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## Form **990-PF**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

2010

	For cal	endar year 2010, or ta	x year beginning	, 2010	, and ending	j		
	<b>G</b> Che	eck all that apply	Initial returnInit	ial Return of a former p	· —		Final return	
-			Amended return	Address	change Na	me change		
		SALADINO FAMII		A Employer identification number 26-0218131				
		WEST FIGARDEN NO, CA 93711	N DRIVE		B Telephone number (see the instructions) 559-256-4620			
					C If exemption app D 1 Foreign organization	olication is pending, check here tions, check here		
•	<b>H</b> C	heck type of organiza	tion X Section 50 nonexempt charitable tr	1(c)(3) exempt private for	oundation private foundation	2 Foreign organization here and attach of	tions meeting the 85% test, check computation	
-		or market value of all assets from Part II, column (c), line	s at end of year J Acc	counting method: X C Other (specify)  column (d) must be on	ash Accruai	under section 50	tion status was terminated 17(b)(1)(A), check here is in a 60-month termination 17(b)(1)(B), check here	
	Part	Analysis of Re		(a) Revenue and expenses per books	(b) Net investme		d net (d) Disbursements for charitable	
		sarily equal the an (see the instruction	nounts ın column (a)		_		purposes (cash basis only)	
•			grants, etc, received (att sch)	51,000.				
2011			oundn is <b>not</b> req to att Sch B ings and temporary		, w. w	* 3×3×3×		
7		cash investmen	nts					
_		4 Dividends and inter	est from securities					
0		<b>5a</b> Gross rents <b>b</b> Net rental income		***************************************				
MAR	R	or (loss) 6 a Net gain/(loss) from	sale of assets not on line 10		2.	· · · · · · · · · · · · · · · · · · ·		
	E V	<b>b</b> Gross sales price fo assets on line 6a	rall		. *%: ::	3.3.38		
S	É	7 Capital gain net inco	ome (from Part IV, line 2)					
뿔	N U	8 Net short-term 9 Income modific	, -					
SCANNED	Ē	10 a Gross sales less returns and allowances				<u> </u>		
S		b Less Cost of goods sold						
		c Gross profit/(loss)	•		XX			
		<u></u> `	attach schedule)					
		12 Total. Add lines 13 Compensation of off	s 1 through 11 ficers, directors, trustees, etc	51,000.		0.	0. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
		14 Other employee sala		J				
		' '	employee benefits					
	A D M	The same of the sa	chedule) tach-sch) SEE ST 1	470.	4	70.	470.	
	0 1	c Other prof fees (att	ach sch)					
	O PERAT	17 Interest 8 7		25.		25.	25.	
	i i	19 Depreciation (a sch) ang deplet 20 Occupancy	itach.					
	G É' A E N X D P	22 Printing and pu						
	D P	<u> </u>	s (attach schedule)					
	E S	expenses. Add	and administrative lines 13 through 23	495.	4	95.	495.	
	-		, grants paid STMT 3	51,278.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	51,278.	
		Add lines 24 ar		51,773.		95.	495. 51,278.	
		27 Subtract line 26 a Excess of revel	nue over expenses					
		and disbursem	ents	<del>-773</del> .		0.		
			e (if negative, enter -0 ) (if negative, enter -0 )		:	<u> </u>	0.	
	BAA F		ion Act Notice, see the	instructions.	Σ	TEEA0504L 07/23/10	Form <b>990-PF</b> (2010	

Dast	11	Balance Sheets	Attached schedules and amounts in the description	Beginning of year		of year
e ere e	<b>秋</b> .1	Dalatice Stieets	column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-	bearing	2,215.	1,442.	
	2	Savings and tempora	ary cash investments			
	3	Accounts receivable	•			X
		Less allowance for o	doubtful accounts			
	4	Pledges receivable	<b></b>		N. N	
	•	Less, allowance for o	doubtful accounts	]		
	5	Grants receivable				
	6	Receivables due from offic	ers, directors, trustees, and other th schedule) (see the instructions)			
	7	Other notes and loans rece		` \\	. 7.3%	. We is a si
Α	′	Less allowance for o		1 '` '	, , ", '	8 1 W V. W. W
Ş	8	Inventories for sale of		-		
A S E T	-	Prepaid expenses ar				
T S	l	Investments – US	and state government			
	١.	obligations (attach so		· · · · ·		
		Investments — corporate s	,			
		: Investments — corporate t	,			
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprect (attach schedule)	ation •			
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment: basis	. \\.	40 1 1 1	N 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Less accumulated deprect (attach schedule)	ation -			
		Other assets (descrit Total assets (to be o	pe ►) completed by all filers — p, see page 1, item I)	2,215.	1,442.	1,442.
L	17	Accounts payable ar		2/210.	2,1121	: 515 72
ī	_	Grants payable	a accided expenses		<u> </u>	140
A B	18	Deferred revenue				
Ĭ	19		burstone O other discustified persons			
L	20	,	ors, trustees, & other disqualified persons	<del> </del>		
Ť	21	Mortgages and other notes	• • •			
Ī	22	Other liabilities (descri				
E S	23	Total liabilities (add		0.	0.	i i de
		Foundations that fol and complete lines 2	low SFAS 117, check here X4 through 26 and lines 30 and 31.			
N F	24	Unrestricted		2,215.	1,442.	Marin M
N F E U T N	25	Temporarily restricte	d			
' D	26	Permanently restricte				San
A S S A E L T A		Foundations that do and complete lines 2	not follow SFAS 117, check here Page 7.7 through 31.			
ĔĹ	27	•	rincipal, or current funds			
SN	28	•	or land, building, and equipment fund			1 1
o E	29	Retained earnings, accumi	ulated income, endowment, or other funds			` `` <b>;</b> `. :
ŘŠ	30	Total net assets or for	und balances (see the instructions).	2,215.	1,442.	
	31	(see the instructions		2,215.	1,442.	. : 1
Parl	III	<b>Analysis of Chan</b>	ges in Net Assets or Fund Balan	ces	<del></del>	·-
1	Tota	I net assets or fund ba	alances at beginning of year – Part II, colu d on prior year's return)	ımn (a), line 30 (must ag	ree with	2,215.
2		r amount from Part I,			2	-773.
2		increases not included in the			3	
3		lines 1, 2, and 3				1,442.
4		nnes 1, 2, and 3 ases not included in line 2 (	item(76) ►		5	,
5			alances at end of year (line 4 minus line 5)	- Part II. column (b) III		1,442.
6_	TOTA	THE CASSES OF TURING DA	mandos at one of your (mic + minus into s)	. a , colainii (b); iii		·

(a) List and descri 2-story brick wareho	be the kınd(s) of property sold (e.g., reuse; or common stock, 200 shares ML	eal estate, C Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
е					<del></del>
Complete only for assets show	ring gain in column (h) and owned by t	the foundation on 12/31/69		(I) Gains (Coli	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	' '''	gain minus column (k nan -0-) <b>or</b> Losses (fr	
а					
b					
c					
d					
e					
<ul><li>2 Capital gain net income or (ne</li><li>3 Net short-term capital gain or</li></ul>	t capital loss).  If gain, also If (loss), ent (loss) as defined in sections 1222(5) a	enter in Part I, line 7 der -0- in Part I, line 7 nd (6)	2		
ın Part I, line 8	e 8, column (c) (see the instructions)	<u></u>	3		
Part ♥ : Qualification Unde	er Section 4940(e) for Reduce	<u>d Tax on Net Investm</u>	ent Income	N/A	
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable amount lify under section 4940(e). Do not comin each column for each year, see the	plete this part		Yes	☐ No
	(b)	(c)		(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets (col	Distribution umn (b) divided	
2009					
2008	,				
2007					
2006					
2005					
2 Total of line 1, column (d)			2		
3 Average distribution ratio for the	ne 5-year base period – divide the tota n has been in existence if less than 5	al on line 2 by 5, or by the	3		
-					
4 Enter the net value of nonchar	ritable-use assets for 2010 from Part X	, line 5	4		
5 Multiply line 4 by line 3			5_		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions f			8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, li	ne 1b, and complete that pa	rt using a 1% ta	x rate See the	

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1. 1.	1 141-4 Statements Regarding Activities Continued			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  N/A	13	X	
14	The books are in care of ► THE SALADINO FAMILY FOUNDATION Telephone no. ► 559-2	256-4	620	
15	Located at > 3325 WEST FIGARDEN DRIVE FRESNO CA ZIP + 4 > 93711	- NT / TA		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – Check here and enter the amount of tax-exempt interest received or accrued during the year	N/A		∐ N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ►			:
Par	t ₩I-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	1	Yes	No
1 &	During the year did the foundation (either directly or indirectly)		\$ : T	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No		ì	:
	(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	ř.,	* (	٠,
	(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 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	* * * * * * * * * * * * * * * * * * * *		
ŀ	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here.	<b>₩</b>	ž,	; ;
C	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 2010?	1c	i. i	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			š.
ē	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?			\. \.\.\.\.\.
	If 'Yes,' list the years ▶ 20, 20, 20			£
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see the instructions)	2b	N.	/Ä
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here	1:		
	► 20 , 20 , 20	14,4	٠. إ	٠.
38	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	;	<u>:</u>	,
t	o If 'Yes,' did it have excess business holdings in 2010 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 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 2010)	3b	N	/A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	< . <b>1</b>	X
ŀ	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 2010?	4b		X
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Form 990-PF (2010) THE SALADINO FAMIL	LY FOUNDATION		26-02	18131 Page 6
Part VII-8 Statements Regarding Activit	ies for Which For	m 4720 May Be Red	uired (continued)	)
5a During the year did the foundation pay or incur	,			
(1) Carry on propaganda, or otherwise attemp	_		Yes X	No No
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	tion drive?			No Since the second
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	∐ Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instru	ganization described ctions)	Yes X	]No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes X	]No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to q a current notice regard	ualify under the exception ling disaster assistance	ons	5b N/A
Organizations relying on a current notice regar	dıng dısaster assıstanc	e check here	▶ _	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	N/A Yes	]No
If 'Yes,' attach the statement required by Regu	ilations section 53 4945	5-5(d)		
<b>6a</b> Did the foundation, during the year, receive ar on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	]No
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	tly, on a personal benefi	t contract?	6b X
If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found	ation a party to a probi	hited tay shelter transac	tion? Yes X	No S
<b>b</b> If yes, did the foundation receive any proceeds				.]NO
Part VIII Information About Officers, D				
and Contractors	,	,	. <b></b>	,
1 List all officers, directors, trustees, foundation	managers and their co	ompensation (see instru	ctions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CRAIG A. SALADINO	PRES & DIREC	0.	0.	0.
3325 WEST FIGARDEN DRIVE	1.00			
FRESNO, CA 93711				
MARK SCHUH	TREAS, SEC,	0.	0.	0.
3325 WEST FIGARDEN DRIVE FRESNO, CA 93711	1.00	}		
JOHN KASHIAN	DIRECTOR	0.	0.	0.
8365 N. FRESNO ST. #450	1.00			
FRESNO, CA 93720				
2 Compensation of five highest-paid employees	other than those incl			
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000			•	
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Total. Add lines 1 through 3

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see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, pu	rposes:	
a Average monthly fair market value of securities	1a	
<b>b</b> Average of monthly cash balances	1b	1,831.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	1,831.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,831.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	_27.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line	ne 4 <b>5</b>	1,804.
6 Minimum investment return. Enter 5% of line 5	6	90.
Part Xi Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5)		oundations
and certain foreign organizations check here ▶ and do not cor	nplete this part.)	
1 Minimum investment return from Part X, line 6	1	90.
2a Tax on investment income for 2010 from Part VI, line 5		
b Income tax for 2010. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	90.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	90.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line	1 7	90.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	51,278.
<b>b</b> Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, p	urposes 2	
3 Amounts set aside for specific charitable projects that satisfy the		
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	<u> </u>
<b>b</b> Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part X	(III, line 4 <b>4</b>	51,278.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment in Enter 1% of Part I, line 27b (see instructions)	come.	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,278.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc qualifies for the section 4940(e) reduction of tax in those years	ulating whether the founda	ation
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## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
Distributable amount for 2010 from Part XI, line 7				90.
2 Undistributed income, if any, as of the end of 2010.		\.\.\.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· . 33%,	N
a Enter amount for 2009 only		` '^` ;	0.	
<b>b</b> Total for prior years 20, 20, 20		Q.		
3 Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005		;		n er j
<b>b</b> From 2006		. ;		
c From 2007				
<b>d</b> From 2008 45, 153.			, »	
e From 2009 90,333.	125 406		1.11	
f Total of lines 3a through e	135,486.	·		
4 Qualifying distributions for 2010 from Part			* 65N	
XII, line 4. ► \$ 51,278.			0.	
a Applied to 2009, but not more than line 2a			, , , , , , , , , , , , , , , , , , ,	<u> </u>
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)	100	0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.	NA TOUR		
d Applied to 2010 distributable amount			· · · · · · · · · · · · · · · · · · ·	90.
e Remaining amount distributed out of corpus	51,188.			
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the				
same amount must be shown in column (a) )		\$-\$2.20 \\		
6 Enter the net total of each column as	. · · · · · · · · · · · · · · · · · · ·			
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	186,674.	<u> </u>		
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-			\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
	·			\$ ·
d Subtract line 6c from line 6b Taxable amount – see instructions		0.	" 1 " " " " " " " " " " " " " " " " " "	
e Undistributed income for 2009 Subtract line 4a from				
line 2a Taxable amount — see instructions		*	0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be				0
distributed in 2011	X			0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				. 9
by section 170(b)(1)(F) or 4942(g)(3)	0.			XI
(see instructions)	<u> </u>			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
•	<u> </u>			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	186,674.			
10 Analysis of line 9	, %, : .			
a Excess from 2006				. 3 %
<b>b</b> Excess from 2007	<b>↓</b>			
<b>c</b> Excess from 2008 45, 153.	La			
<b>d</b> Excess from 2009 90, 333.		B 30 3		
<b>e</b> Excess from 2010 51,188.			<u> </u>	Form <b>990-PF</b> (2010)

orm 990-PF (2010) THE SALADINO FAM			1 ) /	26-021813	
art XIV Private Operating Foundati			•		N/A
1a If the foundation has received a ruling or a is effective for 2010, enter the date of the	ruling		•		
<b>b</b> Check box to indicate whether the foundar		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4 > 0000	Prior 3 years	4.0007	4-> <b>T</b> - 4 - 1
investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
• 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:					
a 'Assets' alternative test - enter					
(1) Value of all assets.					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)		_	<del></del>		
(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					
art XV Supplementary Information assets at any time during to Information Regarding Foundation Manage a List any managers of the foundation who is close of any tax year (but only if they have	ne year — see i ers: nave contributed m	ore than 2% of the	total contributions re		N/.
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater intere	poration (or an equa est.	ally large portion of th	e ownership of
2 Information Regarding Contribution, Gran Check here  if the foundation only r requests for funds If the foundation make complete items 2a, b, c, and d.	nakes contributions s gifts, grants, etc,	s to preselected cha (see instructions) t	aritable organizations to individuals or orga	anizations under othe	ot unsolicited or conditions,
a The name, address, and telephone number	er of the person to	wnom applications	Siloulu de addresse	u	
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	als they should include	de:	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or other f	actors:
۸۸	т	FEA0310L 07/23/10			Form <b>990-PF</b> (201

TEEA0310L 07/23/10

BAA

Page **11** 

Bit MY Supplementary information	(continued)			
3 Grants and Contributions Paid During the	ear or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
Name and address (home or business)	substantial contributor	recipient	contribution	
	3003tairtiai contributor	-		
a Paid during the year				
		1		
		İ		
		Ì		
			Į	
				]
		1		
			ļ	
Total			► 3a	
<b>b</b> Approved for future payment				
,,				
		1		
		1		
				•
Total		<u> </u>	► 3b	
LOTAL				i .

### Part XVI-A Analysis of Income-Producing Activities

Entor		<del>1</del>	11	T = 1 .		1
	gross amounts unless otherwise indicated.	(a) Business code	ed business income (b) Amount	(c) Exclu- sion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (see the instructions)
	Program service revenue.			code		<u> </u>
a_		<u> </u>				
p_	<del></del>	<del> </del>				
c_						
<b>d</b> _	<del></del>					
e_					<u> </u>	
_ f _		<del> </del>	.,			
	ees and contracts from government agencies.					
	Membership dues and assessments					· · · · · · · · · · · · · · · · ·
	nterest on savings and temporary cash investments			14		
	Dividends and interest from securities				X	
	let rental income or (loss) from real estate	<u></u>		نشهما		Y 0.7
	Pebt-financed property					
	Not debt-financed property					
	et rental income or (loss) from personal property					
	Other investment income					
<b>8</b> G	aın or (loss) from sales of assets other than inventory					
	let income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11 (	Other revenue:	A Marie	han han i		maia 🥍 a alfhall	manualing V
a_					·	
<b>b</b> _	<del>-</del>					
<b>c</b> _						
<b>d</b> _						
e_		ļ				·
<b>12</b> S	Subtotal Add columns (b), (d), and (e)					<u> </u>
13 T	otal. Add line 12, columns (b), (d), and (e)				13	0.
13 T		culations)	,		13 <sub></sub>	0.
13 T See w	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify cal		shment of Exempt	———— : Purpo		0.
13 T See w	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify call.  Relationship of Activities to the	Accompli			oses	
13 T See w Part	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify call.  Relationship of Activities to the	Accompli			oses	
13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
13 T See w Part	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
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13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
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13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
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13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
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13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	
13 T See w Part Line ▼	orksheet in the instructions for line 13 to verify cales and the instructions for line 13 to verify cales.  Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt in the second seco	Accompli			oses	

# Form 990-PF (2010) THE SALADINO FAMILY FOUNDATION 26-0218131 Part XVI Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<del> </del>					<del>,</del>		
d	eld the organization di escribed in section 50 elating to political orga	11(c) of the Code (o	ngage in any of the fol ther than section 501(c	lowing with ar )(3) organizat	ny other organization ions) or in section 52:	7,		Yes	No
aΥ	ransfers from the rep	orting foundation to	a noncharitable exemp	ot organizatio	n of:			Zmin	20
(1) Cash									<u>X</u>
(2	2) Other assets						1a (2)		X
<b>b</b> O	ther transactions:								a. And
(1	) Sales of assets to	a noncharitable exe	empt organization				1b(1)		<u>X</u>
(2	<ol><li>Purchases of asse</li></ol>	ts from a noncharita	able exempt organization	n			1b(2)		Χ_
(3	Rental of facilities,	equipment, or other	r assets.				1b (3)		Χ_
(4	Reimbursement ari	rangements					1b (4)		<u>X</u>
(5	<ul><li>b) Loans or loan guar</li></ul>	antees					1 b (5)		<u>X</u>
(6	<ol><li>Performance of se</li></ol>	rvices or membersh	up or fundraising solicit	ations			1b (6)		<u>X</u>
c S	haring of facilities, eq	juipment, mailing lis	its, other assets, or par	d employees			1c		<u>X</u> _
<b>d</b> If th	the answer to any of ne goods, other assets	the above is 'Yes,' s, or services given	complete the following by the reporting found how in column (d) the	schedule. Co ation. If the fo	lumn <b>(b)</b> should alway	ys show the fair mass than fair market	arket value value in	of	
(a) Line			of noncharitable exempt orga		(d) Description of trans			ements	
N/A	, no (D) runount mitor	(c) Name	or nonentable exempt orga	TIZETION .	(a) possipilon or a que	toro, transactiono, and	ondring dirang		
			<del></del>			· <u>-</u>			
			<del></del>						
			- <del></del>						
	-				···		***		
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						. —	_		
	-								
<u> </u>									
						<del></del> .			
					<del></del>		<u> </u>		
di	the foundation direct escribed in section 50 'Yes,' complete the fo	1(c) of the Code (o	ated with, or related to, ther than section 501(c)	one or more (3)) or in sec	tax-exempt organizat	ions	Yes	١X	10
	(a) Name of orga	inization	(b) Type of or	ganization	(c)	Description of rela	ationship		
N/A				<u> </u>					
							<del></del> ,	_	
		<u> </u>	<u> </u>						
	Under penalties of penury,	I declare that I have exar	nined this return, including acc than taxpayer or fiduciary) is	companying sched	fules and statements, and to	the best of my knowled	ge and belief, i	t is true	•
Cian	correct, and complete Dev	variable of preparer (outer	than taxpayer or nouclary) is	DESCU OIT all lillor	I a				
Sign					12/16/11	4×25			
Here	Signature of officer or	trustee		_ <del>.</del>	Date	Title			
	Print/Type prepar		Preparer's signatur				PTIN		
	i into type prepar	c. c name	110	-4	FEB 0 7 201	Check if self-	N/A		
Paid		MOODE CDI	DER AND COMPANY	بحساري		employed In the N/A	14/ 11		
Prepa		MOORE GRI			<del>)</del>	- MINS ENV - IV/A			
Use C	only Firm's address		A 93710-3707		<del></del>	Phone no (559	440-0	700	
		FRESHU, C	73110-3101			Phone no (559			2010
BAA							Form <b>990</b>	-rr (4	.u 1U)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2010

name of the organization		Employer Identification number
THE SALADINO FAMILY FOUN	DATION	26-0218131
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> tr 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treate 501(c)(3) taxable private foundation	ed as a private foundation
Check if your organization is covered by <b>Note</b> . Only a section 501(c)(7), (8), or (	γ the <b>General Rule</b> or a <b>Special Rule</b> . 10) organization can check boxes for both the General Ru	ule and a Special Rule. See instructions.
General Rule  X For an organization filing Form 990, contributor (Complete Parts I and I	990-EZ, or 990-PF that received, during the year, \$5,000	) or more (in money or property) from any one
Special Rules		
For a section 501(c)(3) organization 509(a)(1) and 170(b)(1)(A)(vi), and (2) 2% of the amount on (i) Form 99	filing Form 990 or 990-EZ, that met the 33-1/3% support received from any one contributor, during the year, a con 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete	test of the regulations under sections itribution of the greater of (1) \$5,000 or Parts I and II.
For a section 501(c)(7), (8), or (10) aggregate contributions of more that the prevention of cruelty to children	organization filing Form 990 or 990-EZ, that received fron n \$1,000 for use <i>exclusively</i> for religious, charitable, scie or animals. Complete Parts I, II, and III.	n any one contributor, during the year, entific, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here th purpose Do not complete any of the	organization filing Form 990 or 990-EZ, that received fron religious, charitable, etc, purposes, but these contribution e total contributions that were received during the year for a parts unless the <b>General Rule</b> applies to this organization.	ns did not aggregate to more than \$1,000. or an exclusively religious, charitable, etc,
religious, charitable, etc, contributio	ns of \$5,000 or more during the year	- \$
990-PF) but it <b>must</b> answer 'No' on Part	rered by the General Rule and/or the Special Rules does t IV, line 2 of their Form 990, or check the box on line H of the filing requirements of Schedule B (Form 990, 990-EZ,	of its Form 990-EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act No 990EZ, or 990-PF.	tice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010

Schedule <b>B</b> (	(Form 990,	990-EZ, or 990-PF) (2010)	

Name of organization

Page 1

of 1

of Part I

THE SALADINO FAMILY FOUNDATION

Employer identification number 26-0218131

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SALADINO'S, INC.  P.O. BOX 12266  FRESNO, CA 93777	\$50,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		  \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
RΔΔ	TEEA0702L 10/26/10	Schedule <b>B</b> (Form 99	0, 990-EZ, or 990-PF) (2010)

Conteduce B (Form 950, 950 EZ, OF 950 TT) (2010)	, age	_	VI -		OI I UII
Name of organization		Employe	r identifica	ation nun	nber
THE SALADINO FAMILY FOUNDATION		26-02	<u> 21813</u>	1	
Elevis 3 Namacala Dramacha (					

art II	Noncash Property (see instructions )		<del></del>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$	
			4.0
(a) lo. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
			4.0
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
		\$	
		Schedule <b>B</b> (Form 990, 990-E	

of 1

of Part III

THE SALADINO FAMILY FOUNDATION

Employer identification number 26-0218131

Part III . Exclusively religious, charitable, etc, individual contributions to section 501(c)	(7), (8), or (10)	
organizations aggregating more than \$1,000 for the year.Complete cols (a) through (e)	) and the following	line entry.

	For organizations completing Part III, enter contributions of \$1,000 or less for the year	(Enter this information once. See in	structions) \$ N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held		
	N/A				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, addres		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e)			
	Transferee's name, addres	Transfer of gift	Relationship of transferor to transferee		

20	4	
ZU	ı	u

#### FEDERAL STATEMENTS

PAGE 1

THE SALADINO FAMILY FOUNDATION

26-0218131

250.

(D)

STATEMENT 1 FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES** 

		EXPENSES PER BOOKS	 INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES	TOTAL	\$ 470. \$ 470.	470. 470.	\$ 470. \$ 470.	\$ 0.

(A)

(B) NET

(C)

STATEMENT 2 FORM 990-PF, PART I, LINE 18 **TAXES** 

	(A)	(B) NET	(C)	(D)
	EXPENSES PER BOOKS	INVESTMENTINCOME	ADJUSTED NET_INCOME_	CHARITABLE PURPOSES
	THI DOOMS	INCOM	THE THOUSA	
BUSINESS REGISTRATION FEES	\$ 25.	\$ 25.	\$ 25.	
	TOTAL \$ 25.	\$ 25.	\$ 25.	\$ 0.

## **STATEMENT 3** FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

COMMUNITY MEDICAL FOUNDATION

P.O. BOX 1232 FRESNO, CA 93715

NON-PROFIT ORGANIZATION

12,778.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: NON-PROFIT ORGANIZATION

AMOUNT GIVEN:

NAZARETH HOUSE FRESNO 2121 FIRST STREET FRESNO, CA 93703

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

ST AGNES FOUNDATION P.O. BOX 27350 FRESNO, CA 93720

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

30,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

POVERELLO HOUSE PO BOX 12225 FRESNO, CA 93777

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

NON-PROFIT ORGANIZATION

2010

#### FEDERAL STATEMENTS

PAGE 2

THE SALADINO FAMILY FOUNDATION

26-0218131

STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN:

\$ 250.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

ST AGNES SERVICE GUILD 1201 E HERNDON AVE #109

FRESNO, CA 93720

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

1,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

AMERICAN HEART ASSOCIATION

1710 GILBRETH ROAD BURLINGAME, CA 94010

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

250.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS: BSA SEQUOIA COUNCIL 6005 N. TAMERA AVE FRESNO, CA 93711

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

500.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

MAKE-A-WISH FOUNDATION OF CENTRAL CA

83 E. SHAW AVE, SUITE 202

FRESNO, CA 93710

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

3,750.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

SAN JOAQUIN MEMORIAL HS 1406 N. FRESNO ST. FRESNO, CA 93703

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

NON-PROFIT ORGANIZATION

2,500.

TOTAL \$ 51,278.

**STATEMENT 4** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

UNSOLICITED REQUESTS

NAME:

THE SALADINO FAMILY FOUNDATION

CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE: 3325 WEST FIGARDEN DRIVE

TELEPHONE:

FRESNO, CA 93711

FORM AND CONTENT:

WRITTEN REQUEST

2010

## **FEDERAL STATEMENTS**

PAGE 3

THE SALADINO FAMILY FOUNDATION

26-0218131

STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: NONE NONE