CHANGE OF ACCOUNTING PERIOD

# 990 Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2017 Open to Public Inspection

Form **990** (2

Department of the Treasury

A For the 2017 calendar year, or tax year beginning JUL 1, 2017 and ending DEC 31, C Name of organization Check if applicable D Employer identification number Address change DIAMOND PRODUCERS ASSOCIATION USA. Name change 81-3264830 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 28 W 44TH STREET 720 212-221-1724 term City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 29,983,838. Amende NEW YORK, NY 10036 H(a) Is this a group return Applica-tion pending F Name and address of principal officer. JEAN-MARC LIEBERHERR Yes X No for subordinates? SAME AS C ABOVE Yes H(b) Are all subordinates included? Tax-exempt status:  $\bigcirc$  501(c)(3)  $\bigcirc$  501(c) ( 6 )  $\triangleleft$  (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► WWW.DIAMONDPRODUCERS.COM **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > Year of formation: 2016 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: PROTECT AND PROMOTE THE Activities & Governance INTEGRITY AND REPUTATION OF DIAMONDS TO ENSURE THE INDUSTRY Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year** Current Year 0. 0. Contributions and grants (Part VIII, line 1h) Revenue 29,983,838. 19,223,804 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 19,223,804 29,983,838. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 0. Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 768,960. 612,245. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18,454,844 29,371 RECEIVED 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line-25) 19,223,804 .983 Revenue less expenses. Subtract line 18 from line 12 28 2018 Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 2,376,025. <u>8,366,146</u>. 21 Total liabilities (Part X, line 26) OGDEN. UT 8,366,146 2,376,025 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign JEAN-MARC LIEBERHERR, CHIEF EXECUTIVE OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Check Preparer's signature TED CARNEVALE 04/19/18 self-employed Paid P00020982 TED CARNEVALE Preparer Firm's name GRAMKOW CARNEVALE SEIFERT & CO., LLC Firm's EIN 22-3767827 Firm's address TWO FOREST AVENUE Use Only 599-004 ORADELL, NJ 07649 Phone no. (201) May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

1-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.
SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2017) DIAMOND PRODUCERS ASSOCIATION USA, INC. 81-3264830 Page 2 t III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
•	THE PURPOSE OF DIAMOND PRODUCERS ASSOCIATION USA, INC. (DPA USA) IS TO
	MAINTAIN AND ENHANCE CONSUMER DEMAND FOR AND CONFIDENCE IN NATURAL
	DIAMONDS. BY PROMOTING THE INTEGRITY AND REPUTATION OF DIAMONDS AND
	THE DIAMOND INDUSTRY, DPA USA PLAYS A CENTRAL ROLE IN ENSURING THE
	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	DPA USA ENGAGES WITH CURRENT AND FUTURE CONSUMERS TO UNDERSTAND THEIR
	NEEDS AND ASPIRATIONS. RESEARCH DRIVEN INSIGHTS SHAPE DIAMOND CATEGORY
	MARKETING PROGRAMS DESIGNED TO FORGE DEEP AND DURABLE EMOTIONAL
	CONNECTIONS WITH CONSUMERS. MILLENNIAL CONSUMERS ARE A PRIMARY, BUT NOT
	EXCLUSIVE, AUDIENCE. DPA COMPLETED RESEARCH, PRODUCTION AND LAUNCH OF
	TWO NEW ADVERTISING FILMS AND TWO IMAGES FOR ITS REAL IS RARE REAL IS A
	DIAMOND CAMPAIGN FOR USE IN PAID MEDIA INCLUDING TV, DIGITAL, PRINT OUT
	OF HOME, AND CINEMA. THE COMPAIGN DEBUTED IN MID-NOVEMBER AND RAN
	THROUGH YEAR-END DURING THE IMPORTANT HOLIDAY SHOPPING SEASON.
4b	(Code) (Expenses \$) (Revenue \$)
	DPA USA IS A RELIABLE, CURRENT, UNBIASED SOURCE OF INFORMATION FOR THE
	MEDIA, CONSUMERS, GOVERNMENTS, MEMBERS OF THE CIVIL SOCIETY, AND THE
	FINANCIAL COMMUNITY. GIVEN THE COMPLEXITY OF THE DIAMOND SECTOR, WHICH
	TOUCHES MILLIONS OF LIVES IN MULTIPLE JURISDICTIONS ON ALL CONTINENTS,
	INFORMATION INCLUDES DIAMOND EXPLORATION, MINING, CUTTING, POLISHING,
	JEWELRY MANUFACTURING AND RETAIL SALES. DPA SIGNIFICANTLY GREW SOCIAL
	MEDIA FOLLOWING AND REDESIGNED, REPLATFORMED AND RELAUNCHED THE
	REALISADIAMOND.COM WEBSITE WITH MORE EDUCATIONAL AND ADVOCACY
	INITIATIVES WITH NY TIMES, NAT GEO, RAPAPORT, MARIE CLAIRE, AND
	CAPTIVATE.
<u></u>	
4c	(Code) (Expenses \$
	STAKEHOLDERS TO FURTHER IMPROVER OVERALL STANDARDS IN THE DIAMOND
	SUPPLY CHAIN. IT FOCUSES ON EMPLOYEE HEALTH, SAFETY, WORKING
	CONDITIONS, PARTNERSHIPS WITH LOCAL COMMUNITIES, SUPPLY CHAIN
	INTEGRITY, ENVIRONMENTAL MANAGEMENT, FINANCIAL TRANSPARENCY AND PRODUCT
	DISCLOSURE. THE DPA TEAM HOSTED SEVERAL REGIONAL TRADE SALONS WITH
	RETAILERS AND INDUSTRY STAKEHOLDERS ON THE EAST AND WEST COASTS,
	ATTENDED SEVERAL INDUSTRY CONFERENCES, AND LAUNCHED A RETAILER DIAMOND
	TRAINING INITIATIVE TO BE LAUNCHED IN 2018.
	Z
4d	Other program services (Describe in Schedule O)
_	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses
	Form <b>990</b> (2017)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		$\mathbf{x}$
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
٠	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	١		X
40	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		- 22
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		X
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X	10		Λ
11				
_	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	المما	v	
	• • • • • • • • • • • • • • • • • • • •	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			77
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d			77	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	_15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19_		X
		Form	990	(2017)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1 1		
	Schedule K. If "No", go to line 25a	24a		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	270		
2.Ja	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
<b>.</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
D				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	OF L		
ne.	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II			X
07	·	26		Α_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			Х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions).			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			w
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.5
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			7.7
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			**
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	<u>_x</u> _	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2017)

	Check if Schedule O contains a response or note to any line in this Part V			┰
4.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable  1b  1b	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			}
٠	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	10		
	filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	Ì
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<del></del>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			l
	to file Form 8282?	7с	_	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			Į
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12  Cross receipts, included on Form 200, Part VIII, line 12 for public use of sligh feethers.			
b 44	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			l
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
a	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against			Ì
b				
122	amounts due or received from them)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		
		12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .    Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		$\vdash$
a	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
~	organization is licensed to issue qualified health plans			l
	Enter the amount of reserves on hand			]
С				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X

Form 990 (2017) DIAMOND PRODUCERS ASSOCIATION USA, INC. 81-3264830 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

•	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec				
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1			
h	If there are materal differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  In the third in the interest of voting members included in line 1a, above, who are independent to the properation of the committee or similar committee, explain in Schedule 0.  In the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its governing documents since the poor Form 990 was filed?  Did the organization have members or stockholders?  Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Be can committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Ves, *provide the names and addresses in Schedule O.  To a Did the organization have local chapters, branches, or affiliates?  If Yes, *id dit the organization have brighters, branches, or affiliates?  The first of the organization have a written policies and procedures governing the activities of such chapters, and branches to ensure their operations are consistent with the organization's exempt purposes?  The organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their			
	•			
2		2		х
•				
3		3		X_
		4		X
4		-		_ <u>^</u>
5		5	77	
6	•	6	X	
7a		_	,,	
		7a	<u> </u>	
b	• •			
		7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u>X</u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_ X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		<u>X</u>
13	Did the organization have a written whistleblower policy?	13	<u>X</u> _	
14	Did the organization have a written document retention and destruction policy?	14	<u>X</u> _	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cıal	
	statements available to the public during the tax year	•		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JEAN MARC LIEBERHERR, DIRECTOR - 212-221-1724			
	28 W 44TH STREET SUITE 720, NEW YORK, NY 10036			

			ASSOCIATION			81-3264830	Page 7		
Part VII Compensation	of Officers,	Directors, Trus	stees, Key Employe	es, Hig	hest Co	mpensated			
Employees, and Independent Contractors									

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organi (A) Name and Title	(B) Average hours per week	(do	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				one h an	( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) JEAN-MARC LIEBERHERR	0.10							-			
DIRECTOR		X		X				0.	0.	0	
(2) DEBORAH MARQUARDT	40.00							225 222		05 005	
CHIEF MARKETING OFFICER	40.00				X			337,900.	0.	<u>26,296</u>	
(3) SARAH GORVITZ	40.00	-			x			205 000	0.	18,426	
STRATEGIC COMMUNICATIONS					^			205,000.	0.	10,420	
		İ									
		<u> </u>									
4											
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<u> </u>	-			_							
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				$\dashv$	_	$\square$		-			
	<del></del>										
			$\vdash$			$\vdash \vdash$			<del>-</del>		
			$\vdash$			$\vdash$					
	<del> </del>										

Form **990** (2017)

		(2017) <b>DIAM</b> (	OND PRODU	JCERS ASS	OCIATION U	SA, INC.	81-3264	830 Page <b>9</b>
Pa	rt VI	لـد			_			
_•		Check if Schedule O con	tains a response	or note to any lin	e in this Part VIII (A)	 (B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a	· -				312-314
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
S,E	ļ	Fundraising events	1c					
ar /	l	Related organizations	1d					
is, C	l	Government grants (contribut	tions) 1e					
tion r Si	f	All other contributions, gifts, gran	nts, and					
ibu		sımılar amounts not ıncluded abo	ove 1f					
ontr d C	g	Noncash contributions included in lines	s 1a-1f \$					ı
<u>8 0</u>	h	Total. Add lines 1a-1f	<del> </del>	<b></b>				
				Business Code				
ice	2 a	MEMBERSHIP SUPPORT/FEE		900099	29,983,838,	29,983,838.	<del></del> -	
erv ue	b	<u> </u>	<del></del>	-			- <del>-</del>	
Program Service Revenue	С				<del></del>		<del></del>	
gra Re	d	<u> </u>					•	
Pro	e	All other program service reve		-				
_	'	Total. Add lines 2a-2f	inue	<b></b>	29,983,838,			
	3	Investment income (including	dividends inter		29,983,838,		-	
		other similar amounts)	avvasilas, intor	<b>b</b>				
	4	Income from investment of ta	x-exempt bond i	oroceeds				
	5	Royalties .	. ,	•				
		·	(ı) Real	(II) Personal				,
	6 a	Gross rents				;		
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b></b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	ļ					
	b							
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss) Gross income from fundraisin	a avente (net					
Other Revenue	0 a	including \$						
ĕ		contributions reported on line						
Ę		Part IV, line 18	а					
۽	b	Less direct expenses	b					
0		Net income or (loss) from fund	draising events	<b></b>		İ		
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	а					
	b	Less direct expenses	b					
Ì		Net income or (loss) from gam	-	<b></b>	<u>.</u>			
	10 a	Gross sales of inventory, less	returns	]				
		and allowances .	а					
		Less. cost of goods sold	. b	L				
	С	Net income or (loss) from sale						
-	44 -	Miscellaneous Revenu		Business Code				
	11 a							
	Ь			<del> </del>				
	d d	All other revenue	<del></del>	<del></del>	·			
	e	Total. Add lines 11a-11d					·	
	12	Total revenue. See instructions.			29 983 838	29 983 838	0.	0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respon			<u> </u>	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	_			
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic		_		
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				_
	trustees, and key employees				<u>.                                    </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	574,118.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			ļ	
9	Other employee benefits	21,410.	<del></del>		
10	Payroll taxes	16,717.	<u>.</u>		·
11	Fees for services (non-employees).				
а	Management	F4 424			
b	Legal	51,134.			
	Accounting	6,005.	<b>.</b>		
	Lobbying				<del></del>
e	Professional fundraising services. See Part IV, line 17		****		
f	Investment management fees		,		
g	Other. (If line 11g amount exceeds 10% of line 25,	654 501			
40	column (A) amount, list line 11g expenses on Sch 0.)	654,521. 28,325,223.	-		
12 13	Advertising and promotion Office expenses	26,640.		·	
14	Information technology	117,283.			, <u>,</u> <u> </u>
15	Royalties	117,203.			
16	Occupancy	82,949.			
17	Travel	54,415.			
18	Payments of travel or entertainment expenses	31,113.			
	for any federal, state, or local public officials				•
19	Conferences, conventions, and meetings	40,165.			
20	Interest				
21	Payments to affiliates	<u></u>	<u> </u>		
22	Depreciation, depletion, and amortization	2,814.			
23	Insurance .	10,444.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	29,983,838.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (R) Beginning of year End of year Cash - non-interest-bearing 8,153,208. 2,144,971. 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 Inventones for sale or use 8 Prepaid expenses and deferred charges 20,931. 9 10a Land, buildings, and equipment: cost or other 64,274. basis Complete Part VI of Schedule D 10a 5,629 61,460. b Less: accumulated depreciation 10b 58,645. 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 151,478. 15 Other assets See Part IV, line 11 151,478. 8,366,146. 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,376,025. 16 17 2,397,935. Accounts payable and accrued expenses 999,623. 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D <u>5,968,211.</u> 25 <u>1,376,402.</u> 26 8,366,146. 2,376,025. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 27 Temporarily restricted net assets 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 0. 0. 30 Paid-in or capital surplus, or land, building, or equipment fund 31 0. 0. 31 0<u>.</u> 32 Retained earnings, endowment, accumulated income, or other funds 0. 32 Total net assets or fund balances 33 0. 33 Total liabilities and net assets/fund balances 8,366,146. 2,376,025.

Form **990** (2017)

	1990 (2017) DIAMOND PRODUCERS ASSOCIATION USA, INC.	81-32	64830	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	· · · ·		<u></u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>29,98</u>	<u>3,8</u>	38.
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,98	3,8	38.
3	Revenue less expenses Subtract line 2 from line 1	3			0.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8		_	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>0.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10			0.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u>.</u>		<u> </u>	X
	<del>-</del> -			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	_X_	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		-	
	separate basis, consolidated basis, or both:				
	Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,	1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		
			Form	990	(2017)

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Nan	te of the organization  DIAMOND PRODUCERS	ASSOCTA	TON USA TI	IC.	Employer identification number 81 – 3264830
Pa	rt I Organizations Maintaining Donor Advise				
	organization answered "Yes" on Form 990, Part IV, lir		, outloi ominiai i a		ood anto complete in the
	organization answered Tes On Form 550, Fart 14, in		onor advised funds		b) Funds and other accounts
1	Total number at end of year	(4)		<del></del>	2, 1 2.700 2.70 2.70
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)		<del></del>		
4	Aggregate value at end of year		<del></del>		
5		L	a accete held in dones -		do
3	Did the organization inform all donors and donor advisors in	=		lavisea iun	
6	are the organization's property, subject to the organization's	•			. L Yes L No
0	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of impermissible private benefit?	or donor advis	or, or for any other purp	ose conten	~ — —
Pa	rt II Conservation Easements. Complete if the or	raanization and	worod "Vos" on Form O	00 Part IV	Yes No
1	Purpose(s) of conservation easements held by the organizat	· · · · · · · · · · · · · · · · · · ·		90, Part IV,	iirie 7.
•	Preservation of land for public use (e.g., recreation or e	=		بالمصممال	
	Protection of natural habitat	education		-	important land area
	Preservation of open space		Preservation of a	cerunea m	stone structure
2	Complete lines 2a through 2d if the organization held a quali	ified concenie	nan aantributian in tha f	of o oo	
_	day of the tax year.	med conserva	ion contribution in the re	omiora co	Held at the End of the Tax Year
а	Total number of conservation easements				
h	Total acreage restricted by conservation easements		• •		2a
c	Number of conservation easements on a certified historic sti	 ructure includ	nd in (a)	•	2b
4	Number of conservation easements included in (c) acquired		` '	···	2c
u	listed in the National Register	aitei 7723700,	and not on a mistoric sti	ucture	2d
3	Number of conservation easements modified, transferred, re	aleased extino		the organ	
•	year ▶	oleasea, exting	distinct, or terminated by	r the organi	zation during the tax
4	Number of states where property subject to conservation ea	sement is loc:	ated <b>&gt;</b>		
5	Does the organization have a written policy regarding the pe			— Lof	
	violations, and enforcement of the conservation easements i		rig, moposion, rianding	, 0.	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		olations, and enforcing	conservatio	
	<b>&gt;</b>				3 ,
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violation	ons, and enforcing cons	ervation eas	sements during the year
	<b>▶</b> \$	_	•		g ,
8	Does each conservation easement reported on line 2(d) above	ve satisfy the	equirements of section	170(h)(4)(B)	)(I)
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements	in its revenue and expe	ense statem	ent, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ıtıon's financıa	statements that descri	oes the org	anization's accounting for
	conservation easements.				
Pa	t III Organizations Maintaining Collections o			r Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form				
1a	If the organization elected, as permitted under SFAS 116 (AS				
	historical treasures, or other similar assets held for public ext			nerance of p	oublic service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue staten	nent and ba	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or re	search in furtherance of	public sen	vice, provide the following amounts
	relating to these items				
	(i) Revenue included on Form 990, Part VIII, line 1				<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X				► \$ ► \$
2	If the organization received or held works of art, historical tre			nciał gain, p	provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958)	relating to these items.		
	Revenue included on Form 990, Part VIII, line 1				<b>&gt;</b> \$
	Assets included in Form 990, Part X			·	▶ \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 99	0.		Schedule D (Form 990) 2017

732051 10-09-17

$\overline{}$		PRODUCERS								
Pa	rt III   Organizations Maintaining C									
3,	Using the organization's acquisition, accessi	on, and other recor	ds, check any	of the following th	hat are a si	gnıficant	use of its	collection	ı ıtem	IS
	(check all that apply):									
а	Public exhibition	•		or exchange prog						
b		•	e U Other							
C	Preservation for future generations									
4	Provide a description of the organization's co		-	_			ose in Pa	t XIII.		
5	During the year, did the organization solicit o				ther sımılar	assets	_	_	_	_
<u> </u>	to be sold to raise funds rather than to be ma						L	Yes		No
Ра	rt IV Escrow and Custodial Arran		lete if the orgar	nization answered	d "Yes" on	Form 990	), Part IV,	line 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for contri	butions or other a	assets not	ıncluded	_	_		7
	on Form 990, Part X?			•				_ Yes	L	∐ No
Ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:					<u>_</u>		
								Amount		
С			•			1c				
d	Additions during the year					. 1d				
е	Distributions during the year		-			1e				
f	Ending balance				•	1f		<del></del>		
2a	Did the organization include an amount on Fo					ty? .	L	_  Yes	느	_ No
Do:	rt V Endowment Funds. Complete if	Check here if the e	xplanation has	been provided o	n Part XIII					
Га	rt V Endowment Funds. Complete n	-						T		<del></del>
	Bannan of such above	(a) Current year	(b) Prior ye	ar (c) Iwo ye	ars back	d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance									
D	Contributions	<u>.</u>		<del></del>				<u> </u>		
С.	Net investment earnings, gains, and losses									
a	Grants or scholarships			<del></del>				<del> </del>		
е	Other expenditures for facilities			İ	ľ					
	and programs						-	1		
f	Administrative expenses			-	-			├──		
g	End of year balance							<u> </u>		
2	Provide the estimated percentage of the curr	-		imn (a)) held as:						
a	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
2-	The percentages on lines 2a, 2b, and 2c shou	' <del>-</del> '					_			
Ja	Are there endowment funds not in the posses	ssion of the organiz	ation that are h	ieid and administ	terea for th	e organız	ation	Г		
	(i) uprelated organizations								Yes	No
	(i) unrelated organizations			-	•	••	-	3a(i)		
<b>L</b>	(ii) related organizations							3a(ii)		
ь 4	If "Yes" on line 3a(ii), are the related organization			ie H?				3b		
<u> </u>	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		owment funds			<del></del>				
. 41			) Dort IV has t	110 800 5 00	00 De-4 V 4	ina 10				
	Complete if the organization answered  Description of property						<del></del>		<u></u>	
	резсприон от ргорелу	(a) Cost or of basis (investr	, , ,	Cost or other	· · ·	cumulate	a	(d) Book	value	3
4-	Land	Dasis (IIIVESU	n <del>o</del> ny	pasis (other)	dep	reciation				
	Buildings									
	Leasehold improvements				<del> </del>		<del></del>			
	Equipment	.		61 271	-	E 61	10			<u> </u>
	Other			64,274.	<del>'</del>	5,62	49.	58	3,6	40.
	Add lines 1a through 1e. (Column (d) must en		V ==1:=== (D)	/ 10-1					5 6	<u> </u>

Schedule D (Form 990) 2017 DIAMOND PRO Part VIII Investments - Other Securities.	DUCERS ASSOC	IATION USA,	INC. 81-	-3264830 Page 3
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-	of-year market value
(1) Financial derivatives				<del></del>
(3) Other		-		
(A)				
(B)		<del>                                     </del>		
(C)	· · · · · · · · · · · · · · · · · · ·			
(D)				
(E)				
(F)				
(G)				
(H)				·
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" (a) Description of investment				
	(b) Book value	(c) Method of va	aluation: Cost or end-	of-year market value
(1)			<u>.</u>	<del></del>
(2)	<del>_</del>		- 41	
(3)				
(5)		· · · · · · · · · · · · · · · · · · ·		
(6)			·	
(7)				
(8)	<u> </u>		-	
(9)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	· ,			******
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d See Form 990, I	Part X, line 15.	
(a) [	Description			(b) Book value
(1) SECURITY DEPOSIT				151,478.
(2)				
(3)	u			
(4)				<del></del>
(5)	_			
(6)	<del></del>			
				<del></del>
(8)				<del></del>
(9)	451	<del></del>		151 450
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	9.15 )		<u>P</u>	151,478.
Complete if the organization answered "Yes" (	on Form 000 Port IV line	11a ar 11f Can Farm	000 Dark V Iva- 05	
(a) Description of liability		(b) Book value	990, Part X, line 25	
(1) Federal income taxes		(b) Book Value		
(2) PREPAID MEMBERSHIP FEES		1,376,402.		
(3)		1,370, 4021		
(4)	<del>-</del>			
(5)				
(6)				
(7)		<u> </u>		
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)	1,376,402.		
2. Liability for uncertain tax positions. In Part XIII, provide			nancial statements th	at reports the
organization's liability for uncertain tax positions under	FIN 48 (ASC 740) Check	here if the text of the	footnote has been p	rovided in Part XIII
—— <del>——</del>				dule D (Form 990) 2017

	edule D (Form 990) 2017 DIAMOND PRODUCERS ASSOCIA		81-3264830 Pag	ge <b>4</b>
Pa	rt XI. Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per	r Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	2b		
С	Recoveries of pnor year grants	2c		
d	Other (Describe in Part XIII )			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	_	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten		er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	1		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		] ]	
а	Donated services and use of facilities .	2a		
b	Prior year adjustments	2b		
С	Other losses	2c	[	
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d .		2e	
3	Subtract line 2e from line 1	<u>.</u>	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	_4b		
_	Add lines 4a and 4b			
C	•		4c	
_5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	<u> </u>
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.		5	 
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
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<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	
<b>Pa</b> l	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.  de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Par		5	

# SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Open to Public

OMB No 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

DIAMOND PRODUCERS ASSOCIATION USA

Inspection
Employer identification number

81-3264830

**Questions Regarding Compensation** Yes No ta Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? 5a b Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

Regulations section 53 4958-6(c)?

81-3264830 DIAMOND PRODUCERS ASSOCIATION USA, INC.

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

Schedule J (Form 990) 2017

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For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	lble	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)·(i)(B)	in column (B) reported as deferred on prior Form 990
(1) DEBORAH MARQUARDT	Ξ	337,900.	0.	0	0	26,296.	364,196.	0
CHIEF MARKETING OFFICER	▣			• 0	0	0	0	0
(2) SARAH GORVITZ	Ξ	205,00	0.	0	0	18,426.	223,42	0
STRATEGIC COMMUNICATIONS	▣	0.	0.	• 0	0			0
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Schedule J (Form 990) 2017

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### **SCHEDULE O**

(Form 990.or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Inspection

Internal Revenue Service Name of the organization

DIAMOND PRODUCERS ASSOCIATION HEA

Employer identification number 81-3264830

DIAMOND PRODUCERS ASSOCIATION USA, INC. 01-3204030
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SUSTAINABILITY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LONG TERM SUSTAINABILITY OF THE DIAMOND SECTOR.
FORM 990, PART VI, SECTION A, LINE 6:
DIAMOND PRODUCERS ASSOCIATION USA (DPA USA) IS A MEMBERSHIP CORPORATION
WITH VOTING AND NON-VOTING MEMBERS. THE SOLE VOTING MEMBER IS DIAMOND
PRODUCERS ASSOCIATION LIMITED (DPA UK), AND THE NON-VOTING MEMBERS ARE THE
MEMBERS OF DPA UK. NON-VOTING MEMBERS MUST BE DIAMOND PRODUCERS WHICH MEET
CERTAIN SUSTAINABILITY PUBLIC REPORTING CONDITIONS.
FORM 990, PART VI, SECTION A, LINE 7A:
THE SOLE VOTING MEMBER OF THE ORGANIZATION IS DIAMOND PRODUCERS ASSOCIATION
LIMITED (DPA UK), AN ASSOCIATION OF DIAMOND PRODUCERS INCORPORATED UNDER
THE LAWS OF ENGLAND AND WALES. DIAMOND PRODUCERS ASSOCIATION USA (DPA USA)
HOUSES THE US BASED ACTIVITIES OF THE DPA UK. DPA UK HAS THE POWER TO
ELECT OR APPOINT MEMBER OF GOVERNING BODY OF DPA USA.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. THE RETURN
WAS THEN REVIEWED AND APPROVED BY THE BOARD BEFORE THE RETURN WAS FILED
WITH THE IRS.

FORM 990, PART VI, SECTION C, LINE 19:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization  DIAMOND PRODUCERS ASSOCIATION USA, INC.	Employer identification number 81-3264830
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
FORM 990, PART XII, LINE 2C:	
DPA UK'S BOARD OF DIRECTORS HAVE APPOINTED AUDITORS FOR D	PA USA. THE
BOARD OVERSEES THE AUDIT PROCESS.	

**SCHEDULE R** (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

UMERS

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Open to Public Inspection 2017

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number 81-3264830

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. INC. DIAMOND PRODUCERS ASSOCIATION USA, Part

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part	Identification of Related Tax-Exempt Organizations, Complete if	ions. Complete if the organization an	the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt	rt IV. line 34. becaus	se it had one or more re	elated tax-exempt

organizations during the tax year. ו דופל

(b)	Section \$12(b)(13) controlled entity?	Yes			×			×			_
9	Direct							_			
(e)	Public charity status (if section	501(c)(3))						_			
(p)	ode n										
(0)	Legal domicile (state or foreign country)										
(q)	Primary activity		MAINTAIN AND ENHANCE	CUSTOMER DEMAND FOR	NATURAL DIAMONDS	MANAGE OPERATIONAL	ACTIVITIES, CONTRACT	SERVICES FOR DPA UK AND			
(e)	Name, address, and EIN of related organization		DIAMOND PRODUCERS ASSOCIATION LIMITED -	98-1277273, 60 CHISWELL STREET, LONDON,	UNITED KINGDOM ECIY 4AG	DIAMOND PRODUCERS ASSOCIATION, OFFICE OF THE MANAGE OPERATIONAL	CEO, AWDC BUILDING 22 HOVENIERSSTRAAT,	ANTWERPEN, BELGIUM			

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART VII FOR CONTINUATIONS

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Schedule R (Form 990) 2017

732161 09-11-17 LHA

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Schedule R (Form 990) 2017 DIAMOND PRODUCERS ASSOCIATION USA, INC.

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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(j) (k) General or Percentage managing ownership									
ing OW	9	 	-		 -				 -
(j) General manage	Yes No	 		-	-				
(i) Code V-UBI amount in box	K-1 (Form 1065)								
) rtionate ons?	ĝ								
(h) Disproportionate allocations?	Yes								
(g) Share of end-of-year	910000								
(f) Share of total income									
(e) Predominant income (related, unrelated,	sections 512-514)								
(d) Direct controlling entity									
(c) Legal domicile (state or	foreign country)								
(b) Primary activity									
(a) Name, address, and EIN of related organization									

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

				Ī		1	i.		ı			
(E)	512(b)(13) controlled entity?	Yes No			-							
(£)	Percentage ownership							-				
1	Share of end-of-year	2000										
<b>(£)</b>	Share of total income											
(e)	Type of entity (C corp, S corp, or thirst)	(2001)										
(p)	Direct controlling Type of entity (Corp, Scorp,											
(2)	Legal domicile (state or foreign	country)										
(p)	Primary activity											
(a)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2017

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81-3264830 Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	å
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed II	n Parts II-IV?			1
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	_	-		<b>-</b>		×
<ul> <li>b Gift, grant, or capital contribution to related organization(s)</li> </ul>				4	_	×
c Gift, grant, or capital contribution from related organization(s)				<b>5</b>		×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan quarantees by related organization(s)			· ·	4	-	×
				2		4
f Dividends from related organization(s)				<b>=</b>		×
g Sale of assets to related organization(s)				2		×
				=		×
i Exchange of assets with related organization(s)				<b>;=</b>		×
j Lease of facilities, equipment, or other assets to related organization(s)				1;		×
k   pase of facilities equinoment or other assets from related organization(s)				ŧ	•	<b>&gt;</b>
Performance of services or membership or fundraising solicitations for	inization(s)			€ =		( ×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			Ę		×
o Sharing of paid employees with related organization(s)				9		×
p Reimbursement paid to related organization(s) for expenses				<del>0</del>		×
q Reimbursement paid by related organization(s) for expenses					×	
r Other transfer of cash or property to related organization(s)				<b>+</b>		<b>&gt;</b>
				\$		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	tho must complete th	is line, including covered r	elationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(1) DIAMOND PRODUCERS ASSOCIATION LIMITED	Ø	29,983,838.				
(2)						
(8)						
(4)						
(5)						İ
(9)						
732163 06-11-17	24		Scheduk	Schedule R (Form 990) 2017	990) 2(	012

81-3264830

Page 4

Schedule R (Form 990) 2017 DIAMOND PRODUCERS ASSOCIATION USA, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

				-						
(a) Name address and FIN	(b)	(c)	(d)	(e)	(f) Shore of	(g) Share of	(F)	(i)	()	(k)
of entity	ר וווומוץ מכנועונץ	(state or foreign	(related, unrelated, 50 excluded from tax under 0	501(c)(3) 0105 7	total	end-of-year	tionate	the state of Schedule K-1 partners ownership	managing partner?	ownership
		country)	sections 512-514) Ye	Yes No	5000	deserts	Yes No	(Form 1065)	Yes	
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								Schedule	R (Forn	Schedule B (Form 990) 2017
										/

Schedule R (Form 990) 2017 DIAMOND PRODUCERS ASSOCIATION USA, INC. 81-3264830 Page
Provide additional information for responses to questions on Schedule R. See instructions.
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:
NAME OF RELATED ORGANIZATION:
DIAMOND PRODUCERS ASSOCIATION, OFFICE OF THE CEO
PRIMARY ACTIVITY: MANAGE OPERATIONAL ACTIVITIES, CONTRACT SERVICES FOR DP
PRIMARI ACTIVITI. MANAGE OF ERATIONAL ACTIVITIES, CONTRACT DERVICES FOR DE
UK AND DPA USA