#### Edgar Filing: BLACKROCK MUNIHOLDINGS CALIFORNIA QUALITY FUND, INC. - Form 3

BLACKROCK MUNIHOLDINGS CALIFORNIA QUALITY FUND, INC.

Form 3 July 28, 2011

## FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response...

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and A Person *  AUDET  |          | eporting   | 2. Date of Event Requiring Statement (Month/Day/Year)                                  | 3. Issuer Name <b>and</b> Ticker or Trading Symbol BLACKROCK MUNIHOLDINGS CALIFORNIA QUALITY FUND, INC. [MUC] |  |                         |   |  |  |  |
|--------------------------------|----------|------------|--|---|--|-------------------------|---|--|--|--|
| (Last)                         | (First)  | (Middle)   | 07/28/2011   | 4. Relationship of Reporting Person(s) to Issuer  |  | g                       | 5. If Amendment, Date Origina Filed(Month/Day/Year)   |  |  |  |
| 55 EAST 52                     | ND STRE  | EET        |  |   |  |                         | Thed(World) Bay, Tear)  |  |  |  |
| 00 2000 02                     | (Street) |            |  | (Check all applicable)  |  |                         | 6. Individual or Joint/Group  |  |  |  |
| NEW YORK, NY 10055             |          |            | X Direc Offic (give title be   |   | r Other  |                         | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |  |
| (City)                         | (State)  | (Zip)      | Table I - N  | Non-Derivat   | erivative Securities Beneficially Owned                  |                         |   |  |  |  |
| 1.Title of Secur<br>(Instr. 4) | rity     |            | 2. Amount o<br>Beneficially<br>(Instr. 4)  |   | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Na<br>Owne<br>(Instr | *   |  |  |  |
| Reminder: Repo                 | •        |            | each class of securities benefic   | ially S   | EC 1473 (7-02  | 2)                      |   |  |  |  |
|                                | infor    | mation con | spond to the collection of<br>tained in this form are not<br>ond unless the form displ | t   |  |                         |   |  |  |  |

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) |                    | 3. Title and Amount of<br>Securities Underlying<br>Derivative Security |                                  | 4. Conversion or Exercise          | 5.<br>Ownership<br>Form of                           | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|--|--|--------------------|--|----------------------------------|------------------------------------|--|---|
|  | Date<br>Exercisable                                      | Expiration<br>Date | (Instr. 4)<br>Title  | Amount or<br>Number of<br>Shares | Price of<br>Derivative<br>Security | Derivative<br>Security:<br>Direct (D)<br>or Indirect | , ,   |

(Instr. 5)

#### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

AUDET PAUL

55 EAST 52ND STREET Â X Â Â

NEW YORK, NYÂ 10055

#### **Signatures**

/s/ Noah Gellner as Attorney-in-Fact

07/28/2011

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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#### **Remarks:**

No securities are beneficially owned.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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