AMEN	DED RETU	IRN	- SECTION	512(a	a)(7) REPEAL
	EXTENDED	то	NOVEMBER	15,	2019

Form 990-T	E	Exempt Organization Bus	ines	ss Income Ta	ax Return	$U \vdash$	OMB No 1545-0687
		(and proxy tax und	er se	ction 6033(e))	IVI		0040
	For ca	lendar year 2018 or other tax year beginning		, and ending	<u> </u>	_	2018
Department of the Treasury Internal Revenue Service	•	► Go to www.irs.gov/Form990T for in Do not enter SSN numbers on this form as it may				0.50	open to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if name c	hanged	and see instructions.)			yer identification number yees' trust, see tions)
B Exempt under section	Print	CONRAD N. HILTON FOUNDATION				9	4-3100217
X 501(c)(3)	or	Number, street, and room or suite no. If a P.O. box	k, see in	structions.			ted business activity code structions)
408(e)220(e)	Туре	30440 AGOURA ROAD		<u></u>		,	•
408A 530(a)		City or town, state or province, country, and ZIP of AGOURA HILLS, CA 91301	r foreigr	n postal code		523000	0
C Book value of all assets at end of year	•	F Group exemption number (See instructions.)	<u>▶</u>				
2,808,284	452.	G Check organization type ► X 501(c) corp	oration	501(c) trust	401(a)	trust	Other trust
	_	ition's unrelated trades or businesses.	2	Describe t	he only (or first) un	related	
trade or business here	INC	OME FROM PARTNERSHIP INVESTMENTS		If only one, o	complete Parts I-V.	If more t	than one,
describe the first in the b	lank spa	ice at the end of the previous sentence, complete Pa	rts I and	d II, complete a Schedule	M for each addition	al trade o)r
_business, then complete				-			
• • •	•	poration a subsidiary in an affiliated group or a parer	ıt-subsı	diary controlled group?	▶ {	Yes	X Noth
		tifying number of the parent corporation.				0001 0	124 2222 14 15 15 15 15 15 15 15 15 15 15 15 15 15
J The books are in care of		de or Business Income					351-3725
		de of Busiliess income	1	(A) Income	(B) Expenses	-	(C) Net
1a Gross receipts or sale		- Palanca	ا ہا]
b Less returns and allow2 Cost of goods sold (S		C Balance ►	1c 2				
3 Gross profit. Subtract			3			_	
4a Capital gain net incon		1 X	48	8,176,117.			8,176,117.
	•	Part II, line 17) (attach Form 4/97)	4b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		t	
c Capital loss deduction			4c				
•		ship or an S corporation (attach statement)	5	-2,303,122.	STMT 28		-2,303,122.
6 Rent income (Schedu		(4	6				
7 Unrelated debt-finance	•	ne (Schedule E)	7				
Interest, annuities, roy	alties, a	nd rents from a controlled organization (Schedule F)	8				
Investment income of	a section	on 501(c)(7), (9), or (17) organization (Schedule G)	9				· <u> </u>
Exploited exempt acti	vity inco	me (Schedule I)	10			•	•
Advertising income (8	Schedule	s J)	11				
Interest, annuities, roy Investment income of Exploited exempt acti Advertising income (See in: Total. Combine lines		•	12		<u></u>		
13 Total. Combine lines			13	5,872,995.			5,872,995.
. —		ot Taken Elsewhere (See instructions found to the contractions for the contractions must be directly connected to the contractions are contracted to the contractions of the contraction			naama \		
		<u> </u>	With ti	ne umeiated business		T T	· · · · · · · · · · · · · · · · · · ·
Compensation of offSalaries and wages	icers di	RECEIVED				14	
	1	~				15 16	
						17	
Bad debts 18 Interest (attach sche	dule) (d	S JUN 2 4 2020 O				18	
19 Taxes and licenses		nstructions)				19	379,929.
20 Charitable contributi	ons (Se	e instructions is Employed the sign of TATEMENT	31	SEE STATEMEN	T 29	20	541,415.
21 Depreciation (attach	Form 4:	002)		21			
		n Schedule A and elsewhere on return		22a		22b	
23 Depletion				<u> </u>		23	
24 Contributions to defi	erred co	mpensation plans				24	
25 Employee benefit pro	ograms					25	
26 Excess exempt expe	nses (So	chedule I)				26	
27 Excess readership of	osts (Sc	hedule J)		•		27	
28 Other deductions (at	tach scl	nedule)		SEE STATEMEN	T 30	28	77,917.
29 Total deductions. A	dd lines	14 through 28		`		29	999,261.
		ncome before net operating loss deduction. Subtrac				30	4,873,734.
	-	loss arising in tax years beginning on or after Janua	ry 1, 20	18 (see instructions)		31	
32 Unrelated business t	axable ı	ncome. Subtract line 31 from line 30			<u> </u>	32	4,873,734.



Form 990-T				94-310	0217	Page 2
Part II	Total Unrelated Business Taxable In-	come				
33	Total of unrelated business taxable income computed from	all unrelated trades or businesses	(see instructions)		33	4,873,734.
		*** *** *** *** *** ** ** ** ** ** ** *			34	
35	Deduction for net operating loss arising in tax years beginn	ng before January 1, 2018 (see in	istructions)	4	35	
36	Total of unrelated business taxable (ncome before specific i	leduction. Subtract line 35 from th	ne sum of			
	lines 33 and 34				36	4,873,734.
37	Specific deduction (Generally \$1,000, but see line 37 Instru	ctions for exceptions)		>=:	37	1,000.
	Unrelated business taxable income. Subtract line 37 from					•
*	enter the smaller of zero or line 36				38	4,872,734.
-	Tax Computation					
	Organizations Taxable as Corporations. Multiply line 38 b				39	1,023,274.
40	Trusta Taxabla at Trust Rotes. See instructions for tax cor				透 .	
	Tax rate schedule or Schedule D (Form 1041	} , , , ,.			40	
41	Proxy tax. See instructions	**************************************	, ++++++++++	.,	41	
42	Alternative minimum tax (trusts only)			· · · · · · · · · · · · · · · · · · ·	42	
43	Tax on Honcompliant Facility Income. See Instructions				48	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever	applies	*******************		44	1,023,274.
	Tax and Payments	 			BENE!	
	Foreign tax credit (corporations attach Form 1118; trusts a		F		183	
	Other credits (see Instructions)	*******************	45b		- 65,51	
C	General business credit. Attach Form 3800	,	45c	9,518	4성의	
đ	Credit for prior year minimum tax (attach Form 8801 or 88	27)	45d		4 1	
8	Total credits. Add lines 45a through 45d,	**** * **** ** ************************	,		450	9,518.
46	Subtract line 45e from line 44				46	1,013,756.
	Other taxes. Check if from: Form 4255 Form 8					4 412 856
48	Total lax. Add lines 46 and 47 (see instructions)			.,,	48	1,013,756.
	2018 net 965 tax liability pald from Form 965-A or Form 98		1 1		49	0.
	Payments: A 2017 overpayment credited to 2018			1 700 000	- 3	
p	2018 estimated tax payments	*** ***** ****** *** ******* * * * * * *	. 50b	1,700,000	H 2001	
6	Tax deposited with Form 8868		50e	900,000	40.8	
	Foreign organizations; Tax paid or withheld at source (see i				- `:	
	Backup withholding (see Instructions)				- 、	
	Credit for small employer health insurance premiums (atta		501			
g	Other credits, adjustments, and payments: Form 243 Form 4136 Other	Total	▶ 50g		5 5	
51	Total payments. Add lines 50a through 50g				51	2,600,000.
	Estimated lax penalty (see instructions). Check If Form 222					8,216.
	Tax due. If line 51 is less than the total of lines 48, 49, and					
	Overpayment, if line 51 is larger than the total of lines 48,					1,578,028.
	Enter the amount of line 54 you want; Credited to 2019 es	imated lax	569,719. Re	funded >	55	8,309.
	Statements Regarding Certain Activ				1	
	At any time during the 2018 calendar year, did the organiza				······································	Yes Ho
	over a financial account (bank, securities, or other) in a fore					7 7 19 3
	FINCEN Form 114, Report of Foreign Bank and Financial Ac	counts. If 'Yes," enter the name of	the foreign country			
	nere SEB STATEMENT 32					×
57	During the tax year, did the organization receive a distributi	on from, or was it the granter of, c	or transferor to, a fo	reign trust?		×
	f "Yes," see instructions for other forms the organization of				******	1 1
58	Enter the amount of tax-exempt interest received or accive	during the tax year >\$				
	Under penalties of perjury, I declare that I have examined this return correct, and complete Declaration of preparar (other than temparar	including ecoampanying schadules and	datalamenta, and to the	beat of my knowl	edge and bellet, it	is true,
Sign	The same and the same and the same and the same			700	May tha IRS discu	
Here		0/9/10 LFC)		ye brebare, syon	
	Signature of officer Di	ila / Thua			nstructions)? X	Yes No
	Print/Type preparer's name Prepar	er's signature	Date	Check	If PTIN	
Pald		. Another	3/24/2020	self- employed	1	
Prepa		me Jultan	012712020	·	P00941	
Use O				Firm's EIN	85-1	065772
	50 SOUTH SIXTH STREE]		
	Firm's address > NINNEAPOLIS, HM 5540	2	·-·	Phone no.	612-397-40	
523711 01-0	9 19				For	m 990-T (2018)

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inver	tory valuation	N/A					
1 Inventory at beginning of year	1		6 Inventory a	t end of year	,		6		
2 Purchases	2		7 Cost of goo	ds sold. Su	btract I	ine 6			
3 Cost of labor	3		from line 5	. Enter here a	and in F	Part I,			
4a Additional section 263A costs			line 2				7		
(attach schedule)	4a		8 Do the rule	s of section :	263A (\	with respect to		Yes	No
 Other costs (attach schedule) 	4b		property pr	oduced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5		the organiz						<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Pro	operty L	ease	d With Real Prop	perty) 	
1. Description of property									
(1)	<u></u>								
(2)									
(3)			·						
(4)						 		_	
		ed or accrued				3(a) Deductions directl	v conne	cted with the income in	n
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	a than	of rent for	and personal property (i personal property exceed t is based on profit or	or ir	99	columns 2(a) a	ind 2(b)	(attach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.	. . .			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Del	ot-Financed	Income (see	instructions)						
			2. Gross incom			 Deductions directly conto debt-finant 			
1. Description of debt-fi	nanced property		or allocable to financed pro		(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
(1)									
(2)		· <u>-</u>							
(3)									
(4)]						
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	e adjusted basis allocable to inced property h schedule)	6. Column 4 d by column			7. Gross income reportable (column 2 x column 6)		8. Allocable deduct (column 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)		_		%					
(3)				%			\bot		
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Totals				▶		ı	٥.		0.
Total dividends-received deductions	ncluded in columi	n 8							0.

Controlled Cryanizations Controlled Cryaniza	•			Exempt (Controlled O	ganızatı	ions	,				
2 3 4 5 6 6 6 6 6 6	Name of controlled organizat	ident	ification				yments made in		included in the controlling		6. Deductions directly connected with income in column 5	
23 33 40 30 40 30 40 30 40 40 40 40 40 40 40 40 40 40 40 40 40	(1)											
3) 4) onexempt Controlled Organizations 7, Tsadis Income 8, Net unrelated recomm (loss) (per individual) (pe				1	· · · · · · · · · · · · · · · · · · ·							
4) The controlled Organizations 7. Teutible income 8. Net whether ancome (local) (see mathematical in the controlled organizations (see mathematical in the controlled organizations) 1) Add columna 5 and 10 Enter have and on page 1, Part 1, Image 3, column (see mathematical in the controlled organization) (see instructions) 1. Description of mome 2. Amount of mome 2. Amount of mome (see instructions) 2. Amount of mome (see instructions) 4. Sentactions (see instructions) 5. Total documna 5 and 10 Enter have and on page 1, Part 1, Image 3, column (see instructions) 1. Description of working and mome (see instructions) 2. Gross (see instructions) 4. Neme and on page 1, Part 1, Image 3, column (see instructions) 4. Neme controlled Exempt Activity Income, Other Than Advertising Income (see instructions) 4. Neme controlled Exempt Activity Income, Other Than Advertising Income (see instructions) 5. Total documna 6 and 11 Enter have and on page 1, Part 1, Image 3, column (see instructions) 4. Neme controlled Exempt Activity Income, Other Than Advertising Income (see instructions) 5. Cross because of the controlled in the controlled in the control organization (see instructions) 4. Neme controlled in the controlled		····		<u> </u>			·					
7. Tauble income 8. Not unabled month (loss) (gee instructions) 9. Total of species a payments in the controlling organization's gross rooms (gee instructions) 10. Part of column (loss) (gee instructions) 11. Deductions delectify: (gee instructions) 12. Add columns 5 and 10 Enter have and on page 1, Part, line 6, column (l) (gee instructions) 1. Description of income 2. Amount of income (gee instructions) 2. Amount of income (gee instructions) 3. Description of income (gee instructions) 4. Description of example of income (gee instructions) 4. No income (gee) 4. No income (gee) 5. Total description of example of income exploited sciently income, come to make an one page 1, Part, line 8, column (l) (gee instructions) 4. No income (gee) 4. No income (gee) 5. Cough rooms (gee) 4. No income (gee) 5. Cough rooms (gee) 5. Expenses (gee) (gee) 5. Expenses (gee) (gee				 				_				
8, Net unrelated income (loss) (see mish uctoring) 9, Total of expended payments 10, Perf of column 8 has 1 bounded in the cording organization's grown receive in the cording organization's grown receive and the payments of the payments	***			l	;						_	
(see instructions) (see instructions) Add columns 5 and 10 Enter here and on page 1. Part I, the 8, column (A) (see instructions) 1. Description of income 2. Amount of income 2. Amount of income 2. Amount of income 3. Description of income 3. Description of income 4. Set inschedule 4. Set inschedule 5. That description of income (see instructions) 3. Description of income 4. Set inschedule 5. The set of income 6. Explorated Exempt Activity Income, Other Than Advertising Income (see instructions) 4. Set income Set of 12 2. Amount of income 6. Explorated Exempt Activity Income, Other Than Advertising Income (see instructions) 5. Cross income 6. Explorated Exempt Activity Income, Other Than Advertising Income (see instructions) 6. Explorated Exempt Activity Income, Other Than Advertising Income (see instructions) 7. Excess income Set of 12 8. Explorated Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of income income 9. Cross income i		T		T								
2 3 4	7. Taxable Income			9. Total		nents	in the controlli	ng organ	ization's			
2 3 4	(1)				•				. 1			
Add columns 5 and 10 Enter three and on page 1, Pert 1, Iree 8, column (8) 1. Description of Income 2. Amount of Income 3. Deschictions (see instructions) 1. Description of Income 2. Amount of Income 3. Deschictions (inter-in schedule) 4. Schedules (inter-in schedule) 5. Total description of Income 11) 22) 33												
Add columns 8 and 10 Enter here and on page 1, Pert 1, line 8, column (8) 1. Description of income 2. Amount of income 3. Deductions 1. Description of income 2. Amount of income 3. Deductions 4. Sat stacks and set of grant of grant page 1, Pert 1, line 9, column (8) 1. Description of income 2. Amount of income 3. Deductions 4. Sat stacks and set of grant page 1, Pert 1, line 9, column (8) 5. Total disc and set of grant page 1, Pert 1, line 9, column (8) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2. Cross of grant page 1, Pert 1, line 9, column (8) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2. Cross of grant page 1, Pert 1, line 9, column (8) 3. Expenses of grant page 1, Pert 1, line 9, column (8) 4. Not exam (8) 5. Grass income 8 6. Expenses and on page 1, Pert 1, line 9, column (8) 7. Excess are through 7 to grant page 1, Pert 1, line 9, column (9) 11) 22) 33. 4) 4. Not exam (8) 5. Grass income 8 6. Expenses and on page 1, Pert 1, line 9, column (9) 6. Expenses and on page 1, Pert 1, line 9, column (9) 7. Excess are through 7 to grant page 1, Pert 1, line 10, col (8) 8. Enter here and on page 1, Pert 1, line 9, column (9) 8. Enter here and on page 1, Pert 1, line 9, column (9) 9. Enter here and on page 1, Pert 1, line 9, column (9) 11) 22. Grass in grant page 1, Pert 1, line 9, column (9) 13. Expenses of grant page 1, Pert 1, line 10, col (8) 14. Add column 2 and on page 1, Pert 1, line 10, col (8) 15. Created the page 1, Pert 1, line 10, col (8) 16. Raddeship column 2 and page 1, Pert 1, line 10, col (8) 17. Excess are through 7 and page 1, Pert 1, line 10, col (8) 18. Pert 1, line 9, column 2 and page 1, Pert 1, line 10, col (8) 19. Pert 1, line 9, column 2 and page 1, Pert 1, line 10, col (8) 19. Pert 1, line 9, column 2 and page 1, Pert 1, line 10, col (8) 19. Pert 1, line 9, column 2 and page 1, Pert 1, line 10, col (8) 19. Pert 1, line 9, column				<u> </u>								
Add columns a and 10 Enter here and on page 1, line 8, column (A) In Description of income 1. Description of income 2. Amount of income 2. Amount of income 3. Description of income 4. Set-asides Gettler's exhactuals (attach schoolule) 5. Total description of income 10 20 31 41 Enter here and an page 1, Pert I, line 9, column (A) Pert I								- -			**	
totals Comparison of machine Comparison Comparison of machine Comparison Comparison of machine Comparison Comparison	4)			l								
Company Comp							Enter here and	on page	1, Part I,	Enter he	ere and on page 1, Part I,	
(see instructions) 1. Description of income 2. Amount of income 2. Amount of income 3. Description of executive commonded (eittech schedulis) (interfer schedulis) (interf	otals					•			0.		C	
1. Description of income 2. Amount of income 3. Description of income 4. Set-handes detective connected (ettach schedule) 1) 2) 3) 4) Enter here and on page 1, Pert I, Ime 6, column (A) Enter here and on page 1, Pert I, Ime 6, column (A) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 3. Expenses income from page 1, Pert I, Ime 6, column (A) 1. Description of exploited sciently connected with production income have been page 1, Pert I, Ime 6, column (B) 1. Description of exploited sciently connected with production income from exploited sciently connected with production in make an one page 1, Pert I, Ime 6, column (B) 1. Description of exploited sciently connected with production income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business income from exploited sciently plate is not urrelated business in the plate is not urrelated business. 2. C			Section	501(c)(7	7), (9), or (⁻	17) Org	ganization					
1) 2) 3) 4)		,		,	2. Amount of	ıncome	directly conne	cted			5. Total deductions and set-asides (col 3 plus col 4)	
2) 33 4) Enter here and on page 1, Part I, line 9, column (a) Part I, line 9, column (b)	(1)					,		-				
Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity income from Pade or business indicated business											1	
Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity incomes in the property of urrelated business income from trade or business inc												
otals Enter here and on page 1 Part I, line 9, column (A)					.							
Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2. Gross unrelated business income from trade or business income to the page 1, Part 1, Ine 10, cot (A) Enter here and on page 1, Part 1, Ine 10, cot (A) Income From Periodicals Reported on a Consolidated Basis 1. Name of pariodical 2. Gross aurrelated business income to the page 1, Part 1, Ine 10, cot (A) Enter here and on page 1, Part 1, Ine 10, cot (A) Income From Periodicals Reported on a Consolidated Basis 2. Gross advertising costs advertising costs advertising costs for column 5 but than c						lumn (A)					Enter here and on page Part I, line 9, column (B)	
1. Description of exploited activity 2. Gross urrelated business income from trade or business income from activity that is not urrelated business. 1. Name of particular and on page 1, Part 1, line 10, col (B) 1. Name of particular and on page 1, Part 1, line 10, col (B) 2. Gross advertising costs 3. Direct advertising gain or (loss) (col 2 minus of page 1, Part 1, line 10, col (B) 3. Direct advertising gain or (loss) (col 2 minus of page 1, Part 1, line 10, col (B) 4. Advertising gain or (loss) (col 2 minus of page 1, Part 1, line 10, col (B) 3. Direct advertising gain or (loss) (col 2 minus of page 1, Part 1, line 10, col (B) 4. Advertising gain or (loss) (col 2 minus of page 1, Part 1, line 10, col (B) 5. Croulation 6. Readership costs ocities of the page 1, Part 1, line 10, col (B) 7. Excess and the page 1, Part 1, line 10, col (B) 1. Name of pariodical activity that is not urrelated business (column 5 the page 1, Part 1, line 10, col (B) 9. Croulation 1, page 1, Part 1, line 10, col (B) 9. Croulation 1, page 1, Part 1, line 10, col (B) 1. Name of pariodic	Schedule I - Exploited	-	y Incom	e, Other	Than Adv		ng Income	3 83 k 7 m.	7, mc 3500 8 12 1	<u> </u>	<u>दा</u>	
(1) (2) (3) (4) Enter here and on page 1, Part 1, line 10, col (A) Inne 10, col (A) 1. Name of periodical 2. Gross advertising income 2. Gross advertising income 1. Name of periodical 2. Gross advertising income 3. Direct advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7 (1) (2) (3) (4)	1. Description of	2. Gross unrelated business income from	directly with p of u	connected roduction nrelated	from unrelated business (co minus columi gain, compute	trade or lumn 2 n 3) If a n cols 5	from activity t is not unrelat	hat ed	attributi	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(4) Enter here and on page 1, Part 1, line 10, col (A) O. O. O. Schedule J - Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising income advertising costs advertising costs advertising costs (advertising costs) 3. Direct advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7 (1) (2) (3) (4)	(1)		1		<u> </u>							
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Enter here and on page 1, Part I, line 10, col (A) Description Desc		 	+				· · · · · · · · · · · · · · · · · · ·					
Enter here and on page 1, Part I, line 10, cot (A) line 10, cot (B) line 10, cot (B)			 									
Schedule J - Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising income 3. Direct advertising costs oil 3 if a gain, compute cols 5 through 7 (1) (2) (3) (4)	-	page 1, Part I, line 10, col (A)	page line 1	1, Part I, 0, col (B)	SAPP I						Enter here and on page 1, Part II, line 26	
Part I Income From Periodicals Reported on a Consolidated Basis 2. Gross advertising income 3. Direct advertising costs or (loss) (col 2 minus or (loss) (col 2 minus or (loss) (col 3) if a gain, compute cols 5 through 7 (1) (2) (3) (4)						Eur Bur	EST PROPERTY 1	More	A. Sala Barri	22.00 m		
1. Name of periodical 2. Gross advertising income 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 (1) (2) (3) (4)												
1. Name of periodical advertising income advertising costs advertising costs (column 6 column 6 costs) (col 2 minus col 3) If a gain, compute costs 5 through 7 (1) (2) (3) (4)	<u> Pärt []</u> Income From [Periodicals Re _l	oorted o	on a Cons	solidated	Basis						
(2) (3) (4)	1. Name of periodical	advertising	. 1		or (loss) (co	ol 2 minus iin, compu					7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(2) (3) (4)	· /1\				187.5°4 288		\$					
(3)							Ş: 					
(4)							%					
							*			[
	(4)						<u> </u>					
otais (carry to Part II. line (5))	otals (carry to Part II, line (5))		0.		,		,					

Form 990-T (2018) CONRAD N. HILTON FOUNDATION 94-3100217 Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advartising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	0.

Form 990-T (2018)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

ENTITY	1
OMB No	1545-0687

Department of the Treasury Internal Revenue Service (99) For calendar year 2018 or other tax year beginning , and ending

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

Name	of the organization CONRAD N. HILTON FOUNDATION			Employer identif		umber
	nrelated business activity code (see instructions) > 722514		-		-	
	escribe the unrelated trade or business CAFETERIA SALI	ES				
Par			(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sales 34,469.	ĺ				
b	Less returns and allowances c Balance ▶	1c	34,469.			
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3	34,469.			34,469.
4 a	Capital gain net income (attach Schedule D)	4a		· · · · · · · · · · · · · · · · · · ·		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5				
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	interest, annuities, royalties, and rents from a controlled		1			
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9			ļ	
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12		· · · · · · · · · · · · · · · · · · ·		•
13	Total. Combine lines 3 through 12	13	34,469.			34,469.
Par	deductions must be directly connected with the u			.)		ontributions,
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salanes and wages				15	60,650.
16	Repairs and maintenance			<u> </u>	16	60,630.
17	Bad debts			_	17	
18	Interest (attach schedule) (see instructions)			<u> </u>	18	2 157
19	Taxes and licenses			_	19	3,157.
20	Charitable contributions (See instructions for limitation rules)		1 (<u> </u>	20	0.
21	Depreciation (attach Form 4562)		21		 -	
22	Less depreciation claimed on Schedule A and elsewhere on return		22a		22b	
23	Depletion				23	
24	Contributions to deferred compensation plans			1	24	

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 31 from line 30

Schedule M (Form 990-T) 2018

38,251.

102,058.

-67,589.

-67,589.

25

26

27

28

29

30

31

32

SEE STATEMENT 33

instructions)

25

26

27

28

29

Employee benefit programs

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 28

Other deductions (attach schedule)

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

_			
ч	ac	IP.	ì

CONRAD N. HI	LTON FOUNDAT	ION			94-310021	1 age 1
Schedule A - Cost of Good	ds Sold. Enter	method of inve	ntory valuation N/A			
1 Inventory at beginning of year	1		6 Inventory at end of ye	ear		6
2 Purchases	_2		7 Cost of goods sold.	Subtract	line 6	
3 Cost of labor	3		from line 5. Enter her	e and in	Part I,	
4a Additional section 263A costs			line 2		L	7
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or	acquired	d for resale) apply to	
5 Total. Add lines 1 through 4b	5		the organization?			Х
Schedule C - Rent Income	(From Real	Property and	d Personal Property	Lease	d With Real Prope	erty)
(see instructions)	.		**			
Description of property						
(1)						<u>.</u>
(2)					-	
(4)	<u> </u>					
		red or accrued			3/a \ Deductions directly c	onnected with the income in
(a) From personal property (if the property is more than 50% but not more than 50%	re than	(b) From real of rent for the re	and personal property (if the percen personal property exceeds 50% or it ent is based on profit or income)	tege f	columns 2(a) and	2(b) (attach schedule)
(1)						
(2)						
(3)			·			
(4)		<u> </u>				
Total	0.	Total		0.		
(c) Total income. Add totals of column		nter		_	(b) Total deductions. Enter here and on page 1,	
here and on page 1, Part I, line 6, column Schedule E - Unrelated De		Income (as		0.	Part I, line 6, column (B)	0.
Schedule E - Officialed De	:Dt-Fillaliced	income (see	e instructions)	1	3. Deductions directly conne	acted with or allocable
			2. Gross income from		to debt-finance	
1. Description of debt-	-financed property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)		,			4	
(2)	-				·	
(3)						
(4)						
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fine	e adjusted basis allocable to anced property th schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8, Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)	1		%	1		
(2)			%			
(3)		· · ·	%			
(4)			%			
					Enter here and on page 1,	Enter here and on page 1,
					Part I, line 7, column (A).	Part I, line 7, column (B)
Totals			•	-	0.	0.
Total dividends-received deductions	included in colum	n 8			_	0.

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No 1545-0123

CONRAD N. HILTON FOUNDATION

Employer identification number

94-3100217

				94-	3100217
Part I Short-Term Capital Gai	ins and Losses (See	instructions.)		_	· · · · · · · · · · · · · · · · · · ·
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gai or loss from Form(s) 894	n 9.	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (g) '	combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis					
was reported to the IRS and for which you					
have no adjustments (see instructions). However, if you choose to report all these					
transactions on Form 8949, leave this line blank and go to line 1b					_
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
Totals for all transactions reported on					
Form(s) 8949 with Box C checked	<u></u>			,	201,017.
4 Short-term capital gain from installment sales		7		4_	<u>-</u>
5 Short-term capital gain or (loss) from like-kind	•			_ 5	ļ
6 Unused capital loss carryover (attach compute				6	201,017.
7 Net short-term capital gain or (loss). Combin				7	201,017.
Part II Long-Term Capital Gai	ns and Losses (See	instructions)			T
to enter on the lines below.	(d)	(e) Cost	(g) Adjustments to gail or loss from Form(s) 894	n	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (salas price)	(or other basis)	Part II, line 2, column (9)	combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
			1		
Form(s) 8949 with Box E checked	_		<u> </u>		
Form(s) 8949 with Box E checked 10 Totals for all transactions reported on			<u> </u>		
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				I	
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9				11	1,055,931. 6,919,169.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales	·	17		12	
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9	·	7		12 13	
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions	d exchanges from Form 8824			12 13 14	6,919,169.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combini	d exchanges from Form 8824 e lines 8a through 14 in colum			12 13	6,919,169.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combinity Part III Summary of Parts I and	d exchanges from Form 8824 e lines 8a through 14 in colun d II	nn h		12 13 14	
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combinity Part III Summary of Parts I and 16 Enter excess of net short-term capital gain (liii)	d exchanges from Form 8824 e lines 8a through 14 in colun d II ne 7) over net long-term capit	al loss (line 15)	e 7)	12 13 14 15	6,919,169. 7,975,100.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-kin 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combini Part III Summary of Parts I and	d exchanges from Form 8824 e lines 8a through 14 in colun d II ne 7) over net long-term capit n capital gain (line 15) over ne	an h al loss (line 15) et short-term capital loss (lin	e 7)	12 13 14 15	7,975,100.

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2018

JWA

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No 1545-0074

Name(s) shown on return

Social security number or taxpayer identification no.

CONRAD N. HILTON FOUR	NDATION					94-3:	100217
Before you check Box A, B, or C bel statement will have the same inform broker and may even tell you which	atıon as Form 109	you received any 99-B Either will s	/ Form(s) 1099-B o show whether you	or substitute statem r basis (usually you	nent(s) from r cost) was	your broker A su reported to the IF	bstitute IS by your
Part I Short-Term. Transact	ions involving capit	al assets you held	1 year or less are ge	nerally short-term (see	instructions	s) For long-term	
transactions, see page 2 Note: You may aggregate al codes are required. Enter the	ll short-term transac	tions reported on F	Form(s) 1099-B show	ving basis was reporte	d to the IRS	and for which no ad	ljustments or ctions)
You must check Box A, B, or C below.	Check only one bo	X. If more than one b	ox applies for your shor	t-term transactions, comp	lete a separat	Form 8949, page 1, for	each applicable box.
If you have more short-term transactions than wi							
(B) Short-term transactions re	•	•	-		Hote abo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
— ` '	•		_	sported to the mo			
(0) 0				10)	Adjustmen	t, if any, to gain or	(h)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other	loss. If yo	où enter an amount	Gain or (loss).
(Example 100 sh XYZ Co)	(Mo, day, yr)	disposed of	(sales price)	basis See the		(g), enter a code in . See instructions.	Subtract column (e)
(Example 100 31 X12 00)	(1110, 00, 11)	(Mo , day, yr)		Note below and	(f)	(g)	from column (d) &
		, , ,, ,,		the instructions	Code(s)	Amount of	combine the result with column (g)
				the instructions		adjustment	With Column (g)
SHORT TERM GAINS FROM	ļ			 -			201 017
PARTNERSHIPS	VARIOUS	VARIOUS					201,017.
						·····	<u>.</u>
	· · · · · · · · · · · · · · · · · · ·						
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	}						
			·				
2 Totals. Add the amounts in colu	mns (d), (e), (a), a	nd (h) (subtract			ľ		
negative amounts) Enter each to			İ	1			
Schedule D, line 1b (if Box A ab		-					1
above is checked), or line 3 (if E						_	201,017.
							

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

above is checked), or line 10 (if Box F above is checked)

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

Form 3800

General Business Credit

2018

OMB No 1545-0895

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form3800 for instructions and the latest information.

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Attachment Sequence No 22

CONRAD N HILTON FOUNDATION

Identifying number

Part			100217	
	(See instructions and complete Part(s) III before Parts I and II.)	•		_
1	General business credit from line 2 of all Parts III with box A checked	1		
2	Passive activity credits from line 2 of all Parts III with box B checked 2			
3	Enter the applicable passive activity credits allowed for 2018 See instructions	3		
4	Carryforward of general business credit to 2018 Enter the amount from line 2 of Part III with box C checked See instructions for statement to attach	4		
5	Carryback of general business credit from 2019 Enter the amount from line 2 of Part III with box D checked See instructions	5		
6	Add lines 1, 3, 4, and 5	6	0	00
Part	II Allowable Credit		·	
7	Regular tax before credits			
	 Individuals Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44 Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the applicable line of your return 	7	1,023,274	
	Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return			
8	Alternative minimum tax			
	Individuals Enter the amount from Form 6251, line 11			
	Corporations Enter -0-	8		ļ
	Estates and trusts Enter the amount from Schedule I (Form 1041), line 56			1
9	Add lines 7 and 8	9	1,023,274	00
10a	Foreign tax credit 10a			
b	Certain allowable credits (see instructions)	1 _		
С	Add lines 10a and 10b	10c	0	00
11	Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16	11	1,023,274	
• • •	Net income tax. Subtract line 10c from line 9 if 2010, skip lines 12 through 15 and enter -0- of line 10		1,023,274	100
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0- 12 1,023,274 00			
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See Instructions			
14	Tentative minimum tax	1		
	• Individuals Enter the amount from Form 6251, line 9			
	• Corporations Enter -0-			
	• Estates and trusts Enter the amount from Schedule I	,		
15	(Form 1041), line 54 Enter the greater of line 13 or line 14	15	249,569	
16	Subtract line 15 from line 11 If zero or less, enter -0-	16	773,705	
	Enter the smaller of line 6 or line 16	17	113,103	00
17	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization	1/		
		1	- 2000	

Part				
lote:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and e	nter -	0- on line 26	Ι
18	Multiply line 14 by 75% (0 75) See instructions	18		
19	Enter the greater of line 13 or line 18	19		
20	Subtract line 19 from line 11 If zero or less, enter -0-	20	_	
21	Subtract line 17 from line 20 If zero or less, enter -0-	21		
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22		
23	Passive activity credit from line 3 of all Parts III with box B checked 23			
24	Enter the applicable passive activity credit allowed for 2018 See instructions	24	-	
25	Add lines 22 and 24	25		
26	Empowerment zone and renewal community employment credit allowed Enter the smaller of line 21 or line 25	26	0	00
27	Subtract line 13 from line 11 If zero or less, enter -0-	27	773,705	00
28	Add lines 17 and 26	28	0	00_
29	Subtract line 28 from line 27 If zero or less, enter -0-	29	773,705	00_
30	Enter the general business credit from line 5 of all Parts III with box A checked	30		
31	Reserved .	31		
32	Passive activity credits from line 5 of all Parts III with box B checked 32 9,518			
33	Enter the applicable passive activity credits allowed for 2018 See instructions	33	9,518	
34	Carryforward of business credit to 2018 Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34		
35	Carryback of business credit from 2019 Enter the amount from line 5 of Part III with box D checked See instructions .	35		
36	Add lines 30, 33, 34, and 35	36_	9,518	00
37	Enter the smaller of line 29 or line 36	37	9,518	00
38	Credit allowed for the current year. Add lines 28 and 37 Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return Individuals Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51 Corporations Form 1120, Schedule J, Part I, line 5c Estates and trusts Form 1041, Schedule G, line 2b	38	9,518	00

orm 3800	(2018)				ı	Page 3
lame(s) sl	nown on return		lo	dentifyi	ing number	
CONRAI	N. HILTON FOUNDATION		وا	4-31	.00217	
Part III		ınst				
	te a separate Part III for each box checked below. See instructions					
•	General Business Credit From a Non-Passive Activity E Reserved					
_	General Business Credit From a Passive Activity F Reserved					
	General Business Credit Carryforwards G 🔲 Eligible Small	Busin	ess Credit Ca	arryfo	rwards	
	General Business Credit Carrybacks H 🔲 Reserved			•		
	u are filing more than one Part III with box A or B checked, complete and attach firs	t an a	additional Part	III co	mbining amounts f	from
	arts III with box A or B checked Check here if this is the consolidated Part III					<u> X</u>
	(a) Description of credit		(b)		(c)	
	any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the from a pass-thi entity, enter th	rough	Enter the appropr amount	ate
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				
b	Reserved	1b				
С	Increasing research activities (Form 6765)	1c				
d	Low-income housing (Form 8586, Part I only)	1d				
е	Disabled access (Form 8826) (see instructions for limitation)	1e		Ī		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
g	Indian employment (Form 8845)	1g				
h	Orphan drug (Form 8820)	1h				
i	New markets (Form 8874)	1i				
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				
k	Employer-provided child care facilities and services (Form 8882) (see					
	instructions for limitation)	1k			 .=	
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11				<u></u>
m	Low sulfur diesel fuel production (Form 8896)	1m				ļ
n	Distilled spirits (Form 8906)	1n				<u> </u>
0	Nonconventional source fuel (carryforward only)	10				
р	Energy efficient home (Form 8908)	1p				<u> </u>
q	Energy efficient appliance (carryforward only)	1q		\longrightarrow		<u> </u>
r	Alternative motor vehicle (Form 8910)	1r				
S	Alternative fuel vehicle refueling property (Form 8911)	1s_			·	
t	Enhanced oil recovery credit (Form 8830)	1t			· · · · · · · · · · · · · · · · · · ·	
u	Mine rescue team training (Form 8923)	1u 1v				├─
V	Agricultural chemicals security (carryforward only)	1w				_
W	Employer differential wage payments (Form 8932) Carbon oxide sequestration (Form 8933)	1x				_
X	Qualified plug-in electric drive motor vehicle (Form 8936)	1 <u>y</u>			····	_
y z	Qualified plug-in electric whicle (carryforward only)	1z			-	
aa	Employee retention (Form 5884-A)	1aa				
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain					
	other credits (see instructions)	1zz				
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0	00
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			139	_
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				
b	Work opportunity (Form 5884)	4b			10	
C	Biofuel producer (Form 6478)	4c				
d	Low-income housing (Form 8586, Part II)	4d				
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				
	Qualified railroad track maintenance (Form 8900)	40				I

8,244

1,125

9,379 00

Small employer health insurance premiums (Form 8941)

Employer credit for paid family and medical leave (Form 8994)

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

Increasing research activities (Form 6765)

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Other

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For	m 380	0 (2018)					Page 3
Naı	me(s) s	hown on return		10	dentıfyi	ng number	
_		O N. HILTON FOUNDATION			4-31	00217	
	art II		<u>ınst</u>	ructions)			
		te a separate Part III for each box checked below. See instructions					
Α		General Business Credit From a Non-Passive Activity E Reserved					
В		General Business Credit From a Passive Activity F Reserved			_		
		General Business Credit Carryforwards G 🔲 Eligible Small I	Busin	ess Credit Ca	arryfo	rwards	
D		General Business Credit Carrybacks H Reserved					
ı		u are filing more than one Part III with box A or B checked, complete and attach firs	t an a	idditional Part	t III co		
	all P	arts III with box A or B checked Check here if this is the consolidated Part III			Т		<u> </u>
		(a) Description of credit		(b) If claiming the	credit	(c) Enter the appropri	nate
		n any line where the credit is from more than one source, a separate Part III is needed for e	ach	from a pass-th entity, enter th	rough	amount	
_	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	entity, enter th	ie Cilv		
	b	Reserved	1b				\vdash
	C	Increasing research activities (Form 6765)	1c		+	***	
	d	Low-income housing (Form 8586, Part I only)	1d				
	e	Disabled access (Form 8826) (see instructions for limitation)	1e	_			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
	g	Indian employment (Form 8845)	1g				
	h	Orphan drug (Form 8820)	1h				
	i	New markets (Form 8874)	1i				
	i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>				
	k	Employer-provided child care facilities and services (Form 8882) (see		-			
		instructions for limitation)	1k		1		
	I	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m				
	n	Distilled spirits (Form 8906)	1n				
	0	Nonconventional source fuel (carryforward only) .	10				<u> </u>
	р	Energy efficient home (Form 8908)	1р				<u> </u>
	q	Energy efficient appliance (carryforward only)	1q				<u> </u>
	r	Alternative motor vehicle (Form 8910)	1r				
	s	Alternative fuel vehicle refueling property (Form 8911) .	1s				<u> </u>
	t	Enhanced oil recovery credit (Form 8830)	1t				
	u	Mine rescue team training (Form 8923)	1u				
	V	Agricultural chemicals security (carryforward only)	1v				
	W	Employer differential wage payments (Form 8932)	1w				₩
	X	Carbon oxide sequestration (Form 8933)	1x				
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
	z	Qualified plug-in electric vehicle (carryforward only) Employee retention (Form 5884-A)	1z 1aa				
	aa bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
		Other Oil and gas production from marginal wells (Form 8904) and certain	100				
	ZZ	other oil and gas production from marginal wells (rothl 6904) and certain other credits (see instructions)	1zz				
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0	00
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			<u></u>	1
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				
	b	Work opportunity (Form 5884)	4b				
	c	Biofuel producer (Form 6478)	4c				T
	d	Low-income housing (Form 8586, Part II)	4d				
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				
	g	Qualified railroad track maintenance (Form 8900)	4g				
	h	Small employer health insurance premiums (Form 8941)	4h				
	i	Increasing research activities (Form 6765)	4i				
	j	Employer credit for paid family and medical leave (Form 8994)	4j				$oxedsymbol{oxed}$
	Z	Other	4z	51-06057	79	350	
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5				00
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			350	00

		0 (2018)				Page 3
Nar	me(s) si	hown on return			fying number	
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	art III		e inst	ructions)		
	-	te a separate Part III for each box checked below. See instructions				
		General Business Credit From a Non-Passive Activity E Reserved				
		General Business Credit From a Passive Activity F Reserved	_			
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		General Business Credit Carrybacks H Reserved				_
l		u are filing more than one Part III with box A or B checked, complete and attach firs arts III with box A or B checked. Check here if this is the consolidated Part III.	st an a	additional Part III o	combining amounts	from ▶ □
		(a) Description of credit		(b)	(c)	
		any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the cred from a pass-throug entity, enter the Ell	h amount	riațe
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			
	b	Reserved	1b			
	С	Increasing research activities (Form 6765)	1c			
	d	Low-income housing (Form 8586, Part I only)	1d			
	е	Disabled access (Form 8826) (see instructions for limitation)	1e			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
	g	Indian employment (Form 8845)	1g			
	h	Orphan drug (Form 8820)	1h			
٠	٠i	New markets (Form 8874)	1i			
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j	-		1
	k	Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k			
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11			1
	m	Low sulfur diesel fuel production (Form 8896)	1m			† · · · –
	n	Distilled spirits (Form 8906)	1n			
	0	Nonconventional source fuel (carryforward only)	10			†
	р	Energy efficient home (Form 8908)	1p			1
	•	Energy efficient appliance (carryforward only)	1q			†
	q	Alternative motor vehicle (Form 8910)	1r		+	╁
	r	Alternative fuel vehicle refueling property (Form 8911)	1s			+
	s t	Enhanced oil recovery credit (Form 8830)	1t		-	+
		Mine rescue team training (Form 8923)	1u		-	+
	u		10			+
	٧	Agricultural chemicals security (carryforward only) Employer differential wage payments (Form 8932)	1w		 	+
	w	Carbon oxide sequestration (Form 8933)	1x		 	+
	X	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		 	+
	y -	Qualified plug-in electric drive motor vehicle (corryforward only)	1z			
	z	Employee retention (Form 5884-A)	1aa			+
	aa bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb	, , , , , , , , , , , , , , , , , , ,		+
			100		<u> </u>	+-
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz			1
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			00
	2	Enter the amount from Form 8844 here and on the applicable line of Part II	3		<u> </u>	100
	3	•	4a		 	+
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4b		 	+
	b	Work opportunity (Form 5884)	40 4c			+
	C	Biofuel producer (Form 6478)	4c 4d	 	 	+
	d	Low-income housing (Form 8586, Part II)	_		-	+
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			+
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		 	
	g	Qualified railroad track maintenance (Form 8900)	4g		 	+-
	h	Small employer health insurance premiums (Form 8941)	4h	26 2100220	1 057	,
	i	Increasing research activities (Form 6765)	4i	26-3180228	1,057	1

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4z 26-3180228

Employer credit for paid family and medical leave (Form 8994)

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

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Other

Na	me(s) sl	hown on return		Ti	dentify	ıng number		
CC	NRAI	O N. HILTON FOUNDATION		9	94-31	100217		
	art III		ınst	ructions)				
Cc	mplet	te a separate Part III for each box checked below. See instructions						
Α	\Box	General Business Credit From a Non-Passive Activity E Reserved						
		General Business Credit From a Passive Activity F Reserved						
		General Business Credit Carryforwards G	Busin	ess Credit C	arryfo	rwards		
		General Business Credit Carrybacks H Reserved			•			
		u are filing more than one Part III with box A or B checked, complete and attach firs	t an a	additional Par	t III co	mbining amounts	s fro	om
		arts III with box A or B checked Check here if this is the consolidated Part III				ŭ	\blacktriangleright	
		(a) Description of credit		(b)		(c)		
		any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the from a pass-th	nrough	Enter the appro	prıa	te
		ough entity	4 -	entity, enter th	ne EIN		_	
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				+	
	b	Reserved	1b	<u> </u>			+	
	C	Increasing research activities (Form 6765)	1c		-		+	
	d	Low-income housing (Form 8586, Part I only)	1d				+	
	e	Disabled access (Form 8826) (see instructions for limitation)	1e					
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				+	
	g	Indian employment (Form 8845)	1g				+	
	h	Orphan drug (Form 8820)	1h			<u> </u>	+	
	İ	New markets (Form 8874)	1i				+	
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				+	
	k	Employer-provided child care facilities and services (Form 8882) (see	۱,				-	
	_	instructions for limitation)	1k			*	+	
	ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11			*	+	
	m	Low sulfur diesel fuel production (Form 8896)	1m				+	
	n	Distilled spirits (Form 8906)	1n					
	0	Nonconventional source fuel (carryforward only)	10				+	
	р	Energy efficient home (Form 8908)	1p				-	
	q	Energy efficient appliance (carryforward only)	1q				+	
	r	Alternative motor vehicle (Form 8910)	1r				+	
	S	Alternative fuel vehicle refueling property (Form 8911)	1s				+	
	t	Enhanced oil recovery credit (Form 8830)	1t				+	
	u	Mine rescue team training (Form 8923)	1u	-		,	-	
	V	Agricultural chemicals security (carryforward only)	1v				-	
	W	Employer differential wage payments (Form 8932)	1w				+	
	X	Carbon oxide sequestration (Form 8933)	1x				+	
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				+	
	Z	Qualified plug-in electric vehicle (carryforward only)	1z				+	
	aa	Employee retention (Form 5884-A)	1aa				+	
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				+	
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain		1				
	_	other credits (see instructions)	1zz	ļ				
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	ļ			0 (00
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				+	
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a					
	b	Work opportunity (Form 5884)	4b				+	
	С	Biofuel producer (Form 6478)	4c			_	+	
	d	Low-income housing (Form 8586, Part II)	4d				+	
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	ļ			+	
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				+	
	g	Qualified railroad track maintenance (Form 8900)	4g				+	
	h	Small employer health insurance premiums (Form 8941)	4h	1.5 1.50			\perp	
	i	Increasing research activities (Form 6765)	4i	16-17200	129		3	
	j	Employer credit for paid family and medical leave (Form 8994)	4j				+	
	Z	Other	4z				_	
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5				_	00
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	1			310	00

Naı	me(s) sl	nown on return			Identify	ing number		
CC	NRAI	N. HILTON FOUNDATION			94-33	100217		
P	art III	General Business Credits or Eligible Small Business Credits (see	ınst	ructions)				
Сс	mplet	te a separate Part III for each box checked below. See instructions						
Α		General Business Credit From a Non-Passive Activity E Reserved						
В	X	General Business Credit From a Passive Activity F 🔲 Reserved						
С		General Business Credit Carryforwards G	Busin	ess Credit (Carryfo	rwards		
		General Business Credit Carrybacks H Reserved						
ı		are filing more than one Part III with box A or B checked, complete and attach firs	t an a	idditional Pa	ırt III co	mbining amounts	fror	n
		arts III with box A or B checked. Check here if this is the consolidated Part III				-	▶ [
		(a) Description of credit		(b)		(c)		
No	ıte∙ On	any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the from a pass-1	e credit	Enter the approp	riate	3
pa	ss-thro	pugh entity		entity, enter	the EIN	amount		
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			_		
	b	Reserved	1b					
	С	Increasing research activities (Form 6765)	1c					
	d	Low-income housing (Form 8586, Part I only)	1d	-				
	е	Disabled access (Form 8826) (see instructions for limitation)	1e	-			T	
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f					
	g	Indian employment (Form 8845)	1g					
	h	Orphan drug (Form 8820)	1h					
	i	New markets (Form 8874)	1i		ì	•		
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j					
	k	Employer-provided child care facilities and services (Form 8882) (see						
		instructions for limitation)	1k				\perp	
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11				\perp	
	m	Low sulfur diesel fuel production (Form 8896)	1m					
	n	Distilled spirits (Form 8906)	1n					
	0	Nonconventional source fuel (carryforward only)	10					
	р	Energy efficient home (Form 8908)	1p					
	q	Energy efficient appliance (carryforward only) .	1 q					
	r	Alternative motor vehicle (Form 8910)	1r					
	s	Alternative fuel vehicle refueling property (Form 8911)	1s					
	t	Enhanced oil recovery credit (Form 8830)	1t					
	u	Mine rescue team training (Form 8923)	1u					
	٧	Agricultural chemicals security (carryforward only)	1v					
	w	Employer differential wage payments (Form 8932)	1w					
	X	Carbon oxide sequestration (Form 8933)	1x					
	у	Qualified plug-in electric drive motor vehicle (Form 8936) .	<u>1y</u>					
	Z	Qualified plug-in electric vehicle (carryforward only)	1z					
	aa	Employee retention (Form 5884-A)	1aa					
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				┸	
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain						
		other credits (see instructions)	1zz				_	
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part 1	2			C	0	0
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				\perp	_
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				_	
	b	Work opportunity (Form 5884)	4b				4_	
	С	Biofuel producer (Form 6478)	4c				\perp	_
	d	Low-income housing (Form 8586, Part II)	4d				\perp	_
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				\perp	
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				1	
	g	Qualified railroad track maintenance (Form 8900)	4g				\perp	
	h	Small employer health insurance premiums (Form 8941)	4h				\perp	
	i	Increasing research activities (Form 6765)	4i				4_	
	j	Employer credit for paid family and medical leave (Form 8994)	<u>4j</u>				1	
	Z	Other .	4z	20-8306	306	18	_	
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5				3 0	
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	1		1 1 2	a Lo	n

or	m 3800	(2018)					Page 3
Vai	me(s) st	nown on return		1	dentıfyi	ng number	
		N. HILTON FOUNDATION			<u> 34–31</u>	.00217	
	art III	_	e inst	ructions)			
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4		General Business Credit From a Non-Passive Activity E 🔲 Reserved					
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		Seneral Business Credit Carryforwards G 🗋 Eligible Small	Busın	ess Credit C	arryfo	rwards	
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I		u are filing more than one Part III with box A or B checked, complete and attach firs arts III with box A or B checked. Check here if this is the consolidated Part III	st an a	additional Par	t III co		from ▶ □
		(a) Description of credit		(b)		(c)	
		any line where the credit is from more than one source, a separate Part III is needed for eagh entity	ach	If claiming the from a pass-th entity, enter th	rough	Enter the appropr amount	nate
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				
	b	Reserved	1b				
	С	Increasing research activities (Form 6765)	1c				
	d	Low-income housing (Form 8586, Part I only)	1d				
	е	Disabled access (Form 8826) (see instructions for limitation)	1e				
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
	g	Indian employment (Form 8845)	1g				
	h	Orphan drug (Form 8820)	1h				
	i	New markets (Form 8874)	1i				
	i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				
	k	Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k				
		Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m				
	n	Distilled spirits (Form 8906)	1n				
	0	Nonconventional source fuel (carryforward only)	10				\vdash
	р	Energy efficient home (Form 8908)	1p				
	•	Energy efficient appliance (carryforward only)	1q				
	q r	Alternative motor vehicle (Form 8910) .	1r				
		Alternative fuel vehicle refueling property (Form 8911) .	1s				\vdash
	S	Enhanced oil recovery credit (Form 8830)	1t				\vdash
	t	Mine rescue team training (Form 8923)	1u				 -
	u	Agricultural chemicals security (carryforward only)	1v				╁
	٧		1w				╁
	w	Employer differential wage payments (Form 8932) Contrar and acquirement (Form 8932)	<u> </u>				
	X	Carbon oxide sequestration (Form 8933) Qualified plug-in electric drive motor vehicle (Form 8936)	1x				-
	у -		1y 1z				╁
	z	Qualified plug-in electric vehicle (carryforward only)	1aa				
	aa	Employee retention (Form 5884-A) Consequence of the form on electing large nectors by (Schodule K 1 /Form 1065 R))	1bb				
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	100				<u> </u>
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz				
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0	00
;	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				
	b	Work opportunity (Form 5884)	4b]		<u> </u>
	С	Biofuel producer (Form 6478)	4c				
	d	Low-income housing (Form 8586, Part II)	4d				
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				
	g	Qualified railroad track maintenance (Form 8900)	4g				
	h	Small employer health insurance premiums (Form 8941)	4h				
	i	Increasing research activities (Form 6765)	4i	98-10273	07	6,645	

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Employer credit for paid family and medical leave (Form 8994)

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

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Nam	ne(s) si	hown on return		10	dentify	ing number	
COI	NRAI	O N. HILTON FOUNDATION		9	4-31	100217	
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		te a separate Part III for each box checked below. See instructions					
		General Business Credit From a Non-Passive Activity E 🔞 Reserved					
		General Business Credit From a Passive Activity F Reserved					
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		General Business Credit Carrybacks H Reserved	Dusin	ess Orean Or	arryio	i wai u s	
		_ ···					
•		u are filing more than one Part III with box A or B checked, complete and attach firs arts III with box A or B checked. Check here if this is the consolidated Part III	it an a	additional Part	i iii co	mbining amounts i	
	allF			(6)			
		(a) Description of credit		(b) If claiming the	credit	(c) Enter the appropr	ate
		any line where the credit is from more than one source, a separate Part III is needed for e	ach	from a pass-th	rough	amount	iuic
_		bugh entity	4-	entity, enter th	ie EIN		ı
	a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	water Same	00.000.254	Patronano por la la la la la la la la la la la la la	SANK BAE
	b	Reserved	1b	MES. Sir X			
	С	Increasing research activities (Form 6765)	1c				
	d	Low-income housing (Form 8586, Part I only)	1d				
	е	Disabled access (Form 8826) (see instructions for limitation)	1e				
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
	g	Indian employment (Form 8845)	1g				L
	h	Orphan drug (Form 8820)	1h				
	i	New markets (Form 8874) .	1i				
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)				. (
	k	Employer-provided child care facilities and services (Form 8882) (see					
		instructions for limitation)	1k				
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m				
	n	Distilled spirits (Form 8906)	1n				
	0	Nonconventional source fuel (carryforward only)	10				
	p	Energy efficient home (Form 8908)	1p				
	q	Energy efficient appliance (carryforward only)	1q				
	r	Alternative motor vehicle (Form 8910) ,	1r				
	S	Alternative fuel vehicle refueling property (Form 8911)	1s				
-	t	Enhanced oil recovery credit (Form 8830)	1t	`			
	u	Mine rescue team training (Form 8923)	1u				
	٧	Agricultural chemicals security (carryforward only)	1۷	ļ			
	W	Employer differential wage payments (Form 8932)	1w	ļ			<u> </u>
	X	Carbon oxide sequestration (Form 8933)	1x				
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				<u> </u>
	Z	Qualified plug-in electric vehicle (carryforward only)	1z				<u> </u>
	aa	Employee retention (Form 5884-A)	1aa				ļ
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			•	
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain			1		
_		other credits (see instructions)	1zz	34 00 A 74 B	ASTERNATION OF		
2		Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			, 0	00
3		Enter the amount from Form 8844 here and on the applicable line of Part II	3				
4	la	Investment (Form 3468, Part III) (attach Form 3468)	4a				_
	b	Work opportunity (Form 5884)	4b				<u> </u>
	C	Biofuel producer (Form 6478)	4c				<u> </u>
	d	Low-income housing (Form 8586, Part II)	4d				<u> </u>
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ļ <u></u>			<u> </u>
	g	Qualified railroad track maintenance (Form 8900)	4g	ļ			<u> </u>
	h	Small employer health insurance premiums (Form 8941)	4h				ļ
	i	Increasing research activities (Form 6765)	4i				ļ
	j	Employer credit for paid family and medical leave (Form 8994)	4 <u>j</u>				
	Z	Other	4z	98-12427	71	270	
5		Add lines 4a through 4z and enter here and on the applicable line of Part II	5	and the	10.4	270	
6	<u> </u>	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			270	00

For	m 3800	(2018)				Page 3
Nar	ne(s) st	own on return		Identi	fying number	
		N. HILTON FOUNDATION			3100217	
	art III		<u>ınst</u>	ructions)		
_		e a separate Part III for each box checked below. See instructions				
A		Seneral Business Credit From a Non-Passive Activity E Reserved				
В	_	Seneral Business Credit From a Passive Activity F Reserved	_	0 110		
		· · · · · · · · · · · · · · · · · · ·	Busin	ess Credit Carryl	orwards	
		Seneral Business Credit Carrybacks H Reserved				
ı		uare filing more than one Part III with box A or B checked, complete and attach firs irts III with box A or B checked. Check here if this is the consolidated Part III	t an a	idditional Part III o		trom ▶ □
_	ante	(a) Description of credit		(b)		
N.o.	•a: On	any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the cred		riate
		ugh entity	acii	from a pass-throug entity, enter the Ell	n amount	
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			
	b	Reserved	1b			
	С	Increasing research activities (Form 6765)	1c			
	d	Low-income housing (Form 8586, Part I only)	1d			
	е	Disabled access (Form 8826) (see instructions for limitation)	1e			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
	g	Indian employment (Form 8845)	1g			
	h	Orphan drug (Form 8820) .	1h			
	i	New markets (Form 8874)	_1i			<u> </u>
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j			<u> </u>
	k	Employer-provided child care facilities and services (Form 8882) (see				
		instructions for limitation)	1k			ļ
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11			<u> </u>
	m	Low sulfur diesel fuel production (Form 8896)	1m			—
	n	Distilled spirits (Form 8906)	1n			₩
	0	Nonconventional source fuel (carryforward only)	10		-	├
	þ	Energy efficient home (Form 8908)	1p		ļ	
	q	Energy efficient appliance (carryforward only)	1q		-	₩-
	r	Alternative motor vehicle (Form 8910)	1r			├- —
	S	Alternative fuel vehicle refueling property (Form 8911)	1s			-
	t ,	Enhanced oil recovery credit (Form 8830)	1t		-	\vdash
	u	Mine rescue team training (Form 8923)	1u			\vdash
	٧	Agricultural chemicals security (carryforward only)	1v- 1w			\vdash
	w	Employer differential wage payments (Form 8932) Carbon oxide sequestration (Form 8933)	1x			\vdash
	X	Qualified plug-in electric drive motor vehicle (Form 8936)	1 <u>y</u>		<u> </u>	\vdash
	y z	Qualified plug-in electric drive motor vehicle (corryforward only)	1z			+-
	aa	Employee retention (Form 5884-A)	1aa			\vdash
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			\vdash
	zz	Other Oil and gas production from marginal wells (Form 8904) and certain				\vdash
		other credits (see instructions)	1zz			
:	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0	00
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a			
	b	Work opportunity (Form 5884)	4b			
	С	Biofuel producer (Form 6478)	4c			
	d	Low-income housing (Form 8586, Part II)	4d			
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f			
	g	Qualified railroad track maintenance (Form 8900)	4g			
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Increasing research activities (Form 6765)	4i			1
	j	Employer credit for paid family and medical leave (Form 8994)	4j			<u> </u>
	Z	Other	4z	98-1350547	337	
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			00
(6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6	l	337	00

_	m 3800	<u> </u>					Page 3
Var	me(s) sh	nown on return			-	ng number	
		N. HILTON FOUNDATION			<u>4-31</u>	100217	
	art III		e inst	ructions)			
		te a separate Part III for each box checked below. See instructions					
		General Business Credit From a Non-Passive Activity E Reserved					
		General Business Credit From a Passive Activity F 🔲 Reserved					
		General Business Credit Carryforwards G 🔲 Eligible Small	Busın	ess Credit Ca	rryfo	rwards	
		General Business Credit Carrybacks H Reserved					
I		u are filing more than one Part III with box A or B checked, complete and attach firs arts III with box A or B checked. Check here if this is the consolidated Part III	st an a	additional Part	III co		from ▶ □
	- Call 1 C	(a) Description of credit		(b)		(c)	
		any line where the credit is from more than one source, a separate Part III is needed for e ough entity	ach	If claiming the cl	ough	Enter the appropr amount	nate
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	criaty, enter the		· · · · · · · · · · · · · · · · · · ·	
	b	Reserved	1b				
		Increasing research activities (Form 6765)	1c				
	c d	Low-income housing (Form 8586, Part I only)	1d				
			1e				
	e	Disabled access (Form 8826) (see instructions for limitation)	1f		\dashv		-
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	-		-+		
	g	Indian employment (Form 8845) .	1g				-
	h	Orphan drug (Form 8820)	1h				-
	!	New markets (Form 8874)	1i				
	J	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	_1j_				
	k	Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1k				
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m			·	
	n	Distilled spirits (Form 8906)	1n				
	0	Nonconventional source fuel (carryforward only)	10				
	р	Energy efficient home (Form 8908)	1p				
	q	Energy efficient appliance (carryforward only)	1q				
	r	Alternative motor vehicle (Form 8910)	1r		一		
	s	Alternative fuel vehicle refueling property (Form 8911)	1s		\neg		
	t	Enhanced oil recovery credit (Form 8830)	1t				
	u	Mine rescue team training (Form 8923)	1u		-		
	v	Agricultural chemicals security (carryforward only)	1v				
	w	Employer differential wage payments (Form 8932)	1w				
	x	Carbon oxide sequestration (Form 8933)	1x				
		Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
	y z	Qualified plug-in electric whicle (carryforward only)	1z				
		Employee retention (Form 5884-A)	1aa				
	aa bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
			100				
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain	4				
	^	other credits (see instructions) .	1zz				
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	3			0	00
	3	Enter the amount from Form 8844 here and on the applicable line of Part II			-		
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a	26 100266			
	b	Work opportunity (Form 5884)	4b	26-190266	00		-
	C	Biofuel producer (Form 6478)	4c	 			-
	d	Low-income housing (Form 8586, Part II)	4d				├—
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	-			
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ļ			├
	g	Qualified railroad track maintenance (Form 8900)	4g				↓
	h	Small employer health insurance premiums (Form 8941)	4h	<u> </u>			<u> </u>
	i	Increasing research activities (Form 6765)	4i	26-190266	6	302	1

134

443 00

443 00

4j

4z

5

6

26-1902666

Employer credit for paid family and medical leave (Form 8994)

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

Other

Z

5

6

Form 38	300 (2018)				Page 3
Name(s	shown on return		Ident	fying number	
CONR	AD N. HILTON FOUNDATION		94-	3100217	
Part		ınst	ructions)		
	lete a separate Part III for each box checked below See instructions				
ΑÖ	General Business Credit From a Non-Passive Activity E Reserved				
в⊠	General Business Credit From a Passive Activity F Reserved				
c 🗀	·	3usın	ess Credit Carry	forwards	
	General Business Credit Carrybacks H 🔲 Reserved				
	you are filing more than one Part III with box A or B checked, complete and attach firs	t an a	dditional Part III	combining amounts	from
all	Parts III with box A or B checked Check here if this is the consolidated Part III				
	(a) Description of credit		(b)	(c)	
Note:	On any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the cred from a pass-throug	Enter the appropri	rıate
	arough entity		entity, enter the El	n amount	
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			
b	Reserved	1b			
С	Increasing research activities (Form 6765)	1c			
d	Low-income housing (Form 8586, Part I only)	1d			
е	Disabled access (Form 8826) (see instructions for limitation)	1e			
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
g	Indian employment (Form 8845)	1g	-		
h	Orphan drug (Form 8820)	1h			
i	New markets (Form 8874)	1i			
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j			
k	Employer-provided child care facilities and services (Form 8882) (see				
	instructions for limitation)	1k			
- 1	Biodiesel and renewable diesel fuels (attach Form 8864)	11			
m	Low sulfur diesel fuel production (Form 8896)	1m			
n	Distilled spirits (Form 8906)	1n			
0	Nonconventional source fuel (carryforward only)	10			
р	Energy efficient home (Form 8908)	1p			
q	Energy efficient appliance (carryforward only)	1q			
r	Alternative motor vehicle (Form 8910)	1r			
s	Alternative fuel vehicle refueling property (Form 8911)	1s		- "	
t	Enhanced oil recovery credit (Form 8830)	1t			
u	Mine rescue team training (Form 8923)	1u			
٧	Agricultural chemicals security (carryforward only) .	1v			
w	Employer differential wage payments (Form 8932)	1w			
x	Carbon oxide sequestration (Form 8933)	1x			
у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			
z	Qualified plug-in electric vehicle (carryforward only)	1z			
aa		1aa			
bt	· · · · · · · · · · · · · · · · · · ·	1bb			
zz	Other Oil and gas production from marginal wells (Form 8904) and certain				
	other credits (see instructions)	1zz			
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0	00
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a			
b	Work opportunity (Form 5884)	4b	20-4662154	3	
С	Biofuel producer (Form 6478)	4c			
d	Low-income housing (Form 8586, Part II)	4d			
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f			
g	Qualified railroad track maintenance (Form 8900)	4g			
h	Small employer health insurance premiums (Form 8941)	4h			
i	Increasing research activities (Form 6765)	4i	20-4662154	11	
j	Employer credit for paid family and medical leave (Form 8994)	4 <u>j</u>			
z	Other .	4z			1
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		14	00
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			00
-					

Nai	ne(s) sh	nown on return			Identify	ing number	
CC	NRAL	N. HILTON FOUNDATION		9	94-31	100217	
P	art III	General Business Credits or Eligible Small Business Credits (see	e inst	ructions)	_		
Сс	mplet	te a separate Part III for each box checked below. See instructions		•		<u> </u>	
		General Business Credit From a Non-Passive Activity E 🔲 Reserved					
		General Business Credit From a Passive Activity F Reserved					
		General Business Credit Carryforwards G 🔲 Eligible Small	Busin	ess Credit C	Carryfo	rwards	
		General Business Credit Carrybacks H 🔲 Reserved					
1		are filing more than one Part III with box A or B checked, complete and attach firs	t an a	additional Pai	rt III co	mbining amounts	from
		arts III with box A or B checked Check here if this is the consolidated Part III				ū	▶ 🗌
		(a) Description of credit		(b)		(c)	
		any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the from a pass-ti entity, enter ti	hrough	Enter the approp amount	nate
_	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	Criticy, Critical to			
	b	Reserved .	1b				1
	c	Increasing research activities (Form 6765)	1c				1
	d	Low-income housing (Form 8586, Part I only)	1d				+
	e	Disabled access (Form 8826) (see instructions for limitation)	1e				†
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	-			
	g g	Indian employment (Form 8845)	1g	-		·	
	h	Orphan drug (Form 8820)	1h		_		
	i	New markets (Form 8874)	1i				
	i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				
	, k	Employer-provided child care facilities and services (Form 8882) (see	<u> </u>				
	n.	instructions for limitation)	1k				
		Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m				1
	n	Distilled spirits (Form 8906)					
	0	Nonconventional source fuel (carryforward only)				-	†
	р	Energy efficient home (Form 8908) .					
	q	Energy efficient appliance (carryforward only)					1
	r						
	s S	Alternative fuel vehicle refueling property (Form 8911)		-			
	t	Enhanced oil recovery credit (Form 8830)					
	u	Mine rescue team training (Form 8923)	1t 1u				
	v	Agricultural chemicals security (carryforward only)	1v	-			
	w	Employer differential wage payments (Form 8932)	1w				
	x	Carbon oxide sequestration (Form 8933)	1x				
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
	z	Qualified plug-in electric vehicle (carryforward only)	1z	-			
	aa	Employee retention (Form 5884-A)	1aa				
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain					
		other credits (see instructions)	1zz				
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0	00
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				
	b	Work opportunity (Form 5884)	4b				1
	C	Biofuel producer (Form 6478)	4c			•	1
	d	Low-income housing (Form 8586, Part II)	4d				
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				1
	g	Qualified railroad track maintenance (Form 8900)	4g				\top
	h	Small employer health insurance premiums (Form 8941)	4h	<u> </u>			
	i	Increasing research activities (Form 6765)	4i				
	i	Employer credit for paid family and medical leave (Form 8994)	4 j				
	z Other . 4z 20-4754424 2						
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			2	
	6	Add lines 2. 3, and 5 and enter here and on the applicable line of Part II	6				00

Na	me(s) s	hown on return			Identify	ing number	
CC	NRA	D N. HILTON FOUNDATION			94-31	100217	
Ρ	art II	General Business Credits or Eligible Small Business Credits (see	ınst	ructions)			
_		te a separate Part III for each box checked below See instructions		·	•		
Α		General Business Credit From a Non-Passive Activity E 🔳 Reserved					
		General Business Credit From a Passive Activity F 🔳 Reserved					
С		General Business Credit Carryforwards G 🔲 Eligible Small I	Busin	ess Credit (Carryfo	rwards	
	=	General Business Credit Carrybacks H 🔳 Reserved					
		u are filing more than one Part III with box A or B checked, complete and attach firs	t an a	additional Pa	ırt III co	mbining amounts	from
-		arts III with box A or B checked Check here if this is the consolidated Part III					
		(a) Description of credit		(b)		(c)	
No	te: Or	any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the from a pass-t	e credit	Enter the appropi	riate
pa	ss-thr	ough entity		entity, enter		amount	
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				<u> </u>
	b	Reserved .	1b				
	С	Increasing research activities (Form 6765)	1c				<u> </u>
	d	Low-income housing (Form 8586, Part I only)	1d				
	е	Disabled access (Form 8826) (see instructions for limitation)	1e				<u> </u>
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
	g	Indian employment (Form 8845) .	1g				<u> </u>
	h	Orphan drug (Form 8820)	1h				ļ
	i	New markets (Form 8874)	1i				ļ
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				<u> </u>
	k	Employer-provided child care facilities and services (Form 8882) (see					
		instructions for limitation)	1k				ļ
	1	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	m	Low sulfur diesel fuel production (Form 8896)	1m				
	n	Distilled spirits (Form 8906)	1n				Ь
	0	Nonconventional source fuel (carryforward only)	10				
	р	Energy efficient home (Form 8908)	1p				<u> </u>
	q	Energy efficient appliance (carryforward only)	1q				
	r	Alternative motor vehicle (Form 8910)	1r				
	s	Alternative fuel vehicle refueling property (Form 8911)	1s				<u> </u>
	t	Enhanced oil recovery credit (Form 8830)	1t				
	u	Mine rescue team training (Form 8923)	1u				
	٧	Agricultural chemicals security (carryforward only)	1v				
	W	Employer differential wage payments (Form 8932)	1w				
	X	Carbon oxide sequestration (Form 8933)	1x				
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				_
	Z	Qualified plug-in electric vehicle (carryforward only)	1z				-
	aa	Employee retention (Form 5884-A)	1aa				_
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain					
		other credits (see instructions)	1zz				100
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0	+
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3	27-3123	320	139	
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a				-
	b	Work opportunity (Form 5884)	4b			<u> </u>	-
	С	Biofuel producer (Form 6478)	4c				
	d	Low-income housing (Form 8586, Part II)	4d				
	e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				-
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ļ			┼
	g	Qualified railroad track maintenance (Form 8900)	4g				+
	h	Small employer health insurance premiums (Form 8941) .	4h	27, 2122	330	226	+
	i ·	Increasing research activities (Form 6765)	4i	27-3123	32 U	226	
	j	Employer credit for paid family and medical leave (Form 8994)	4 <u>j</u>			 	┼
	_Z	Other .	4z			22.0	100
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			226	
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			: 3 65	00

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 28
DESCRIPTION	NET INCOME OR (LOSS)
INCOME FROM PARTNERSHIPS - OTHER INCOME (LOSS) SECTION 951A INCOME FROM PARTNERSHIPS - OTHER INCOME (LOSS)	-2,303,122. 15,234.
NONTAXABLE SECTION 951(A) INCOME FROM PARTNERSHIPS - OTHER INCOME (LOSS)	-15,234.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-2,303,122.

CONRAD N. HILTON FOUNDATION

FORM 990-T	CONTRIBUTIONS	STATEMENT 29
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CASH ONLY CHARITABLE DEDUCTIONS FROM K-1'S	N/A N/A	102,031,480.
TOTAL TO FORM 990-T, PAGE 1, L	INE 20	102,053,421.

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FORM 990-T	OTHER DEDUCTIONS	STATEMENT 30
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		77,917.
TOTAL TO FORM 990-T, PAGE 1,	LINE 28	77,917.

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 31
QUALIFIED CONTRIBUTIONS SU	JBJECT TO 100% LIMIT		
CARRYOVER OF PRIOR YEARS UFOR TAX YEAR 2013	JNUSED CONTRIBUTIONS		
FOR TAX YEAR 2014	132,341,934		
FOR TAX YEAR 2015	114,305,782		
FOR TAX YEAR 2016	101,814,623		
FOR TAX YEAR 2017	102,474,535		
TOTAL CARRYOVER		450,936,874	
TOTAL CURRENT YEAR 10% COM	NTRIBUTIONS	102,053,421	
TOTAL CONTRIBUTIONS AVAILA	ABLE -	552,990,295	
TAXABLE INCOME LIMITATION	AS ADJUSTED	541,415	
EXCESS 10% CONTRIBUTIONS	-	552,448,880	
EXCESS 100% CONTRIBUTIONS		0	
TOTAL EXCESS CONTRIBUTIONS	5	552,448,880	
ALLOWABLE CONTRIBUTIONS DE	EDUCTION		541,415
TOTAL CONTRIBUTION DEDUCT	ION	•	541,415

FORM 990-T

NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 32

NAME OF COUNTRY

UNITED KINGDOM

EGYPT

GHANA

KENYA

MAURITIUS

NAMIBIA

NIGERIA

TANZANIA

UGANDA

COTE DIVOIRE (IVORY COAST)

ZAMBIA

ZIMBABWE

NETHERLANDS

MOROCCO

BOTSWANA

MALAWI

CONRAD N. HILTON FOUNDATION

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 33
DESCRIPTION		AMOUNT
FOOD COSTS		30,483.
COUPON EXPENSES		3,672.
UTILITIES		1,588.
INSURANCE		2,508.
TOTAL TO SCHEDULE M, PART	II, LINE 28	38,251.

REASON FOR FILING AMENDED RETURN

STATEMENT 34

THE TAXPAYER IS FILING AN AMENDED FORM 990-T, EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN, TO CLAIM A REFUND OF UNRELATED BUSINESS INCOME TAX PAID ON THE TAXPAYER'S 2018 FORM 990-T. THE TAXPAYER IS FILING AN AMENDED FORM 990-T DUE TO REPEAL OF SECTION 512(a)(7), INCREASE IN UNRELATED BUSINESS INCOME BY DISALLOWED FRINGES. THE FOLLOWING LINES OF THE FORM 990-T CHANGED DUE TO THE REPEAL OF SECTION 512(a)(7):

	AS ORIGINALLY	
	FILED	AS AMENDED
LINE 20: CHARITABLE CONTRIBUTIONS	545,739	541,415
LINE 29: TOTAL DEDUCTIONS	1,003,585	999,261
LINE 30: UBTI BEFORE NET OPERATING LOSS DEDUCTION	4,869,410	4,873,734
LINE 32: UNRELATED BUSINESS TAXABLE INCOME	4,869,410	4,873,734
LINE 33: UBTI COMPUTED FROM ALL UNRELATED T/B	4,869,410	4,873,734
LINE 34: AMOUNTS PAID FOR DISALLOWED FRINGES	43,237	-
LINE 36: TOTAL UBTI BEFORE SPECIFIC DEDUCTION	4,912,647	4,873,734
LINE 38: UNRELATED BUSINESS TAXABLE INCOME	4,911,647	4,872,734
LINE 39: ORGANIZATIONS TAXABLE AS CORPORATIONS	1,031,446	1,023,274
LINE 44: TOTAL TAX LIABILITY	1,031,446	1,023,274
LINE 46: TOTAL TAX LIABILITY LESS TOTAL CREDITS	1,021,928	1,013,756
LINE 48: TOTAL TAX LIABILITY DUE	1,021,928	1,013,756
LINE 52: ESTIMATED TAX PENALTY	8,353	8,216
LINE 54: OVERPAYMENT	1,569,719	1,578,028
LINE 55: REFUNDED	_	8,309