س مع ماتي		1				0.0					
		NΟ	ттсғ	2018-100	٠.	29	393	306	27336		
Form -990-T	E	NO cempt Organization (and proxy ta	Bus	siness Inc	ome	Tax Retu	rn	OMB No	1545-0687		
	For cale	ndar year 2018 or other tax year beg				• •	20	<b>୬</b> ଏ	<b>112</b>		
Department of the Treasury	1 01 52.55	► Go to www.irs.gov/Form99				·		كال	<i>y</i> 10		
Internal Revenue Service	<b>▶</b> Do	not enter SSN numbers on this form					(c)(3)	Open to Put 501(c)(3) Or	plic Inspection for ganizations Only		
A Check box if address changed		Name of organization ( Check	box if na	me changed and see	instructions	S)		yer identifica yees' trust, see	ation number		
	'4										
B Exempt under section								13-5633307			
X 501( C)(B)	Print or	Number, street, and room or suite no	паро	box, see instructions	5				s activity code		
408(e) 220(e	1 y pe	1300 SPRING STREET				500		structions)	, acarry code		
408A530(a	1)	City or town, state or province, coun	try and 2	7IP or foreign postal o	ode		1				
529(a)  C Book value of all assets	1	SILVER SPRING, MD 2	•				45231	.9			
at end of year		up exemption number (See instruc						_			
70,175,662.		eck organization type   X 50			501(c)	trust	401(a)	trust	Other trust		
		inization's unrelated trades or busin						(or first) uni	related		
trade or business he					only one,	complete Parts	•				
		end of the previous sentence, co	omplete	Parts I and II, con	nplete a So	chedule M for ea	ach addition	al			
trade or business, t											
I During the tax year	, was the	corporation a subsidiary in an aff	iliated g	roup or a parent-su	ubsidiary o	ontrolled group?	·	▶ ∟	Yes X No		
If "Yes," enter the	name and	identifying number of the parent of	orporati	on 🕨							
J The books are in ca	re of ▶HA	AYFORD MENSAH, CFO			Telephon	e number ► 30	01-844-	7300			
		or Business Income		(A) Incom	ie	(B) Expe	nses	- (	C) Net		
1 a Gross receipts or	sales	13,593.									
<b>b</b> Less returns and allow		c Balance l			,593.			1	1		
		ule A, line 7)			,402.			<del> </del>	2,191.		
		2 from line 1c	. 3		,191.						
		ettach Schedule D)						1			
- , , ,		Part II, line 17) (attach Form 4797)						-			
Ť		trusts			-	1		1			
		r an S corporation (attach statement)									
		come (Schedule E)				<del></del> -		<del>                                     </del>			
		, , , , , , , , ,	· —		-						
	-	ents from a controlled organization (Schedule 1(c)(7), (9), or (17) organization (Schedule C	·			<u>.</u>					
		ncome (Schedule I)	′ <del></del>								
		dule J)									
<del>-</del>	•	tions, attach schedule)									
13 Total Combine	lines 3 thr	ough 12	13		,191.				2,191.		
Part II Deduction	ns Not	Taken Elsewhere (See ins	tructio	ons for limitation	ns on d	eductions)(	Except for	or contrib	utions,		
deductio	ns must	be directly connected with	the u	nrelated busine	ess inco	me)					
14 Compensation of	of officers,	directors, and trustees (Schedule	٥		ا خدانها ما	'm= m' ' '	14				
					ECE	VED O	15				
16 Repairs and mai	ntenance				3± 6 6	90	16				
17 Bad debts				S   U	2.9 .ال	2019.	17		<del>,</del>		
		(see instructions)				إكا أسمسمسميد	18	ļ			
					GDEN	i, UT	19	-	8,937.		
		See instructions for limitation rules		1		<del></del> .	20	-			
		4562)									
·		on Schedule A and elsewhere on					22b	-			
		• • • • • • • • • • • • • • • • • • •									
		compensation plans									
		s									
•	•	schedule J)									
28 Other deduction						ATCH 1		<del> </del>	3,500.		

29

30

Form **990-T** (2018)

12,437.

-10,246.

-10,246.

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29

30

31

32

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

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

Form	990-T (2018)			Pa	ige 2
Par	t III Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	.			
	ınstructions)				0.
34	Amounts paid for disallowed fringes	. 34	16	51,3	24.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see				
	instructions)				0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum				
<b>V U</b>	of lines 33 and 34		16	51,3	24.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)			1,0	00.
	Unrelated business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36,	· <del></del>			
38	enter the smaller of zero or line 36		16	50,3	24.
Do		.   30			
	t IV Tax Computation	▶ 39		33,6	68.
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)		<del>_</del>	,,,	<del></del>
40	Trusts Taxable at Trust Rates. See instructions for tax computation income tax on	1 1			
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)				
41	Proxy tax See instructions	► 41			
42	Alternative minimum tax (trusts only)	. 42			
43	Tax on Noncompliant Facility Income. See instructions			10.0	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	. 44	3	33,6	68.
Par	t V Tax and Payments				
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	_			
b	Other credits (see instructions)	_			
С	General business credit Attach Form 3800 (see instructions)	_			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)				
е	Total credits. Add lines 45a through 45d	. 45e			
46	Subtract line 45e from line 44		3	33 <u>,</u> 6	68.
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)				
48	Total tax. Add lines 46 and 47 (see instructions)			33,6	68.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				
	Payments A 2017 overpayment credited to 2018				
JU a	2018 estimated tax payments				
	Tax deposited with Form 8868				
	Foreign organizations Tax paid or withheld at source (see instructions) 50d				
	Backup withholding (see instructions)	-			
	Credit for small employer health insurance premiums (attach Form 8941) 50f	7			
	orealt for small employer meant insorance promising (ender the small end of the small end o				
9	Other credits, adjustments, and payments Form 2439 Other Total 50g				
-4		. 51			
	Total payments Add lines 50a through 50g	52			
	Estimated tax penalty (see instructions) Check if Form 2220 is attached			33,6	68
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		,,,	<del>.</del>
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54			
55	Enter the amount of line 54 you want Credited to 2019 estimated tax				
Par				V T	N -
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of			Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization of				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	e foreign	country	.,	
	here ATTACHMENT 3		—— ├	Х	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	reign trust	² <u> </u>		X
	If "Yes," see instructions for other forms the organization may have to file			1	
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$873,038.				
	Under penalties of perjury I declare that I have examined this return, including accompanying schedules and statements, and to the	e best of m	y knowledge an	d belief	, it is
Sig	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	May the	IRS discuss t	his re	ture
Her		•	preparer sho		
		(see instruction	· · · —	$\overline{}$	No
	Print/Type preparer's name Preparer's signature Date	ook .	PTIN		
Paid	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	eck   if f-employed	P0084	7851	
Prep	parer - CDANT MICONITION LLD		36-6055		
Use	Only		3-847-7		
	Films address > 1000 Willook DBVD, Solita 1400, AMBINGTON, VA 22209 PAC	יוו פווע י		0 T	

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Form **990-T** (2018)

Form-990-T (2018)									F	Page 3
Schedule A - Cost of G	<u>oods Sold. E</u>	nter method	d of invento							
1 Inventory at beginning of	year . 1			6 Inventory	at end of ye	ar	6			
<b>2</b> Purchases				7 Cost of	goods so	ld. Subtract line	1 1			
3 Cost of labor	3			6 from		iter here and in				
4a Additional section 263A c	osts			Part I, line	2		7			
(attach schedule)	4a			8 Do the	rules of	section 263A (w	ith re	spect to 🗋	/es	No
<b>b</b> Other costs (attach schedu	ule) . 4b					or acquired for			ĺ	ĺ
5 Total. Add lines 1 through				to the orga	anization? .	<u></u>	<u></u>	<u> </u>		X
Schedule C - Rent Incom	e (From Real f	Property a	nd Persor	nal Property	Leased V	Vith Real Proper	ty)			
(see instructions)										
1. Description of property										
(1)										
(2)										
(3)										
(4)										
	2. Rent rece	ived or accru	ed		· · · · · · · · · · · · · · · · · · ·	<u>}</u>				
(a) From personal property (if the for personal property is more th more than 50%	nan 10% but not	percent	age of rent for	personal property personal property based on profit or	exceeds	3(a) Deductions di in columns 2(		nnected with the b) (attach sched		me
(1)	<del>-</del>		<del>'</del>			1		<u> </u>		
(2)										
(3)										
(4)										
Total		Total								
(c) Total income Add totals of c	olumns 2(a) and 2	(b) Enter				(b) Total deductio Enter here and on				
here and on page 1, Part I, line 6						Part I, line 6, colum				
Schedule E - Unrelated D			e instruction	ons)						
1. Description of de	bt-financed property			ncome from or debt-financed		Deductions directly con debt-finance	ed proper	ty		
			pro	operty	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)			
(1)										
(2)										
(3)					_					
(4)								-		
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adju of or alloca debt-financed (attach sch	ible to property	4 0	Column divided olumn 5	_	income reportable n 2 x column 6)		Allocable deduc nn 6 x total of c 3(a) and 3(b))	olumi	
(1)				%						
(2)				%						
(3)		_		%						
(4)				%						
						e and on page 1, e 7, column (A)		here and on a line 7, colum		
Totals						▶				

Form 990-T (2018)	HIAS, IN							_		633307 Page <b>4</b>	
Schedule F-Interest, Ann	uities, Royalties	, and Ren	ts Fro	om Contro	lled Or	ganiza	<b>tions</b> (see	Instruction	ns)		
		Exen	npt Co	ontrolled Org	ganızatı	ons					
1 Name of controlled organization	, ,				1	of specified included		of column 4 that is ed in the controlling ation's gross income		6 Deductions directly connected with income in column 5	
(1)											
(2)										_	
(3)										_	
(4)	<del></del>									<u> </u>	
Nonexempt Controlled Organi	zations							<u> </u>			
7 Taxable Income	8 Net unrelated in (loss) (see instruction	1		Total of specific payments made	ed	ınclı	art of column ided in the co lization's gros	ntrolling		Deductions directly nected with income in column 10	
(1)	<del> </del>								<del>                                     </del>		
(2)				_			-		<del> </del>		
(3)	· · · · · · · · · · · · · · · · · · ·				_		-		<del>                                     </del>		
(4)	<u></u>					۸۵	d columns 5 a	nd 10	Δ,	dd columns 6 and 11	
						Ente	er here and on II, line 8, colu	page 1,	Ent	ter here and on page 1, art I, line 8, column (B)	
Totals					▶				<u> </u>		
Schedule G-Investment II	ncome of a Sec	tion 501(	c)(7),			nizatio	n (see ins	tructions)			
1 Description of income	2 Amount of	income		3 Deduction of the 3 december 3 d	nected		4 Set-asides (attach schedule)			5 Total deductions and set-asides (col. 3 plus col. 4)	
(1)		_									
(2)											
(3)									$\rightarrow$		
(4)									$\longrightarrow$		
	Enter here and Part I, line 9, or						Enter here and on page 1, Part I, line 9, column (B)				
Totals ▶	1			***						<del></del>	
Schedule I – Exploited Exc	empt Activity In	come, Oth	er Th	an Advert	ising Ir	come	(see instru	ctions)		<del></del>	
1. Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expension directly connected production unrelate business in	y with n of ed	4 Net incomfrom unrelated or business 2 minus collif a gain, collif a gain, collif a familiary three seconds 5	ed trade (column umn 3) ompute	5 Gross income from activity that is not unrelated business income 6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)			
(1)											
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Pa line 10, col	art I,							Enter here and on page 1, Part II, line 26	
Totals	acomo (soo instr	uctions)					<u>.</u>				
			oneol	idated Rac	e ie						
Part I Income From Per		eu on a C	UIISUI	luateu Das		Ι					
1 Name of periodical	2 Gross advertising income	3 Directions		4 Advent gain or (los 2 minus co a gain, co cols 5 thro	s) (col ol 3) If mpute		irculation ncome	6 Reade cost		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)											
(2)											
(3)											
(4)										<u> </u>	
						<u> </u>					
Totals (carry to Part II, line (5))				1						Form <b>990-T</b> (2018)	

13-5633307

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

2 through 7 on a	iine-by-iine basi	s)					
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)							
(2)							
(3)							
(4)							
Totals from Part I ▶				`	ļ	·	
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,			Enter here and on page 1, Part II, line 27	
Totals, Part II (lines 1-5) ▶							
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)			
4 Name	-	2	Tutto	3 Percent of			

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

Form **990-T** (2018)

HIAS, Inc.

EIN: 13-563307

Form 990-T, Part I, Line 28 FYE 12/31/2018

**Other Deductions** 

HIAS, Inc.

EIN: 13-563307

Form 990-T, Part I, Line 31 FYE 12/31/2018

**Unrelated Trade or Business: Online Sales** 

Net Operating Loss Arising in Tax Years Beginning After January 1, 2018

Fiscal Year Ended	Net Operating (Loss) Incurred	Net Operating Loss Used	NOL Carryforward available for next year	Period NOL used
12/31/2018	(10,246)	-	(10,246)	N/A
Carryforward to FYE	12/31/2019		(10,246)	

HIAS, Inc.

EIN: 13-563307

Form 990-T, Part VI, Line 56 FYE 12/31/2018

## **Financial Accounts in Foreign Countries**

HIAS Inc. had an interest in or a signature or other authority over a financial account (bank, securities, other) in the following countries

Aruba, Austria, Chad, Costa Rica, Ecuador, France, Greece, Israel, Kenya, Panama, Republic of Georgia, Russia, Uganda, Ukraine, and Venezuela