FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																		
1. Name and Address of Reporting Person * Schugart Sherri W					2. Issuer Name and Ticker or Trading Symbol HMS INCOME FUND, INC. [NONE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 2800 POST OAK BLVD., SUITE 5000					3. Date of Earliest Transaction (Month/Day/Year) 10/16/2014								X Officer (give title below) Other (specify below) Chairman, CEO and President							
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
HOUST	ON, TX 77	7056														od by More than	One Reporting	Cison		
(City)	(State)		(Zip)			T	able I	- Non	-De	erivative :	Secu	rities A	Acqui	red, Disp	osed of, or I	Beneficially	Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		Execu any	Deemed ution Date, if	Code (Instr. 8)			1 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of Form:		eneficial			
					(Month/Day/Year		ear)	Code		V	Amour	nt	(A) or (D)	Price		str. 3 and 4)			irect (D) Owne Indirect (Instr) nstr. 4)	
Common \$0.001 pc	Stock, pa er share	r value	10/16	5/2014				P			11,111	.11	A	\$ 9	11,111	.11		D		
				Table II -					quire	con the d, I	itained i form dis	n th spla of, o	is forr ys a c r Bene	n are urren ficial	not requ ntly valid		ormation spond unle rol numbe	ss	EC 14	74 (9-02)
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execu y/Year) any	any	ate, if	4. Transaction Code (Instr. 8)				and	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Undo Secu	tle and bunt of erlying trities r. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form Deriv Secur Direct or Ind	vative rity: et (D) direct	Beneficia Ownershi (Instr. 4)	
						Code	V	(A)	(D)	Dat Exc	te ercisable	Exp Date	iration e	Title	Amount or Number of Shares					

Reporting Owners

D 4 0 V /	Relationships							
Reporting Owner Name / Address	Director 10% Owner Office		Officer	Other				
Schugart Sherri W 2800 POST OAK BLVD. SUITE 5000 HOUSTON, TX 77056	X		Chairman, CEO and President					

Signatures

/s/ Sherri W. Schugart	10/17/2014
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.