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2020

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

A Employer information number 28-47-97-97-97-97-97-97-97-97-97-97-97-97-97	For	caler	ndar year 2020, or tax year beginning 01-01-2	020 , aı	nd ending 12-31	-2020				
Teleprone number (see instructions) Control (Control						entification numbe	r			
CO 10 MicCRESCA CW CMT RE. Control MicCRESCA (MicCRESCA CW CMT) Control MicCRESCA (MicCRESCA CW) Control MicCRESCA					20-3478127					
Corrections, scale or province, control, and ZPP or breign postal code Correct Co				Room/suite	B Telephone nu	B Telephone number (see instructions)				
Ministration					(201) 342-775	3				
Final return					C If exemption	application is pendin	g, check here			
Auditess change	G Cl	neck al	Il that apply: ☑ Initial return ☐ Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	ere			
Military										
## Check type of organization:			\square Address change \square Name change				· -			
Fair market value of all assets at end of your form part II, col. (c) Other (specify) Other (spe	H C	neck ty	pe of organization: $lacksquare$ Section 501(c)(3) exempt private	foundation						
of years (from Part II, Co.I. (c). (c). Other-(openity).		Section	n 4947(a)(1) nonexempt charitable trust 🔻 🗌 Other taxab	le private foundation						
				☑ Cash ☐ Accru						
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check			▶\$ 17.020.227	t be on cash basis.)	under section	11 307(b)(1)(b), chec	Kilele			
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check	Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements			
2 Check			of amounts in columns (b), (c), and (d) may not necessarily	expenses per		, ,	for charitable purposes			
2 Check		1		300,000						
Sch. 8 3 Interest on savings and temporary cash Investments 303,287		2	·							
1000 1000			Sch. B							
Sa Gross rents			- , ,	202.20	202.20					
Description		-		303,287	303,287					
Page 200 Page 201										
Description Page 200	a)		` '	134,319)					
Net short-term capital gain	Ĕ			· ·						
Net short-term capital gain	Reve	-	4,705,624	4						
10a Gross sales less returns and allowances					134,319					
10a Gross sales less returns and allowances		_								
B Less: Cost of goods sold			I							
C Gross profit or (loss) (attach schedule)										
12 Total. Add lines 1 through 11 737,606 437,606 0		c	-							
13 Compensation of officers, directors, trustees, etc. 105,000 34,650 0 70,350 14 Other employee salaries and wages		11	Other income (attach schedule)							
14 Other employee salaries and wages		12	Total. Add lines 1 through 11	737,606	437,606	0				
15 Pension plans, employee benefits 15 16a Legal fees (attach schedule) 16a Legal fees (attach schedule) 16b 16a Legal fees (attach schedule) 17 Legal fees (attach schedule) 17 Legal fees (attach schedule) 18 Legal fees (attach schedule) 19 Legal		13	Compensation of officers, directors, trustees, etc.	105,000	34,650	0	70,350			
16a Legal fees (attach schedule) 23,842 0 0 369 b Accounting fees (attach schedule) 23,842 0 0 23,842 c Other professional fees (attach schedule) 23,842 0 0 23,842 17 Interest		14	Other employee salaries and wages	66,000) (0	66,000			
23 Other expenses (attach schedule)	6S	15	Pension plans, employee benefits	45,500	0	0	45,500			
23 Other expenses (attach schedule))Su	16a	Legal fees (attach schedule)	369	C	0	369			
23 Other expenses (attach schedule)	ж	ь	Accounting fees (attach schedule)	23,842	2 0	0	23,842			
23 Other expenses (attach schedule)	e E	C	Other professional fees (attach schedule)							
23 Other expenses (attach schedule)	ativ	17	Interest							
23 Other expenses (attach schedule)	Str	18		48,329	19,277	0	29,052			
23 Other expenses (attach schedule)	i	19	Depreciation (attach schedule) and depletion							
23 Other expenses (attach schedule)	£ E		• •							
23 Other expenses (attach schedule)	9									
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-) c O 163,991 0 801,755 0 801,755			• ,	96-1 220 170	110.064	0	110 115			
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-) c O 163,991 0 801,755 0 801,755	Ę			220,179	110,004		110,113			
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-) c O 163,991 0 801,755 0 801,755	era	24	· •	500 210	163 001	_	245 228			
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-)	o	25	-							
25 965,746 163,991 0 801,755 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-)							,			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		27	25	965,746	163,991	0	801,755			
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-)		"	disbursements	-228,140						
					273,615					
THE PARTY WITH A REPORT OF THE PARTY WITH A REPORT OF THE PARTY WITH A PARTY WITH W	Ea-					, and the second	000 PE (2022)			

Beginning of year

Page 2

17.020.227

End of year

17,020,227

11,482

16,322,768

16,322,768

16 334 250

9,657

9,657

17,010,570

17,010,570 17.020.227

1

2

3

4

5

6

16,322,768

17,010,570

17,010,570 Form **990-PF** (2020)

-228,140

915,942

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14

15 16

17

18

19

20

21

22 23

24 25

26

27

28

29

30

Part III

2

3

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions .

Net assets with donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Other liabilities (describe -_

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances (see instructions) . . .

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg., and equipment fund

Liabilities

Fund Balances

Net Assets or

		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts >			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
55		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U.S. and state government obligations (attach schedule)	1,492,684	1,936,858	1,936,858
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)	985,700	1,427,604	1,427,604
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	9,323,797	13,206,024	13,206,024

•	Investments land, buildings, and equipment, basis P		
	Less: accumulated depreciation (attach schedule) ▶		
<u> </u>	Investments—mortgage loans		
3	Investments—other (attach schedule)	9,323,797	%
ŀ	Land, buildings, and equipment: basis ▶		
	Less: accumulated depreciation (attach schedule) ▶		
;	Other assets (describe >)		
5	Total assets (to be completed by all filers—see the		
	instructions. Also, see page 1, item I)	16,334,250	
,	Accounts payable and accrued expenses	11,482	
3	Grants payable		

Page **3**

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a See Additional Data Tabl	e					
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a See Additional Data Tabl	e					
b						
c						
d						
e						
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)	
(i) F.M.V. as of 12/31/69	(j)	Excess	(k) of col. (i) . (j), if any	Gains (Col. (col. (k), but not	h) gain minus less than -0-) or om col.(h))	
a See Additional Data Tabl			(3))			
b						
c						
d						
e						
•	gain or (loss) as defined in sections art I, line 8, column (c) (see instructions art I)		Part I, line 7	2 3	134,319 -37,906	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come		
	ALED ON DECEMBER 20, 2019					
1 Reserved	•					
(a) Reserved	(b) Reserved	(c) Reserved		(d) Reserved	_	
2 Reserved			2			
3 Reserved			3			
4 Reserved			4			
5 Reserved			5]		
6 Reserved			6]		
7 Reserved				ì		
			<u> </u>	1	-	
o neserveu ,			8	<u>_</u>		

Form	990-PF (2020)							Page 6			
Par	t VII-B Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continued)						
5a	During the year did the foundation	pay c	r incur any amount to:				Ye	s No			
	(1) Carry on propaganda, or other	wise a	attempt to influence legisl	ation (section 4945(e))?	☐ Yes 🗸	No					
	(2) Influence the outcome of any s	pecifi	c public election (see sect	tion 4955); or to carry	□ les ⊡	110					
	on, directly or indirectly, any v	oter r	er registration drive?								
	(3) Provide a grant to an individua	l for t	ravel, study, or other sim	No							
	(4) Provide a grant to an organizat	ion o	ther than a charitable, etc								
	in section 4945(d)(4)(A)? See	instru	ctions								
	(5) Provide for any purpose other		-	* **	· · L Yes 🗹						
	educational purposes, or for the		•	No							
b	If any answer is "Yes" to 5a(1)-(5)		=								
	Regulations section 53.4945 or in a				_	5	b				
	Organizations relying on a current		-								
С	If the answer is "Yes" to question 5			•							
	tax because it maintained expendit If "Yes," attach the statement requ		•		· ·	No					
6a	Did the foundation, during the year	r, rece	eive any funds, directly or	indirectly, to pay premiu	ıms on						
	a personal benefit contract?				· 🗌 Yes 🗸	No					
b	Did the foundation, during the year	r, pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	b	No			
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, wa				∟ Yes 💌	No					
	If "Yes", did the foundation receive		-			_7	'b				
8	Is the foundation subject to the sec										
	excess parachute payment during t										
Par 1	and Contractors List all officers, directors, truste				nagers, Highly Paid Ei						
	(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		Expense account, other allowances				
GREG	ORY F HOLT		CTOR 0		(0			
	ROYAL STREET ORLEANS, LA 70116	30.0	U								
	EN HOLT	FXF	CUTIVE DIRECTOR	85,000	(
	01 HACKENSACK AVE 4TH FL	37.5		33,000	`	1	0				
,	ENSACK, NJ 07601										
	HEN MORGANSTERN	TRE/ 10.0	ASURER	20,000	(이		0			
	01 HACKENSACK AVE 4TH FL ENSACK, NJ 07601	10.0	0								
	Compensation of five highest-pa	id er	nployees (other than tl	nose included on line 1	.—see instructions). If no	ne, ente	r "NOI	NE."			
	Name and address of each employee 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) Exp		ccount,			
MARI	TZA WULF		EXECUTIVE ASSISTANT	66,00	 			0			
	ARKANSAS AVE IER, LA 70065		40.00	ĺ							
Tota	I number of other employees paid o	ver \$5	0,000			Form	990-P	0 F (2020)			

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Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
T-1-1		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include r	relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 THE HOLT FAMILY FOUNDATION ESTABLISHED A SCHOLARSHIP PROGR.	,	
RESIDING IN PLAQUEMINES PARISH AND OTHER COMMUNITIES IN SOU SCHOLARSHIP IS A PROGRAM DESIGNED TO ASSIST RESIDENTS OF LO		
EDUCATION IN COLLEGE.THIS PROGRAM IS ADMINISTERED BY SCHOLA	ARSHIP AMERICA, THE NATION'S LARGEST	
DESIGNER AND MANAGER OF SCHOLARSHIP, TUITION ASSISTANCE AN FOR CORPORATIONS, FOUNDATIONS, ASSOCIATIONS, AND INDIVIDUA		
REGARD TO RACE, COLOR, CREED, RELIGION, SEXUAL ORIENTATION, A		
ORIGIN.STUDENTS MUST HAVE A MIN 2.5 GPA AND DEMONSTRATE FIN	ANCIAL NEED.	332,000
2 THE HOLT FAMILY FOUNDATION PROVIDED GRANTS TO ORGANIZATION ENVIRONMENTAL ENDEAVORS.IT PROVIDED FUNDING FOR MEDICAL AND		
NOT LIMITED TO SUCH RESEARCHRELATED TO COASTAL, MARITIME AN		
PROVIDES EDUCATIONAL GRANTS THROUGH QUALIFIED MUSEUM PROC	GRAMS.	89,000
3 THE HOLT FAMILY FOUNDATION PROVIDED TUITION & HOUSING ASSIS	_	
ECONOMIC HARDSHIP DUE TO NATURAL AND OTHER ECONOMIC DISAS THE TUITION & HOUSING ASSISTANCE ON BEHALF OF THESE STUDENT		35,527
4		
Part IX-B Summary of Program-Related Investments (see	e instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		
Total. Add intes 1 till ough 5		0 Form 000-BE (2020)
		Form 990-PF (2020)

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Part XII

1

2

3

4

5

b

7

1a

1b

2

3a 3b

4

5

762.035

801,755

801.755

801.755

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762,035

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P	art XIII	Undistributed	Income (see instructi	ions)			
				(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1	Distributab	le amount for 2020 f	rom Part XI, line 7				762,
2	Undistribut	ed income, if any, as	of the end of 2020:				
а	Enter amou	unt for 2019 only.				0	
b	Total for pr	rior years: 20	, 20, 20		0		
3	Excess dist	ributions carryover, i	if any, to 2020:				
а	From 2015						
b	From 2016						
С	From 2017						
d	From 2018						
e	From 2019		1			[

f Total of lines 3a through e. 4 Qualifying distributions for 2020 from Part

(If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c 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 e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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 2015 not applied on line 5 or line 7 (see instructions) . . .

6 Enter the net total of each column as

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. **b** Excess from 2017. . c Excess from 2018. . d Excess from 2019. . e Excess from 2020. .

Subtract lines 7 and 8 from line 6a . . .

indicated below:

same amount must be shown in column (a).)

XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years

(Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2020.

39.720

39.720

39,720

39,720

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F	Part XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	ion is a private oper	ating foundation des	scribed in section \Box] 4942(j)(3) or □	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Iotai
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
Ь	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c						
	(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					
	Supplementary Information assets at any time during th	e year—see inst		foundation had	\$5,000 or more i	1
1 a	Information Regarding Foundation Man List any managers of the foundation who hav before the close of any tax year (but only if GREGORY F HOLT	e contributed more			•	
b	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
2	Information Regarding Contribution, Gr		• • • •	_		
	Check here ► ☐ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gra	ants, etc. to individu			
а	The name, address, and telephone number LAURA MICKLE PO BOX 240	or e-mail address of	the person to whon	n applications should	be addressed:	

SAINT PETER, MN 56082

(507) 931-8307

SCHOLARSHIP PROGRAM IS ADMINISTERED BY SCHOLARSHIP AMERICA. APPLICANTS MUST APPLY ONLINE. STUDENTS MUST BE RESIDENT OF LOUISIANA WHO HAVE A MINIMUM GPA OF 2.5 AND BE CURRENTLY ACCEPTED INTO A COLLEGE OR UNIVERSITY.

FOR NON SCHOLARSHIP RELATED GRANTS, APPLICANTS MUST OUTLINE THE FINANCIAL NEED AND PURPOSE OF THE GRANT. THE

c Any submission deadlines:

N/A

 ${f b}$ The form in which applications should be submitted and information and materials they should include:

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

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Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid	During the Year or Appro	oved for Future	Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	456,527
b Approved for future payment				
		1		
		1		
Total			▶ 3b	0

	I-A Analysis of Income-Producing	Activities				rage La
	-			Freely dead by the second	- 512 - 512 - 514	(e)
Enter gros	s amounts unless otherwise indicated.	(a)	usiness income (b)	Excluded by section	(d)	Related or exempt function income
_	m service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
d						
	and contracts from government agencies					
	ership dues and assessments					
	st on savings and temporary cash ments					
	nds and interest from securities					303,287
	ntal income or (loss) from real estate:					
	:-financed property					
	ntal income or (loss) from personal property					
	investment income					
8 Gain o	or (loss) from sales of assets other than ory					124 210
	come or (loss) from special events:					134,319
10 Gross	profit or (loss) from sales of inventory					
11 Other	revenue: a					
	tal. Add columns (b), (d), and (e).		0			437,606
	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu			1	3	437,606
Part XV			hment of Exem	pt Purposes		
	Explain below how each activity for which	income is report	ted in column (e) o	f Part XVI-A contribu	ited importantly to	2
Line No. ▼	the accomplishment of the foundation's exinstructions.)					
8	N/A					
10	N/A					
		·				
	1					

om 550 11 (2020)										
		Information Pegarding Transfers To and Transactions and Pelationships With Nonchari								
Part XVII Exempt Organizations										
1	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described in section 501		.,							

1			anization directly or in han section 501(c)(3)								on 501		Yes	No
а	Trans	fers fr	om the reporting foun	dation to a n	oncha	ritable exe	empt organizatio	n o	ıf:		F			
	(1)	Cash.									. :	la(1)		No
	(2)	Other	assets								. [La(2)		No
b	Other	trans	actions:								Ī	`		
			of assets to a nonchari	itable exemp	t orga	nization.					:	Lb(1)		No
			ases of assets from a n		_							Lb(2)		No
			of facilities, equipmer			-		Ċ				Lb(3)		No
			ursement arrangemen	•				Ī				Lb(4)		No
			or loan guarantees.					ď				Lb(5)		No
			nance of services or m									Lb(6)		No
_			facilities, equipment, n								· F	1c		No
		-	er to any of the above			•					• <u> </u>			NO
u	of the	good g	s, other assets, or ser saction or sharing arra	vices given b	y the	reporting t	foundation. If th	e fo	oundation receive	d less than fair mar	ket value			
(a)	Line N	lo.	(b) Amount involved	(c) Name of	noncha	aritable exer	mpt organization		(d) Description of	transfers, transactions	, and shari	ng arrar	ngement	ts
		_												
		_												
		-												
		+												
		+												
		\top												
	descr	ibed ir	dation directly or indirent on section 501(c) (other mplete the following so	r than section		•	•				es 🗹	No		
_		-,	(a) Name of organization			(E) Type of organiza	tion	1	(c) Description	n of relation	ship		
		of my	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, co										
	gn ere	*:	****				2021-11-03		*****		May the return with the below			
	'	S	ignature of officer or t	rustee			Date		Title		(see ins	tr.) 🗸	Yes □	No
	·		Print/Type preparer's	name	Prep	arer's Sigr	nature		Date	Check if self-	PTIN F	00608	881	
	aid epa	rer	JOEL PARITZ CPA	OED METTO O	DAC:				2021-10-31	employed F				
	se O			GER METIS C							Firm's EII	V ▶ 06-	16674	65
			Firm's address ► 40	1 HACKENSA	CK A	VE 4TH FLO	OOR							
			H <i>A</i>	HACKENSACK, NJ 07601 Phone no. (201) 342-775									7753	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) Date sold (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation MORGAN STANLEY 605-036321-010 LT Ρ 2019-01-01 2020-12-31 MORGAN STANLEY 605-036321-010 ST Р 2020-02-01 2020-12-31 MORGAN STANLEY 605-060313-010 LT Р 2019-01-01 2020-12-31 MORGAN STANLEY 605-060313-010 ST Р 2020-02-01 2020-12-31 Ρ MORGAN STANLEY 605-063854-010 LT 2019-01-01 2020-12-31 2020-02-01 2020-12-31 MORGAN STANLEY 605-063854-010 ST Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 2,107,638 1.964.875 142,763 1,441,609 1,402,474 -39,135372,297 344,279 28,018 111.408 113,254 -1,846 168,765 167,321 1,444 543,042 539.967 3,075 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 142,763 -39.135 28.018 -1,8461,444 3,075

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial contributor		
a Paid during the year			
THE ROOT OF MUISC 2624 BURGUNDY ST NEW ORLEANS, LA 70117	N/A	COMMUNITY OUTREACH	5,000

NEW ORLEANS, LA 70117			
STUMPTOWN CLUB 14211 OWLS NEST RD NOKESVILLE, VA 20181	N/A	COMMUNITY OUTREACH	1,000
SCHOLARSHIP AMERICA	N/A	SCHOLARSHIP PROGRAM	332,000

14211 OWLS NEST RD NOKESVILLE, VA 20181			
SCHOLARSHIP AMERICA 7900 INTERNATIONAL DRIVE MINNEAPOLIS, MN 55425	N/A	SCHOLARSHIP PROGRAM	332,000
Total		 ▶ 3a	456,527

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year			
PAIDEIA MONTESSORI SCHOOL INC 67 N SUMMIT STREET TENAFLY, NJ 07670	N/A	TUITION ASSISTANCE	18,895

67 N SUMMIT STREET TENAFLY, NJ 07670			
NOCCA INSTITUTE2800 CHARTRES ST NEW ORLEANS, LA 70117	N/A	COMMUNITY OUTREACH	38,000
JACKSONVILLE SCIENCE FESTIVAL	N/A	COMMUNITY OUTREACH	10,000

NOCCA INSTITUTE2800 CHARTRES ST NEW ORLEANS, LA 70117	N/A	COMMUNITY OUTREACH	38,000
JACKSONVILLE SCIENCE FESTIVAL 3675 SAN PABLO ROAD SOUTH JACKSONVILLE, FL 32224	N/A	COMMUNITY OUTREACH	10,000

Total .

456,527

3a

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year			
ECOLE CLASSIQUE5236 GLENDALE ST METAIRIE, LA 70006	N/A	TUITION ASSISTANCE	7,500
MAKE MUSIC LOLA	N/A	COMMUNITY OUTREACH	5,000

AKE MUSIC LOLA .50 URSULINES AVENUE UNIT C1 EW ORLEANS, LA 70116	N/A	COMMUNITY OUTREACH
CONCILE NEW ORLAND	N/A	COMMUNITY OUTREACH

Total .

MAKE MUSIC LOLA 2150 URSULINES AVENUE UNIT C1 NEW ORLEANS, LA 70116	N/A	COMMUNITY OUTREACH	5
RECONCILE NEW ORLAND 1631 ORETHA CASTLE HALEY BLVD	N/A	COMMUNITY OUTREACH	20

2150 URSULINES AVENUE UNIT C1 NEW ORLEANS, LA 70116			·
RECONCILE NEW ORLAND 1631 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	N/A	COMMUNITY OUTREACH	20,000

150 URSULINES AVENUE UNIT C1 EW ORLEANS, LA 70116	1471	CONTROLLER GOTTLES	3,000
ECONCILE NEW ORLAND 631 ORETHA CASTLE HALEY BLVD	N/A	COMMUNITY OUTREACH	20,000

N/A		COMMUNITY OUTREACH	20,000
	N/A	N/A	N/A COMMUNITY OUTREACH

456,527

■ 3a

Recipient If recipient is an individual, Purpose of grant or Foundation Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

Total .

	or substantial contributor		
a Paid during the year			
KID SMART-ROOT REACH CAMPAIGN 2533 COLUMBUS STREET SUITE 201	N/A	COMMUNITY OUTREACH	10,000

2533 COLUMBUS STREET SUITE 201 NEW ORLEANS, LA 70119			
SAINT ELIZABETH ANN SETON SCHOOL	N/A	TUITION ASSISTANCE	9

SAINT ELIZABETH ANN SETON SCHOOL	N/A	TUITION ASSISTANCE	9,132
4119 SAINT ELIZABETH DR			
KENNER, LA 70065			

▶ 3a

456,527

SAINT ELIZABETH ANN SETON SCHOOL	N/A	TUITION ASSISTANCE	9,:
4119 SAINT ELIZABETH DR			
KENNER, LA 70065			

efile GRAPHIC print - DO NOT P	ROCESS As Filed [Data -	DL	N: 93491307015061		
TY 2020 Accounting Fees Schedule						
_						
	Name: THE HOLE EIN: 20-3478	T FAMILY FOUNDAT	ΓΙΟΝ			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING SERVICES	23,842	0	0	23,842		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491307015061 TY 2020 Explanation of Non-Filing with Attorney General Statement Name: THE HOLT FAMILY FOUNDATION **EIN:** 20-3478127 **Statement:** FORM 990PF IS NOT REQUIRED TO FILE IN WASHINGTON D.C.

ellie GRAPHIC PHILL - DO NOT PROCESS	AS Filed Data -	DLN. 93491307013001
TY 2020 Investments Corpora	te Bonds Schedule	
Name:	THE HOLT FAMILY FOUNDATION	ON
name:	THE HOLT FAMILY FOUNDATION	JIN

DIN. 02/0120701E061

1,427,604

1,427,604

ofile CRAPHIC print - DO NOT PROCESS | As Filed Data -

CORPORATE FIXED INCOME

EIN: 20-34/812/		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value

20 2470427

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491307015061			
TY 2020 Investments Government Obligations Schedule						
Name:	THE HOLT FAI	MILY FOUNDATION				
EIN:	20-3478127					
US Government Securities - End of Year Book Value:		1,936,858				
US Government Securities - End of Year Fair Market Value:		1,936,858				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307015061
TY 2020 Investments - Other S	Schedule	

FMV

FMV

Name: THE HOLT FAMILY FOUNDATION

20 2470127

EQUITIES

J.P MORGAN

EIN: 20-32	+/012/		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Mark
MUTUAL FUNDS	FMV	1,836,674	

f Year Fair ket Value

9,869,050

1,500,300

1,836,674

9,869,050 1,500,300

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	l: 93491307015061
TY 2020 Legal Fees Schedu	le			
_				
	ne: THE HOLT F. N: 20-3478127	AMILY FOUNDATIO	N	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL EXPENSES	369	0	0	369

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491307015061
TY 2020 Other Expenses Sche	edule			
Name:	THE HOLT FAMI	LY FOUNDATION		
EIN:	20-3478127			
Other Expenses Schedule				
	_			

EIN. 20-34/612/				
Other Expenses Schedule		1		
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disburseme Charita

IT SUPPORT

INSURANCE

MANAGEMENT FEE

REPAIR AND MAINTENANCE

EMPLOYEE MEDICAL EXPENSE

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	110,064	110,064	0	0
OFFICE SUPPLIES	13,127	0	0	13,127
AUTO EXPENSE	9,408	0	0	9,408

13,932

45,127

14,480

13,239

802

0

0

0

13,932

45,127

14,480

13,239

802

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491307015061			
TY 2020 Other Increases Schedule						
Name:	THE HOLT FAN	1ILY FOUNDATION				
EIN:	20-3478127					
Other Increases Schedule						
De	escription		Amount			
UNREALIZED GAIN			915,942			

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-1	DLI	N: 93491307015061
TY 2020 Taxes Schedule				
Name: THE HOLT FAMILY FOUNDATION				
EIN: 20-3478127				
Taxes Schedule				
Category	Amount	Net Investment	Adjusted Net	Disbursements
	,	Income	Income	for Charitable
				Purposes
EXCISE TAX	15,647	15,647	0	0
FOREIGN DIVIDEND TAX	3,630	3,630	0	0
PAYROLL TAX	29,052	0	0	29,052

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491307015061		
Schedule B	Sche	dule of Contributors		OMB No. 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. Go to <u>www.irs.gov/Form990</u> for the latest information.		mation.	2020		
Name of the organization THE HOLT FAMILY FOUNDA	TION		Employer i	dentification number		
Organization type (chec	k one):		20-3478127			
	,					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt ch	naritable trust not treated as a p	orivate foundation			
	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3) exempt private	foundation				
	4947(a)(1) nonexempt ch	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private	foundation	oundation			
	ion filing Form 990, 990-EZ, or 99 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that cone contributor, during the year, to 1, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (otal contributions of more than \$1,0 ne prevention of cruelty to children	000 <i>exclusively</i> for religious, ch	aritable, scientific, literary, e			
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this o	it no such contributions tota le year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000. eligious, charitable, etc., ived <i>nonexclusively</i>		
990-EZ, or 990-PF), but i	that isn't covered by the General must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't i	e 2, of its Form 990; or check th	e box on line H of its Form			
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990	D, 990-EZ, or 990-PF) (2020)		

for Form 990, 990-EZ, or 990-PF.

Employer identification number 20-3478127

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additio	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GREGORY HOLT 1240 ROYAL STREET	\$ 300,000	Person Payroll
	NEW ORLEANS, LA 70116		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
		Calcadiula D./Er	contributions.)