 18 - Taxes ₹O÷ Investment Investment S 0 0 Federal Statements Net Method 543 543 4,228 4,228 Total Total 674 200DB 1,165 200DB 1,839 Depreciation **Prior Year** 1370 Holden Family Charitable Foundation Description S 4/13/16 199,227 REMODEL - 8 HARBOUR ISLE DR 761 1,514 #104 70,366 299,662 27,797 INDIRECT ACCOUNTING FEES TELEVISION - SAM'S CLUB INDIRECT TAXES/LICENSES Basis Cost 1/23/13 8 HARBOUR ISLE DR. E, Description **Description** FURNITURE & FIXTURES 12/31/16 FYE: 12/31/2017 6/20/12 12/31/16 Acquired TELEVISION TOTAL TOTAL 56-2227887

1370 Holden Family Charitable Foundation

56-2227887 FYE: 12/31/2017

Federal Statements

	Charitable Purpose	n -	٠
Expenses	Adjusted	n -	٥ ا
orm 990-PF, Part I, Line 23 - Other Expenses	Net	n-	٠
Statement 4 - Form 990-PF,	Total	18 4,840 646	\$ 5,504
⊗	Description	EXPENSES OFFICE DUES INSURANCE	TOTAL

Net FMV	\$ 299,666	w
End Accumulated Depreciation	1,839	1,839
	₩.	w
End Cost / Basis	299,666	299,666
9	₩	တ္
Beginning Net Book	297,827	297,827
1	တ	w.
Description		TOTAL
	Beginning End Accumulated Net Book Cost / Basis Depreciation	Beginning End Accumulated Net Book Cost / Basis Depreciation \$ 297,827 \$ 299,666 \$ 1,839 \$

1370 Holden Family Charitable Foundation
Federal Statements FYE: 12/31/2017 Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount RONALD C AND CLARICE HOLDEN 69,139 TOTAL 69,139 Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description IN WRITING TO INDIVIDUALS LISTED ABOVE Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description NONE