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Department of the Treasury Internal Revenue Service **Return of Private Foundation**

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

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

OMB No 1545-0052

2011

For calendar year 2011 or tax year beginning			, 2011, and ending				, 20		
Name of foundation SABATINI FAMILY FOUNDATI			in N A Employer identification number 1990 A Employer identification n						
		d street (or PO box number if mail is not delivered to street address)		 		 	9		
190		3 St. 31 14 St VP0+	Room	/suite	Telephone	number (see instruction $266^{\circ}5$			
	v or tow	n, state, and ZIP code							
1	<u>.</u> .	2 Ka. KS (66605-2341)			C If exemp	tion application is pend	ing, check here ▶ [_		
G			n of a former public	charity	D 4 Foreign	n organizations, check	hara		
_	011001	Final return Amended	•	Chanty			_		
		☐ Address change ☐ Name cha				n organizations meeting here and attach compi			
H	Check	type of organization: Section 501(c)(3) exempt p				·	_		
	Section	on 4947(a)(1) nonexempt charitable trust	xable private found	lation		foundation status was 07(b)(1)(A), check here	terminated under ►		
		narket value of all assets at J Accounting method	I. 🗌 Cash 🔲 Ad	ccrual	F If the fou	ndation is in a 60-mont	h termination		
		f year (from Part II, col. (c), Other (specify)				ction 507(b)(1)(B), chec			
	line 16	`	on cash basis)				Y		
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable		
		the amounts in column (a) (see instructions))	expenses per books		come	income	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)		% . a . , ,	N 8% .	. One with the	(cusiv busis only)		
	2	Check ► I if the foundation is not required to attach Sch. B		\$45.X			72 3 3 3		
	3	Interest on savings and temporary cash investments		1787 274 Y.	A COLUMN SECTION	· · · · · · · · · · · · · · · · · · ·	A. C. S.		
	4	Dividends and interest from securities					*2.		
re	5a	Gross rents		_			The same of the same		
	b	Net rental income or (loss)	7 MARK 2004	<u> </u>	(5)	(6) 是 2.35年(6)			
	6a	Net gain or (loss) from sale of assets not on line 10		Car (Me 2)		Water of the state of the state of			
Revenue	b	Gross sales price for all assets on line 6a	CALL AN AND AN	37000	(Mary'''		September 3		
ě	7	Capital gain net income (from Part IV, line 2) .	Mar Charles				* 58,7		
Œ	8	Net short-term capital gain	2000年度有限。19	1.34	r wayyaar.		/學漢字:		
	9	Income modifications	77 x x x x x x x x x x x x x x x x x x	Same and		00.00.000.000.000.000.000.000.000.000.000.000	\$ 1. 3. 1 3. 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	10a	Gross sales less returns and allowances		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	**************************************	Market Care		
	b	Less: Cost of goods sold		With the Parks			1:53 ROMANNES		
	11	Other income (attach schedule)		(? ? % a*	52 m 646 343				
	12	Total. Add lines 1 through 11					(X) X		
	13	Compensation of officers, directors, trustees, etc					39916 1 3 3 3 3		
Expenses	14	Other employee salaries and wages							
ë	15	Pension plans, employee benefits							
Ř	16a	Legal fees (attach schedule)							
_	b	Accounting fees (attach schedule)							
ţ	С	Other professional fees (attach schedule)							
Operating and Administrative	17	Interest RECEIVED							
nis	18	Taxes (attach schedule) (see instructions)							
Ē	19	Depreciation (attach schedule) and depletion . Occupancy . E DEC 2 2011 . O					7 5 3/4/2		
Ad	20	Occupancy . 5 DEC 20 2011 . 6							
g	21 22	Travel, conferences, and meetings					 		
ā	23	Other expenses (attach schedule) EN, UT							
ij	24	Total operating and administrative expenses.							
ā		Add lines 13 through 23							
þ	25	Contributions, gifts, grants paid		 	, .	6 m 12 ,			
0	26	Total expenses and disbursements. Add lines 24 and 25		· *. *. <u>.</u>					
	27	Subtract line 26 from line 12:	\$50 PH \$50.5	8 4 8 - 45	* ; ···, · : [*] , *		¥		
	a	Excess of revenue over expenses and disbursements		4 e. c	· 1948	Works Commercial	**		
	b	Net investment income (if negative, enter -0-)	14						
	_ c	Adjusted net income (if negative enter -0-)	L , 1	,	Sailde		J. J. 1988		

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023511 12-07-10 1,177,114.

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

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 Part VI instructions

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1,179.

188,822.

7

Enter qualifying distributions from Part XII, line 4

Add lines 5 and 6

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	n 990-PF (2010) SABATINI FAMILY FOUNDATION 48-09 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	966619		Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	CC 1113(1)	40110	113/
	`Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		1.1	79.
	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-)			0.
3	Add lines 1 and 2		1,1	79.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,1	79.
6	Credits/Payments,			
а	a 2010 estimated tax payments and 2009 overpayment credited to 2010			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			34.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		1,2	13.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2011 estimated tax		,	
	art VII-A Statements Regarding Activities		1	
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a	<u> </u>	X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	ļ	X_
	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	1		
	Did the foundation file Form 1120-POL for this year?	10	ļ	<u>X</u>
d	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1	
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.		İ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ļ	
_	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	X
_	If "Yes," attach a detailed description of the activities.	i		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
4	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	-	X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4a	-	X
	b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-	v
J	If "Yes," attach the statement required by General Instruction T	5	 	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
Ü	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?	6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
•	If "Yes," complete Part II, col. (c), and Part XV	- '-	- 22	
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions) None			
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
Í	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	1	<u> </u>	
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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X

3b

4a

N/A

b 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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

during the year?

orm 990-PF (2010) SABATINI FAMILY FOUNDATI	ON,		<u>48-09666</u>	<u> 19</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,			
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y6	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	or outdowns nur purposes, or .		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		in riogalationo	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check h	· ·			-	+-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		inad			
expenditure responsibility for the grant?		/A	es No	ĺ	1
If "Yes," attach the statement required by Regulations section 53 494		'/A ''	8 NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		Y6			7,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870.			(12)		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		+
b If "Yes," did the foundation receive any proceeds or have any net income attribu		Himble		7b	
Part VIII Information About Officers, Directors, Trust	ees, roundation Ma	inagers, Higni	y		
List all officers, directors, trustees, foundation managers and their	componention				
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) E	vnanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	expense ant, other
	to position	enter -0-)	compensation	allov	wances
RANK C SABATINI	TRUSTEE				
2423 SE 37TH STREET					_
OPEKA, KS 66605	10.00	0.	0.		<u> </u>
		ļ			
				<u> </u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allo	wances
NONE					
				1	
	,				
				1	
				1	
Total number of other employees paid over \$50,000					0
Otto Hamos, of other employees paid over 400,000			Form	990-P	F (2010)
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	,
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of servi	ice (c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3	0.
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P	art.X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, :	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,359,770.
b	Average of monthly cash balances	1b	1,359,770. 16,839.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,376,609.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,376,609.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,649.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,355,960.
6	Minimum investment return. Enter 5% of line 5	6	67,798.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	67,798.
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	1,179.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	66,619.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	66,619.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	66,619.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		100.000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	188,822.
þ	Program-related investments - total from Part IX-B	1b	0.
2	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:		
а	Suitability test (prior IRS approval required)	3a	
þ	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 XIII, line 4	4	188,822.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,179.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	187,643.
	Nets. The amount on line C will be used in Bort V, column (b), in authorizing when colculating whether the foundation (accalifica far	the eastern

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4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				66,619.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007			·	
d From 2008				
e From 2009 198,450.	400 450			
f Total of lines 3a through e	198,450.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 188,822.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			55 510
d Applied to 2010 distributable amount	100 000			66,619.
e Remaining amount distributed out of corpus	122,203.	<u>.</u>		
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	320,653.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.	·-·	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011 Subtract lines 7 and 8 from line 6a	220 652			
1	320,653.		<u> </u>	
10 Analysis of line 9: a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009 198, 450.				
e Excess from 2010 122, 203.				
			· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2010)

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	I FAMILY FO				66619 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
` foundation, and the ruling is effective fo	r 2010, enter the date of t	he ruling	▶ └		···· · · · · · · · · · · · · · ·
b Check box to indicate whether the found		ng foundation described in		<u>4942(j)(3) or </u> 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					· · · · · · · · · · · · · · · · · · ·
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:					<u> </u>
(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		<u>-</u>			
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)			İ		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during t	he year-see the i	instructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the clos	se of any tax
year (but only if they have contributed in	nore than \$5,000). (See s	ection 507(d)(2).)			
None					
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large port	tion of the ownership of a pa	artnership or
None					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► ☐ If the foundation of the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to who	n applications should be	addressed:		
SABATINI FAMILY FOUN	DATION, 785	-266-5555			
2423 SE 37TH STREET,	TOPEKA, KS	66605			
b The form in which applications should be LETTER APPLICATION	e submitted and informa	tion and materials they sh	nould include:		
c Any submission deadlines:					
NO DEADLINES					
d Any restrictions or limitations on award			kınds of institutions, or	other factors	_
NO RESTRICTIONS OR L	IMITATIONS	ON AWARDS			
023601 12-07-10			· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2010)
00000 1 16-01-10					1 OI III 3 3 0 - F 1 - (20 10)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
		}		
			!	
See Statement 6				
Total		T	▶ 3a	188,822.
b Approved for future payment				
None				
Total	-		▶ 3b	0.
023611 12-07-10			F	orm 990-PF (2010)

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)	
-	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exe	
Program service revenue:	code	Amount	code	Amount	function inco	me
a						
b		<u></u>				
C						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments						22
4 Dividends and interest from securities					117,	877
5 Net rental income or (loss) from real estate:						
a Debt-financed property			 			
b Not debt-financed property			+			
6 Net rental income or (loss) from personal property						
7 Other investment income						
B Gain or (loss) from sales of assets other						•
than inventory						
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue						
a						
b						
c						
d						
e						
2 Subtotal. Add columns (b), (d), and (e)	1).	0.	117,	
3 Total. Add line 12, columns (b), (d), and (e)				13	117,	<u>899</u>
See worksheet in line 13 instructions to verify calculations.)		· · · · · · · · · · · · · · · · · · ·				
Part XVI-B Relationship of Activities to	o the Accom	plishment of	Exempt F	Purposes		
Line No. Explain below how each activity for which inco	me is reported in c	olumn (e) of Part XV	I-A contribute	d importantly to the accom-	plishment of	

Part XVI-B	Relationshi	p of Activities	to the Accom	plishment of	Exempt Purp	oses
------------	-------------	-----------------	--------------	--------------	-------------	------

 the foundation's exempt purposes (other than by providing funds for such purposes).

Part Avii,	Exempt Organ	•	o and Transactions at	nd Relationships with Nonch	aritable	•		
1 Dud the or			owing with any other organization	described in section 501(c) of		Yes	No	
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								
		ation to a noncharitable exemp						
(1) Cash	wom the reporting realist	ation to a nononariable exemp	or gameation of.		1a(1)		X	
(2) Other	assets				1a(2)		X	
b Other tran					14(2)			
_	of assets to a noncharita	hle evemnt organization			1b(1)		X	
, ,		ncharitable exempt organization	nn		1b(2)		X	
• •	···							
• •	bursement arrangements				1b(3) 1b(4)		X	
· · · · · · · · · · · · · · · · · · ·								
\' ,	•	embership or fundraising solici	itations		1b(5) 1b(6)		X	
• •		uling lists, other assets, or paid			1c		X	
				ays show the fair market value of the goods		ente		
			v v	e in any transaction or sharing arrangement,		,010,		
		other assets, or services recei		in any mandaction of onlining arrangement,	011011			
(a) Line no	(b) Amount involved		table exempt organization	(d) Description of transfers, transactions, and	d sharing ari	rangeme	nts	
`		N/						
		217	<u> </u>			_		
		,						
								
			•		-			
					-			
2a Is the four	ndation directly or indirec	tly affiliated with, or related to,	one or more tax-exempt organiza	ations described		•	_	
	•	r than section 501(c)(3)) or in		[Yes	X	No	
	omplete the following sch						-	
	(a) Name of org		(b) Type of organization	(c) Description of relation	ship			
	N/A							
				statements, and to the best of my knowledge and b	elief, it is tru	ie, corre	ot,	
Sign	complete Declaration of prepa	arer (ether than taxpayer or fiduciary)) is based on all information of which pr		_			
Here			12/17	1/11 Trest	re			
	Signature of officer or tru	ustee	Date	Title				
	Print/Type preparer's na	ame Repare	r's signature	Date Check if PTIN				
	David Brau	nsdorf,		self- employed				
Paid	CPA	Qu	Asin'(W/ 1	12/13/11				
Preparer	Firm's name ► Dav	id L. Braunsd	off, CPA PA	Firm's EIN ▶				
Use Only			/				_	
	Firm's address ▶ PO							
	то	peka, KS 6660	4-0485	Phone no. 785-	272-	222	7	
					orm 990			

023622 04-26-11

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

SABATINI FAMILY FOUNDATION

Employer identification number

48-0966619

Organization type (check one)						
Filers of	:	Section:				
Form 99	0 or 990·EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-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				
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
General	Rule					
X	For an organization contributor Compl	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II				
Special	Rules					
	509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II				
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
	contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year.				
but it mi	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990·EZ, or 990·PF), Part IV, line 2 of its Form 990, or check the box on line H of its Form 990·EZ, or on line 2 of its Form 990·PF, to certify an requirements of Schedule B (Form 990, 990·FZ, or 990·PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

SABATINI FAMILY FOUNDATION

48-0966619

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CAPITAL CITY BANCSHARES 3706 S TOPEKA BLVD TOPEKA, KS 66609	\$12,900.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	CAPITAL CITY BANK 3706 S TOPEKA BLVD TOPEKA, KS 66609	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	FRANK C SABATINI TRUST 2423 SE 37TH STREET TOPEKA, KS 66605	s46,600.	Person X Payroll
(a) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
023452 12-2		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution) 990, 990-EZ, or 990-PF) (2010)

Name of organization .

Employer identification number

SABATINI FAMILY FOUNDATION

48-0966619

Part II N	oncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(SOO MOLEGACIO)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
— [<u> </u>			
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	· · · · · · · · · · · · · · · · · · ·		
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)		(2)	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			, ,
_			
3453 12-23-10		\$	 990, 990-EZ, or 990-PF) (

• •	•	•		
Name of orga	rm 990, 990-EZ, or 990-PF) (2010) anization			Page of of Part III Employer identification number
Part III	NI FAMILY FOUNDATION Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complete Part III, enter the total of exclusively religion \$1,000 or less for the year (Enter this info	e columns (a) through (e) and the fous, charitable, etc., contributions of	ollowing line entry For	48-0966619 organizations aggregating organizations completing
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	cription of how gift is held	
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of tra	insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift (d) De:		cription of how gift is held
_	Transferee's name, address, ar	(e) Transfer of gift	Relationship of tra	insferor to transferee

	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
		(e) Transfer of gift	

		-	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

(e)	Transfer	of	gift
-----	----------	----	------

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Relationship of transferor to transferee

Form 990-PF Interest on Savi	ngs a	nd Tem	porary C	ash Ir	nvestments	Statemen	1
Source						Amoun	t
CAPITAL CITY BANK							22.
Total to Form 990-PF, Part I,	line	3, Co	lumn A				22.
Form 990-PF Dividend	ls and	Inter	est from	Secui	rities	Statemen	t 2
Source		Gross	Amount		ital Gains ividends	Column Amoun	
INTRUST BANK OPPENHEIMER	-		71,124. 46,753.		0.	•	
Total to Fm 990-PF, Part I,]	.n 4		117,877.		0.	117	,877.
Form 990-PF		Tax	es			Statemen	t 3
Description	Expe	a) nses Books	(b) Net Inv		(c) Adjusted Net Incom		table
FEDERAL TAXES		2,335.		0.		0.	0.
To Form 990-PF, Pg 1, ln 18 =		2,335.		0.		0.	0.
Form 990-PF	0	ther E	xpenses	•		Statemen	t 4
Description	Expe	a) nses Books	(b) Net Inv	est-	(c) Adjusted Net Incom		table
ANNUAL REPORT TO SECRETARY OF STATE		220.		0.		0.	0.
To Form 990-PF, Pg 1, ln 23		220.	• •	0.		0.	0.

Form 990-PF	Corporate Stock		State	ement 5	
Description		Book Value		Fair Market Value	
COMMON STOCK		1,114,46	55. 1	,406,148.	
Total to Form 990-PF, Part II	I, line 10b	1,114,46	55. 1	,406,148.	
	ants and Contribution Paid During the Year		Stat	ement 6	
Recipient Name and Address	Recipient Rel		cipient Status	Amount	
WASHBURN UNIVERSITY ENDOWEMEN ASSOCIATION 1729 SW MACVICAR TOPEKA, KS 6-6604	SUPPORT STUDENGEDUCATION & ARGINE UNIVERSITY	TS AT		39,800.	
ST MATTHEWS CHURCH 2700 SE VIRGINIA TOPEKA, KS 66605	CHURCH ACTIVIT	IES		18,337.	
YMCA 421 SW VAN BUREN TOPEKA, KS 66603	SUPPORT YOUTH ACTIVITIES			5,000.	
KANSAS UNIVERSITY ENDOWMENT ASSOCIATION PO BOX 928 LAWRENCE, KS 6604	SUPPORT UNIVER			10,000.	
MID AMERICA ARTS COUNCIL 2018 BALTIMORE AVENUE KANSAS CITY, MO 64108	SUPPORT ARTIST	S IN THE		10,000.	
WASHBURN WOMENS ALLIANCE 1700 SW COLLEGE TOPEKA, KS 66621	SUPPORT UNIVER SCHOLARSHIPS	SITY		2,000.	

SABAŢINI FAMILY FOUNDATION	•	48-0966619
MEALS ON WHEELS 5724 SW HUNTOON TOPEKA, KS 66604	PROVIDE MEALS TO LIVE INS	1,800.
CAAPPER FOUNDATION 3500 SW 10TH AVENUE TOPEKA, KS 66604	SUPPORT FOR HADICAPPED CHILDREN	10,000.
ST. BENEDICT'S ABEY 1020 NORTH 2ND STREET ATCHINSON, KS 66002	SUPPORT RELIGIOUS ACTIVITIES	5,000.
SCARS PO BOX 22 AUBURN, KS 66402	ANIMAL RIGHTS	5,000.
WILLIAMS EDUCATION FUND UNIVERSITY OF KANSAS 1651 NAISMITH DRIVE LAWRENCE, KS 66045	SCHOLARSHIPS	20,000.
LAWRENCE COMMUNITY SHELTER 214 WEST 10TH STREET LAWRENCE, KS 66044	COMMUNITY BETTERMENT	5,000.
UNITED WAY OF GREATER TOPEKA PO BOX 4188 TOPEKA, KS 66604	COMMUNITY ORGINATIONS	3,000.
KANSAS SPORTS HALL OF FAME 238 N MEAD WICHITA, KS 67202	SUPPORT FOR ATHLETICS	10,000.
SYMPHONY IN THE FLINT HILLS 311 COTTONWOOD AVENUE STRONG CITY, KS 66869	SUPPORT MUSIC EDUCATION AND THE ARTS	1,750.
SHAWNEE COUNTY HISTORICAL SOCIETY 1118 SE MADISON STREET TOPEKA, KS 66612	HISTORICAL ACTIVITIES	5,000.

SABATINI FAMILY FOUNDATION	•	48-0966619
LOYOLA UNIVERSITY 3431'N SHERIDEN ROAD CHICAGO, IL 60626	SUPPORT ACADEMICS	2,500.
MIDAMERICA NAZARENE UNIVERSITY 2030 E COLLEGE WAY OLATHE, KS 66062	SUPPORT ACADEMICS	1,000.
DOUGLAS COUNTY COMMUNITY FOUNDATION 900 MASSACHUETTES SUITE 406 LAWRENCE, KS 66044	SUPPORT COMMUNITY PROJECTS	12,000.
BISHOP WARD HIGH SCHOOL 708 N 18TH STREET KANSAS CITY, KS 66102	SUPPORT ACADEMICS	1,000.
VARIOUS CHARITIES ALL GIFTS UNDER \$1,000	SUPPORT ACADEMICS AND COMMUNITY ACTIVITIES	20,635.
Total to Form 990-PF, Part XV, lin	ne 3a	188,822.