Department of the Treasury

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.

2018

		nue Service			gov/Form990PF fo	r instruc	tions and	the late	st informati	on. Oper	n to Public Inspection
Fo	r caler	ndar year 201	8 or tax year be	ginnir	ng			, and	ending		
		undation	-						A Employe	r identification numbe	r
TH	E H	OGG FOUN	DATION		•		`				
^Nu	mber and	d street (or PO b	ox number if mail is no	t delive	red to street address)		Roon	n/suite	54-1084092		
		<u>IVER ROA</u>							B Telephon	e number (see instruction	ons)
			e, country, and ZIP or f	foreign (postal code						
<u>ИЕ</u>	WPOI	<u>RT NEWS</u>			VA	2	<u> 3601-1</u>	<u> 3951</u>	757-59	<u>6-7451</u>	
Fo	eign cou	untry name	Foreig	gn provi	ince/state/county		Foreign post	al code	C If exempt	tion application is pendii	ng, check here 🕨 🗌
G	Check	k all that apply	🖰 🔲 Initial retur	'n	☐ Initial return	of a form	ner public	charity	D 1. Foreig	n organizations, check l	here ▶ 🗌
			Final return	n	Amended re	turn	·		2. Foreig	n organizations meeting	the 85% test
			Address cl	hange	🕛 🔲 Name chang	je			check	here and attach comput	tation ► _
Н	Check	eck type of organization: Section 501(c)(3) exemp				ivate fou	ındatıon	04		foundation status was te	
	Section	on 4947(a)(1)	nonexempt charif	able t	rust 🔲 Other tax	able priv	ate founda		section 50	07(b)(1)(A), check here	. ▶□
ī		narket value o			Accounting method		ash 🗓 A]		
			art II, col. (c),	۲	Other (specify)		, بط	.00.00.		ndation is in a 60-month ction 507(b)(1)(B), check	
			158,158.	ب Part)	: I, column (d) must be	e on cash	basis)		under sec	2001 307 (0)(1)(D), Check	(liele
P	art I		Revenue and Ex			T		1			(d) Disbursements
		-	lumns (b), (c), and	-	•		venue and nses per	(b) Ne	t investment	(c) Adjusted net	for charitable
			ounts in column (a) (•		ooks ,	"	ncome -	income	purposes
	4					<u> </u>		STATE STATE	Farmer and Control	interpretation in the	(cash basis only)
	1		gifts, grants, etc., rece of the foundation is no	•	•		, <u>300 .</u> 强心强缺;			MARKATAN CAND	
	2		ir the foundation is no avings and tempo			HOME AL E	576. 1 Mar. 1	CE . IN STATE	was tetern resident	Permit Autor Land Propert	HICKELL STATE
	4		avings and tempt id interest from se	•			,031.	1 2	,031:	2,031.	Thinks and
	5a	Gross rents	o interest from se	ecunii	es		, 031		, U31;	2,031.	Sign Walling 1
	b		come or (loss)			0.5827-87	**************************************	an estate	Lawar i dili	THE PROPERTY OF	Six Boxes of Six
4	_				o not on line 10		,100.			CAR TO WATER	
Ĭ	6a b		loss) from sale of		RECEIVE	D.//25				THE SALES HERE	THE TANK ASSET
Revenue	7	•	ce for all assets on lin		V line 3	S	Test de tra			ELITA LA MARCA CAPA	
è	8		net income (from	ı m	1 '				, 100.	8,100.	ARTHUR MAN
	9	Income mod	m capital gain .	B02	- APR 0 8 201				man attack	8,100.	NO NO SECURITION OF SECURITION
	10a		s returns and allowar				312 33 AT A	27. 37. 4	S CONTRACTOR	2007 克城市 30	
				- 1	OGDEN, U	14.4				Mary Carriers	
	b C		f goods sold .. or (loss) (attach s				NA GAM		A COLUMN	Section of the second of	P. C. Programme D. S. S.
	11	•	e (attach schedul		•			868 C	- 1. PT-04E		Pr. St. Ob. "
	12		ines 1 through 11	•		10	,431.	10	,131:	10,131.	179 323,220,345
	13		on of officers, dire			1 1 1	, = 3 + .		, 131.	10,131.	10 To the second second second second
ses	14		yee salaries and			 -			•	- 	
ű	15		ns, employee ben								<u> </u>
ğ	16a	•	is, employee ben attach schedule)	Ciito	• • •	 					
Operating and Administrative Expen	b		ees (attach scheo	اعلیا ا		<u> </u>	970.		970.	970.	
Ve.	C	_	sional fees (attac	-			<u> </u>	-			
ati	17	Interest .	· · · · · ·					 			
str	18		h schedule) (see			·	12.		12.	12.	
Ë	19	•	(attach schedule		•	<u> </u>	<u> </u>	-			Lawlendine
Έ	20	Occupancy			· ·			 			34, 34, FOR 1723 SAX
A	21		rences, and mee								
ğ	22	Printing and		_		<u> </u>		<u> </u>			
a	23		ses (attach sched			- -		 			
ng	24		ing and adminis				 _				
ati	_ •	Add lines 13					982.		982.	982.	
ē	25		s, gifts, grants pai			4	,510.	To all the		SHEW COUNTRY OF	4,510.
g	26		s and disbursement				492.		982.	982.	4,510.
			26 from line 12			 '		€95\€. 20	US235541/9625		
	27			224 4:	churcomorto	12	,939.			图 图 图 图	
	a		nue over expenses ent income (if ne				,333. 陸國開始	U JUNEAU	,149.	MANAGEMENT AND	
	b		•	-	•				RADIATIVA	9,149.	
	С	Aujustea ne	t income (if nega	zuv€, (- (-U-)	Mary Marie	かい かいまだり	1977995 RE	Typical in the second		ローンをおいる。これに「日日

Form 990-PF (2018)

For Paperwork Reduction Act Notice, see instructions.

SCANNED MAY 0 9 2019

Pá	art II	Balance Sheets Attached schedules and amounts in the description column			End of year		
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	(b) Book Value (c) Fair Market		
	1 ,	Cash—non-interest-bearing	18,362.	12,58	2.	12,582.	
	2	Savings and temporary cash investments					
	3	Accounts receivable •					
		Less: allowance for doubtful accounts					
	4	Pledges receivable	1 1				
		Less. allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less: allowance for doubtful accounts					
ts	8	Inventories for sale or use		· · - · ·			
Assets	9	Prepaid expenses and deferred charges		***			
As	10a	Investments—U.S. and state government obligations (attach schedule)	98,439.	118,15	8.	145,576.	
-	b	Investments—corporate stock (attach schedule)		· · · · · · · · · · · · · · · · · · ·			
	c	Investments—corporate bonds (attach schedule)	 j				
	11	Investments—land, buildings, and equipment basis					
	` `	Less ⁻ accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis					
	' '	Less: accumulated depreciation (attach schedule)					
	15	Other assets (describe					
	16	Total assets (to be completed by all filers—see the					
	10	instructions. Also, see page 1, item I)	116 801	130,74	Λ	158,158.	
_	17	Accounts payable and accrued expenses	110,001.		<u> </u>	1	
	18	Grants payable					
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ap	21	Mortgages and other notes payable (attach schedule)	·	·			
	22	· · · · · · · · · · · · · · · · · ·					
	23	Other liabilities (describe Total liabilities (add lines 17 through 22)					
		Foundations that follow SFAS 117, check here .					
es		and complete lines 24 through 26, and lines 30 and 31.					
n	24	Unrestricted				3	
alances	25	Temporarily restricted		- 100,			
ä	26	Permanently restricted				~ · · · · · ·	
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here					
교		and complete lines 27 through 31.					
5	27	Capital stock, trust principal, or current funds	116,801.	130,74	ο. ່	·	
ß	28	Paid-in or capital surplus, or land, bldg, and equipment fund			-		
se	29	Retained earnings, accumulated income, endowment, or other funds		-			
As	30	Total net assets or fund balances (see instructions)	116,801.	130,74	0.	·	
e	31	Total liabilities and net assets/fund balances (see					
Z	31	instructions)	116,801.	130,740.			
P۵	rt III	Analysis of Changes in Net Assets or Fund Balances			<u></u>		
		net assets or fund balances at beginning of year—Part II, column (a) line 30 (must agre	e with			
•		of-year figure reported on prior year's return)			1	116,801.	
2					2	13,939.	
	2 Enter amount from Part I, line 27a						
		ines 1, 2, and 3			4	130,740.	
					5		
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II. column (b). line	30 .	6	130,740.	

Part	a) List and describe the kin	Losses for Tax on Investr d(s) of property sold (for example, real es se, or common stock, 200 shs MLC Co)	tate,	(b) How acquired P—Purchase	(c) Date acquir (mo , day, yr	
1a	DAVENPORT CAPIT			D—Donation P	L'	1812/31/2018
<u>iu</u> b	DITTUINI ON CHILL	111 0211110		 	12/31/20	10,127,317,2010
c						
d						
<u>е</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis nse of sale) Gain or (loss) olus (f) minus (g))
a	8,100.				<u> </u>	8,100.
<u>b</u>						
<u> </u>						
<u>d</u>						
<u>e</u>	Complete only for assets sho	owing gain in column (h) and owned	hy the foundation	on 12/31/69		<u> </u>
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) (j), if any	col (k), b	s (Col (h) gain minus ut not less than -0-) or ses (from col (h))
					-	8,100.
b						
с						
d						
<u> e </u>			L		···	
2	Capital gain net income or	(net capital loss) { If (loss)	also enter in Pa), enter -0- in Pa	rt I, line 7	2	8,100.
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) See instructions	ions If (loss), en			
_		<u> </u>		<u> J</u>	3	8,100.
Part		er Section 4940(e) for Redu		***		
(For d	optional use by domestic priv	ate foundations subject to the s	section 4940(a) to	ax on net investr	nent income.)	
If sec	tion 4940(d)(2) applies, leave	e this part blank.				
		section 4942 tax on the distribut alify under section 4940(e). Do			ise period?	☐ Yes ☒ No
		unt in each column for each yea			king any entrie	S.
	(a)	(b)		(c)		(d)
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value o	of noncharitable-use a	ssets (col	Distribution ratio (b) divided by col (c))
	2017	4,15	0.	125,03		0.033192
	2016	2,04		104,66		0.019578
	2014	2,49		100,64		0.024740
	2014	1,37		96,19		0.014242
	2013	5,09	5.	95,04	0.	0.053609
_	Total of line 4 column (d)				. 2	0.145361
2 3	Total of line 1, column (d) Average distribution ratio for	or the 5-year base period—divid				0.113301
3		undation has been in existence				0.029072
4	Enter the net value of nonc	haritable-use assets for 2018 f	rom Part X, line	5	. 4	135,418.
5	Multiply line 4 by line 3 .				5	3,937.
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		6	91.
7	Add lines 5 and 6				. 7	4,028.
8	Enter qualifying distribution	ns from Part XII, line 4			. 8	4,510.
	If line 8 is equal to or greate	er than line 7, check the box in	Part VI, line 1b,	and complete tha	at part using a	1% tax rate See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	structio	ns)			•
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Qate of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	9:	<u>l.</u>		7
	here ▶ 🗓 and enter 1% of Part I, line 27b			ļ		1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of					J
2	Part I, line 12, col (b).	_	0			
2 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2	3	9:	- 1		-
4	Add lines 1 and 2	4	<u>-ر</u>			-
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5	9:	1.		-
6	Credits/Payments:	- -		-		Ī
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) 6c			[
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here	8				_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	91	L.		_
10		10				
11		11				-
Part \				v T		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	l it	$\overline{}$	Yes	No X	-
	participate or intervene in any political campaign?		1a	-+		•
	instructions for the definition		1 _b		Х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	ale	10	, 		ì
	published or distributed by the foundation in connection with the activities	ais		•		
	Did the foundation file Form 1120-POL for this year?		1c		X	'
	(1) On the foundation. ▶\$ (2) On foundation managers ▶\$			İ		l
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	osed	1			1
	on foundation managers. ▶\$					
	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	•	2		Х	j
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		-	<u>. </u>		Ì
	of incorporation, or 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?	•	4a	-+	Х	-
	If "Yes," has it filed a tax return on Form 990-T for this year?	•	4b		X	•
	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . If "Yes," attach the statement required by $General Instruction T$.		3			İ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			.		
	By language in the governing instrument, or]]			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions t conflict with the state law remain in the governing instrument? 		6	${\mathbf{x}}$		į
	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	$\frac{x}{x}$		•
	Enter the states to which the foundation reports or with which it is registered. See instructions.	•	 '- 	^		i
	VA			1		l
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	neral	1			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	— ·		•
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)				_	İ
	or 4942(J)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV			_		•
	"Yes," complete Part XIV		9		Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	their				
	names and addresses		. 10		Х	

Parl	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		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website address ▶			
14	The books are in care of ▶ JOHN R HOGG Telephone no ▶ 757-5			_
	Located at ▶ 409 RIVER ROAD NEWPORT NEWS VA ZIP+4 ▶ 23601	-39	ΣŢ	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	•	. 1	▶ ∟
4.0	and enter the amount of tax-exempt interest received or accrued during the year	- 1	Yes	No
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	16	162	X
	over a bank, securities, or other financial account in a foreign country?	,		11
	name of the foreign country			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	,		
	the benefit or use of a disqualified person)?		,	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)		•	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	41	—	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		
	Organizations for a current notice regulating diseases. Economics of excessions		٠,,	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		X
•	were not corrected before the first day of the tax year beginning in 2018?	"		21
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		,,	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and		•	
•	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 20, 20, 20,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			ا،
_				
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	,		1
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018)	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			
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Х

5a			ich Form 4	· - • · · · ·				 /			
Ju	During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt to			(sectio	on 4945(e))	? .	Yes	X No		Yes	No
	(2) Influence the outcome of any specific public e directly or indirectly, any voter registration driv						☐ Yes	X No			
	(3) Provide a grant to an individual for travel, stud						Yes	X No] `		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions		able, etc., org	-			☐ Yes	X No			
	(5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelty to ch						☐ Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify	under the e	xceptio	ns descri	bed in			_
	Regulations section 53 4945 or in a current notice								5b		
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility.	founda	ition claim ex	emptio	n from the t		· ·	► □ No			
	If "Yes," attach the statement required by Regulat	ions se	ction 53.494	5–5(d).							
6a	Did the foundation, during the year, receive any formula on a personal benefit contract?						☐ Yes				
b	Did the foundation, during the year, pay premium if "Yes" to 6b, file Form 8870	s, dırec	tly or indirect	ly, on a	personal b	enefit (contract?	•	6b		X
7a b	At any time during the tax year, was the foundation a part of "Yes," did the foundation receive any proceeds						Yes nsaction?		7b		
8	Is the foundation subject to the section 4960 tax or remuneration or excess parachute payment(s) du	on payn	nent(s) of mo	re than	\$1,000,00	0 in 	Yes	⊠ No	,		
Part	VIII Information About Officers, Directo						lighly Pa	aid Em	ploye	es,	
	and Contractors										
_1	List all officers, directors, trustees, and found										
	(a) Name and address	hou devot	e, and average irs per week ted to position	` (If ı	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse aco	
OH	N R HOGG										
09	RIVER ROAD	TRUS	TEE 								
		TRUS	STEE								
	RIVER ROAD	TRUS	TEE								
	RIVER ROAD										
	RIVER ROAD					1—see			none,	ențer	
	Compensation of five highest-paid employees	(other		include average veek		_		ons). If	(e) Expe		count,
	Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,00	(other	(b) Title, and a hours per v	include average veek	ed on line	_	instructi (d) Contrib employee plans and	ons). If	(e) Expe	nse ac	count,
2	Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,00	(other	(b) Title, and a hours per v	include average veek	ed on line	_	instructi (d) Contrib employee plans and	ons). If	(e) Expe	nse ac	count,
2	Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,00	(other	(b) Title, and a hours per v	include average veek	ed on line	_	instructi (d) Contrib employee plans and	ons). If	(e) Expe	nse ac	count,
2	Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,00	(other	(b) Title, and a hours per v	include average veek	ed on line	_	instructi (d) Contrib employee plans and	ons). If	(e) Expe	nse ac	count,
2	Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,00	(other	(b) Title, and a hours per v	include average veek	ed on line	_	instructi (d) Contrib employee plans and	ons). If	(e) Expe	nse ac	count,

Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid En	ployees,
3 Five	highest-paid independent contractors for professional services. S	ee instructions. If none, enter "N	ONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total numb	er of others receiving over \$50,000 for professional services		
Part IX-A			
I dit ix-/	Summary of Direct Chartable Activities		
	ation's four largest direct charitable activities during the tax year. Include relevant statistical in and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1			
		<u> </u>	
2			
3		•••••	
		• • • • • • • • • • • • • • • • • • • •	
4			
•		•••••	
		•••••	
Part IX-E	Summary of Program-Related Investments (see instruction	ons)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1			
2			
All other pro	gram-related investments. See instructions		
3			
Total Add I	ines 1 through 3		I

Form 9	90-PF (2018) THE HOGG FOUNDATION	54-1	084092 _{Page} 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n found	dations,
	see instructions.)		•
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	122,008.
b	Average of monthly cash balances	1b	15,472.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	137,480.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	افتدا	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	137,480.
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	2,062.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	135,418.
6	Minimum investment return. Enter 5% of line 5	6	6,771.
<u>Part</u>		ions	
	and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	6,771.
2a	Tax on investment income for 2018 from Part VI, line 5	_ .	
b	Income tax for 2018 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	91. 6,680.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,680.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,680.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>Ine 1 </u>	7	6,680.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	4,510.
þ	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	4,510.
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. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,510.

ali	Undistributed Income (see instructions)	<u> </u>		,	
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
_	line 7	, t pm;	1 ,	<u> </u>	6,680.
2	Undistributed income, if any, as of the end of 2018			<u>-</u>	
a	Enter amount for 2017 only				
þ	Total for prior years. 20, 20, 20				<u> </u>
3	Excess distributions carryover, if any, to 2018.				
а	From 2013				
b	From 2014				
С	From 2014				
d	From 2016				
е	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII,				. ,
	line 4 ▶ \$ 4,510.			1	
а	Applied to 2017, but not more than line 2a				
b	Applied to undistributed income of prior years		<u></u>		
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
ď	Applied to 2018 distributable amount				4,510.
	Remaining amount distributed out of corpus				, , , , , , , , , , , , , , , , , , , ,
5	Excess distributions carryover applied to 2018				
_	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income. Subtract				
-	line 4b from line 2b				
^	Enter the amount of prior years' undistributed	- 		<u> </u>	
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
	· · · · · · · · · · · · · · · · · · ·				
q	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2017. Subtract line	j			
	4a from line 2a Taxable amount—see				
	instructions				
t	Undistributed income for 2018. Subtract lines				
	4d and 5 from line 1. This amount must be				2 170
_	distributed in 2019				2,170.
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 2013 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:		•	, ,	
а	Excess from 2014			tu.	
þ	Excess from 2014	. 17 7 71 11	1 11	'11	9-16
¢	Excess from 2016		•	1.1	
d	Excess from 2017	ĺ			
e	Excess from 2018				

Part	XIV Private Operating Foundation	<u>ons (s</u> ee instruc	tions and Part V	'II-A, question 9)		
1a	If the foundation has received a ruling	or determination I	etter that it is a pri	ivate operating		<u> </u>
	foundation, and the ruling is effective for	or 2018, enter the	date of the ruling	· >		
b	Check box to indicate whether the foundation	on is a private opera	ting foundation desc	cribed in section	4942(j)	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed	*				
b	85% of line 2a					
	Qualifying distributions from Part XII,					
•	fine 4 for each year listed					
ч	Amounts included in line 2c not used directly				/	
ű	for active conduct of exempt activities					
е	Qualifying distributions made directly					
·	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
2			 			
3	Complete 3a, b, or c for the alternative test relied upon:					}
_	"Assets" alternative test—enter					
a						-
	(1) Value of all assets		 	+		
	(2) Value of assets qualifying under section 4942(I)(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 (integest,					
	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		<u></u>	<u> </u>		
Part	XV Supplementary Information	າ (Complete thi	s part only if th	e foundation ha	d \$5,000 or moi	re in assets at
	any time during the year—	see instruction	s.)			
1	Information Regarding Foundation N	flanagers:				
а	List any managers of the foundation with					he foundation
	before the close of any tax year (but or	ily if they have co	ntributed more tha	an \$5,000). (See se	ction 507(d)(2).)	
_						
b	List any managers of the foundation wh	no own 10% or mo	ore of the stock of	a corporation (or a	n equally large po	rtion of the
	ownership of a partnership or other ent					
	·					
2	Information Regarding Contribution	Grant, Gift, Loa	n, Scholarship, e	tc., Programs:		
	Check here ▶ ☐ if the foundation or				izations and does	not accept
	unsolicited requests for funds. If the fou	undation makes g	fts, grants, etc., to	individuals or orga	anizations under of	ther
	conditions, complete items 2a, b, c, and					
	The name, address, and telephone nur	mber or email add	ress of the person	to whom application	ons should be add	ressed
u	The hame, address, and telephone har	inder or email add	reas of the person	r to writin application	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.00000
инот	N R HOGG 757-596-7451	409 RIVER	ROAD NEWPO	ORT NEWS VA	23601	
	The form in which applications should be					
ט	The form in which applications should t	oe submilled and	miormation and III	iateriais triey sillouit	. 11101UUC	
חד כו (ע	TTEN REQUEST					
						
	Any submission deadlines:					
NONE		a augh as hir as	groupical acces	haritable fields les	de of institutions	or other
a	Any restrictions or limitations on award	s, such as by geo	grapriicai areas, c	mantable lielus, Kini	นอ ()) การแนนเบาเรี, (A JUICI
°∕∖∖≀⊓	factors: TRIBUTIONS ARE MADE ON	.V ጥር ይሰንጣ	3 ODCANT7A	ייד וויי		
	RIOUILUMA ARR MAUR (JN)	ロエーエン つひろし	- OKCANIAH	7 T T O TA O		

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During		d for Fut	ure Payment	,
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	Contribution	
a Paid during the yearCOLLEGE CHARLESTON FDN66 GEORGE STREET			GENERAL FUND	250.
29424 SC CHARLESTON ABINGDON EPISCOPAL P O BOX 82			GENRAL FUND	1,900.
23183 VA WHITE MARSH COLONIAL WMSBG FDTN P O BOX 1776			GENERAL FUND	100.
23187 VA WILLIAMSBURG JAMESTOWN YORKTOWN FDN BOX 519			GENERAL FUND	150.
23690 VA YORKTOWN WATERMANS MUSEUM 100 MUSEUM DRIVE			GENERAL FUND	80.
23606 VA NEWPORT NEWS MARINERS MUSEUM 100 MUSEUM DRIVE			GENERAL FUND	1,000.
23606 VA NEWPORT NEWS VIMS FOUNDATION BOX 1693 23187 VA WILLIAMSBURG			GENERAL FUND	100.
ST ANDREWS EPISCOPAL 45 MAIN STREET			GENERAL FUND	930.
				2 4 510
Total	<u> </u>	· · · ·		3a 4,510.
b Approved for future payment				
	,	į		
		}		
·				
,				
Total		<u>.</u> .	<u> </u>	3b

Pa	rt XV	I-A Analysis of Income-Producing Ac	tivities				
		ss amounts unless otherwise indicated	1	usiness income	Excluded by sect	ion 512, 513, or 514	T
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Prog	ram service revenue		<u> </u>	ļ		(See instructions)
	a _		_		<u>-</u>		
						-	<u> </u>
	° –						
						<u>-</u>	ļ
	e _						ļ
	† -						
_	_	ees and contracts from government agencies		<u> </u>	 		
2		bership dues and assessments			·		
3		est on savings and temporary cash investments	-	 	14	2 021	
4 5			+:	regar to make		2,031.	r v
5		rental income or (loss) from real estate	•	'	•	-	
		Debt-financed property					
6		ental income or (loss) from personal property		<u> </u>	-		
7		r investment income					-
8		or (loss) from sales of assets other than inventory	· · · · · · · · · · · · · · · · · · ·	 	18	8,100.	
9		ncome or (loss) from special events			10	0,100.	
10		s profit or (loss) from sales of inventory .					
11		r revenue a		<u> </u>			
••	b						
	_						
	ď					-	
	e –						
12		otal. Add columns (b), (d), and (e)	•		٠,,	10,131.	
13	Tota	I. Add line 12, columns (b), (d), and (e)		·			10,131.
(Se		sheet in line 13 instructions to verify calculation					
Pa	rt XV	Relationship of Activities to the A	ccomplishme	ent of Exempt	Purposes		
	e No.	Explain below how each activity for which incom	ne is reported in c	column (e) of Part	XVI-A contributed	I importantly to the	•
	<u> </u>	accomplishment of the foundation's exempt purp	poses (other than	by providing fund	s for such purpos	ses) (See instructi	ons)
							_ <u></u>
				·····			
		<u> </u>					·
			·				
							
			<u> </u>				
							
			·				
							
							·
		-				-	-
						-	- -
				 			
				<u>-</u>			
							

Part	XVII	Information Exempt Org	Regarding Tra	nsfers to	and Transa	actions	and Relation	nships With	Noncharit	able	-	<u>-</u>
1	in se	he organization of ection 501(c) (other	directly or indirectly er than section 50						escribed		Yes	No
а	_	nizations?	porting foundation	to a nanah	aritabla ayar	ont organ	nization of:					1
a						-				1a(1)	—	X
	٠,,								• •	1a(1)		X
b		r transactions:							•	14(2)		
_			a noncharitable e	xempt orga	inization .					1b(1)		X
			ets from a nonchai							1b(2)		X
			, equipment, or oth		. •					1b(3)		Х
	(4) R	Reimbursement a	rrangements							1b(4)		Χ
	(5) L	oans or loan gua	rantees							1b(5)		X
			ervices or member		-					1b(6)		Χ
C			quipment, mailing						•	1c		X
d	value value	of the goods, other in any transaction	he above is "Yes," cer assets, or services or sharing arranger	s given by th ment, show i	e reporting for n column (d) t	undation. he value	If the foundation of the goods, o	on received less ther assets, or s	than fair mark ervices receiv	ed.		
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable ex	empt organizatio	on	(d) Description	of transfers, transa	ctions, and sha	ring arra	ngeme	nts
	+											
	-											
	-+									_		
	\rightarrow				•							
		· · · · · ·					.	····				
												
									_			
									<u></u>			
	_	·										
	_		·									
	desc	ribed in section 5	ctly or indirectly aff 601(c) (other than s following schedule	section 501	·			mpt organizatio	ons	Yes	ΧN	-
<u> </u>		(a) Name of organ		<u> </u>	(b) Type of orga	anization	T	(c) Desc	ription of relation	ship		
		<u> </u>			· · · · · ·	-			<u> </u>	<u> </u>		
	·											
Sign	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\							discuss to	wn beloy	<u>v?</u>		
Here	Sign	Signature of officer or trustee () Date Title						 See instruct 	ons]	< Yes [No	
Paid	ــــــــــــــــــــــــــــــــــــــ	Print/Type preparer's TAMMY HAY	s name		r's signature	1.0	Day 03	/ / 0		TIN 2010	586	 45
Prepa		Firm's name ► HAYES ACCOUNTING INC Firm's EIN ► 54-19							9836	579		
Use O	nly	Firm's address > 12388 WARWICK BLVD SUITE 208 Phone no 757)4		

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Employer identification number

THE HOGG FOUNDATION 54-1084092							
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						
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						
	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See						
General Rule							
or more (in money or pr	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	•						
regulations under section 13, 16a, or 16b, and the	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.						
contributor, during the y	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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III						
contributor, during the y contributions totaled mo during the year for an e General Rule applies to	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the orthis organization because it received nonexclusively religious, charitable, etc., contributions aduring the year						
	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, t 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Foreign State or Province

.......

Foreign Country

Name of organization

Employer identification number

THE HOGG FOUNDATION 54-1084092 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 ___1 JOHN R HOGG Person 409 RIVER ROAD **Payroll** NEWPORT NEWS VA 23601-\$ 9,300. Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (c) (d) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Pavroll Noncash Foreign State or Province (Complete Part II for Foreign Country. noncash contributions) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for Foreign State or Province Foreign Country noncash contributions) (c) (d) (a) (b) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash Foreign State or Province (Complete Part II for noncash contributions) Foreign Country (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person

noncash contributions)

Payroll

Noncash

(Complete Part II for

Name of organization
THE HOGG FOUNDATION

Employer identification number

54-1084092 Part 1 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) 500 SHARES WELLS FARGO COMMON STOCK FUND 1 \$ 9,300. 12/31/2018 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) -----(a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received (See instructions) Part I (c) (a) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I (c) (a) No. (b) (d) FMV (or estimate) from **Date received** Description of noncash property given (See instructions) Part I