Edgar Filing: HILTON HOTELS CORP - Form 4

HILTON HO	DTELS CORP										
Form 4											
October 03, 2	2005										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL	
UNITED STATES SECURITIES AND EACHANGE COMMISSION									OMB	3235-0287	
Check thi	is box		Was	shington,	D.C. 20	549			Number:		
if no long	ar								Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENI									Estimated average burden hours per		
Section 1		SECURITIES									
Form 4 o Form 5		aurquent to	Santian 1	6(a) of th	o Soourit	ion E	vohona	h A at of 1024	response	0.5	
obligation	na -						-	e Act of 1934, 1935 or Section	n		
may cont	inue.			vestment	•	· ·			1		
See Instru 1(b).	uction	50(II)	of the m	vestment	Compan	улс		.0			
1(0).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Person(s) to				
COLEMAN BARBARA BELL Symbol Issuer							Issuer				
HILTON HOTELS CORP [HLT]							(Chao)	k all appliaable)			
(Last) (First) (Middle) 3. [. Date of Earliest Transaction				(Check all applicable)			
				/Day/Year)				X Director 10% Owner			
HILTON HOTELS 09/30/2				-			Officer (give titleOther (specify				
CORPORA	TION, 9336 C	IVIC						below)	below)		
CENTER D	RIVE										
(Street) 4. If Ame				endment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)				
· · · · · · · · · · · · · · · · · · ·			Ionth/Day/Year)								
_X_Form f					_X_ Form filed by C	y One Reporting Person					
BEVERLY	HILLS, CA 90	0210						Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)								_	
(eny)	(Build)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D			3.	4. Securit			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye		tion Date, if Transaction(A) or Disposed of (D)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(Instr. 5)		any (Month/	Code (Instr. 3, 4 and 5) (Instr. 8)				Owned	Indirect (I)	Ownership		
		X		(Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(1180. 5 and 4)			
Common	09/30/2005			А	649 <u>(1)</u>	А	\$	1,906	D		
Stock					<u> </u>		22.32	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COLEMAN BARBARA BELL HILTON HOTELS CORPORATION 9336 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210	Х						
Signatures							
Barbara Bell Coleman by Bryan S. Wh Attorney-in-Fact	nite,		10/03/2005				
**Signature of Reporting Person		Date					

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Acquired pursuant to election to receive shares of Hilton common stock in lieu of quarterly director retainer fees under the Hilton Hotels Corporation Director's Stock and Deferred Retainer Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.