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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

For estandar year 2009, or taxy part beginning			of the Treasury lenue Service Note. The foundation may	be able to use a copy of this		ting requirements.	2009	
Check all that apply: Install return Indial return Address change Name change						<u> </u>	<u> </u>	
Use the IRS Name of foundation Anderes change Name change An Employer identification number Table Name of foundation An Employer identification number Table Name and developer \$0 box number of mail is not delicated to street each easy Table Table				Initial return of a fo	ormer public charity	Final return		
Use the less short service of the label. Otherwise and stored (or 10 box marked free is not delivered to street address) Profit (15 or 10 box marked free is not delivered to street address) See Specific Cay or town, state, and 20 code Instructions NEW ORLEANS, LA 70.139 Cover town, state, and 25 code (and or 10 box marked free is not delivered to street address) Section 49.77(a)(1) noncempt character bery and the label by the control of the marked by the control of the						Name change		
Interest of the control of the contr	llea	the l	RS Name of foundation	<u> </u>		A Employer identification	number	
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sof type. 4 500 ONE SHELL SQUARE 50.4 - 581 - 32.34 See Specific Cyp or town (all, and ZiP code 1.5 See Specific Cyp or town (The Name St. La. 70139 H Check type of organization: Section 497(4) in government perfection (see Section 497(4)) in government perfection (see Section	Oth	erwis			 		·	
See Specified Top or Town, State, and ZIP code NEW ORLEANS LA 70139 H Check type of organization: XI Section 501(5(3) exempt private foundation Section 4947(4)(1) nonexempt charitable trust Other teachle private foundation Fear market value of all assets at and of year Accounting method: XI Section 4947(4)(1) nonexempt of depter to the repeat of		•			Room/suite		2.4	
Instructions Gry to (Instructions Carlot New Oral Ranks La 70139 1 Foreign organizations La Section 497(4) (nonexempt private (oundation Carlot New Oral Ranks La 1 Accounting method: Carlot New Oral Ranks La Carlot N			TOO OND DILLIA DOCUME	<u> </u>				
H. Check type of organization:			De City of town, State, and Zir Code	10				
Section 4947(9)(1) nonexempt charable brust						2. Foreign organizations me	eting the 85% test,	
Farr market value of all assets at end of year (from Part II, col., cl), line 16) \$ 1	H				ation			
### Compared to Col. (a), fine 16)	_ <u></u>							
S S A QB (Part L Column (c)) must be on cash basss.) Part II Analysis of Revenue and Expenses This local of arounds in column (b) (and (c)) many not necessity equal the emotions in column (b) (b) (c) (c			· · · · · · · · · · · · · · · · · · ·	-		,		
Part Analysis of Revenue and Exponses (c) Revenue and exponses (c) Revenue and exponses per book recessary years to amounts on column (d) in come (c) Adjusted net income (c) Adjusted net recessary years to amounts on column (d) in come (c) Adjusted net recessary years to a security on the securities of the property of the prop			5,408 (Part I, cold	ımn (d) must be on cash	basis.)	L ⁻	i I	
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2 Check			necessarily equal the amounts in column (a))		income		(cash basis only)	
Interest on awrongs and temporary 3 cash revestments 4 Dividends and interest from securities 5 a Gross rents 5 Net service receives 6 Net gain or possition make of assets not on line 10 6 Cross service price for all assets on in case price for all assets on line assets on line and assets on line assets on line and		1	Contributions, gifts, grants, etc., received		<u> </u>		,	
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68 Net gain or (loss) from sale of assets not on line 10					, , , , , , , , , , , , , , , , , , , ,	F Land Class	4 1 7 24	
A very gain of process prior from sale of assess and contract to b assets on line for as all to be as all to b assets on line for as all to be as all t	<u>n</u> e			1 2 2 2 2	*			
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		27	Subtract line 26 from line 12:	<u></u>		· .		
c Adjusted net income (if negative, enter -0-)		1	•	2,160.				
		1		7 7 7	0.	NT / 2	ļ	
	9235			n Ant Notice and the instance	tions.	IN/A	Form 990-PF (2000)	

For	m 99	0-PF (2009) H.U.G.S., INC.		72-1128842					
Г	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	- Beginning of year	End o	f year				
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value				
•	1	Cash - non-interest-bearing	3,248.	5,408.	5,408.				
	2	Savings and temporary cash investments							
	3	Accounts receivable ▶							
		Less: allowance for doubtful accounts ▶							
	4	Pledges receivable ►	· · ·						
	1	Less: allowance for doubtful accounts ▶							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
]	disqualified persons							
	7	Other notes and loans receivable							
	'	Less: allowance for doubtful accounts	- En e monument management ou also	and the record of the same	and the second s				
(A		Inventories for sale or use							
Assets	[Prepaid expenses and deferred charges							
Ass	9								
-	Į.	Investments - U.S. and state government obligations		·					
	_	Investments - corporate stock	<u> </u>						
	1	Investments - corporate bonds							
	11	Investments - land, buildings, and equipment basis	<u> </u>		المتا تكفئ حسيد حسا				
		Less accumulated depreciation							
	12	Investments - mortgage loans							
	13	Investments - other							
	14	Land, buildings, and equipment basis ▶	1		- Land				
		Less accumulated depreciation							
	15	Other assets (describe							
	16	Total assets (to be completed by all filers)	3,248.	5,408.	5,408.				
	17	Accounts payable and accrued expenses			71.				
	18	Grants payable							
S	19	Deferred revenue							
abilities	20	Loans from officers, directors, trustees, and other disqualified persons							
abi	21	Mortgages and other notes payable			, A				
Ξ	22	Other liabilities (describe)			A= 1				
	ŀ								
	23	Total liabilities (add lines 17 through 22)	0.	0.	1				
		Foundations that follow SFAS 117, check here			建是到了一根				
		and complete lines 24 through 26 and lines 30 and 31.			10000000000000000000000000000000000000				
Ses	24	Unrestricted	3,248.	5,408.					
an	25	Temporarily restricted							
or Fund Balances	26	Permanently restricted							
힏		Foundations that do not follow SFAS 117, check here							
ł		and complete lines 27 through 31.							
	27	Capital stock, trust principal, or current funds	ŀ						
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund							
Ass	29	Retained earnings, accumulated income, endowment, or other funds		-	经验证证明的				
Net Assets	30	Total net assets or fund balances	3,248.	5,408.					
Z	الالا	folds liet assets of fund balances	3,240.	5/400.					
	21	Total liabilities and net assets/fund balances	3,248.	5,408.					
_									
P	art	Analysis of Changes in Net Assets or Fund E	salances						
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30						
•		st agree with end-of-year figure reported on prior year's return)		1	3,248.				
2	•	r amount from Part I, line 27a		2	2,160.				
		r increases not included in line 2 (itemize)		3	0.				
		lines 1, 2, and 3	4	5,408.					
		eases not included in line 2 (itemize)		5	0.				
-		net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (h) line 30	6	5,408.				
0_	+ Uld	net assets of fund valances at end of year (fille 4 fillings line 3) - Part II, t	Control (O) mic OO .		J, ±00 •				

Form **990-PF** (2009)

	2000	00,400.1	10,0010		4.433334
	2005	81,024.	11,130.		7.279784
	2004	118,560.	6,257.		18.948378
	Total of line 1, column (d)			2	38.419039
3	Average distribution ratio for the 5-year ba the foundation has been in existence if less	se period - divide the total on line 2 by 5, or by the nu s than 5 years	imber of years	3	7.683808
4	Enter the net value of noncharitable-use as	sets for 2009 from Part X, line 5		4	10,605.
5	Multiply line 4 by line 3			5	81,487.
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	0.
7	Add lines 5 and 6			7	81,487.
8	Enter qualifying distributions from Part XII	, line 4		8	64,019.
	If line 8 is equal to or greater than line 7, c See the Part VI instructions.	heck the box in Part VI, line 1b, and complete that par	t using a 1% tax rate.		

	1990-PF (2009) H.U.G.S., INC.	72-	-112	8842		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	Or 4946	- see	instru	CUO	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		÷ 3-5=	* * * * * * * * * * * * * * * * * * * *		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	E. 1		، - ـــــشط	ونست	المراقب المراقب
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔛 and enter 1%	1	ļ			0.
	of Part I, line 27b	25.	1.7	· -, z ⁷		J 7
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) $\mathcal J$			<u></u>		A N
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:	** 3	J. 3- 1	1 i i	- ~, -, -	. 4
а	2009 estimated tax payments and 2008 overpayment credited to 2009	1. 3. 25	- 12	:		" (1)
	Exempt foreign organizations - tax withheld at source 6b	17.2	77 /22/2	وعي داري		
	Tax paid with application for extension of time to file (Form 8868)	- 13 -	3.			1 m 19
	Backup withholding erroneously withheld 6d 6d		"		· ^= -4	
	Total credits and payments. Add lines 6a through 6d	7		**************************************	· /	0.
	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.
	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 2010 estimated tax ► Refunde irt VII-A: Statements Regarding Activities	11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or int	entene in		1, 1	Yes	No
ıa	any political campaign?	CI VCIIC III		1a		X
L	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit	10n\2				X
D	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu			1b	, 5 .,	- A
		Diisried Of		1 1 1	* #	
_	distributed by the foundation in connection with the activities.				1 18	X
	Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	0.			(38-	
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$			1		- 3
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1		—; ,	* - 1 ~ - 1	
	managers. > \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	2" "	X
_	If "Yes," attach a detailed description of the activities.	ation or		, , , ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	auon, or				v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	• ••	••	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	ν.	T/3	4a		 ^
	If "Yes," has it filed a tax return on Form 990-T for this year?	ľ	I/A	4b	-	7
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	2, 4, 5	X
	If "Yes," attach the statement required by General Instruction T.			7,550		15.
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			~ jf		
	By language in the governing instrument, or			3.3		3, 3, 3
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the second of th	ie state iaw			v	
_	remain in the governing instrument?			6	X	├
7	Did the foundation have at least \$5,000 in assets at any time during the year?			2 2/2	X	-5-3 - 4
	If "Yes," complete Part II, col. (c), and Part XV.			257		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	152.0	1775 - 47 176-ee 1
	LA				rægfår Zurkk	1.1.
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					1	-
	of each state as required by General Instruction G? If "No," attach explanation				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					12.00	(
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	•		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	1		10		<u> </u>

orm 990-PF (2009) H.U.G.S., INC.	72-112	8842		Page 5
Part VII-A 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	f			
section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
August 17, 2008?	•	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application	on?	13	X	
Website address ► N/A				
14 The books are in care of ► ALFRED A. PARDEN JR.	Telephone no. $ ightharpoonup 504-58$	<u> 35-0</u>	<u>354</u>	<u> </u>
Located at ▶ 4500 ONE SHELL SQUARE, NEW ORLEANS, LA	ZIP+4 ► 7	013 <u>9</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u>.</u>			•
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A_	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Requ	uired			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	Yes	No
1a During the year did the foundation (either directly or indirectly):		, ,	, "	7.5
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		÷ .	3,5
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		~ ₁		E.
a disqualified person?	Yes X No	15.2		' -
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	ļ;	,	- =]
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		5 .	1,747
(5) Transfer any income or assets to a disqualified person (or make any of either available		± .		7
for the benefit or use of a disqualified person)?	Yes X No		24 - 4	ا تور د
(6) Agree to pay money or property to a government official? (Exception. Check "No"			* (* ·	٠ , ٦
if the foundation agreed to make a grant to or to employ the official for a period after			٤	,
termination of government service, if terminating within 90 days.)	Yes X No	ا ي -	۶,	7
b If any answer is "Yes" to 1a(1)-(6), did any 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 page 20 of the instructions)?	N/A	1b		
Organizations relying on a current notice regarding disaster assistance check here	▶ □		. 1	5 a.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were no	ot corrected		7.	* <u>1</u>
before the first day of the tax year beginning in 2009?		10		Х
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operation	ing foundation	, .	**	3
defined in section 4942(j)(3) or 4942(j)(5)):	·	, ,-		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax y	/ear(s) beginning	, ,	- 1	
before 2009?	Yes X No		يد ب	
If "Yes," list the years		1	,125,1 6,125,13	1
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relatively	ting to incorrect		70; 32 - 27	
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer			3	ا مم
statement - see instructions.)	N/A	2b		
c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	•	1 1		, *
		1246	3.2	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		4		15 (
during the year?	Yes X No		1	
b if "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disquali	•			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4		1.5		
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Us				' 4
Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	,	4a	-	х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its ch	aritable purpose that	+		

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009) H.U.G.S., INC. Part VII-B Statements Regarding Activities for Which F	orm 4720 May Ro E		72-11288	42 Page 6
	TOTILI 4720 IVIAY DE F	required (contin	uea)	47 J -1
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1045(a)\?	□ v _e	s X No	
 (1) Carry on propagatioa, or otherwise attempt to influence registation (section (2) Influence the outcome of any specific public election (see section 4955); o 	* **	•	S LALINU S	
any voter registration drive?	i to carry on, unectiy or mund		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization		16		
509(a)(1), (2), or (3), or section 4940(d)(2)?	i described in section	□ v₀	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or f		5 A 10 5	
the prevention of cruelty to children or animals?	or cadeational parposes, or i		s 🗓 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	for the excentions described :			
		in negulations	.	5b
section 53.4945 or in a current notice regarding disaster assistance (see instru				50 195 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Organizations relying on a current notice regarding disaster assistance check h		ınad		數學學
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		I/A 🔲 Ye	s No	
expenditure responsibility for the grant?	•	(/A16	יי טארייים אינייים אינ אינייים אינייים אינייי	
If "Yes," attach the statement required by Regulations section 53.4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No 📶	
a personal benefit contract?		Y6		<u> </u>
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	•	<u> </u>	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribute		Limbi		7b
Part VIII Information About Officers, Directors, Trustopher Paid Employees, and Contractors		inagers, riigniy	, 	
1 List all officers, directors, trustees, foundation managers and their		1	(4)	
(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
MARK C. SURPRENANT	PRES.			
4500 ONE SHELL SQUARE				
NEW ORLEANS, LA 70139	0.00	0.	0.	0.
	SEC.			
4500 ONE SHELL SQUARE				
NEW ORLEANS, LA 70139	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(- D	
(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				
	1			
	1			
Total number of other employees paid over \$50,000			•	0

Form 990-PF (2009) H.U.G.S., INC. 72-	1128842	Page 7
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 service	(c) Co	mpensation
NONE		
•		
	-	
Total number of others receiving over \$50,000 for professional services PartilX*A* Summary of Direct Charitable Activities	<u>▶</u>	0
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.	Expens	ses
1 ASSISTANCE TO VARIOUS MEDICAL RESEARCH ORGANIZATIONS		
	20	0,403.
2 ASSISTANCE THROUGH PARTIES AND GIFT GIVING TO CHILDREN WHO		7,403.
ARE NEGLECTED, ABUSED OR WHO SUFFER FROM FAMILY PROBLEMS OR		
SERIOUS ILLNESS	1	L,570.
3 PARTIES AND SPECIAL FUNCTIONS ARE HELD FOR VARIOUS	ı I	
ORGANIZATIONS THAT SUPPORT MENTALLY AND PHYSICALLY		7 1 6 6
HANDICAPPED INDIVIDUALS 4 ASSISTANCE TO VARIOUS ORGANIZATIONS THAT HELP TO PROVIDE	<u> </u>	7,165.
FOOD FOR NEEDY AND POOR		
FOOD FOR NEEDI AND FOOR		5,750.
PartiXB 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.	Amoui	nt
1 <u>N/A</u>		
2		
All other program-related investments. See instructions. 3		

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions.)
1 .	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	i de	<u> </u>
	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	10,766.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	10,766.
e			
_	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	10,766.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	161.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,605.
6	Minimum investment return. Enter 5% of line 5	6	530.
ξ P	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	530.
2a	Tax on investment income for 2009 from Part VI, line 5	224	
þ	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	530.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	530.
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	<u>5</u> 30.
P	art XIII 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	64,019.
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:	域版	
а	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	64,019.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	64,019.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	e section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7		, ,	1 3 1 2 7 1	530.
2 Undistributed income, if any, as of the end of 2009		-	4 4	
a Enter amount for 2008 only			0.	
b Total for prior years:		<u> </u>	77	7, 1
,,,	·	0.	3 .	, ,
3 Excess distributions carryover, if any, to 2009:				-
a From 2004 118, 247.	· • • • • • • • • • • • • • • • • • • •	,	~	- 1
b From 2005 80,467.	·	1 · 1		: :
c From 2006 (65,696.				,
d From 2007 80,862.				
e From 2008 75,525.	100 505	· · · · · ·		,
f Total of lines 3a through e	420,797.	· · · · · · · · · · · · · · · · · · ·	- 32 - 2	
4 Qualifying distributions for 2009 from	- 1		14.14	,
Part XII, line 4: ►\$ 64,019.			0.	
a Applied to 2008, but not more than line 2a	, , , , , , , , , , , , , , , , , , ,	. 4	0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	<u> </u>			-
c Treated as distributions out of corpus (Election required - see instructions)	0.	- , 71	·	
d Applied to 2009 distributable amount			· · · · · · · · · · · · · · · · · · ·	530.
e Remaining amount distributed out of corpus	63,489.	,,	7, 4	5501
5 Excess distributions carryover applied to 2009	0.	, , ,		0.
(If an amount appears in column (d), the same amount must be shown in column (a))				7
6 Enter the net total of each column as indicated below:	,			-
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	484,286.	•	.6 x - 1	
b Prior years' undistributed income. Subtract	202/200.			
line 4b from line 2b	. :	0.	, n	- ,
c Enter the amount of prior years'	,		1 ~ 1 = 4 1	*
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	;		, • vř	,
amount - see instructions	,	0.	<i>z'</i> ,	
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract		· ,	i	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				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 2004	110 047	* * *		
not applied on line 5 or line 7	118,247.	, ,	<u>'</u>	
9 Excess distributions carryover to 2010.	366,039.			
Subtract lines 7 and 8 from line 6a	300,033.			
10 Analysis of line 9:	1	,	,	
a Excess from 2005 80,467. b Excess from 2006 65,696.				
c Excess from 2007 80,862. d Excess from 2008 75,525.				
e Excess from 2009 63,489.	1		,	
C EXCOSS II OIL ESSO OJ FEO J				Form 990-PF (2009)

toundation, and the ruling is effective for 2009, enter the date of the ruling is check box to indicate whether the foundation is a private operating foundate. Inter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed a story of line 2a. Qualifying distributions from Part XII, line 4 for each year listed a 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 Complete 3a, b, or c for the alternative test relied upon: Assest' alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) Endowment' alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization section 4942(j)(3)(B)(iii) (4) Gross investment income Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% year (but only if they have contributed more than \$5,000). (See section 500) Information Regarding Contribution, Grant, Gift, Loan, Schola other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Schola other entity) of which the foundation only makes contributions to presel the foundation makes gifts, grants, etc. (see instructions) to individuals of a The name, address, and telephone number of the person to whom application and the person to who		Prior 3 years (c) 2007	4942(j)(3) or 49 (d) 2006	42(j)(5) (e) Tota
Inter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed 85% of line 2a Qualifying distributions from Part XII, line 4 for each year listed 4 Amounts included in line 2c not used directly for active conduct of exempt activities 2 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: 1 Assets' alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) 2 Endowment' alternative test - enter: (2) Value of assets qualifying under section 4942(j)(3)(B)(i) 2 Endowment' alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization as pr		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed a 85% of line 2a coualifying 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 could from line 2c Complete 3a, b, or c for the alternative test relied upon: Assets' alternative test relied upon: Assets' alternative test relied upon: 1 Assets' alternative test relied upon: 273 of minimum investment return shown in Part X, line 6 for each year listed 2 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) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(n)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income THEXALLY Supplementary Information (Complete this at any time during the year-see the instruction of the foundation who have contributed more than 2% year (but only if they have contributed more than \$5,000). (See section 50) List any managers of the foundation who own 10% or more of the stock of their entity) of which the foundation has a 10% or greater interest.	(b) 2008		(d) 2006	(e) Tota
investment return from Part X for each year listed be 85% of line 2a coualifying distributions from Part XII, line 4 for each year listed default Amounts included in line 2c not used directly for active conduct of exempt activities coualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: 1 Assets' alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) 2 Endowment' alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed 2 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) (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 TIEXAME Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% year (but only if they have contributed more than \$5,000). (See section 50) Information Regarding Contribution, Grant, Gift, Loan, Schola Check here \(\bar{X} \) if the foundation only makes contributions to preselt the foundation makes gifts, grants, etc. (see instructions) to individuals of	(b) 2008	(c) 2007	(d) 2006	(e) Tota
each year listed 8 5% of line 2a Qualifying distributions from Part XII, line 4 for each year listed A mounts 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 Complete 3a, b, or c for the alternative test relied upon: A Assets' alternative test - enter: (1) Value of assets qualifying under section 4942()(3)(8)(i) Tendowment' alternative test - enter: (2) Value of assets qualifying under section 4942()(3)(8)(i) Tendowment' alternative test - enter: (3) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(8)(ii) (3) Largest amount of support from an exempt organization as provided in section 4942()(3)(8)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income TIXXVIII Supplementary Information (Complete this at any time during the year-see the instruction of the foundation who have contributed more than 2% year (but only if they have contributed more than \$5,000). (See section 50 to their entity) of which the foundation who own 10% or more of the stock of other entity) of which the foundation has a 10% or greater interest. DNE Information Regarding Contribution, Grant, Gift, Loan, Schola Check here \(\bar{V} \) if the foundation only makes contributions to presel the foundation makes gifts, grants, etc. (see instructions) to individuals of the foundation makes gifts, grants, etc. (see instructions) to individuals of the foundation makes gifts, grants, etc. (see instructions) to individuals of the foundation makes gifts, grants, etc. (see instructions) to individuals of the foundation makes gifts, grants, etc. (see instructions) to individuals of the foundation makes gifts, grants, etc. (see instructions)				ļ
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Check here X if the foundation only makes contributions to presel the foundation makes gifts, grants, etc. (see instructions) to individuals on	rship, etc., F	Programs:		
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a The name, address, and telephone number of the person to whom applica	organizations	under other conditions, co	omplete items 2a, b, c, and	l d.
	ations should b	oe addressed:		
b The form in which applications should be submitted and information and	materials they	should include:		
c Any submission deadlines;				
d Any restrictions or limitations on awards, such as by geographical areas,		ls, kinds of institutions, or i	other factors:	_

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,			
	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		<u></u>
a Paid during the year SCHEDULED CONTRIBUTIONS SEE ATTACHED	or substantial contributor	PUBLIC	GENERAL PURPOSE OF THE	64,019.
•				
Total			▶ 3a	64,019.
NONE				
Total	<u> </u>	 	▶ 3b	0.

D-14 V3/1 A 1	Amalusia of I	ncome-Producing	Activition
Part Avi-A	Analysis of I	income-Producina	ACTIVILIES

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	Coue		1000			
a b			 			
					<u> </u>	
c						
			 	-		
e			<u> </u>			
g Fees and contracts from government agencies						
Membership dues and assessments			1			
3 Interest on savings and temporary cash		. <u> </u>	 			
investments						
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:	建设在 扩张	二次"强烈"的"强烈"。	177	BENEFIT WILLIAM		
a Debt-financed property						
b Not debt-financed property			Ì			
6 Net rental income or (loss) from personal			ĺ			
property						
7 Other investment income			Î			
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			01	1,105.		
11 Other revenue:			1			
a			ļ			
b			<u> </u>			
C		<u> </u>	ļ			
d			├ ──			
e	Total Street Control Co. (b)		Sinson.	1 105		
12 Subtotal. Add columns (b), (d), and (e)		0.	議等		0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,105.	
(See worksheet in line 13 instructions to verify calculations.) Relationship of Activities to	the Acc	omnlishment of F	vemn	at Purnoses		
The processed interpretational extension of the control of the con		<u> </u>			and the second of	
Line No. Explain below how each activity for which incore the foundation's exempt purposes (other than to be a constant of the foundation).			A CONTIN	outed importantly to the accor	npusument of	
the foundation's exempt purposes (other than t	by providing to	nus for such purposcoj.				
						
						
				., · <u></u>		
						
	<u> </u>					
			="			

orm 99	90-PF (2009) H.U.G	S.S., INC.		72-1	.128842 Page 13
Pärt	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (1c) X				
_					l- "15" 1
					Yes No
	•			zations?	
	• •	ation to a noncharitable exem	ipt organization of:		
•			•		
(2) Other assets		• •	•	
b Ot	her transactions:				
(1	Sales of assets to a noncharita	ible exempt organization			
(2) Purchases of assets from a no	ncharitable exempt organizati	ion		1b(2) X
(3) Rental of facilities, equipment,	or other assets			1b(3) X
(4) Reimbursement arrangements	;			1b(4) X
(5) Loans or loan guarantees				1b(5) X
(6) Performance of services or me	embership or fundraising solic	citations		1b(6) X
c St	naring of facilities, equipment, ma	uling lists, other assets, or pai	id employees		1c X
d If	the answer to any of the above is	"Yes," complete the following	schedule. Column (b) should alw	ays show the fair market value of the go	ods, other assets,
or	services given by the reporting f	oundation. If the foundation re	eceived less than fair market value	e in any transaction or sharing arrangen	ent, show in
CC	lumn (d) the value of the goods,	other assets, or services rece	erved.		
a) Line	no (b) Amount involved	(c) Name of nonchar	ritable exempt organization	(d) Description of transfers, transaction	s, and sharing arrangements
		N/	'A		
•					
				1	
			· · · · · · · · · · · · · · · · · · ·		
					. = 4
					
				· ·	
2a Is	the foundation directly or indirec	tly affiliated with, or related to	o, one or more tax-exempt organiz	rations described	
ın	section 501(c) of the Code (othe	r than section 501(c)(3)) or ır	n section 527?		Yes X No
b If	"Yes," complete the following sch	edule.			
	(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	ationship
	N/A				
				ents, and to the best of my knowledge and bein	ef, it is true, correct,
and	complete Declaration of preparer (other	than laxpayer or fiduciary) is bas	sed on all information of which preparer I	<u> </u>	
	C www	w Cuw		Caerale lou	uza
စ္က 🕨	Signature of officer or trustee		Date	Title	- · · · · · · · · · · · · · · · · · · ·
Ĕ	Preparer's	71.	Da		Preparer's identifying number
, _ g	signature	Dunith	VON	0 8 2010 self- employed >	100001173

L.L.C.

17TH FLOOR 70005

504.831.4949 Form **990-PF** (2009)

EIN ▶

Phone no.

Firm's name (or yours

ıf self-employed), address, and ZIP code BOURGEOIS BENNETT,

111 VETERANS BLVD.

LOUISIANA

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

2009

Name of the organizati	Employer identification number							
	H.U.G.S., INC.	72-1128842						
Organization type (chec								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-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							
General Rule	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R							
	ation filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in minumeter) and II.	noney or property) from any one						
Special Rules	mpiete i arto i arte ii.							
opecial ridies								
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
aggregate cont	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, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
contributions for If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contor use exclusively for religious, charitable, etc., purposes, but these contributions did not a ecked, enter here the total contributions that were received during the year for an exclusival complete any of the parts unless the General Rule applies to this organization because table, etc., contributions of \$5,000 or more during the year	ggregate to more than \$1,000. rely religious, charitable, etc,						
but it must answer "No"	on 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 line of filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of org	ganization		Employer	identification number
H.U.G	.S., INC.		72-	1128842
Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
1	ADAMS AND REESE, L.L.P. 4500 ONE SHELL SQUARE NEW ORLEANS, LA 70139	\$\$61,4	(Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	ions	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II if there s a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II if there s a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II if there s a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II if there a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$\$		Person Payroll Noncash Complete Part II if there is a noncash contribution.)
23452 02-0	I-10	Schedule E	3 (Form 99)	0, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

FORM 990-PF	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10	STATEMENT 1
INCOME		
2. RETURNS AND ALLOWAN	1,10 ICES	5 1,105
4. COST OF GOODS SOLD	(LINE 15)	1,105
6. OTHER INCOME		
7. GROSS INCOME (ADD L	JINES 5 AND 6)	1,105
9. MERCHANDISE PURCHAS 10. COST OF LABOR 11. MATERIALS AND SUPPL	IES	
	(LINE 13 LESS LINE 14)	

FORM 990-PF	OTHER E	XPENSES	STATEMENT 2			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ADMINISTRATIVE EXPENSES	5,829.	0.		0.		
TO FORM 990-PF, PG 1, LN 23	5,829.	0.		0.		

H.U.G.S., INC. 72-1128842 CONTRIBUTIONS PAID PART XV, LINE 3a 2009

AMERICAN CANCER SOCIETY P.O. Box 22718 Oklahoma City, OK 73123-1718	3,264
AMERICAN HEART ASSOCIATION 7272 Greenville Avenue Dallas, TX 75231	1,900
BIG BROTHER / BIG SISTER 3801 Canal Street New Orleans, LA 70119	2,500
BOY'S HOPE 251 Florida Street Baton Rouge, LA 70801	5,000
CHILD ADVOCACY CENTER, INC 1351 Springhill Ave Mobile, AL 36604	2,471
CRESCENT CITY REHAB CENTER 1420 General Taylor Street New Orleans, LA 70115	3,500
JUVENILE DIABETES RESEARCH FOUNDATION 9457 Brookline Avenue Baton Rouge, LA 70809	1,500
ODYSSEY HOUSE 1125 N. Tonti Street New Orleans, LA 70119	2,969
OPERATION SHOESTRING PO Box 11223 Jackson, MS 39283	1,199
SOLACE 701 Poydras Street, Suite 4500 New Orleans, LA 70139	2,500

H.U.G.S., INC. 72-1128842 CONTRIBUTIONS PAID PART XV, LINE 3a 2009

SPECIAL OLYMPICS-TEXAS 7715 Chevy Chase Drive, Suite 120 Austin, TX 78752	2,500
ST. ANDREWS VILLAGE PO Box 444 Abita Springs, LA 70420	2,817
ST. JOSEPHS COMMUNITY CENTER 1802 Tulane Avenue New Orleans, LA 70112	1,861
ST. JUDE CHILDREN'S HOSPITAL 332 N. Lauderdale Memphis, TN 38105	2,834
ST. MICHAELS SPECIAL SCHOOL 1522 Chippewa Street New Orleans, LA 70130	3,843
STARC 1541 St. Ann Place Slidell, LA 70460	8,006
SUSAN G. KOMEN BREAST CANCER FOUNDATION 210 Baronne Street New Orleans, LA 70112,	5,704
Organizations paid less than \$1,000 each	9,651
	64,019

Z \data\00699.4\2009\CONTRIBUTIONS xls

Form **8868** (Rev April 2009)

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.

ES 0699-4 8/15/2010 OMB No 1545-1709

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		•	. ► LX .	
■ If you Do not	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	torm). led Fo	m 8868		
Part			W COCO WE	ILED GFR	HEIF
			A	1AY 13 /	P6746)
•	ration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	1,7	1991 1317	(f. fr)
Part I or		•			
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an come tax returns.	exter	sion of time		
noted b (not aut you mus	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensic elow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic omatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cost submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Charities & Nonprofits.	cally it nsolid	(1) you want ated Form 99	the additional or. Instead,	al
Type or	Name of Exempt Organization	Emp	loyer identifi	cation numb	er
print		_	0 1100		
File by the	H.U.G.S., INC.		<u>2-11288</u>	342	
due date fo filing your	4500 ONE SHELL SOUARE				
return See instruction					
	NEW ORLEANS, LA 70139				
Check 1	type of return to be filed (file a separate application for each return).				
F	orm 990 Form 990-T (corporation) Form 47	20			
===	orm 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52				
==	orm 990-EZ Form 990-T (trust other than above) Form 60				
	orm 990-PF				
Telep	blooks are in the care of ► 4500 ONE SHELL SQUARE - NEW ORLEANS, LA shone No. ► 504-585-0354 FAX No. ► The organization does not have an office or place of business in the United States, check this box The sist of a Group Return, enter the organization's four digit Group Exemption Number (GEN)	s is fo	r the whole g		
	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt				
_	AUGUST 15, 2010 , to file the exempt organization return for the organization named a	bove.	The extensio	n	
	for the organization's return for:				
•	X calendar year 2009 or				
-	tax year beginning, and ending		<u> </u>		
2 If	this tax year is for less than 12 months, check reason:		Change in ac	counting per	boo
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	onrefundable credits. See instructions.	3a	\$		0.
	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	01	•		^
	x payments made. Include any prior year overpayment allowed as a credit. alance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b	\$		0.
	· · · ·				
	eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	3c	\$		0.
					_
Cautior ———	n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	O for payme	nt instruction	ns.
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8	868 (Rev. 4-2)	009)

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Form 8868 (Rev. 4-2009)	AUG 12	2010				Page 2
		mb. Bant II one	I aback this ba		_()(1/1	► [V]
If you are filing for an Additional (Not Automatic) 3-Month External Note. Only complete Part II if you have already been granted an au						لما 🕶
• If you are filing for an Automatic 3-Month Extension, complete			neviously med	FOITH	5000.	
Part II Additional (Not Automatic) 3-Month Extension, complete			onginal (no co	nies r	eeded\	
Name of Exempt Organization		OT OTHY THE LITE	The state of the s			fication number
Type or				Linpi	Oyer rueriti	ncation number
print H.U.G.S., INC.			1 15 7	7	2-1128	842
File by the	e instructions				RS use only	<u> </u>
due date for 4500 ONE SHELL SOUARE	mondonono.					
City, town or post office, state, and ZIP code For a fore Instructions NEW ORLEANS, LA 70139	eign address, see ii	nstructions.	3, 1 1 2	. ·	3	, , , ,
Check type of return to be filed (File a separate application for each Form 990 Form 990-FZ Form 990-T (sec.	401(a) or 408(a) tr	· =	n 1041-A	= -	rm 5227	Form 8870
Form 990-BL X Form 990-PF Form 990-T (trust	t other than above)	Ll Fon	m 4720 L	Fo	rm 6069	
STOP! Do not complete Part II if you were not already granted a	n automatic 3-mo	onth extension	on a previou	sly file	d Form 886	8.
	SQUARE - 1 FAX No n the United States	b. check this bounder (GEN) th the names a	ox	s is for	the whole g	
5 For calendar year 2009, or other tax year beginning		,	and ending		_	
6 If this tax year is for less than 12 months, check reason:	Initial return	Fina	ıl retum		Change in a	ccounting period
7 State in detail why you need the extension						
ADDITIONAL TIME IS REQUESTED TO			TION RE	CEN'	<u> TLY RE</u>	CEIVED
AND PREPARE A COMPLETE AND ACCU	JRATE RETU	JRN.				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or	6069, enter the ter	ntative tax, less	any			
nonrefundable credits See instructions.				8a	_\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, er				- 25		
tax payments made. Include any prior year overpayment allow	wed as a credit and	l any amount p	aid			_
previously with Form 8868.				8b	\$	0.
c Balance Due. Subtract line 8b from line 8a. Include your pays		•				_
with FTD coupon or, if required, by using EFTPS (Electronic F			instructions.	8c	_\$	<u> </u>
•	ure and Verific					
Under penalties of perjury, I declare that I have examined this form, including it is true, correct, and complete, and that I am authorized to prepare this form	n.					ge and belief,
Signature & E Somoth CPA Title >	BOURGEO	S. BENNETT	LLC.	Date	AU AU	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7

BOURGEOIS, BENNETT, L.L.C., CERTIFIED PUBLIC ACCOUNTANTS P. O. Box 60600, New Orleans, LA 70160-0600 I. D. #72-0136870 Ph. 831-4949

Form 8868 (Rev. 4-2009)