

For the year Jan. 1 - Dec. 31, 2023, or other tax year beginning , ending See separate instructions.

Your first name and middle initial Last name Your social security number
STEPHEN G. HILTON

If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
Foreign country name Foreign province/state/county Foreign postal code
Presidential Election Campaign
Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
You Spouse

Filing Status
Single Head of household (HOH)
Married filing jointly (even if only one had income)
Married filing separately (MFS) Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent RACHEL M WHETSTONE

Digital Assets
At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)
Yes No

Standard Deduction
Someone can claim: You as a dependent Your spouse as a dependent
Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: Were born before January 2, 1959 Are blind Spouse: Was born before January 2, 1959 Is blind

Table with 4 columns: (1) First name Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instr.): Child tax credit Credit for other dependents

Main income table with rows 1a through 15. Includes sub-rows 2a-6b for tax-exempt and taxable interest/dividends. Total income 2,958,118. Taxable income 2,953,113.

LHA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2023)

<b>Tax and Credits</b>	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	1,057,609.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	1,057,609.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,057,609.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	3,462.
24	Add lines 22 and 23. This is your <b>total tax</b>	24	1,061,071.	

<b>Payments</b>	25	Federal income tax withheld from:	25d	1,079,436.
	a	Form(s) W-2	25a	1,076,649.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions) <b>SEE STATEMENT 2</b>	25c	2,787.
	d	Add lines 25a through 25c	25d	1,079,436.
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31		
32	Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b>	32		
33	Add lines 25d, 26, and 32. These are your <b>total payments</b>	33	1,079,436.	

<b>Refund</b>	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>	34	18,365.
	35a	Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/>	35a	18,365.
	b	Routing number	c Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number		
36	Amount of line 34 you want <b>applied to your 2024 estimated tax</b>	36		

<b>Amount You Owe</b>	37	Subtract line 33 from line 24. This is the <b>amount you owe</b> . For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS? See instructions  **Yes. Complete below.**  **No**

Designee's name **RAWLINSON & HUNTER LLP** Phone no. + [redacted] Personal identification number (PIN) [redacted]

**Sign Here** Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature \_\_\_\_\_ Date \_\_\_\_\_ Your occupation **TV NEWS SHOW HOST**

Spouse's signature, if a joint return, **both** must sign. \_\_\_\_\_ Date \_\_\_\_\_ Spouse's occupation \_\_\_\_\_

Phone no. \_\_\_\_\_ Email address \_\_\_\_\_

**Paid Preparer Use Only** Preparer's name **LISA FESTERLING** Preparer's signature **LISA FESTERLING** Date **06/20/24** PTIN [redacted] Check it:  Self-employed

Firm's name **RAWLINSON & HUNTER LLP** Phone no. [redacted]  
Firm's address [redacted] Firm's EIN [redacted]

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

**SCHEDULE 1**  
**(Form 1040)**

**Additional Income and Adjustments to Income**

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. **01**

Department of the Treasury  
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.  
Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

**STEPHEN G. HILTON**

Your social security number

**Part I Additional Income**

1	Taxable refunds, credits, or offsets of state and local income taxes	STMT 3	STMT 4	1	0.
2a	Alimony received			2a	
3	Date of original divorce or separation agreement (see instructions)			3	-141,994.
4	Business income or (loss). Attach Schedule C			4	
5	Other gains or (losses). Attach Form 4797			5	0.
6	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			6	
7	Farm income or (loss). Attach Schedule F			7	
8	Unemployment compensation				
8	Other income:				
a	Net operating loss	8a	( )		
b	Gambling	8b			
c	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	( )		
e	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l			
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
o	Section 951A(a) inclusion (see instructions)	8o			
p	Section 461(l) excess business loss adjustment	8p			
q	Taxable distributions from an ABL account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	( )		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
z	Other income. List type and amount:	8z			
9	Total other income. Add lines 8a through 8z			9	
10	Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8			10	-141,994.

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 1 (Form 1040) 2023

**Part II Adjustments to Income**

11	Educator expenses		11
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12
13	Health savings account deduction. Attach Form 8889		13
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14
15	Deductible part of self-employment tax. Attach Schedule SE		15
16	Self-employed SEP, SIMPLE, and qualified plans		16
17	Self-employed health insurance deduction		17
18	Penalty on early withdrawal of savings		18
19a	Alimony paid		19a
	b Recipient's SSN		
	c Date of original divorce or separation agreement (see instructions):		
20	IRA deduction		20
21	Student loan interest deduction		21
22	Reserved for future use		22
23	Archer MSA deduction		23
24	Other adjustments:		
	a Jury duty pay (see instructions)	24a	
	b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
	c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
	d Reforestation amortization and expenses	24d	
	e Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
	f Contributions to section 501(c)(18)(D) pension plans	24f	
	g Contributions by certain chaplains to section 403(b) plans	24g	
	h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
	i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
	j Housing deduction from Form 2555	24j	
	k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
	z Other adjustments. List type and amount:	24z	
	_____		
	_____		
25	Total other adjustments. Add lines 24a through 24z		25
26	Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10		26

**SCHEDULE 2**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Additional Taxes**

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

**STEPHEN G. HILTON**

**Part I Tax**

<b>1</b>	Alternative minimum tax. Attach Form 6251 .....	<b>1</b>	
<b>2</b>	Excess advance premium tax credit repayment. Attach Form 8962 .....	<b>2</b>	
<b>3</b>	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17 .....	<b>3</b>	<b>0.</b>

**Part II Other Taxes**

<b>4</b>	Self-employment tax. Attach Schedule SE .....	<b>4</b>	
<b>5</b>	Social security and Medicare tax on unreported tip income. Attach Form 4137 .....	<b>5</b>	
<b>6</b>	Uncollected social security and Medicare tax on wages. Attach Form 8919 .....	<b>6</b>	
<b>7</b>	Total additional social security and Medicare tax. Add lines 5 and 6 .....	<b>7</b>	
<b>8</b>	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required If not required, check here <input type="checkbox"/> .....	<b>8</b>	
<b>9</b>	Household employment taxes. Attach Schedule H .....	<b>9</b>	
<b>10</b>	Repayment of first-time homebuyer credit. Attach Form 5405 if required .....	<b>10</b>	
<b>11</b>	Additional Medicare Tax. Attach Form 8959 .....	<b>11</b>	<b>3,462.</b>
<b>12</b>	Net investment income tax. Attach Form 8960 .....	<b>12</b>	
<b>13</b>	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12 .....	<b>13</b>	
<b>14</b>	Interest on tax due on installment income from the sale of certain residential lots and timeshares .....	<b>14</b>	
<b>15</b>	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000 .....	<b>15</b>	
<b>16</b>	Recapture of low-income housing credit. Attach Form 8611 .....	<b>16</b>	

(continued on page 2)

For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule 2 (Form 1040) 2023

**Part II Other Taxes** (continued)

<b>17</b> Other additional taxes:			
<b>a</b> Recapture of other credits. List type, form number, and amount			
	<b>17a</b>		
<b>b</b> Recapture of federal mortgage subsidy, if you sold your home see instructions			
	<b>17b</b>		
<b>c</b> Additional tax on HSA distributions. Attach Form 8889			
	<b>17c</b>		
<b>d</b> Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889			
	<b>17d</b>		
<b>e</b> Additional tax on Archer MSA distributions. Attach Form 8853			
	<b>17e</b>		
<b>f</b> Additional tax on Medicare Advantage MSA distributions. Attach Form 8853			
	<b>17f</b>		
<b>g</b> Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property			
	<b>17g</b>		
<b>h</b> Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A			
	<b>17h</b>		
<b>i</b> Compensation you received from a nonqualified deferred compensation plan described in section 457A			
	<b>17i</b>		
<b>j</b> Section 72(m)(5) excess benefits tax			
	<b>17j</b>		
<b>k</b> Golden parachute payments			
	<b>17k</b>		
<b>l</b> Tax on accumulation distribution of trusts			
	<b>17l</b>		
<b>m</b> Excise tax on insider stock compensation from an expatriated corporation			
	<b>17m</b>		
<b>n</b> Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866			
	<b>17n</b>		
<b>o</b> Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR			
	<b>17o</b>		
<b>p</b> Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund			
	<b>17p</b>		
<b>q</b> Any interest from Form 8621, line 24			
	<b>17q</b>		
<b>z</b> Any other taxes. List type and amount:			
	<b>17z</b>		
<b>18</b> Total additional taxes. Add lines 17a through 17z			<b>18</b>
<b>19</b> Reserved for future use			<b>19</b>
<b>20</b> Section 965 net tax liability installment from Form 965-A	<b>20</b>		
<b>21</b> Add lines 4, 7 through 16, and 18. These are your <b>total other taxes</b> . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b			<b>21</b>
			<b>3,462.</b>

Schedule 2 (Form 1040) 2023

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Itemized Deductions**

Attach to Form 1040 or 1040-SR.  
Go to [www.irs.gov/ScheduleA](http://www.irs.gov/ScheduleA) for instructions and the latest information.  
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. **07**

Name(s) shown on Form 1040 or 1040-SR

Your social security number

**STEPHEN G. HILTON**

<b>Medical and Dental Expenses</b>	<b>Caution:</b> Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions) .....		
	2	Enter amount from Form 1040 or 1040-SR, line 11 .....	2	
	3	Multiply line 2 by 7.5% (0.075) .....		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- .....	4	
<b>Taxes You Paid</b>	5	State and local taxes.		
		a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box <b>SEE STATEMENT 5</b> <input type="checkbox"/>	5a 413,514.	
		b State and local real estate taxes (see instructions) .....	5b	
		c State and local personal property taxes .....	5c	
		d Add lines 5a through 5c .....	5d 413,514.	
		e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) .....	5e 5,000.	
		6 Other taxes. List type and amount: .....	6	
	7	Add lines 5e and 6 .....	7 5,000.	
<b>Interest You Paid</b> <b>Caution:</b> Your mortgage interest deduction may be limited. See instructions.	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box <input type="checkbox"/>		
		a Home mortgage interest and points reported to you on Form 1098. See instructions if limited .....	8a	
		b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address .....	8b	
		c Points not reported to you on Form 1098. See instructions for special rules .....	8c	
		d Reserved for future use .....	8d	
		e Add lines 8a through 8c .....	8e	
		9 Investment interest. Attach Form 4952 if required. See instructions .....	9	
		10	Add lines 8e and 9 .....	10
	<b>Gifts to Charity</b> <b>Caution:</b> If you made a gift and got a benefit for it, see instructions.	11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions .....	11 5.
		12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You <b>must</b> attach Form 8283 if over \$500 .....	12
13		Carryover from prior year .....	13	
14		Add lines 11 through 13 .....	14 5.	
<b>Casualty and Theft Losses</b>	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions .....	15	
<b>Other Itemized Deductions</b>	16	Other - from list in instructions. List type and amount: .....	16	
<b>Total Itemized Deductions</b>	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12 .....	17 5,005.	
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>		

LHA For Paperwork Reduction Act Notice, see the instructions for Form 1040.

319501 11-03-23

Schedule A (Form 1040) 2023



**SCHEDULE C  
(Form 1040)**

Department of the Treasury  
Internal Revenue Service

Name of proprietor

**Profit or Loss From Business**

(Sole Proprietorship)

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.  
Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. 09

Social security number (SSN)

**STEPHEN G. HILTON**

**A** Principal business or profession, including product or service (see instructions)

**MEDIA OUTLET**

**B** Enter code from instructions

**516000**

**C** Business name. If no separate business name, leave blank.

**CR PRODUCTIONS LLC**

**D** Employer ID number (EIN) (see Instr.)

**E** Business address (including suite or room no.)

City, town or post office, state, and ZIP code

**CA**

**F** Accounting method: (1)  Cash (2)  Accrual (3)  Other (specify)

**G** Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses

Yes  No

**H** If you started or acquired this business during 2023, check here

Yes  No

**I** Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions

Yes  No

**J** If "Yes," did you or will you file required Form(s) 1099?

Yes  No

**Part I Income**

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked	<input type="checkbox"/>	1	3,439.
2	Returns and allowances		2	
3	Subtract line 2 from line 1		3	3,439.
4	Cost of goods sold (from line 42)		4	
5	Gross profit. Subtract line 4 from line 3		5	3,439.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)		6	
7	Gross income. Add lines 5 and 6		7	3,439.

**Part II Expenses. Enter expenses for business use of your home only on line 30.**

8	Advertising	8	101,433.	18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depreciation	12		b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest (see instructions):			24	Travel and meals:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals (see instructions)	24b	
17	Legal and professional services	17		25	Utilities	25	
18				26	Wages (less employment credits)	26	44,000.
19				27 a	Other expenses (from line 48)	27a	
20				b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
21				28	Total expenses before expenses for business use of home. Add lines 8 through 27b	28	145,433.
22				29	Tentative profit or (loss). Subtract line 28 from line 7	29	-141,994.
23				30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. <b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____ Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	
24				31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31	-141,994.
25				32a	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.	32a	<input checked="" type="checkbox"/> All investment is at risk.
26				32b		32b	<input type="checkbox"/> Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.  
320001 10-25-23

Schedule C (Form 1040) 2023

**SCHEDULE D**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

Attach to Form 1040, 1040-SR, or 1040-NR.  
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.  
Go to [www.irs.gov/ScheduleD](http://www.irs.gov/ScheduleD) for instructions and the latest information.

OMB No. 1545-0074

**2023**

Attachment  
Sequence No. **12**

Name(s) shown on return

Your social security number

**STEPHEN G. HILTON**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b>	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				
<b>1b</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked				
<b>2</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked				
<b>3</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked				
<b>4</b>	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				<b>4</b>
<b>5</b>	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				<b>5</b>
<b>6</b>	Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions				<b>6</b> ( 193,500. )
<b>7</b>	<b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				<b>7</b> <193,500.>

**Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b>	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				
<b>8b</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked				
<b>9</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked				
<b>10</b>	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked				
<b>11</b>	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				<b>11</b>
<b>12</b>	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				<b>12</b>
<b>13</b>	Capital gain distributions. See the instructions				<b>13</b>
<b>14</b>	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions				<b>14</b> ( )
<b>15</b>	<b>Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then, go to Part III on page 2				<b>15</b>

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Schedule D (Form 1040) 2023

**Part III Summary**

<p><b>16</b> Combine lines 7 and 15 and enter the result .....</p> <ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li> </ul> <p><b>17</b> Are lines 15 and 16 <b>both</b> gains?  <input type="checkbox"/> <b>Yes.</b> Go to line 18.  <input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.</p> <p><b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet .....</p> <p><b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet .....</p> <p><b>20</b> Are lines 18 and 19 both zero or blank and you are not filing Form 4952?  <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16. <b>Don't</b> complete lines 21 and 22 below.  <input type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.</p> <p><b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:  <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul> </p> <p><b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.</p> <p><b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?  <input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.  <input checked="" type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>	<p><b>16</b></p> <p><b>18</b></p> <p><b>19</b></p> <p><b>21</b></p>	<p>&lt;193,500.&gt;</p> <p></p> <p></p> <p></p> <p>( 1,500.)</p>
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**SCHEDULE E**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Income and Loss**

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

Go to [www.irs.gov/ScheduleE](http://www.irs.gov/ScheduleE) for instructions and the latest information.

OMB No. 1545-0074

**2023**  
Attachment  
Sequence No. **13**

Name(s) shown on return

Your social security number

**STEPHEN G. HILTON**

**Part I** **Income or Loss From Rental Real Estate and Royalties** Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions  Yes  No  
 B If "Yes," did you or will you file required Form(s) 1099?  Yes  No

1a Physical address of each property (street, city, state, ZIP code)  
 A 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM  
 B 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM  
 C

1b	Type of Property (from list below)	2	Fair Rental Days	Personal Use Days	QJV
A	1	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	A 365		<input type="checkbox"/>
B	1		B 365		<input type="checkbox"/>
C			C		<input type="checkbox"/>

**Type of Property:**

- 1 Single Family Residence
- 2 Multi-Family Residence
- 3 Vacation/Short-Term Rental
- 4 Commercial
- 5 Land
- 6 Royalties
- 7 Self-Rental
- 8 Other (describe)

Income:	Properties		
	A	B	C
3 Rents received	3 6,530.	6,530.	
4 Royalties received	4		
<b>Expenses:</b>			
5 Advertising	5		
6 Auto and travel (see instructions)	6		
7 Cleaning and maintenance	7		
8 Commissions	8		
9 Insurance	9 1,023.	280.	
10 Legal and other professional fees	10		
11 Management fees	11		
12 Mortgage interest paid to banks, etc. (see instructions)	12		
13 Other interest	13 3,683.	9,822.	
14 Repairs	14 19,016.	19,016.	
15 Supplies	15		
16 Taxes	16		
17 Utilities	17		
18 Depreciation expense or depletion	18 9,155.	14,851.	
19 Other (list)	19		
20 Total expenses. Add lines 5 through 19	20 32,877.	43,969.	
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21 -26,347.	-37,439.	
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22 0.)	0.)	
23a Total of all amounts reported on line 3 for all rental properties	23a 13,060.		
b Total of all amounts reported on line 4 for all royalty properties	23b		
c Total of all amounts reported on line 12 for all properties	23c		
d Total of all amounts reported on line 18 for all properties	23d 24,006.		
e Total of all amounts reported on line 20 for all properties	23e 76,846.		
24 <b>Income.</b> Add positive amounts shown on line 21. Do not include any losses	24	0.	
25 <b>Losses.</b> Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25		
26 <b>Total rental real estate and royalty income or (loss).</b> Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26	0.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

LHA 321491 11-07-23

**Foreign Tax Credit**  
(Individual, Estate, or Trust)  
Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.  
Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.

Name **STEPHEN G. HILTON** Identifying number as shown on page 1 of your tax return [REDACTED]

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a  Section 951A category income    c  Passive category income    e  Section 901(j) income    g  Lump-sum distributions  
b  Foreign branch category income    d  General category income    f  Certain income re-sourced by treaty

h Resident of (name of country) **UNITED STATES**

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

**Part I Taxable Income or Loss From Sources Outside the United States** (for category checked above)

i Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
<b>1a</b> Gross income from sources within country shown above and of the type checked above:	<b>UNITED KINGDOM</b>			
	13,060.			13,060.
<b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/>				
<b>2</b> Expenses definitely related to the income on line 1a (attach statement) <b>SEE STATEMENT 7</b>	13,060.			
<b>3</b> Pro rata share of other deductions not definitely related:				
<b>a</b> Certain itemized deductions or standard deduction	5,000.			
<b>b</b> Other deductions (attach statement)				
<b>c</b> Add lines 3a and 3b	5,000.			
<b>d</b> Gross foreign source income	13,060.			
<b>e</b> Gross income from all sources	3,118,111.			
<b>f</b> Divide line 3d by line 3e	.004188433			
<b>g</b> Multiply line 3c by line 3f	21.			
<b>4</b> Pro rata share of interest expense:				
<b>a</b> Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
<b>b</b> Other interest expense				
<b>5</b> Losses from foreign sources				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5	13,081.			
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				13,081.
				-21.

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued						(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		In foreign currency			In U.S. dollars				
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends		
A									
B									
C									

**8** Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8**

For Paperwork Reduction Act Notice, see instructions.

**Part III Figuring the Credit**

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) <input type="checkbox"/> (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	
11	Add lines 9 and 10	11	
12	Reduction in foreign taxes	12	
13	Taxes reclassified under high tax kickout	13	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	-21.
16	Adjustments to line 15	16	21.
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	
18	<b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption <b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	
20	<b>Individuals:</b> Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. See instructions <b>Caution:</b> If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.	20	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	
22	Increase in limitation (section 960(c)) (see instructions)	22	
23	Add lines 21 and 22	23	
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV	24	

**Part IV Summary of Credits From Separate Parts III**

25	Credit for taxes on section 951A category income	25	
26	Credit for taxes on foreign branch category income	26	
27	Credit for taxes on passive category income	27	
28	Credit for taxes on general category income	28	
29	Credit for taxes on section 901(j) income	29	
30	Credit for taxes on certain income re-sourced by treaty	30	
31	Credit for taxes on lump-sum distributions	31	
32	Add lines 25 through 31	32	
33	Enter the smaller of line 20 or line 32	33	0.
34	Reduction of credit for international boycott operations	34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	0.

Form **1116**

Department of the Treasury  
Internal Revenue Service

**ALTERNATIVE MINIMUM TAX  
Foreign Tax Credit**

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.  
Go to [www.irs.gov/Form1116](http://www.irs.gov/Form1116) for instructions and the latest information.

OMB No. 1545-0121

**2023**

Attachment  
Sequence No. **19**

Name

Identifying number as shown on page 1 of your tax return

**STEPHEN G. HILTON**

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a  Section 951A category income    c  Passive category income    e  Section 901(j) income    g  Lump-sum distributions  
b  Foreign branch category income    d  General category income    f  Certain income re-sourced by treaty

h Resident of (name of country) **UNITED STATES**

**Note:** If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

**Part I Taxable Income or Loss From Sources Outside the United States** (for category checked above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
<b>i Enter the name of the foreign country or U.S. possession</b>	<b>UNITED KINGDOM</b>			
<b>1a</b> Gross income from sources within country shown above and of the type checked above:	13,060.			1a 13,060.
<b>b</b> Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/>				
<b>Deductions and losses</b> (Caution: See instructions.):				
<b>2</b> Expenses <b>definitely related</b> to the income on line 1a (attach statement)	13,060.			
<b>3</b> Pro rata share of other deductions <b>not definitely related</b> :				
<b>a</b> Certain itemized deductions or standard deduction				
<b>b</b> Other deductions (attach statement)				
<b>c</b> Add lines 3a and 3b				
<b>d</b> Gross foreign source income	13,060.			
<b>e</b> Gross income from all sources	3,118,111.			
<b>f</b> Divide line 3d by line 3e	.004188433			
<b>g</b> Multiply line 3c by line 3f				
<b>4</b> Pro rata share of interest expense:				
<b>a</b> Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
<b>b</b> Other interest expense				
<b>5</b> Losses from foreign sources				
<b>6</b> Add lines 2, 3g, 4a, 4b, and 5	13,060.			
<b>7</b> Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				6 13,060.

**Part II Foreign Taxes Paid or Accrued**

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued							(u) Total foreign taxes paid or accrued (add cols. (q) through (t))		
		In foreign currency				In U.S. dollars					
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties		(s) Interest	(t) Other foreign taxes paid or accrued
A											
B											
C											

**8** Add lines A through C, column (u). Enter the total here and on line 9, page 2

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2023)

LHA 311501 12-21-23

15490626 147826 140870

21  
2023.04000 HILTON, STEPHEN G

140870\_1

**ALTERNATIVE MINIMUM TAX**

**Part III Figuring the Credit**

<b>9</b> Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	<b>9</b>		
<b>10</b> Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) <input type="checkbox"/> (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	<b>10</b>		
<b>11</b> Add lines 9 and 10	<b>11</b>		
<b>12</b> Reduction in foreign taxes	<b>12</b>		
<b>13</b> Taxes reclassified under high tax kickout	<b>13</b>		
<b>14</b> Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit			<b>14</b>
<b>15</b> Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	<b>15</b>		
<b>16</b> Adjustments to line 15	<b>16</b>		
<b>17</b> Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	<b>17</b>		
<b>18</b> <b>Individuals:</b> Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. <b>Estates and trusts:</b> Enter your taxable income without the deduction for your exemption <b>Caution:</b> If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	<b>18</b>		
<b>19</b> Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			<b>19</b>
<b>20</b> <b>Individuals:</b> Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. <b>Estates and trusts:</b> Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16. See instructions <b>Caution:</b> If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.			<b>20</b>
<b>21</b> Multiply line 20 by line 19 (maximum amount of credit)			<b>21</b>
<b>22</b> Increase in limitation (section 960(c)) (see instructions)			<b>22</b>
<b>23</b> Add lines 21 and 22			<b>23</b>
<b>24</b> Enter the <b>smaller</b> of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV			<b>24</b>

**Part IV Summary of Credits From Separate Parts III**

<b>25</b> Credit for taxes on section 951A category income	<b>25</b>		
<b>26</b> Credit for taxes on foreign branch category income	<b>26</b>		
<b>27</b> Credit for taxes on passive category income	<b>27</b>		
<b>28</b> Credit for taxes on general category income	<b>28</b>		
<b>29</b> Credit for taxes on section 901(j) income	<b>29</b>		
<b>30</b> Credit for taxes on certain income re-sourced by treaty	<b>30</b>		
<b>31</b> Credit for taxes on lump-sum distributions	<b>31</b>		
<b>32</b> Add lines 25 through 31			<b>32</b>
<b>33</b> Enter the <b>smaller</b> of line 20 or line 32			<b>33</b> 0.
<b>34</b> Reduction of credit for international boycott operations			<b>34</b>
<b>35</b> Subtract line 34 from line 33. This is your <b>foreign tax credit</b> . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a			<b>35</b> 0.

**Allocation of Tax Amounts Between  
 Certain Individuals in Community Property States**  
 Attach to Form 1040, 1040-SR, or 1040-NR.  
 Go to [www.irs.gov/Form8958](http://www.irs.gov/Form8958) for the latest information.

OMB No. 1545-0074

Attachment  
 Sequence No. **63**

Your first name and initial		Your last name		Your social security number (SSN)	
STEPHEN G.		HILTON		[REDACTED]	
Spouse's or partner's first name and initial		Spouse's or partner's last name		Spouse's or partner's SSN	
RACHEL M.		WHETSTONE		[REDACTED]	
		A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP	
			SSN [REDACTED]	SSN [REDACTED]	
<b>1</b> Wages (each employer)					
FOX NEWS NETWORK LLC		509,615.	254,808.		254,807.
NETFLIX, INC.		5,692,825.	2,846,413.		2,846,412.
<b>2</b> Interest Income (each payer)					
BANK INTEREST		784.	392.		392.
<b>3</b> Dividends (each payer)					
<b>4</b> State income tax refund					
<b>5</b> Self-employment income (see instructions)					
CR PRODUCTIONS		-283,988.	-141,994.		-141,994.
<b>6</b> Capital gains and losses					
ST CAPITAL LOSS CARRYOVER		-193,500.	-193,500.		
DISALLOWED CAPITAL LOSSES		192,000.	192,000.		
<b>7</b> Pension income					
<b>8</b> Rents, royalties, partnerships, estates, trusts					

	A Total Amount	B Allocated to Spouse or RDP	C Allocated to Spouse or RDP
<b>9</b> Deductible part of self-employment tax (see instructions)		SSN [REDACTED]	SSN [REDACTED]
<b>10</b> Self-employment tax (see instructions)			
<b>11</b> Taxes withheld			
<b>FOX NEWS NETWORK LLC</b>	122,514.	61,257.	61,257.
<b>NETFLIX, INC.</b>	2,030,783.	1,015,392.	1,015,391.
<b>12</b> Other items such as: social security benefits, unemployment compensation, deductions, credits, etc.			
<b>ITEMIZED DEDUCTION</b>	5,005.	5,005.	
<b>OTHER TAXES</b>	3,462.	3,462.	

**Additional Medicare Tax**

Department of the Treasury  
Internal Revenue Service

If any line does not apply to you, leave it blank. See separate instructions.  
Attach to Form 1040, 1040-SR, 1040-NR, or 1040-SS.  
Go to [www.irs.gov/Form8959](http://www.irs.gov/Form8959) for instructions and the latest information.

**2023**

Attachment  
Sequence No. 71

Name(s) shown on return <b>STEPHEN G. HILTON</b>	Your social security number [REDACTED]
-----------------------------------------------------	-------------------------------------------

<b>Part I Additional Medicare Tax on Medicare Wages</b>	
1 Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1 509,615.
2 Unreported tips from Form 4137, line 6	2
3 Wages from Form 8919, line 6	3
4 Add lines 1 through 3	4 509,615.
5 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	5 125,000.
6 Subtract line 5 from line 4. If zero or less, enter -0-	6 384,615.
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7 3,462.

<b>Part II Additional Medicare Tax on Self-Employment Income</b>	
8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0-	8
9 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	9
10 Enter the amount from line 4	10
11 Subtract line 10 from line 9. If zero or less, enter -0-	11
12 Subtract line 11 from line 8. If zero or less, enter -0-	12
13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13

<b>Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation</b>	
14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14
15 Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	15
16 Subtract line 15 from line 14. If zero or less, enter -0-	16
17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17

<b>Part IV Total Additional Medicare Tax</b>	
18 Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS filers, see instructions), and go to Part V	18 3,462.

<b>Part V Withholding Reconciliation</b>	
19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19 10,176.
20 Enter the amount from line 1	20 509,615.
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21 7,389.
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22 2,787.
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers, see instructions)	24 2,787.

# Net Investment Income Tax - Individuals, Estates, and Trusts

OMB No. 1545-2227

## 2023

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.

Go to [www.irs.gov/Form8960](http://www.irs.gov/Form8960) for instructions and the latest information.

Attachment  
Sequence No. 72

Name(s) shown on your tax return: **STEPHEN G. HILTON**      Your social security number or EIN: XXXXXXXXXX

**Part I Investment Income**

Section 6013(g) election (see instructions)

Section 6013(h) election (see instructions)

Regulations section 1.1411-10(g) election (see instructions)

1 Taxable interest (see instructions) .....			1	392.
2 Ordinary dividends (see instructions) .....			2	
3 Annuities (see instructions) .....			3	
4a Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions) .....	4a	-141,994.		
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) <b>STATEMENT 8</b> .....	4b	141,994.		
c Combine lines 4a and 4b .....			4c	0.
5a Net gain or loss from disposition of property (see instructions) .....	5a	-1,500.		
b Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions) .....	5b			
c Adjustment from disposition of partnership interest or S corporation stock (see instructions) .....	5c			
d Combine lines 5a through 5c .....			5d	-1,500.
6 Adjustments to investment income for certain CFCs and PFICs (see instructions) .....			6	
7 Other modifications to investment income (see instructions) .....			7	
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7 .....			8	-1,108.

**Part II Investment Expenses Allocable to Investment Income and Modifications**

9a Investment interest expenses (see instructions) .....	9a			
b State, local, and foreign income tax (see instructions) .....	9b			
c Miscellaneous investment expenses (see instructions) .....	9c			
d Add lines 9a, 9b, and 9c .....			9d	
10 Additional modifications (see instructions) .....			10	
11 Total deductions and modifications. Add lines 9d and 10 .....			11	

**Part III Tax Computation**

12 Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a - 21. If zero or less, enter -0- <b>Individuals:</b> .....			12	
13 Modified adjusted gross income (see instructions) .....	13	2,958,118.		
14 Threshold based on filing status (see instructions) .....	14	125,000.		
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15	2,833,118.		
16 Enter the smaller of line 12 or line 15 .....			16	
17 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). <b>Enter here and include on your tax return</b> (see instructions) .....			17	
<b>Estates and Trusts:</b>				
18a Net investment income (line 12 above) .....	18a			
b Deductions for distributions of net investment income and charitable deductions (see instructions) .....	18b			
c Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0- .....	18c			
19a Adjusted gross income (see instructions) .....	19a			
b Highest tax bracket for estates and trusts for the year (see instructions) .....	19b			
c Subtract line 19b from line 19a. If zero or less, enter -0- .....	19c			
20 Enter the smaller of line 18c or line 19c .....			20	
21 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). <b>Enter here and include on your tax return</b> (see instructions) .....			21	

LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8960 (2023)

**Passive Activity Loss Limitations**

Department of the Treasury  
Internal Revenue Service

See separate instructions.  
Attach to Form 1040, 1040-SR, or 1041.  
Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

**2023**  
Attachment  
Sequence No. **858**

Name(s) shown on return

Identifying number

**STEPHEN G. HILTON**

**Part I 2023 Passive Activity Loss**

**Caution:** Complete Parts IV and V before completing Part I.

**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** in the instructions.)

1a	Activities with net income (enter the amount from Part IV, column (a))	1a	
1b	Activities with net loss (enter the amount from Part IV, column (b))	1b	( )
1c	Prior years' unallowed losses (enter the amount from Part IV, column (c))	1c	( )
1d			Combine lines 1a, 1b, and 1c

**All Other Passive Activities**

2a	Activities with net income (enter the amount from Part V, column (a))	2a	
2b	Activities with net loss (enter the amount from Part V, column (b))	2b	( 63,786. )
2c	Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	( 149,664. )
2d			Combine lines 2a, 2b, and 2c

-213,450.

3 Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used

-213,450.

- If line 3 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

**Part II Special Allowance for Rental Real Estate Activities With Active Participation**

**Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

4	Enter the smaller of the loss on line 1d or the loss on line 3	4	
5	Enter \$150,000. If married filing separately, see instructions	5	
6	Enter modified adjusted gross income, but not less than zero. See instructions <b>Note:</b> If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.	6	
7	Subtract line 6 from line 5	7	
8	Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9	Enter the smaller of line 4 or line 8. If line 3 includes any CRD, see instructions	9	

**Part III Total Losses Allowed**

10	Add the income, if any, on lines 1a and 2a and enter the total	10	
11	Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return	11	SEE STATEMENT 12 0.

**Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
<b>Total.</b> Enter on Part I, lines 1a, 1b, and 1c					

For Paperwork Reduction Act Notice, see instructions.

**Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c.** See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
<b>SEE ATTACHED STATEMENT FOR PART V</b>					
<b>Total.</b> Enter on Part I, lines 2a, 2b, and 2c		-63,786.	-149,664.		

**Part VI Use This Part if an Amount Is Shown on Part II, Line 9.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
<b>Total</b>					

**Part VII Allocation of Unallowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
<b>SEE ATTACHED STATEMENT FOR PART VII</b>				
<b>Total</b>		213,450.	1.000000000	213,450.

**Part VIII Allowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
<b>SEE ATTACHED STATEMENT FOR PART VIII</b>				
<b>Total</b>		213,450.	213,450.	

ALTERNATIVE MINIMUM TAX  
**Passive Activity Loss Limitations**

Department of the Treasury  
Internal Revenue Service

See separate instructions.  
Attach to Form 1040, 1040-SR, or 1041.  
Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

**2023**  
Attachment  
Sequence No. **858**

Name(s) shown on return

Identifying number

**STEPHEN G. HILTON**

**Part I 2023 Passive Activity Loss**

Caution: Complete Parts IV and V before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see <b>Special Allowance for Rental Real Estate Activities</b> in the instructions.)			
1a	Activities with net income (enter the amount from Part IV, column (a))	1a	
1b	Activities with net loss (enter the amount from Part IV, column (b))	1b	( )
1c	Prior years' unallowed losses (enter the amount from Part IV, column (c))	1c	( )
d Combine lines 1a, 1b, and 1c		1d	
<b>All Other Passive Activities</b>			
2a	Activities with net income (enter the amount from Part V, column (a))	2a	
2b	Activities with net loss (enter the amount from Part V, column (b))	2b	( 63,786 )
2c	Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	( 149,664 )
d Combine lines 2a, 2b, and 2c		2d	-213,450.
3	Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-213,450.

- If line 3 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

**Part II Special Allowance for Rental Real Estate Activities With Active Participation**

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

4	Enter the smaller of the loss on line 1d or the loss on line 3	4	
5	Enter \$150,000. If married filing separately, see instructions	5	
6	Enter modified adjusted gross income, but not less than zero. See instructions Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.	6	
7	Subtract line 6 from line 5	7	
8	Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9	Enter the smaller of line 4 or line 8. If line 3 includes any CRD, see instructions	9	

**Part III Total Losses Allowed**

10	Add the income, if any, on lines 1a and 2a and enter the total	10	
11	Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return	11	SEE STATEMENT 16 0.

**Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c.** See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
<b>Total.</b> Enter on Part I, lines 1a, 1b, and 1c					

For Paperwork Reduction Act Notice, see instructions.

**ALTERNATIVE MINIMUM TAX**

Form 8582 (2023) **STEPHEN G. HILTON**

**Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c.** See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
	SEE ATTACHED STATEMENT FOR PART V				
<b>Total.</b> Enter on Part I, lines 2a, 2b, and 2c		-63,786.	-149,664.		

**Part VI Use This Part if an Amount Is Shown on Part II, Line 9.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
<b>Total</b>					

**Part VII Allocation of Unallowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
	SEE ATTACHED STATEMENT FOR PART VII			
<b>Total</b>		213,450.	1.000000000	213,450.

**Part VIII Allowed Losses.** See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
	SEE ATTACHED STATEMENT FOR PART VIII			
<b>Total</b>		213,450.	213,450.	

# Expenses for Business Use of Your Home

Department of the Treasury  
Internal Revenue Service

File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

**2023**  
Attachment  
Sequence No. 176

Go to [www.irs.gov/Form8829](http://www.irs.gov/Form8829) for instructions and the latest information.

Name(s) of proprietor(s)

**STEPHEN G. HILTON**

Your social security number

## Part I Part of Your Home Used for Business

1	Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions)	1	
2	Total area of home	2	
3	Divide line 1 by line 2. Enter the result as a percentage	3	%
<b>For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7.</b>			
4	Multiply days used for daycare during year by hours used per day	4	hr.
5	If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760	5	hr.
6	Divide line 4 by line 5. Enter the result as a decimal amount	6	
7	Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3	7	%

## Part II Figure Your Allowable Deduction

8	Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, minus any loss from the trade or business not derived from the business use of your home. See instructions.	8	-141,994.
<small>See instructions for columns (a) and (b) before completing lines 9-22.</small>			
9	Casualty losses (see instructions)	9	
10	Deductible mortgage interest (see instructions)	10	
11	Real estate taxes (see instructions)	11	
12	Add lines 9, 10, and 11	12	
13	Multiply line 12, column (b), by line 7	13	
14	Add line 12, column (a), and line 13	14	
15	Subtract line 14 from line 8. If zero or less, enter -0-	15	0.
16	Excess mortgage interest (see instructions)	16	
17	Excess real estate taxes (see instructions)	17	
18	Insurance	18	
19	Rent	19	
20	Repairs and maintenance	20	
21	Utilities	21	
22	Other expenses (see instructions)	22	
23	Add lines 16 through 22	23	
24	Multiply line 23, column (b), by line 7	24	
25	Carryover of prior year operating expenses (see instructions)	25	
26	Add line 23, column (a), line 24, and line 25	26	
27	Allowable operating expenses. Enter the smaller of line 15 or line 26	27	
28	Limit on excess casualty losses and depreciation. Subtract line 27 from line 15	28	0.
29	Excess casualty losses (see instructions)	29	
30	Depreciation of your home from line 42 below	30	
31	Carryover of prior year excess casualty losses and depreciation (see instructions)	31	
32	Add lines 29 through 31	32	
33	Allowable excess casualty losses and depreciation. Enter the smaller of line 28 or line 32	33	0.
34	Add lines 14, 27, and 33	34	0.
35	Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions	35	0.
36	<b>Allowable expenses for business use of your home.</b> Subtract line 35 from line 34. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions	36	0.

## Part III Depreciation of Your Home

37	Enter the smaller of your home's adjusted basis or its fair market value. See instructions	37	
38	Value of land included on line 37	38	
39	Basis of building. Subtract line 38 from line 37	39	
40	Business basis of building. Multiply line 39 by line 7	40	
41	Depreciation percentage (see instructions)	41	%
42	Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above	42	

## Part IV Carryover of Unallowed Expenses to 2024

43	Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0-	43	
44	Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-	44	

Form **4562**

# Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

# 2023

Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return

Attach to your tax return. **SCHEDULE E- 1**

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Attachment  
Sequence No. **179**

Business or activity to which this form relates  
**RESIDENTIAL - 67A  
LEVERTON STREET, LONDON**

Identifying number  
[REDACTED]

**STEPHEN G. HILTON**

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	9,155.

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>	

**Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property	/	27.5 yrs.	MM	S/L	
		/	27.5 yrs.	MM	S/L	
i	Nonresidential real property	/	39 yrs.	MM	S/L	
		/		MM	S/L	

**Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year	/	30 yrs.	MM	S/L	
d	40-year	/	40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	9,155.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. 26 Property used more than 50% in a qualified business use. 27 Property used 50% or less in a qualified business use. 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1. 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 main columns (a-f) for Vehicle 1 through Vehicle 6. Rows include: 30 Total business/investment miles driven during the year (don't include commuting miles); 31 Total commuting miles driven during the year; 32 Total other personal (noncommuting) miles driven; 33 Total miles driven during the year. Add lines 30 through 32; 34 Was the vehicle available for personal use during off-duty hours?; 35 Was the vehicle used primarily by a more than 5% owner or related person?; 36 Is another vehicle available for personal use?

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners. 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Rows include: 42 Amortization of costs that begins during your 2023 tax year; 43 Amortization of costs that began before your 2023 tax year; 44 Total. Add amounts in column (f). See the instructions for where to report.

Form **4562**

Department of the Treasury  
Internal Revenue Service  
Name(s) shown on return

# Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return. **SCHEDULE E- 2**

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

# 2023

Attachment  
Sequence No. **179**

**STEPHEN G. HILTON**

Business or activity to which this form relates

**RESIDENTIAL - 67B  
LEVERTON STREET, LONDON**

Identifying number

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(e) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2022 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	14,851.

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2023	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property	/	27.5 yrs.	MM	S/L	
i	Nonresidential real property	/	27.5 yrs.	MM	S/L	
		/	39 yrs.	MM	S/L	
		/		MM	S/L	

**Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year	/	30 yrs.	MM	S/L	
d	40-year	/	40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	14,851.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with columns for percentage and other details.

27 Property used 50% or less in a qualified business use: Table with columns for percentage and S/L status.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include 30-36 regarding miles driven and personal use availability.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

Table for Section C with questions 37-41 and Yes/No columns.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

Table for Part VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2023 tax year:

43 Amortization of costs that began before your 2023 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

**Statement of Specified Foreign Financial Assets**  
 ▶ Go to [www.irs.gov/Form8938](http://www.irs.gov/Form8938) for instructions and the latest information.  
 ▶ Attach to your tax return.

OMB No. 1545-2195  
 Attachment  
 Sequence No. **938**

For calendar year **2023** or tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

If you have attached additional statements, check here  Number of additional statements \_\_\_\_\_

**1** Name(s) shown on return  
**STEPHEN G. HILTON**

**2** Taxpayer identification number (TIN)  
 [REDACTED]

**3** Type of filer  
 a  Specified individual    b  Partnership    c  Corporation    d  Trust

**4** If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name \_\_\_\_\_ b TIN \_\_\_\_\_

**Part I Foreign Deposit and Custodial Accounts Summary**

<b>5</b> Number of deposit accounts (reported in Part V)	<b>1</b>
<b>6</b> Maximum value of all deposit accounts	\$ <b>160,465.</b>
<b>7</b> Number of custodial accounts (reported in Part V)	_____
<b>8</b> Maximum value of all custodial accounts	\$ _____
<b>9</b> Were any foreign deposit or custodial accounts closed during the tax year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Part II Other Foreign Assets Summary**

<b>10</b> Number of foreign assets (reported in Part VI)	<b>1</b>
<b>11</b> Maximum value of all assets (reported in Part VI)	\$ <b>711,188.</b>
<b>12</b> Were any foreign assets acquired or sold during the tax year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets** (see instructions)

(a) Asset category	(b) Tax item	(c) Amount reported on form or schedule	Where reported	
			(d) Form and line	(e) Schedule and line
<b>13</b> Foreign deposit and custodial accounts	a Interest	\$ <b>360.</b>		<b>SCH B, LN 1</b>
	b Dividends	\$ _____		
	c Royalties	\$ _____		
	d Other income	\$ _____		
	e Gains (losses)	\$ _____		
	f Deductions	\$ _____		
	g Credits	\$ _____		
<b>14</b> Other foreign assets	a Interest	\$ _____		
	b Dividends	\$ _____		
	c Royalties	\$ _____		
	d Other income	\$ _____		
	e Gains (losses)	\$ _____		
	f Deductions	\$ _____		
	g Credits	\$ _____		

**Part IV Excepted Specified Foreign Financial Assets** (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

**15** Number of Forms 3520 \_\_\_\_\_    **16** Number of Forms 3520-A \_\_\_\_\_    **17** Number of Forms 5471 \_\_\_\_\_  
**18** Number of Forms 8621 \_\_\_\_\_    **19** Number of Forms 8865 \_\_\_\_\_

**Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary**  
(see instructions)

If you have more than one account to report in Part V, attach a separate statement for each additional account. See instructions.

<b>20</b> Type of account	a <input checked="" type="checkbox"/> Deposit b <input type="checkbox"/> Custodial	<b>21</b> Account number or other designation
<b>22</b> Check all that apply	a <input type="checkbox"/> Account opened during tax year b <input type="checkbox"/> Account closed during tax year c <input checked="" type="checkbox"/> Account jointly owned with spouse d <input checked="" type="checkbox"/> No tax item reported in Part III with respect to this asset	
<b>23</b> Maximum value of account during tax year		\$ <b>160,465.</b>
<b>24</b> Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>25</b> If you answered "Yes" to line 24, complete all that apply.		
(a) Foreign currency in which account is maintained	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
<b>UNITED KINGDOM, POUND</b>	<b>.786000000</b>	
<b>26a</b> Name of financial institution in which account is maintained		<b>b</b> Global Intermediary Identification Number (GIIN) (Optional)
<b>C HOARE BANK</b>		
<b>27</b> Mailing address of financial institution in which account is maintained. Number, street, and room or suite no.		
<b>37 FLEET STREET</b>		
<b>28</b> City or town, state or province, country, and ZIP or foreign postal code		
<b>LONDON EC4P4DQ UNITED KINGDOM</b>		

**Part VI Detailed Information for Each "Other Foreign Asset" Included in the Part II Summary** (see instructions)

If you have more than one asset to report in Part VI, attach a separate statement for each additional asset. See instructions.

<b>29</b> Description of asset	<b>30</b> Identifying number or other designation	
<b>FOREIGN PENSION PLAN</b>	<b>IPP /</b>	
<b>31</b> Complete all that apply. See instructions for reporting of multiple acquisition or disposition dates.		
a Date asset acquired during tax year, if applicable b Date asset disposed of during tax year, if applicable c <input type="checkbox"/> Check if asset jointly owned with spouse d <input checked="" type="checkbox"/> Check if no tax item reported in Part III with respect to this asset		
<b>32</b> Maximum value of asset during tax year (check box that applies)		
a <input type="checkbox"/> \$0 - \$50,000    b <input type="checkbox"/> \$50,001 - \$100,000    c <input type="checkbox"/> \$100,001 - \$150,000    d <input type="checkbox"/> \$150,001 - \$200,000 e If more than \$200,000, list value		
\$ <b>711,188.</b>		
<b>33</b> Did you use a foreign currency exchange rate to convert the value of the asset into U.S. dollars?		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>34</b> If you answered "Yes" to line 33, complete all that apply.		
(a) Foreign currency in which asset is denominated	(b) Foreign currency exchange rate used to convert to U.S. dollars	(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service
<b>UNITED KINGDOM, POUND</b>		
<b>35</b> If asset reported on line 29 is stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.		
a Name of foreign entity	b GIIN (Optional)	
<b>c</b> Type of foreign entity	(1) <input type="checkbox"/> Partnership    (2) <input type="checkbox"/> Corporation    (3) <input type="checkbox"/> Trust    (4) <input type="checkbox"/> Estate	
d Mailing address of foreign entity. Number, street, and room or suite no.		
e City or town, state or province, country, and ZIP or foreign postal code		

**36** If asset reported on line 29 is not stock of a foreign entity or an interest in a foreign entity, enter the following information for the asset.  
**Note:** If this asset has more than one issuer or counterparty, attach a separate statement with the same information for each additional issuer or counterparty. See instructions.

a Name of issuer or counterparty	<b>CLERICAL MEDICAL PERS PENSION</b>
Check if information is for <input checked="" type="checkbox"/> Issuer <input type="checkbox"/> Counterparty	
b Type of issuer or counterparty	
(1) <input type="checkbox"/> Individual    (2) <input type="checkbox"/> Partnership    (3) <input checked="" type="checkbox"/> Corporation    (4) <input type="checkbox"/> Trust    (5) <input type="checkbox"/> Estate	
c Check if issuer or counterparty is a <input type="checkbox"/> U.S. person <input checked="" type="checkbox"/> Foreign person	
d Mailing address of issuer or counterparty. Number, street, and room or suite no.	
<b>CASTLEWOOD TWICKENHAM ROAD</b>	
e City or town, state or province, country, and ZIP or foreign postal code	
<b>CASTLEWOOD TWICKENHAM ROAD BS216BD UNITED KINGDOM</b>	

## Form 1116

## U.S. and Foreign Source Income Summary

NAME

STEPHEN G. HILTON

INCOME TYPE	TOTAL	U.S.	FOREIGN PASSIVE
Compensation	3,101,220.	3,101,220.	
Dividends/Distributions			
Interest	392.	392.	
Capital Gains			
Business/Profession	3,439.	3,439.	
Rent/Royalty	13,060.		13,060.
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income			
Gross Income	<u>3,118,111.</u>	<u>3,105,051.</u>	<u>13,060.</u>
Less:			
Section 911 Exclusion			
Capital Losses			
Capital Gains Tax Adjustment			
Total Income - Form 1116	<u>3,118,111.</u>	<u>3,105,051.</u>	<u>13,060.</u>
Deductions:			
Business/Profession Expenses	145,433.	145,433.	
Rent/Royalty Expenses	13,060.		13,060.
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses	1,500.	1,500.	
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction			
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments			
Capital Gains Tax Adjustment			
Total Deductions	<u>159,993.</u>	<u>146,933.</u>	<u>13,060.</u>
Adjusted Gross Income	<u>2,958,118.</u>	<u>2,958,118.</u>	
Less Itemized Deductions:			
Specifically Allocated	5.	5.	
Home Mortgage Interest			
Other Interest			
Ratably Allocated	5,000.	4,979.	21.
Other Deductions			
Total Adjustments to Adjusted Gross Income	<u>5,005.</u>	<u>4,984.</u>	<u>21.</u>
Taxable Income	<u>2,953,113.</u>	<u>2,953,134.</u>	<u>-21.</u>

**Form 1116**

**Allocation of Itemized Deductions**

NAME

**STEPHEN G. HILTON**

	Total Itemized Deductions	Form 1116		
		Specifically U.S.	Specifically Foreign	Ratable
Medical/Dental .....				
Taxes .....	5,000.			5,000.
Interest - Not Including Investment Interest .....				
Investment Interest .....				
Contributions .....	5.	5.		
Casualty Losses .....				
Other Miscellaneous Deductions - Not Including Gambling Losses .....				
Gambling Losses .....				
Foreign Adjustment .....				
<b>Total Itemized Deductions .....</b>	<b>5,005.</b>	<b>5.</b>		<b>5,000.</b>

STEPHEN G. HILTON



FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 1

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T FOX NEWS NETWORK LLC	509,615.	122,514.	22,181.		9,932.	10,176.
T NETFLIX, INC.	5,692,825.	2,030,783.	391,333.			
<b>TOTALS</b>	<b>6,202,440.</b>	<b>2,153,297.</b>	<b>413,514.</b>		<b>9,932.</b>	<b>10,176.</b>

FORM 1040 FEDERAL INCOME TAX WITHHELD - OTHER FORMS STATEMENT 2

T S DESCRIPTION	AMOUNT
FORM 8959, LINE 24	2,787.
<b>TOTAL TO FORM 1040, LINE 25C</b>	<b>2,787.</b>

SCHEDULE 1 STATE AND LOCAL INCOME TAX REFUNDS STATEMENT 3

	2022	2021	2020
GROSS STATE/LOCAL INC TAX REFUNDS	40,164.		
LESS: TAX PAID IN FOLLOWING YEAR			
<b>NET TAX REFUNDS CALIFORNIA</b>	<b>40,164.</b>		
<b>TOTAL NET TAX REFUNDS</b>	<b>40,164.</b>		

STEPHEN G. HILTON



SCHEDULE 1		TAXABLE STATE AND LOCAL INCOME TAX REFUNDS		STATEMENT 4
		2020	2021	2022
NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT.				40,164.
LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION				
1	NET REFUNDS FOR RECALCULATION		0.	40,164.
2	AMOUNT FROM PRIOR YEAR SCHEDULE A, LINE 5E			5,000.
3	TOTAL OF PRIOR YEAR SCHEDULE A, LINES 5B AND 5C			
4	SUBTRACT LINE 3 FROM LINE 2 IF ZERO OR LESS, STOP HERE NONE OF YOUR REFUND IS TAXABLE	0.	0.	5,000.
5	ENTER THE STATE AND LOCAL INCOME TAXES FROM PRIOR YEAR SCHEDULE A, LINE 5A			400,340.
6	ENTER THE AMOUNT FROM LINE 1			40,164.
7	SUBTRACT LINE 6 FROM LINE 5			360,176.
8	ADD LINE 7 TO LINE 3			360,176.
9	SUBTRACT LINE 8 FROM LINE 2			-355,176.
10	ENTER THE LESSER OF LINE 4, LINE 6 OR LINE 9. IF ZERO OR LESS, STOP HERE. NONE OF YOUR REFUND IS TAXABLE. IF GREATER THAN ZERO, PROCEED TO LINE 11			-355,176.
11	ALLOWABLE PRIOR YEAR ITEMIZED DEDUCTIONS			
12	ENTER YOUR PRIOR YEAR STANDARD DEDUCTION			
13	SUBTRACT LINE 12 FROM LINE 11			
14	ENTER THE SMALLER OF LINE 10 OR LINE 13.			
15	PRIOR YEAR TAXABLE INCOME			
16	AMOUNT TO INCLUDE ON SCHEDULE 1, LINE 1			
	* IF LINE 15 IS -0- OR MORE, USE AMOUNT FROM LINE 14			
	* IF LINE 15 IS A NEGATIVE AMOUNT, NET LINES 14 AND 15			
STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2020				
TOTAL TO SCHEDULE 1, LINE 1				

STEPHEN G. HILTON



SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT 5
DESCRIPTION		AMOUNT
FOX NEWS NETWORK LLC		22,181.
NETFLIX, INC.		391,333.
TOTAL TO SCHEDULE A, LINE 5A		413,514.

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT 6
1. ENTER THE AMOUNT FROM FORM 1040, LINE 15		2,953,113.
2. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT		1,500.
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		2,954,613.
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		1,500.
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT		193,500.
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15		
7. ADD LINES 4 AND 6		1,500.
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		192,000.
9. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT		
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7		
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-		
12. ADD LINES 10 AND 11		
13. LONG-TERM CAPITAL LOSS CARRYOVER TO NEXT YEAR. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		

FORM 1116	EXPENSES DIRECTLY ALLOCABLE TO FOREIGN INCOME	STATEMENT 7
DESCRIPTION	COUNTRY	AMOUNT
RESIDENTIAL	UNITED KINGDOM	6,530.
RESIDENTIAL	UNITED KINGDOM	6,530.
TOTAL TO FORM 1116, PART I, LINE 2		13,060.

STEPHEN G. HILTON



FORM 8960	TRADE OR BUSINESS INCOME	STATEMENT 8
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CR PRODUCTIONS LLC	141,994.
AMOUNT TO FORM 8960, LINE 4B	141,994.

FORM 8582	OTHER PASSIVE ACTIVITIES - PART V	STATEMENT 9
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NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-26,347.	-48,084.		-74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-37,439.	-101,580.		-139,019.
TOTALS	0.	-63,786.	-149,664.		-213,450.

FORM 8582	ALLOCATION OF UNALLOWED LOSSES - PART VII	STATEMENT 10
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NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	.348704615	74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	.651295385	139,019.
TOTALS		213,450.	1.000000000	213,450.

FORM 8582 ALLOWED LOSSES - PART VIII STATEMENT 11

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	74,431.	
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	139,019.	
TOTALS		213,450.	213,450.	

FORM 8582 SUMMARY OF PASSIVE ACTIVITIES STATEMENT 12

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	-26,347.	-48,084.	-74,431.	74,431.	
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	-37,439.	-101,580.	-139,019.	139,019.	
TOTALS		-63,786.	-149,664.	-213,450.	213,450.	
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582, LINE 11						

FORM 8582

ALTERNATIVE MINIMUM TAX  
OTHER PASSIVE ACTIVITIES - PART V

STATEMENT 13

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-26,347.	-48,084.		-74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	0.	-37,439.	-101,580.		-139,019.
TOTALS	0.	-63,786.	-149,664.		-213,450.

FORM 8582

ALTERNATIVE MINIMUM TAX  
ALLOCATION OF UNALLOWED LOSSES - PART VII

STATEMENT 14

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	.348704615	74,431.
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	.651295385	139,019.
TOTALS		213,450.	1.000000000	213,450.

FORM 8582

ALTERNATIVE MINIMUM TAX  
ALLOWED LOSSES - PART VIII

STATEMENT 15

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67A LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	74,431.	74,431.	
RESIDENTIAL - 67B LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM	SCH E	139,019.	139,019.	
TOTALS		213,450.	213,450.	

STEPHEN G. HILTON



FORM 8582AMT

SUMMARY OF PASSIVE ACTIVITIES - AMT

STATEMENT 16

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
RESIDENTIAL - 67ASCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-26,347.	-48,084.	-74,431.	74,431.	
RESIDENTIAL - 67BSCH E LEVERTON STREET, LONDON NW5 2NX UNITED KINGDOM		-37,439.	-101,580.	-139,019.	139,019.	
TOTALS		-63,786.	-149,664.	-213,450.	213,450.	
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582AMT, LINE 11						