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Form **990-PF**

EXTENDED TO AUGUST 17, 2015 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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calen	dar year 2014 or tax year beginning		, and ending		
Nai	ne of	foundation		-	A Employer identification	number
Н	.U	.G.S., INC.			72-1128842	}
Nur	nber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
4	<u>50</u>	O ONE SHELL SQUARE			504-581-32	34
		own, state or province, country, and ZIP or foreign p ORLEANS,LA 70139	ostal code		C If exemption application is p	pending, check here
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization:	s, check here
		Final return	Amended return	,		
		Address change	Name change		Foreign organizations me check here and attach co	peting the 85% test, proputation
H C	heck	type of organization: X Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
	<u> Se</u>		Other taxable private founda		under section 507(b)(1)(A), check here 🕨 🗔
		rket value of all assets at end of year J Accounti	-	Accrual	F If the foundation is in a	60-month termination
			ther (specify)		under section 507(b)(1)(B), check here $ ightharpoonup$
	\$	57,706. (Part I, colu	i			(4) -
Pa	<u>ırt l</u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	117,344.		N/A	
	2	Check from father foundation is not required to attach Sch. B. Interest on savings and temporary				
	3	cash investments				
	4	Dividends and interest from securities				
		Gross rents				
	_	Net rental income or (loss)				
ue	b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
ä	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10а 	and allowances Less Cost of goods sold				
	l	Gross profit or (loss)				
	11	Other income		·		
	12	Total. Add lines 1 through 11	117,344.	0.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
"	1	Pension plans, employee benefits				
Ses		Legal fees	(::	·		
Şer ⊆		Accounting fees	11			
30		Other professional fees	3			
/ ロコン ピエポンドシー Administrative Expens		Interest				
Ste	18 19	Taxes Depreciation and depletion				
끉듵	20	Occupancy				
Αğ	21	Travel, conferences, and meetings				
and C	22	Printing and publications				
~ ღ ან		Other expenses STMT 1	8,564.	0.		8,492.
2106 Operating	24	Total operating and administrative				
per.		expenses. Add lines 13 through 23	8,564.	0.		8,492. 93,253.
0	20	Contributions, gifts, grants paid	93,253.			93,253.
	26	Total expenses and disbursements.				
	<u> </u>	Add lines 24 and 25	101,817.	0.		101,745.
	l	Subtract line 26 from line 12:	45 505			
	ı	Excess of revenue over expenses and disbursements	15,527.			
	ı	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		0.	N/A	
	, "	AUDISTRUCTED DEL DICTURE DI DECIZIVE EDIEC -U-1	1		1 1N / A	i

72-1128842 Form 990-PF (2014) H.U.G.S., INC. Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing ... 42,179. 57,706. 57,706. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► 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 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 42,179. 57,706. 57,706. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 21 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) ightharpoonsFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 42,179. 57,706. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Vet Assets or 27 Capital stock, trust principal, or current funds. 28 Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds 42,179. 57,706. 30 Total net assets or fund balances 42,179. 57,706. 31 Total liabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances** Part III

1	lotal net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	42,179.
2	Enter amount from Part I, line 27a	2	15,527.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	57,706.
5	Decreases not included in line 2 (itemize) >	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	57,706.

		S., INC.			72-112	8842	Page 3
F	Part IV Capital Gains and	Losses for Tax on Investment					~13
	(a) List and describe the 2-story brick warehous	e kind(s) of property sold (e.g., real estate, se; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	c) Date acquired (mo., day, yr.)	(d) Date (mo., da	
<u>1a</u>							
_ <u>b</u>							
_6						···-	
_ <u>d</u>							
<u>_</u>			st or other basis expense of sale		(h) Gain or (loss) (e) plus (f) minus (
a							
_ <u>b</u>							
_ <u>c</u>							
_d							
_e		in column (h) and owned by the foundation	on 12/21/60		Cours (Col. (b) sous		
_	(i) F.M.V. as of 12/31/69	(i) Adjusted basis (k) Ex	cess of col. (1) col. (1), if any	còl.	Gains (Col. (h) gain (k), but not less thai Losses (from col. (1 -0-) or	
a							
 b							
_d							
_ <u>e</u>	·						
2	Capital gain net income or (net capital lo	ss) $\begin{cases} \text{If gain, also enter in Part I, line} \\ \text{If (loss), enter -0- in Part I, line} \end{cases}$		} 2			
3	Net short-term capital gain or (loss) as of If gain, also enter in Part I, line 8, column			}			
F	If (loss), enter -0- in Part I, line 8 Part V Qualification Under	Section 4940(e) for Reduced	Tax on Net I)	ome	·	
		ations subject to the section 4940(a) tax on				·	
•				· · · · · · · · · · · · · · · · · · ·			
It s	section 4940(d)(2) applies, leave this part	t Diank.					
		42 tax on the distributable amount of any ye		od? .	-	Yes	X No
<u>lf "</u>		er section 4940(e). Do not complete this pa					
1_	Enter the appropriate amount in each co	olumn for each year; see the instructions be	fore making any en		т	(4)	
	Base neriód vears	(b) Adjusted qualifying distributions	Net value of non-	(c) charitable-use assets	Distrib	(d) ution ratio ided by col.	/o\\
_	Calendar year (or tax year beginning in) 2013	107,563.	TOT VALUE OF HOLE	10,927	+		4378:
_	2012	91,517.	-	8,809		10.38	
	2011	105,678.		18,157			2023!
	2010	76,320.		9,030			5182
	2009	64,019.		10,605		6.0	3668
	Total of line 1, column (d)	·			2	40.5	1155
3	Average distribution ratio for the 5-year the foundation has been in existence if le	base period - divide the total on line 2 by 5, ess than 5 years	or by the number o	of years	3	8.10	0831:
4	Enter the net value of noncharitable-use	assets for 2014 from Part X, line 5			4	32	,801
5	Multiply line 4 by line 3				5	265	,961
6	Enter 1% of net investment income (1%	of Part I, line 27b)		•	6		0
	Add lines 5 and 6	. ,	-	•	7	265	,961
	Enter qualifying distributions from Part	XII. line 4			8		,745
•		, check the box in Part VI, line 1b, and comp	lete that part using	a 1% tax rate.	L		

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - see	Instru	Ction	is)
1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🛄 and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🛄 and enter 1%	1			0.
of Part 1, 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:				
a 2014 estimated tax payments and 2013 overpayment credited to 2014				
b Exempt foreign organizations - tax withheld at source 6b				
c Tax paid with application for extension of time to file (Form 8868) 6c				
d Backup withholding erroneously withheld 6d				
7 Total credits and payments. Add lines 6a through 6d	7			0.
	8			
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	9			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded	11			
Part VII-A Statements Regarding Activities			Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		165	
any political campaign?	.	1a		_ <u>X</u> _
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	•	1b		<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or			ı
distributed by the foundation in connection with the activities,				
c Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				i
(1) On the foundation. ► \$ (2) On foundation managers ► \$				ı
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
managers. ► \$0.		1 1		i
2 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 incorporation, of	ır			ı
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.				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				i
By language in the governing instrument, or				i
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law			i
remain in the governing instrument?		6	х	i
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 Part XV	, .	7	X	
To the first foundation have actious cooperation acting and during the year. In 165, Complete Farth, Con. (6), and Farthy		,		
8a Enter the states to which the foundation reports or with which it is registered (see instructions)				i
LA		-		ļ
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)		-		ı
		0.6	х	ı
of each state as required by General Instruction G? If "No," attach explanation	ndor	8b	Λ	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	HUAF			v
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		<u>X</u> _
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	DE:	X
	F	orm 990	- 25 (2014)

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

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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

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4a

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (control	17-TT788	44	Page 6
5a During the year did the foundation pay or incur any amount to:	Offit 4120 May De I	required (contin	The contract of the contract o		Τ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e)\2	□ v	es X No		
(2) Influence the outcome of any specific public election (see section 4955); (• ••	23 22 110		
any voter registration drive?			es X No		
(3) Pròvide a grant to an individual for travel, study, or other similar purposes			es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization			53 [22] NO		
4945(d)(4)(A)? (see instructions)	ar document in cooling	□ v _i	es 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or educational nurposes, or				
the management of county to abilities an account O			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un				Ì	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
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 f	•	uned			
expenditure responsibility for the grant?	N	J/A □ Y€	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1	
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			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	shelter transaction?	. 🗀 Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		······································		7b	<u> </u>
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	У		
List all officers, directors, trustees, foundation managers and their	compensation		 		
, and a second s		(c) Compensation	(d) Contributions to	(e) E	mense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accour	pense it, other ances
MARK C. SURPRENANT	PRESIDENT	enter-0-7	Compensation	allow	ances
4500 ONE SHELL SQUARE	RESIDENT				
NEW ORLEANS, LA 70139	0.00	0.	0.		0.
	SECRETARY	-	<u></u>		<u> </u>
4500 ONE SHELL SQUARE					
NEW ORLEANS, LA 70139	0.00	0.	0.		0.
				-	
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc	hudad an line 1) If name	anton IINONE II			
2 Componsation of the highest-paid employees (other than those inc	(b) Title, and average	enter NONE."	(d) Contributions to	(a) Ev	nenca
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	accoun	pense it, other
NONE	devoted to position		compensation	anow	ances
NONE					
	1				
Total number of other employees paid over \$50,000					0

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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 service		(c) Compensation	_ 1
'NONE		(C) Compensation	<u>'</u>
NONE	ļ		
			_
	\longrightarrow		_
			-
	ĺ		
		· · · · · · · · · · · · · · · · · · ·	-
Total number of others receiving over \$50,000 for professional services			_)
Part IX-A Summary of Direct Charitable Activities			_
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	T	-	-
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	
ı N/A		<u> </u>	
	1		
	1		
)	· · · · · · · · · · · · · · · · · · ·		-
	1		
	1		
3	1		-
	1		
	1		
			_
]		
]		
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	_
N/A			
	j		
		<u> </u>	_
	_		
	ļ		_
All other program-related investments. See instructions.			
	1		
	1		

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; a Average monthly fair market value of securities 1a b Average of monthly cash balances 1b 301 c Fair market value of all other assets 10 d Total (add lines 1a, b, and c) 33,301 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 301. 3 Subtract line 2 from line 1d 3 33. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 500. 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 32,801. 5 Minimum investment return. Enter 5% of line 5 ,640. Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 1 Minimum investment return from Part X, line 6 1,640. 1 Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014. (This does not include the tax from Part VI.) Add lines 2a and 2b C 2с 1.640. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 0. 4 4 5 Add lines 3 and 4 1,640. 5 0. 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 640. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 101,745. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 101,745. 4 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

Destholable amount for 2014 from Part XI, Inter	`	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
2. Underblocked scene, of any, as a of the end of 2214 a. Enter amount 12 2013 only b Total for prior years: 3. Excess distributions carryover, if any, to 2014, a. From 2009	· 1				1 640
a Enter amount for 2013 only b Total for pror years: 2 Excess distributions carryover, if any, to 2014; a From 2009 63, 489, b From 2010 75, 868. c From 2011 104, 770. d From 2012 191, 977. d From 2012 191, 977. d From 2013 107, 017. d From 2014 17 1 Total of lines 3 shrough e. 4 Qualifying distributions for 2014 from Part XI, line 4 ≥ \$ 101, 745. a Applied to 2013, but not more than line 2a by Applied to an inforthied discrete or grone years (Election required - see instructions) c Freated as distributions of or corpus (Election required - see instructions) c Freated as distributions of or corpus (Election required - see instructions) c Freated as distributions of or corpus (Election required - see instructions) c Freated as distributions of or corpus (Election required - see instructions) c Freated as distributions of corpus (Election required - see instructions) c Freated as distributions of corpus (Election required - see instructions) c Freated as distributions of corpus c (Election required - see instructions) c Freated as distributions of corpus c (Election required - see instructions) c Freated as distributions of corpus c (Election required - see instructions) c Freated as distribution of corpus c (Election required - see instructions) c Freated as distribution of corpus c (Election required - see instructions) c Freated as distribution of corpus c Indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat line 6 c Freater the net total of each column as indicated belay of the C and de Subreat	•				1,040.
3 Excess distributions carryover, it amy, to 2014; a From 2009				0	
3 Excess distributions carryover, if any, to 2014; a From 2009				0.	
3 Excess distributions carryover, if any, to 2014. a From 2009. 75, 868. c From 2010. 75, 868. c From 2011. 104, 770. e From 2012. 107, 017. e From 2013. 107, 017. e From 2013. e From 2014. e From 2015.	g rotal for prior yours.		0		
a From 2019	3 Excess distributions carryover, if any, to 2014	-			
Firm 2010 75, 868 Firm 2011 104, 770 91,077 Firm 2013 107, 017, 017, 017, 017, 017, 017, 017,	1				
Firm 2011 1.04,770.					
A A A A A A A A A A					
From 2013		İ			
1 Total of lines 3a through e . 4 4.2 , 2.2.1 . 4 Qualifying distributions for 2014 from Part XII, line 4 ► \$ 101 , 745 . a Applied to 2013, but not more than line 2a . 0 . b Applied to misstributed income of prorry years (Election required - see instructions) o . Treated as distributions out of corpus (Election required - see instructions) o . d Applied to 2014 distributable amount a Remaining amount distributed of corpus (Election required - see instructions) o . d . d . d . d . d . d . d . d . d .					
4. Qualifying distributions for 2014 from Part XII, line 4; PS 101, 745, a Applied to 2018, Subtract line 4 Applied to undistributed morme of prore years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2014 distributed amount e Remaining amount distributed out of corpus 5 Exercise state state hatten approximate above in column (a); which were amount must be shown in column (a); which were amount must be shown in column (a); which were amount must be shown in column (a); which were amount in the state of the state		442 221			
Part XII, line (: ► \$ 101.745. a Applied to 2013, but not more than line 2a b Applied to undistributed income of pror years (Election required - see instructions) c. The tail as distributions out of corpus (Election required - see instructions) d. Applied to 2014 distributable amount e Remaining amount distributed out of corpus continued to the tail of the tail o		± ± 20 / 20 20 4			
a Applied to 2013, but not more than line 2a b Applied to undistributed moome of prior years (Election required - see instructions) c. Treated as distributions out of corpus (Election required - see instructions) d. Applied to 2014 distributable amount a Remaining amount distributed out of corpus 5 Excess distributions eclarging with a content of the content of th	· ·				
b Applied to undistributed income of prior years (Election required - see instructions) corpus (Election required - see instructions) d Applied to 2014 distributable amount a Remaining amount distributed out of corpus 5 Excess distributions curryover applied to 2014 (the same amount must be shown in column (a)) 100,105. Extense distributions curryover applied to 2014 (from amount appearus in column (b) the same amount must be shown in column (a)) 5 Early shown in column (a)) 6 Enter the net total of each column as indicated below: 2 Corpus As the set st. e. and se Subtract line 5 DPTror years' undistributed income. Subtract line 40 from line 2 to Enter the amount of prior years' undistributed income for which a notice of deficiency has been sized, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2013. Subtract line 4 a from line 2. Taxable amount - see instructions to extract lines 4d and 5 from line 1. This amount must be distributed in 2015 0. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(p)(3) (Election may be required - see instructions) 0. Excess distributions carryover from 2009 not applied on line 5 or line 7 5, 86.8. Excess from 2010 75, 86.8. Excess from 2011 104,770. Excess from 2012 91,077. Excess from 2012 91,077. Excess from 2013 107,017.	• • • • • • • • • • • • • • • • • • • •			0.	
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C Treated as distributions out of corpus ((Election required - see instructions) 4 Applied to 2014 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2014 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	• •		n .		
(Election required - see instructions) d Applied to 2014 distributable amount as Remaining amount distributed out of corpus 5. Excess distributions carryover applied to 2014 (for a mount appear in column do.) 5. Excess distributions carryover to 2015. 6. Enter the national of each column as indicated below: a 8 corpus And lines 3f, 4c, and 4c Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed morem for which a notice of deficiency has been issued, or on which the section 494/2(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2013. Subtract line 4a from line 2. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4a from line 2. Taxable amount - see instructions for a subtract line 6 from line 1. This amount must be distributed in 2015 7. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b) f)(F) or 4942(p)(3) (Election may be required - see instructions) 8. Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 1.,640. 1.00,105. 5.42,326.					
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d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2010 b Excess from 2010 c Excess from 2012 d Excess from 2013 10 7, 017. d Excess from 2013 10 7, 017.	undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
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Innes 4d and 5 from line 1. This amount must be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2010	-			U •	
be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2010					
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section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8					
may be required - see instructions) 8		}			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2010 b Excess from 2011 c Excess from 2012 d Excess from 2013 107,017.		0.			
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9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2010 b Excess from 2011 c Excess from 2012 d Excess from 2013 107,017.	ı	63.489			
Subtract lines 7 and 8 from line 6a 478,837. 10 Analysis of line 9: a Excess from 2010 75,868. b Excess from 2011 104,770. c Excess from 2012 91,077. d Excess from 2013 107,017.	· · · · · · · · · · · · · · · · · · ·	03/1031			
10 Analysis of line 9: a Excess from 2010	- 1	478.837.			
a Excess from 2010 75,868. b Excess from 2011 104,770. c Excess from 2012 91,077. d Excess from 2013 107,017.	F	2.0,007.			
b Excess from 2011 104,770. c Excess from 2012 91,077. d Excess from 2013 107,017.					
c Excess from 2012 91,077. d Excess from 2013 107,017.					
d Excess from 2013 107,017.					

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Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2014, enter the date of	the ruling	▶		
b Check box to indicate whether the found			in section	4942(j)(3) or 4	1942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>]
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for			`	1.	
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			1	 	
e 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 all assets	·				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	-				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(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			-,		·
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst				
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed m			tributions received by th	e foundation before the cl	ose of any tax
MARK C. SURPRENANT				 	
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large port	tion of the ownership of a	partnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here X if the foundation of the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone numb	ber or e-mail address of	the person to whom app	lications should be addre	essed:	
b The form in which applications should b	e submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of ınstıtutıons, or	other factors:	

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Part XV Supplementary Information	(continued)	·		
3 Grants and Contributions Paid During the Yo		Payment		
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	CONTRIDUCION	, ,,,,,
a Paid during the year				
THE GLEASON INITIATIVE FOUNDATION P.O. BOX 24493 NEW ORLEANS, LA 70184	N/A	PC	GENERAL PURPOSE OF THE	1,000.
INTERFAITH MINISTRIES (ANIMEALS ON WHEELS) 3217 MONTROSE BLVD HOUSTON, TX 77006	N/A	PC	GENERAL PURPOSE OF THE	2,000.
BOYS HOPE/GIRLS HOPE P.O. BOX 4414 BATON ROUGE, LA 70821	N/A	PC	GENERAL PURPOSE OF THE	5,576 .
CHILDREN'S BUREAU 2626 CANAL ST, SUITE 201 NEW ORLEANS, LA 70119	N/A	PC	GENERAL PURPOSE OF THE	1,500.
CHILDREN'S HOME SOCIETY 3027 SAN DIEGO ROAD JACKSONVILLE FL 32207	N/A	PC	GENERAL PURPOSE OF THE	1,000,
	TINUATION SHEE	IT(S)	<u>▶</u> 3a	93,253,
b Approved for future payment NONE				
			▶ 3b	0.

Part XVI-A	Analysis	of Income	-Producing	Activitie
Part Avi-A	Anaiysis	or income	-Producing	ACTIVITI

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		d by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					\
b	1				
cd			1		
	1 1		+		
f			+		
g Fees and contracts from government agencies					
2 Membership dues and assessments .					
3 Interest on savings and temporary cash			1		
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:			 -		
a Debt-financed propertyb 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	<u> </u>				
10 Gross profit or (loss) from sales of inventory			 -		
11 Other revenue:	}				
ā	1		+		
b	1		+		
c	1 1	 	+		
de			1-1-		
12 Subtotal. Add columns (b), (d), and (e)		0.		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 Accom	plishment of E	xempt	Purposes	
Line No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI-A	A contribut	ed importantly to the accord	nnlishment of
the foundation's exempt purposes (other than			1 0011111111111	ou importantly to the accom	ipiioiiiioiit oi
					
					
					
423821 11-24-14					Form 990-PF (2014)

orm 990-PF (2	014) H.U.G	.s., INC.			72-112	8842	Page	13
Part XVII	Information Re Exempt Organ	egarding Transfers To lizations	and Transactions a	and Relationsl	nips With Noncha	ritable	;	
1 Did the or		rectly engage in any of the follow	ving with any other organization	on described in secti	ол 501(c) of		Yes N	10
)(3) organizations) or in section			o oo 1(07 o.	1		
		ation to a noncharitable exempt		112410113:		- (
(1) Cash		ation to a noncharitable exempt	organization of.			14-743	,	v
• •	•					1a(1)		<u>X</u> _
(2) Other						1a(2)		<u>X</u> _
b Other tran						- [
	of assets to a noncharital			•		1b(1)		<u>X</u> _
		ncharitable exempt organization	•			1b(2)		<u>X</u> _
(3) Renta	l of facilities, equipment,	or other assets				1b(3)		<u>X</u>
(4) Reimi	oursement arrangements					1b(4)		<u>X_</u>
(5) Loans	s or loan guarantees					1b(5)]	X
(6) Perfo	rmance of services or me	embership or fundraising solicital	tions			1b(6)		X
c Sharing of	facilities, equipment, ma	uling lists, other assets, or paid e	emplovees	•		1c		X
		"Yes," complete the following sci		 ways show the fair m	arket value of the goods.	other ass		
		oundation. If the foundation rece					• • • • • • • • • • • • • • • • • • • •	
		other assets, or services receive		so in any transaction	or onaring arrangomona, a)11.0 11 111		
	(b) Amount involved	(c) Name of noncharitat		(d) Description	of transfers, transport and			
(a) Elle IIO	(b) Alliount ill volveu	 		(d) Description	of transfers, transactions, and	sharing an	angements	
		N/A	·	- 				
	· · · · · · · · · · · · · · · · · · ·							
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								—
								
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		ļ						
		<u> </u>						
		tly affiliated with, or related to, or		zations described		_		
		r than section 501(c)(3)) or in se	ection 527?		L	Yes	X	10
b If "Yes," co	mplete the following sche			,	·			
	(a) Name of org	anization	(b) Type of organization	(c) Description of relations	hip		
	N/A							
Under	penalties of perjury, I declare t	that I have examined this return, include	ding accompanying schedules and	statements, and to the t	pest of my knowledge			_
Sign and be	lief, is true, correct, and con	npleta. Declaration of preparer (other the	han taxpayer) is based on all inform	nation of which preparer	nas any knowledge retu	irn with the	liscuss this preparer	
Here	Xmda Sc	DOMA	18/14/15	Sugara			(see instr.)?	
F (-)	ature of officer or trustee	100000	Data	Title	y 114434161	X. Yes	·	No
1 3001			Date	Title \	Check I if PTIN			
	Print/Type preparer's na	ame Preparer's	Signature	1				
n_:4		رزيريلا	apoberle AU	G 1 3 2015	self- employed			
Paid	LINDA EBER		_//	0 12 5017		<u> 1000</u>		
Preparer	Firm's name > BOU	RGEOIS BENNETT	√L.L.C.		Firm's EIN ► 72-0	1368	70	
Use Only							·	
	Fırm's address ► 11	1 VETERANS BLV	D. 17TH FLOO	R				
	ME_	TAIRIE, LA 700	05		Phone no. 504.8	31.4	949	
)-PF (20)14)

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.lrs.gov/form990.

2011 2011

Name of the organization Employer identification number H.U.G.S., INC. 72-1128842 Organization type (check one): 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor.

☐ For an organization described in section 501(c) (7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor.

☐ For an organization described in the filing Form 990 or 990 EZ that received from any one contributor.

☐ For an organization described in the filing Form 990 or 990 EZ that received from 990 EZ that received fro year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If 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 totaling \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet 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) (2014)

Name of organization

Employer identification number

H.U.G.S., INC.

72-1128842

Part i	. Contributors	(see instructions).	Use duplicate cor	oies of Part I if	additional space is needed.
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	- Continuation (see monatono), cos deprode copies of fair in addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ADAMS AND REESE, L.L.P. 4500 ONE SHELL SQUARE NEW ORLEANS, LA 70139	\$ 79,660.	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	MARK SURPRENANT 4500 ONE SHELL SQUARE NEW ORLEANS, LA 70139	\$5,000.	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 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 Occupate Part II for noncash contributions Part II for
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)

Employer identification number

H.U.G.S., INC.

72-1128842

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. irom 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
		\$	
(a) No. From	(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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization Employer identification number 72-1128842 H.U.G.S. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, 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 (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift 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 (e) Transfer of gift

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor CHRISTMAS TOY SHOP N/A ₽C GENERAL PURPOSE OF THE 550 16TH STREET NORTH CHARITY ST. PETERSBURG, FL 33705 6,304. CRESCENT CITY HEALTH/REHAB CENTER N/A PC GENERAL PURPOSE OF THE CHARITY 1420 GENERAL TAYLOR ST NEW_ORLEANS, LA 70115 3,325. DCA HAPPY HEARTS PROGRAM N/A PC GENERAL PURPOSE OF THE 204 DELTA DRIVE CHARTTY MARION, AR 72364 1,400. FANNIE BATTLE DAY HOME FOR CHILDREN N/A PC GENERAL PURPOSE OF THE 108 CHAPEL AVENUE CHARITY NASHVILLE, TN 37206 2,236. JAMIE'S HOPE N/A ÞС GENERAL PURPOSE OF THE 5858 WESTHEIMER, SUITE 708 CHARITY HOUSTON, TX 77057 3,014. JUVENILE DIABETES RESEARCH FOUNDATION N/A Ьc GENERAL PURPOSE OF THE 9457 BROOKLINE AVE CHARITY BATON ROUGE, LA 70809 2,630. JOYFUL TOYFUL N/A ÞС GENERAL PURPOSE OF THE P.O. BOX 638 CHARITY BAYTOWN, TX 77522 2,263. MUSTANG MEN'S CLUB N/A ÞC GENERAL PURPOSE OF THE 1817 CLEARY AVE CHARITY METAIRIE, LA 70001 1,000. MYASTHENIA GRAVIS FOUNDATION OF N/A ÞС GENERAL PURPOSE OF THE AMERICA (MG WALK) CHARITY 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 1,000. ODYSSEY HOUSE N/A ÞC GENERAL PURPOSE OF THE CHARITY 1125 N. TONTI ST NEW ORLEANS, LA 70119 3,205. Total from continuation sheets 82,177. H.U.G.S., INC.

Part XV | Supplementary Information

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
R.I.C.H. HOUSE	N/A	PC	GENERAL PURPOSE OF THE	
8218 N. MARKS ST			CHARITY	
TAMPA, FL 33604				5,78
NEGOVO WARNEGE FOOD DANK				
SECOND HARVEST FOOD BANK 700 EDWARDS AVE	N/A	PC	GENERAL PURPOSE OF THE	
NEW ORLEANS, LA 70123				1,950
OUISIANA BAR CENTER (SECRET SANTA)	N/A	PC	GENERAL PURPOSE OF THE	
501 ST. CHARLES AVE			CHARITY	
NEW ORLEANS, LA 70130				1,39
ST. ANDREWS VILLAGE	N/A	PC	GENERAL PURPOSE OF THE	
P.O. BOX 444 ABITA SPRINGS LA 70420			CHARITY	2,88
				2,00
ST. JOSEPH CHURCH	N/A	₽C	GENERAL PURPOSE OF THE	
1802 TULANE AVE			CHARITY	
YEW ORLEANS, LA 70112				2,404
ET. JUDE CHILDREN'S HOSPITAL 262 DANNY THOMAS PLACE	N/A	PC	GENERAL PURPOSE OF THE	
MEMPHIS, TN 38105				_1,41
et. Michael's school	N/A	PC	GENERAL PURPOSE OF THE	
522 CHIPPEWA ST			CHARITY	
IEW ORLEANS, LA 70130		<u>- </u>		3,10
ST. TAMMANY ASSOCIATION OF RETARDED	N/A	PC	GENERAL PURPOSE OF THE	
CITIZENS (STARC)			CHARITY	
1541 ST. ANN PLACE				F 00
ELIDELL, LA 70460				5,00
SUSAN G. KOMEN FOUNDATION	N/A	₽C	GENERAL PURPOSE OF THE	
4141 VETERANS MEMORIAL BLVD, SUITE 202			CHARITY	
METAIRIE, LA 70002				10,54
TREES FOR HOUSTON	N/A	PC	GENERAL PURPOSE OF THE	
P.O. BOX 270477 HOUSTON TX 77277			CHARITY	1 10
Total from continuation sheets	<u> </u>			1,10

H.U.G.S., INC.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient WINGARD HOME MINISTRY N/A ₽C GENERAL PURPOSE OF THE 1279 N. WEST CHARITY JACKSON MS 39202 2,384. OTHER CHARITIES < \$1,000 EACH N/A ₽C GENERAL PURPOSE OF THE CHARITY 17 837. Total from continuation sheets

FORM 990-PF	OTHER E	XPENSES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATIVE EXPENSES	8,564.	0.		8,492.	
TO FORM 990-PF, PG 1, LN 23	8,564.	0.		8,492.	

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.lrs.gov/form8868 .

OMB No. 1545-1709

 If you are 	e filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			. ▶ X	
If you are	e filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form).	•		
			itic 3-month extension on a previou	-			
Electronic	filing (e-file) . You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of ti	me to file (6 months for	a corporation	
required to	file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically	file Form 8	868 to reque	est an extension	
of time to fi	le any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers .	Associated V	With Certain	
Personal Be	enefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	ctronic filing	of this form,	
visit www ir	s gov/efile and click on e-file for Charities & Nonprofits						
Part I	Automatic 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).			
A corporati	on required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete			
Part I only						. ▶ 🔲	
	rporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reque	st an exter	nsion of time		
to file incon	ne tax returns.			Enter file	er's identify	ing number	
Type or	Name of exempt organization or other filer, see instru-	ctions.		Employer identification number (EIN)			
print							
L	H.U.G.S., INC.				72-11	28842	
File by the due date for	Number, street, and room or suite no. If a P.O. box, se	tions.	Social security number (SSN)				
filing your	4500 ONE SHELL SQUARE						
return See - instructions	City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions	•			
	NEW ORLEANS, LA 70139	Ū					
Enter the R	eturn code for the return that this application is for (file	a separa	te application for each return)			0 4	
Application	1	Return	Application	polication			
ls For		Code	Is For	Return Code			
	or Form 990-EZ	01	Form 990-T (corporation)	0-T (corporation)			
Form 990-B		02	Form 1041-A				
Form 4720		03	Form 4720 (other than individual)			09	
Form 990-F		04	Form 5227			10	
	(sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	(trust other than above)	06	Form 8870			12	
1 01111 050 1	PAUL LASSALLE		1 0111 0070			12	
	ks are in the care of 4500 ONE SHELL	SQUA	RE - NEW ORLEANS,	LA 70	139	· · · · · · · · · · · · · · · · · · ·	
	ne No ▶ <u>504-581-3234</u>		Fax No			. —	
	ganization does not have an office or place of business						
. –	for a Group Return, enter the organization's four digit		· · · · · · · · · · · · · · · · · · ·		•	group, check this	
box 🕨 L	If it is for part of the group, check this box				ers the exte	nsion is for	
•	uest an automatic 3-month (6 months for a corporation	•	•				
		t organıza	tion return for the organization nam	ned above	The extensi	on	
_	the organization's return for:						
►L≥	\subseteq calendar year 2014 or						
	tax year beginning	, an	d ending		·		
	tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retui	rn		
2 If the	Change in accounting period						
2 If the	Change in accounting pence				1		
	s application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any				
3a If this		or 6069,	enter the tentative tax, less any	За	\$	0.	
3a If this	application is for Forms 990-BL, 990-PF, 990-T, 4720,			За	\$	0.	
3a If this nonre	s application is for Forms 990-BL, 990-PF, 990-T, 4720, efundable credits. See instructions	, enter an	y refundable credits and	3a 3b	\$ \$		
3a If this nonre b If this estim	s application is for Forms 990-BL, 990-PF, 990-T, 4720, efundable credits See instructions s application is for Forms 990-PF, 990-T, 4720, or 6069 nated tax payments made Include any prior year overp	, enter an	y refundable credits and llowed as a credit			0.	
3a If this nonre b If this estim	s application is for Forms 990-BL, 990-PF, 990-T, 4720, efundable credits. See instructions application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an eayment a yment wit	y refundable credits and llowed as a credit h this form, if required,				