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Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation 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. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of
In beginning DEC 23, 2013 , and ending DEC 31,

For	calen	dar year 2013 or tax year beginning DEC	23, 2013	, and ending]	DEC 31, 2013	
Name of foundation					A Employer identification	number	
		timent Foundation				46-4368195	
		nd street (or P O box number if mail is not delivered to street	n/suite	B Telephone number			
		3 Evergreen		281-397-39	. 1991		
		own, state or province, country, and ZIP or foreign p laire, TX 77401	ostal code			C if exemption application is p	ending, check here
			Initial return of a fo	rmor public shout	.,	D 1 Foreign organization	s check here
u C	neck	all that apply: X Initial return	Amended return	imei public charit	у	D 1. Foreign organizations	s, check here
•		Address change	Name change			Foreign organizations me check here and attach co	eeting the 85% test,
H (heck	type of organization: X Section 501(c)(3) ex					
	_		Other taxable private founda	ation		E If private foundation sta under section 507(b)(1)	
I Fa		rket value of all assets at end of year J Accounti	· · · · · · · · · · · · · · · · · · ·	Accrual		F If the foundation is in a	
		·	her (specify)			under section 507(b)(1)	
•		100,000. (Part I, colu	mn (d) must be on cash l	basis)		олиол оослол оол (о ₎ (г	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	ırt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investr	nent	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.			N/A	
	2	Check If the foundation is not required to attach Sch. B				-	
	3	Interest on savings and temporary cash investments				,	
	4	Dividends and interest from securities					
	5a	Gross rents					
	6	Net rental income or (loss)					
ē		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
Revenue	_b	assets on line 6a		: 	0.		
Re	7	Capital gain net income (from Part IV, line 2)	***************************************		U •		-
_		Net short-term capital gain					
	9 10a	Income modifications Gross sales less returns					
		and allowances Less Cost of goods sold	-				
	1	Gross profit or (loss)					
	11	· · · · · · · · · · · · · · · · · · ·					
	12	Total. Add lines 1 through 11	100,000.		0.		
	13	Compensation of officers, directors, trustees, etc	0.	7-	0.		0.
i !	14	Other employee salaries and wages		3			
	15	Pension plans, employee benefits		ਹੀ ਵ	i 		
nses	16a	Legal fees		Ţ	,	_	
ben	b	Accounting fees			N'[:	Y % 7	
Exper	C	Other professional fees		-			
tive	17	Interest				•	ļ ·
Operating and Administrative	18	Taxes					1
inis	19	Depreciation and depletion					,
Ē	20	Occupancy					
Ą	21	Travel, conferences, and meetings					
a an	22	Printing and publications					_
ting	23	Other expenses					
era	24	Total operating and administrative expenses. Add lines 13 through 23	0.		0.		0.
o	25	Contributions, gifts, grants paid	0.		٠.		0.
26 Total expenses and disbursements.						 	
	້	Add lines 24 and 25	0.		0.		0.
	27	Subtract line 26 from line 12:			<u> </u>		
	1	Excess of revenue over expenses and disbursements	100,000.				
		Net investment income (if negative, enter -0-)			0.		
_	C	Adjusted net income (if negative, enter -0-)				N/A	
3235	Λī						

10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

323511 10-10-13

(a) List and describe the	LOSSES FOR I ax on II ne kind(s) of property sold (e.g ise; or common stock, 200 sh	g., real estate,	t income	I P	How acqu - Purchas - Donatio	se I '	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NONE								
С								
_d				1				
<u>e</u>		_		Щ,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (los (e) plus (f) minus	
a b		 				<u>.</u>		
c		 			-			-
d		 	- · · · · · · · · · · · · · · · · · · ·				···	
e								
Complete only for assets showing gai	n in column (h) and owned by	the foundation	n on 12/31/69	\dashv		(1)	Gains (Col. (h) gai	n minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E:	xcess of col. (i)			col. ((k), but not less th Losses (from col	an -0-) or
a		 						·
b				-	•			
c		 		-				
d		<u> </u>						
e	· · · · · · · · · · · · · · · · · · ·	 					-	
	C If goin also ente	ur in Dort I line	7	7				
2 Capital gain net income or (net capital	oss) $ \begin{cases} & \text{if gain, also enter of } \\ & \text{if (loss), enter of } \end{cases} $			}	2			
3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colur		nd (6):		J				
If (loss), enter -0- in Part I, line 8					3	- 1		
Part V Qualification Unde	r Section 4940(e) fo	r Reduced	Tax on Net	Inv	estme	nt Inco	ome	
(For optional use by domestic private four	dations subject to the section	4940(a) tax or	n net investment ir	ncome	e.)			N/A
If section 4940(d)(2) applies, leave this pa	rt blank							

Was the foundation liable for the section 4			•	rıod?				Yes No
If "Yes," the foundation does not qualify ur								
1 Enter the appropriate amount in each	1	instructions be	etore making any e				·	(d)
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying di	stributions	Net value of no		(c) Distribution ratio (col. (b) divided by col. (c			ibútión ratio
2012								
2011			ļ				-	
2010			<u> </u>				ļ	
2009							ļ	
2008			<u> </u>				<u>. </u>	
2 Total of line 1, column (d)							2	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of				of ye	ars			
the foundation has been in existence if less than 5 years						3		
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5						4		
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment income (1% of Part I, line 27b)						6		
7 Add lines 5 and 6							7	
8. Enter qualifying distributions from Part VII. line 4.							8	· · · · · · · · · · · · · · · · · · ·
8 Enter qualifying distributions from Part XII, line 4 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.					ð.			
See the Part VI instructions.								

orm	990-PF (2013) Sentiment Foundation			681 <u>95</u>		Page 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 494	8 - se	e instru	ctior	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					Į
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		1			0.
	of Part I, line 27b					
C.	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). $$		_ .			;
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			0.
3	Add lines 1 and 2	🗀	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	. [_	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	. [5			0.
6	Credits/Payments:					
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6a		, ·			: :
b	Exempt foreign organizations - tax withheld at source . 6b		.			
c	Tax paid with application for extension of time to file (Form 8868)					*
d	Backup withholding erroneously withheld 6d		` - - ₋ -			:
7	Total credits and payments. Add lines 6a through 6d	T	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ -	10			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ Refunde	d▶	11			
Pai	t VII-A Statements Regarding Activities	-				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	ervene in			Yes	No
	any political campaign?			1a		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the def	ınıtıon)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu		or			t
	distributed by the foundation in connection with the activities					;
	Did the foundation file Form 1120-POL for this year?			1c	-	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			, ,		
	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$	0.				:
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1				
	managers. ▶ \$ 0.					1
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					***
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpora	ition, or				!
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					-
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with th	e state la	w			
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Po	art XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		i
	TX			_		,
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			_		
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	or calend	ar			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
	Did any persons become substantial contributors during the tax year? H "Yes," attach a schedule listing their names and addresses	St	mt 1	. 10	X	
	<u> </u>			Form 990	-PF	2013)

323541 10-10-13

Total. Add lines 1 through 3

For	m 990-PF (2013) Sentiment Foundation	<u>46-4368195</u>	Page 8
P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	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	0.
	Average of monthly cash balances	1b 100	,000.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 100	,000.
e	Reduction claimed for blockage or other factors reported on lines 1a and		-
Ī	1c (attach detailed explanation) 1e 0.	.[
2	Acquisition indebtedness applicable to line 1 assets	1 2	0.
3	Subtract line 2 from line 1d	3 100	,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 1	.,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 98	,500.
6	Minimum investment return. Enter 5% of line 5 Adjusted for Short Tax Period	6	121.
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.)	nd certain	
1	Minimum investment return from Part X, line 6	1	121.
2a	Tax on investment income for 2013 from Part VI, line 5	• • •	
	Income tax for 2013. (This does not include the tax from Part VI.)	1	
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	121.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	121.
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	121.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		•
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	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:		
a	Suitability test (prior IRS approval required)	3a	
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 XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	_
	income. Enter 1% of Part I, line 27b	5	0.

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

Form **990-PF** (2013)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII	Undistributed	Income	(see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,		, ====		
line 7				121.
2 Undistributed income, if any, as of the end of 2013		······································		
a Enter amount for 2012 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008			,	
b From 2009				
c From 2010				
d From 2011				,
e From 2012				
f Total of lines 3a through e	0.			,
4 Qualifying distributions for 2013 from				
Part XII, line 4: ►\$ 0.				
a Applied to 2012, 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.			
d Applied to 2013 distributable amount		· · · · · · · · · · · · · · · · · · ·	4	0.
e Remaining amount distributed out of corpus	0.		· · · · · · · · · · · · · · · · · · ·	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as				,
indicated below:			*	
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		,	
b Prior years' undistributed income. Subtract		Ti		
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 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				121.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	1			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				1
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2009			1	
b Excess from 2010	1			
c Excess from 2011	1]
d Excess from 2012	1			1
e Excess from 2013	1			<u> </u>
•				Form 990-PF (2013)

m 990-PF (2013) Sentiment F art XV Supplementary Informati	On (continued)		46-4368	195 Page
Grants and Contributions Paid During th	e Year or Approved for Future P	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		····
a Paid during the year				
None				
			İ	
Total			► 3a	
Approved for future payment				
	· ·			
None				
210220				
Total			▶ 3b	

Part XVI-A	Analysis of	Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	741100111	code	Amount	Tanetion moonio
a			+		
b			+		· -
c					·
d					
e					
f					
g Fees and contracts from government agencies			-		
2 Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·	_		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
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					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	·				
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	^ ,	0		0.	
13 Total Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

			-	

				-
			·	
	<u> </u>			
				
				
 				
				
-				· · · · · · · · · · · · · · · · · · ·
				
		· · · · · · · · · · · · · · · · · · ·	-	
 				
				

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Here		water	4/11/7014	TVER	ndun T	X Yes N
_ }	Sign	ature of officer or trustee	Date	Title		L
		Print/Type preparer's name	Preparer's signature	Date	Check if I	PTIN
Paid Prepa		Jerome W. Weikel Frm's name ➤ Weikel, John	nson, Parris & Rou	1/-11-14 se, PLLP	Firm's EIN ► 73	P00068626 3-1553481
Use O	-	Firm's address ► 5416 S. Yal Tulsa, OK	Phone no. (91	8)744-9657		
						- 000 DE

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

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

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

2013

Name of the organization

Employer identification number

S	entiment Foundation	46-4368195					
Organization type (check	one)						
Filers of:	Section:						
Form 990 or 990-EZ							
	4947(a)(1) nonexempt chantable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	301(c)(3) exempt private foundation						
	4947(a)(1) nonexempt chantable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
General Rule X For an organizati	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in rapplete Parts I and II.						
Special Rules							
509(a)(1) and 170	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re D(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contribution	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, total contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts 1, II, and III						
contributions for If this box is che purpose. Do not	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributior, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its let the filing requirements of Schedule B (Form 990, 990-EZ, 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) (2013)

Name of orga	nization	

Employer identification number

Sentiment Foundation

46-4368195

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Ionel Nechiti 5413 Evergreen Bellaire, TX 77401	sss	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Carmen Zanacan 5413 Evergreen Bellaire, TX 77401	\$50,000.	Person X 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 Oncash Occash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		 \$	Person Payroll Oncash Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
222452 10 2		\$Schodulo R / Form	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Employer identification number

Sentiment Foundation

46-4368195

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.				
(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) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		s			
(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) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		 s	990 990-F7 or 990-PF) (201)		

Name of orga	nization		Employer identification number
Sentime Part III	ent Foundation Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition.	c., contributions of \$1,000 or less to	46-4368195 (3)(7), (8), or (10) organizations that total more than \$1,000 for the conscompleting Part III, enter refer the year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gi	It Relationship of transferor to transferee
(a) No.			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, al	(e) Transfer of gi	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
F		(e) Transfer of gi	ft
-	Transferee's name, address, 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, address, a	(e) Transfer of gi	ft Relationship of transferor to transferee
-			

Form 990-PF	List of Substantial Contributors Part VII-A, Line 10	Statement	
Name of Contributor	Address		
Ionel Nechiti	5413 Evergreen Bellaire, TX 77401		
Carmen Zanacan	5413 Evergreen Bellaire, TX 77401		
Form 990-PF	Part XV - Line 1a List of Foundation Managers	Statement	2

Name of Manager

Ionel V. Nechiti Carmen M. Zanacan Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

•

Name and Address of Person to Whom Applications Should be Submitted

Ionel Nechiti 5413 Evergreen Bellaire, TX 77401

Telephone Number

281-397-3938

Form and Content of Applications

Each application requires the applicant to submit an application with basic data that includes their name, address, contact information, education background, references, past activity that relates to current proposed project, and a photograph. The application must also include a written description of the project proposal that explains what the candidate is trying to achieve, detail financial budget (estimated cash requirements, estimated cash expenditures and nature of expenditures), plan for fund raising efforts and estimate of cash donations to be received, available resources, and timeline with critical milestones.

Any Submission Deadlines

None

Restrictions and Limitations on Awards

None

Form 886	8 (Rev. 1-2014)					Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box	>	X
	ly complete Part II if you have already been granted an a					
• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1).			•
Partil	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the originate	al (no copi	es needed).	
			Enter filer's	identifying n	umber, see ins	tructions
Type or	Name of exempt organization or other filer, see instru-	ctions.		Employer ide	entification numb	per (EIN) or
print						
File by the Sentiment Foundation 46-4368195						5
due date for	I Number, succes, and room of suite no. If a P.O. Dox. see Instructions.				ty number (SSN	1)
filing your return See 5413 Evergreen						
instructions	City, town or post office, state, and ZIP code For a fo	oreign add	lress, see instructions.			
	Bellaire, TX 77401					
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
					*	,
Applicati	on	Return	Application			Return
Is For		Code	Is For	At any of the same of the	TO FREE REAL COMPANIES.	Code
	or Form 990-EZ	01	,一个人,他们就是一个人,他们也不是一个人的。 第一个人,他们就是一个人的,他们就是一个人的,他们就是一个人的,他们就是一个人的,他们就是一个人的,他们就是一个人的,他们		特别的影響	
Form 990		02	Form 1041-A			08
	(individual)	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10
	7-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
STOP! DO	o not complete Part II if you were not already granted	an auton	natic 3-month extension on a previ	iously filed F	orm 8868.	
● The be	Carmen Zanacan books are in the care of \triangleright 5413 Evergreen	- Bo	115ims my 77401			
	none No. ► 281-397-3938	- ве.	Fax No.			
	organization does not have an office or place of business	n in the Lir				
	is for a Group Return, enter the organization's four digit					
box ▶	. If it is for part of the group, check this box		shiption rumber (GEN) If			
			ber 15, 2014.	all ITICITIDEIS	THE EXTENSION IS	ior.
	calendar year, or other tax year beginning			DEC 3	1, 2013	
	ne tax year entered in line 5 is for less than 12 months, or			Final retu		·
	Change in accounting period					
7 Sta	te in detail why you need the extension					
Aċ	ditional time is needed to	rathe	r information need	ed in c	rder to	file
	complete and accurate return					
8a If th	his application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			· · · · · · · · · · · · · · · · · · ·
not	nrefundable credits. See instructions.			8a \$		0.
b ifti	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated	444		
tax	payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid			
pr	eviously with Form 8868.			8b \$		0.
c Ba	lance due. Subtract line 8b from line 8a. Include your pa	ayment wit	th this form, if required, by using			
EF	TPS (Electronic Federal Tax Payment System). See instr			8c \$		0.
			st be completed for Part il o	_		·
Under pen it is true, c	latties of perjury, I declare that I have examined this form, include correct, and complete, and that I am authorized to prepare this fo	ling accomp orm.	panying schedules and statements, and to	the best of m	y knowledge and b	elief,
Signature	► 4 WLM Title ►	CPA		Date >	87-14	
	·				Form 8868 (R	ev. 1-2014)

Form **8868** (Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

If you a	ire filing for an Automatic 3-Month Extension, compl e	te only Pa	art I and check this box			► LX
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)		
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sty filed Fo	orm 8868.	
Electroni	c filing (e-file) You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tir	ne to file (6 months for a cor	poration
	o file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the ex					
	Benefit Contracts, which must be sent to the IRS in pag					
	irs gov/efile and click on e-file for Charities & Nonprofits		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).	·	
	ation required to file Form 990-T and requesting an autor					
Part I only		110110 0 1110	one of the post and	complete	ì	• 🗂
	corporations (including 1120-C filers), partnerships, REM	IICs and t	rusts must use Form 7004 to reques	 et an avtar	sion of time	_
	ome tax returns	103, 6110 1	iusis musi use i omi i oca io reque.		er's identifying nu	ımhar
Type or	Name of exempt organization or other filer, see instru	ctions		1		
print	Name of exempt organization of other filer, see institu	CHOIIS.		Employer identification number (EIN) or $46-4368195$		
PIRIL	Sentiment Foundation					
File by the		!		Carrela		
due date for filing your	Number, street, and room or suite no. If a P.O. box, s 5413 Evergreen	ee instruc	tions.	Social se	cunty number (SS	·N)
return See	(· · · · · · · · · · · · · · · · · · ·			L		
instructions	City, town or post office, state, and ZIP code. For a following Bellaire, TX 77401	oreign add	ress, see instructions.			
	Deliane, IX //401					.
F - 4 4b -	Dataman and familia makes at the Ather and beautiful for (GI					0 4
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)	•	•	0 4
• • •	 	T .	r			
Applicati	on	Return	Application			Return
ls For		Code	ls For		 	Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720 (other than individual)			09
Form 990	·PF	04	Form 5227			10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	T (trust other than above)	06	Form 8870		 	12
	Ionel Nechiti					
	oks are in the care of > 5413 Evergreen	– <u>Ве</u> .	llaire, TX 77401			
Teleph	one No. ► 281-397-3938		Fax No. 🕨			
If the c	rganization does not have an office or place of business	s in the Un	ited States, check this box			▶
If this i	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group,	check this
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all memb	ers the extension	s for.
	quest an automatic 3-month (6 months for a corporation	required 1	to file Form 990-T) extension of time	until		
	August 15, 2014, to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
is fo	or the organization's return for:					
▶[calendar year or					
▶[X tax year beginning DEC 23, 2013	, an	dending DEC 31, 2013		•	
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck reas	on X Initial return	Final retur	n	
	Change in accounting period					
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069.	enter the tentative tax, less any			
	refundable credits. See instructions.			3a	\$	0.
	is application is for Forms 990-PF, 990-T, 4720, or 6069	. enter an	v refundable credits and			
	mated tax payments made. Include any prior year overg	-		3ь	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa			1 55		<u>-</u>
	using EFTPS (Electronic Federal Tax Payment System).	•	· ·	3c	\$	0.
	If you are going to make an electronic funds withdrawal					
instruction.		(airect ae	on) with this form 6666, see Form 6	1453-EU &	10 FOITH 00/9-EU	or payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 323841 12-31-13 Form 8868 (Rev. 1-2014)