## \*\*\* PUBLIC DISCLOSURE COPY \*\*\* Return of Organization Exempt From Income Tax

Form **990** (Rev. January 2020)

Department of the Treasury Internal Revenue Service 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.

2019	
Open to Public Inspection	

OMB No. 1545-0047

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AI	For the 2	019 calendar year, or tax year beginning and	ending		- 1.2 - 14. 0.1
B	Check if applicable:	C Name of organization		D Employer identif	ication number
	Address	DKT INTERNATIONAL, INC.		C. STOLLASSES	12
E	Name	Doing business as		58-15931	.37
E	Final Final		Room/suite 800	E Telephone number 202-233-	8780
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	250,192,645.
-	Amended	WASHINGTON, DC 20036	F	H(a) Is this a group r	
	Applica- tion pending	F Name and address of principal officer: CHRISTOPHER H. PURI	YC	for subordinate	
		SAME AS C ABOVE	-	H(b) Are all subordinates I	
		npt status: 🗴 501(c)(3) 🚺 501(c) ( ) ◀ (nsert no.) 🚺 4947(a)(1) c	or 527		a list. (see instructions)
		WWW.DKTINTERNATIONAL.ORG	_	H(c) Group exemption	on number 🕨
_	art I S	ganization; 🕱 Corporation 📄 Trust 🦳 Association 📄 Other 🕨	10-cm		M State of legal domicile: NC
Activities & Governance	01	iefly describe the organization's mission or most significant activities: TO PE PTIONS FOR FAMILY PLANNING AND HIV/AIDS	PREVEN	TION.	
rna		neck this box 🕨 🥅 if the organization discontinued its operations or dispose	ed of more		sets.
ove				3	6
5		mber of independent voting members of the governing body (Part VI, line 1b)			5
es	5 To	tal number of individuals employed in calendar year 2019 (Part V, line 2a)		5	27
viti	6 To	tal number of volunteers (estimate if necessary)		6	11
Act	7 a To	tal unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
_	b Ne	t unrelated business taxable income from Form 990-T, line 39	amanguna		0.
				Prior Year	Current Year
e	1.1.1.1.1.1.1.1	intributions and grants (Part VIII, line 1h)		54,771,608.	60,743,190.
Revenue		ogram service revenue (Part VIII, line 2g)		43,193,393.	162,657,141.
Rev		restment income (Part VIII, column (A), lines 3, 4, and 7d)		10,533,264.	8,195,542.
	the party of the second second	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,485,315.	942,756.
		tal revenue - add lines 8 through 11 (must equal Part YIII, column (A), line 12)		10,983,580. 0.	232,538,629.
		ants and similar amounts paid (Part IX, column (A), lines 1-3)	1.1007.50. http://	0.	0.
1.1		nefits paid to or for members (Part IX, column (A), line 4) laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		40,122,977.	0. 46,221,804.
Expenses		plessional fundraising fees (Part IX, column (A), line 11e)		0.	40,221,004.
La	b Tot	al fundraising expenses (Part IX, column (D), line 25)	8.	0.	0.
Ă		ter expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		86,166,203.	184,552,091.
		al expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		26,289,180.	230,773,895.
		venue less expenses. Subtract line 18 from line 12		15,305,600.	1,764,734.
PS				inning of Current Year	End of Year
Net Assets or Fund Balances	20 Tot	al assets (Part X, line 16)	2	60,547,300.	291,833,511.
ASS	21 Tot	al liabilities (Part X, line 26)		67,042,539.	81,042,010.
Let	22 Net	assets or fund balances. Subtract line 21 from line 20		93,504,761.	210,791,501.
		Signature Block	2.2		
Inde	r penalties	of perjury, I declare that I have examined this return, including accompanying schedules	and statemer	nts, and to the best of my	knowledge and belief it is
rue,	correct, an	nd complete. Declaration of preparer (other than officer) is based on all information of white	ch preparer h	as any knowledge. /	/
					120
Sign		Signature of officer		Date /	/
lere	21 N	CHRISTOPHER H. PURDY, PRESIDENT & CEO	-		
_		Type or print name and title /			
		nt/Type preparer's name Preparer's signature		ate Check	PTIN
aid		RON M. FOX	11	1/11/20 self-employe	
repa	rer Firr	m's name MARCUM LLP		Firm's EIN 🕨	11-1986323
se O	nly Firm	m's address 1899 L STREET, NW, SUITE 850			
		WASHINGTON, DC 20036		Phone no. (2)	02) 227-4000
lay I	the IRS d	liscuss this return with the preparer shown above? (see instructions)			X Yes No
12001	01-20-20	LHA For Paperwork Reduction Act Notice, see the separate instruction			Form 990 (2019)
		*** ELECTRONICALLY FILED ON	11/11	/2020 ***	COPY

Form	990 (2019) DKT INTERNATIONAL, INC.	58-1593137 Page <b>2</b>
	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO PROVIDE COUPLES WITH AFFORDABLE AND SAFE OPTIONS	
	PLANNING AND HIV/AIDS PREVENTION THROUGH DYNAMIC SOC	IAL MARKETING.
2	Did the organization undertake any significant program services during the year which were not listed on	
	prior Form 990 or 990-EZ?	Yes X No
	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 ser	rvices?Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program servi	
	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
4 -	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 225,990,440. including grants of \$	162 657 1/1
4a	(Code:) (Expenses \$ 225,990,440. including grants of \$ DKT IS ONE OF THE LARGEST PRIVATE PROVIDERS OF FAMIL	
	REPRODUCTIVE HEALTH PRODUCTS AND SERVICES IN THE DEVI	
	SERVING 47.8 MILLION COUPLES IN 2019, AND PREVENTING	
	UNWANTED PREGNANCIES, 10 MILLION UNSAFE ABORTIONS, 3	
	DEATHS AND 56,000 INFANT DEATHS AVERTED.	S,000 MII LIUM
	DKT SOCIALLY MARKETS A RANGE OF CONTRACEPTIVE PRODUC	TS INCLUDING
	CONDOMS, ORAL CONTRACEPTIVE PILLS, AND LONGER-LASTING	
	IMPLANTS AND INTRA-UTERINE DEVICES (IUDS) IN 57 COUN	
	THE AVAILABILITY, ACCESSIBILITY, AND AFFORDABILITY O	
	CONTRACEPTIVES BY LEVERAGING THE PRIVATE SECTOR TO D	
	BROADLY. DKT EXECUTES MARKETING AND PROMOTION CAMPAI	GNS TO EDUCATE THE
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses ► 225,990,440.	
		Form <b>990</b> (2019)
32002	SEE SCHEDULE O FOR CONTINUATI	
	2	
511	.12 150872 DKT 2019.05000 DKT INTERN	ATIONAL, INCCORT

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 Form 990 (2019)
 DKT INTERNATIONAL, INC.

 Part IV
 Checklist of Required Schedules

1         In the organization described in section 501(cgl) or 4047(ql)) (bler than a private bundation?         1         X           2         Is the organization require for organization seque in four organization ampage in four organization and the organization ampage in four organization and the organization ampage in four organization that receives membership dues, assessments, or simila runnum encodes to 511(cgl), or 501(cgl) organization and the organization fraction 511(cgl), or 501(cgl) organization and the organization fraction 511(cgl), or 501(cgl) organization fract receives membership dues, assessments, or simila runnum encodes or four encodes to a runnum encode runnum encode to a runnum encode runnum encode to a runnum encode to a runnum encode to a runnum encode to a runnum encode runnum encode to runnum encode to a runnum encode t				Yes	No
2         the organization engage in direct or indirect particular appage activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I         3         X           3         Did the organization engage in direct or indirect particular appage in kobying activities, or have a section 501(h) election in effect         3         X           4         Section 501(c)(d) organizations. Dd the organization engage in kobying activities, or have a section 501(h) election in effect         4         X           5         the organization associant 501(h) election in effect         4         X           6         Dd the organization in activities of Marko are accurds. The Yes, 'complete Schedule C, Part II         8         X           7         Dd the organization investment of anounts in such funds or accurds? If Yes, 'complete Schedule D, Part II.         8         X           8         Dd the organization receive or hold a conservation esserved in licularity esserve ore space.         7         X           8         Dd the organization receive or hold a conservation esserved in licularity esserve as a cutodian for area mounts in being market or any of the hold account tablet, server as a cutodian for area mounts in the functional researce or cutodial account tablet, server as a cutodian for area mount for investment of an engagem related enganization receive or hold account tablet, server as a splicable.         9         X           10         Dd the organization receprat a mount for investment of an engagem related in	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3         Dd the organization engage in direct or indirect political campaign activities on behalt of or in opposition to candidate for public office? If "Ves," complete Schedule C, Part I         3         X           4         Section 501(k)(organization. B) dhe organization engage in lobbying activities, on have a section 501(h) election in effect during the tax year? If "Ves," complete Schedule C, Part II         4         X           5         Is the organization enterina any doma advised fundo or any similar fundos or avocumitar for which domars have the right to provide advice on the distribution or investment of amounts in such fundo or accounts? If "Ves," complete Schedule D, Part I         6         X           9         Did the organization maintain any doma advised fundos or any similar fundos areas or philatical structures? If "Ves," complete Schedule D, Part II         7         X           9         Did the organization maintain celectors of verins of a cancer stron assembly due savestor?         7         X           9         Did the organization maintain celectors of verins of a cancer stron assembly due savestor of the organization engage in display due to the organization savestor?         7         X           9         Did the organization maintain celectors of verins of a cancer stron assembly due savestor assets?         7         X           9         Did the organization method the organization in through a related organization motion assets?         7         X           9         Did the organization report an amount for view timents -		If "Yes," complete Schedule A	1		
public office3 if ''Yes, complete Schedule Q, Part I         3         X           4         Section 501(c)(3) organization. Did the organization engage in lobbying activities, or have a section 501(h) eluction in effect         4         X           5         Is the organization a section 501(c)(4), 507(c)(5), or 501(c)(4) organization that receives membership dues, assessments, or similar anount in a solution 80 1871 /''Yes, 'complete Schedule C, Part II         5         X           6         Did the organization or investment of anounts in solut holds or accounts for which doors have the right to provide advice on the distribution or investment of anounts in solut holds or accounts for which doors have the memory. In the organization endex or holds of circulars J, anound to a cacount for Yes, 'complete Schedule D, Part I         7         X           7         Did the organization memory in anount in Part X, line 21, for escrew or outsodial account liability, serve as a custodial for amounts not lised in Part X, ine 21, for escrew or outsodial account liability, serve as a custodial for amounts not lised in Part X, ine 21, for escrew or custodial account liability, serve as a custodial for amounts not lised in Part X, ine 21, for escrew or custodial account liability, serve as a custodial for amounts not for indusing, add equipment in Part X, line 12, if Yes, 'complete Schedule D, Part V         1           8         Did the organization, neotor an anount for liability grave complete Schedule D, Part V         1         1         X           10         Did the organization report an amount for investments - other securitis in Part X, line 12, that is 5% or more of its tota	2		2	Х	
4         Section 501(c)(3) arguitzations. Dot the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule D, Parl II	3				
during the tax year? If Yes,* complete Schedule C, Part II         4         X           5         Is the organization a section S(10(4), 501(6)(3) for 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 38:13? If "Yes,* complete Schedule C, Part II         6         X           6         Did the organization maritam any domor advised funds or any similar funds or accounts for which domors have the right to provide advised on the distribution or investment at manutin is sub-tailed. D, Part II         6         X           7         Did the organization maritam collections of works of art, historical treasures, or other similar assets? If "Yes,* complete Schedule D, Part II         7         X           8         Did the organization is amount in Part X, line 21, for sercow or custodial account liability, serve as a custodian for amounts not listed in Part X; or polyde credit counseling, debt management, credit repart, or debt negotiation services?         9         X           9         Did the organization (incidy or through a related organization, hold assets in donor-restricted endowments         10         X           10         Did the organization report an amount for the dolowing questions is "Yes," then complete Schedule D, Part VI         10         X           11         If the organization report an amount for timestyments- orber securities in Part X, line 10? If "Yes,* complete Schedule D, Part VI         11         X           12         Did the organization report an amount for three securities			3		<u> </u>
5         Is the organization a section 501(c)(6), 67 901(c)(6), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99:197 if Yes, "complete Schedule C, Part II         S         X           6         Did the organization markina may down advised funds or any similar trads or accounts? If Yes, "complete Schedule D, Part II         6         X           7         XX           9         Did the organization nearest or hold a conservatin, funding easements to preserve open space.         7         X           9         Did the organization marken proof a namework incluing easements to preserve open space.         7         X           9         Did the organization meritor proof a credit random searest, including easements to regular part or detter negotitation services?         7         X           9         Did the organization, rientory to through a nellated organization, hold assets in donor-restricted endowments or in quasi endowments? If Yes, "complete Schedule D, Part V         10         X           11         T spoplex Schedule D, Part IV         10         X           11         T spoplex Schedule D, Part IV         11         X           12         Ho de organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes, "complete Schedule D, Part VI         11         X           13         Did the organization report an amount for investimeets - mere securtlies in Part X, line 15? If Ye	4				
a milling amounts as defined in Revenue Procedure 99-199 // Yes," complete Schedule C, Pert II         5         X           Did the organization maintain any domer advised funds or any similar funds or accounts? // Yes," complete Schedule D, Part I         6         X           To bit the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical faces, or historical treasures, or other similar assets? // Yes," complete Schedule D, Part II         7         X           B Did the organization report an amount in Part X, line 21, for sercew or custodial account fability, serve as a custodian for amounts in Istolar Part X, romovide cadit consensation, hold assets in donor-restricted endowments or in quale indowments? // Yes," complete Schedule D, Part II         8         X           Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quale indowments? // Yes," complete Schedule D, Part V         10         X           II the organization report an amount for land, buildings, and equipment in Part X, line 10? // Yes," complete Schedule D, Part V         10         X           II the organization report an amount for land, buildings, and equipment in Part X, line 10? // Yes," complete Schedule D, Part V         11a         X           Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // Yes," complete Schedule D, Part V         11a         X           Did the organization report an amount for land, buildings, Pard Part VI         11a         X			4		<u> </u>
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 amount is nucleuling easements to preserve open space, the environment, historic land areas, or historic structures? If 'rys,' complete Schedule D, Part II         5           7         Did the organization reactive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'rys,' complete Schedule D, Part II         7         X           8         X         Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 197. If 'rys,' complete Schedule D, Part IV         8         X           10         Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'ryse,' complete Schedule D, Part V         10         X           11         If the organization report an amount for investments - other securities in Part X, line 10? If 'ryse,' complete Schedule D, Part VI         11         X           12         Did the organization report an amount for investments - organi related in Part X, line 10? If 'ryse,' complete Schedule D, Part VI         11         X           13         Did the organization report an amount for investments - program related in Part X, line 10? If 'ryse,' complete Schedule D, Part VI         11         X           14         Did the organization report an amount for investments - program related in	5				
provide advice on the distribution or investment of amounts in such funds or account? 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 Schedule D, Part IV         8         X           9         Did the organization report an amount in Part X, line 21, for escrow or cutodial account liability, serve as a custodian for amounts not listed in Part X, ves, 'complete Schedule D, Part V         8         X           10         Did the organization idnectly or through a related organization, hold assets in donor-restricted endowments?         9         X           11         If the organization idnectly or through a related organization, hold assets in donor-restricted endowments?         10         X           12         X         11         X         11         X           13         Did the organization report an amount for investments - organize schedule D, Part V         11         X           14         X         10         X         11         X           14         X         10         11         X           15         Did the org	_		5		<u> </u>
7       Did the organization receive or hold a conservation easement, including easements to preserve open space. the environment, historic land areas, or historics structures? // #vss_*complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? // #vss_*complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for servow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counselling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 107. If Yes, "complete Schedule D, Part V       10       X         11       B tot the organization report an amount for investments- other securities in Part X, line 107. If Yes, "complete Schedule D, Part VI       11a       X         12       Did the organization report an amount for investments- program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167. If Yes, "complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for other assets in Part X, line 12, It hat is 5% or more of its total asset reported in Part X, line 167. If Yes, "complete Schedule D, Part X       11e       X         14       X       Did the organization seport an amount for other assets in Part X, line 12, If Yes, "complete Schedule D, Part X       11	6				77
the environment, historic and 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 Schedule D, Part II         8         X           9         Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?         9         X           10         Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "yes," complete Schedule D, Part V         10         X           11         the organization report an amount for indu, buildings, and equipment in Part X, line 10? If "yes," complete Schedule D, Part VI         10         X           12         Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part VIII         11a         X           13         Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part VIII         11a         X           14         Did the organization report an amount for invertimassets in Part X, line 15? If "yes," complete Schedule D, Part X         114         X </td <td></td> <td></td> <td>6</td> <td></td> <td><u> </u></td>			6		<u> </u>
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? #"Yes," complete       Image: Complete Schedule D, Part V         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed In Part X, or provide credit counselling, debt management, credit repair, or debt negotiation services?       9         10       Did the organization for any of the following questions is "Yes," ten complete Schedule D, Part V, UII, VIII, VII, VX, or X as applicable.       10       X         11       If the organization report an amount for inde, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, ine 16? If "Yes," complete Schedule D, Part V       11a       X         12       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V       11a       X         13       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11a       X         14       Did the organization subarity for the labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         14       Did the organization subarity for the labilities in Part X, line 27? If "Yes," complete Schedule D, Part X       11d       X         14	7				v
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         9       Did the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       10       X         a Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII       11a       X         c Did the organization report an amount for investments - organs related in Part X, line 167 If "Yes," complete Schedule D, Part XIII       11a       X         2       Did the organization is apparate, independent audited financial statements for the tax year?       11a       X         11       Z       Z       X       11a       X         2       Did the organization included in consolidated, independent audited financial statements for the tax year?	_		7		
9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in donor restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V</i> 10       X         11       If the organization, directly or through a related organization, hold assets in donor restricted endowments       10       X         12       Did the organization report an amount for land, buildings, and equipment in Part X, line 12? <i>If 'Yes,' complete Schedule D, Part V</i> 11a       X         13       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VI</i> 11a       X         14       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part X</i> 11d       X         11a       X       11d       X       11d       X         11d       X       11d       X       11d       X         11d       Did the organization include in consolidated, independent audited financial statements for the tax year?       11f       X	8				v
amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       9       X         11       If the organization, directly or through a related organization, shold assets in donor-restricted endowments       9       X         11       If the organization, directly or through a related organization, shold assets in donor-restricted endowments       9       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10?       // Yrss," complete Schedule D, Part VI       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // Yrss," complete Schedule D, Part VII       11       X         13       Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // Yrss," complete Schedule D, Part VII       11       X         14       Did the organization organization report an amount for other assets in Part X, line 15? // Yrss," complete Schedule D, Part X       114       X         15       Did the organization report an amount for other assets in Part X, line 15? // Yrss," complete Schedule D, Part X       114       X         16       Did the organiza	~	,	8		
If "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         12       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11b       X         13       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIIIIII       11c       X         14       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         14       Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         15       Did the organization onbud tor other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11f       X         16       Did the organization anducet	9				
10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? II' 'Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, VII, VIII, VII, VII, VII, VII, VII					v
or in quasi endowments? If "Yes," complete Schedule D, Part V     10     X       11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.     11a     X       a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI     11a     X       b) Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VI     11b     X       c) Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11c     X       d) Did the organization report an amount for other labeling is Schedule D, Part VII     11d     X       e) Did the organization report an amount for other labeling is Schedule D, Part X     11e     X       e) Did the organization report an amount for other labeling is Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part X     11e     X       e) Did the organization report an amount for other labeling is Schedule D, Part X     11e     X     11e     X       11d     X     11d     X     11e     X     11e     X       12a     Did the organization is parate, independent audited financial statements for the tax year?     11f     X       12a     X <td< td=""><td>40</td><td></td><td>9</td><td></td><td></td></td<>	40		9		
11       If the organization's answer to any of the following questions is "Ves," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.       11         a)       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part V       11a       X         b)       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VI       11b       X         c)       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VII       11c       X         c)       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part X       11c       X         c)       Did the organization report an amount for other assets in Part X, line 25 // "Yes," complete Schedule D, Part X       11d       X         c)       Did the organization separate, independent audited financial statements for the tax year include a tootnote that addresses the organization asperate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization asperate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization obtai separate, inde	10		10		v
as applicable.       a) Id the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII       11a       X         b) Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c) Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         c) Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         c) Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f) Did the organization is aparate, independent audited financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         13a       X       11e       X       11d       X         14a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X	44		10		A
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other assets in Part X, line 25? If 'Yes," complete Schedule D, Part X       11e       X         f Did the organization is separate or consolidated financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization a school described in section 170(b)(1)A(lii)? If 'Yes,' complete Schedule E       12a       X         14a       Did the organization aschool described in section 170(b)(1)A(lii)? If 'Yes,' complete Schedule E       13       X         14a       Did the organization navice aschoulie F, Parts II and IV       12a					
Part VI       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets 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?       If it X       11e       X         12a       Did the organization noluded in consolidated, independent audited financial statements for the tax year?       If it X       11e       X         13       Is the organization nakina an office, employees, or agenets outside of the United States?       14a       X         b       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gargeste grants or other assistance to or for any foreign indinviduals? If "Yes," co	~				
b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization is parate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       12a       X         14a       Did the organization navies aggregate revenues or expenses of more than \$5,000 of grants or other assistance to or for any foreign organization report on Part X, columm (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Part II and IV       14b       X </td <td>a</td> <td></td> <td>112</td> <td>x</td> <td></td>	a		112	x	
assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X       11e       X         11       X       11e       X       11e       X         12       Did the organization's separate or consolidated financial statements for the tax year?       /f "Yes," complete Schedule D, Part X       11t       X         12       Did the organization included in consolidated, independent audited financial statements for the tax year?       /f "Yes," complete Schedule D, Part X       12a       X         13       Is the organization askine assets or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       13a       X         14a       X       11d       X       11d       X         15       Did the organization maint an office, employees, or agents outside of the United States?       13a       X	h				
c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> 11c       X         e       Did the organization report an amount for other assets in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 11e       X         f       Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization otal in separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization achol described in section 170(0)(1)A(iii)? <i>If "Yes," complete Schedule E</i> 13       X         14a       Did the organization animitain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> 16       X         16       X       17       X       16       X	D.		11h	x	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11t       X         12a       Did 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, Part X and XII is optional       12b       X         14a       Did the organization as school described in section 170(b)(1)(A)(W)?       If "Yes," complete Schedule E       13       X         14a       Did the organization neport on Part IX, column (A), line 3, more than \$10,000 forg martmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       16       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of ggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       16	c				
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization asswered "No" to line 12a, then completing Schedule D, Part X and XII       12a       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         114a       X       12a       X         b Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b Did the organization neopt on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garges to rother assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         16       X       17       X       18	Ŭ		110		x
Part X, line 16? /f "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? /f "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 obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11e       X         b Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       12a       X         b 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 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 II and IV       16       X         17       Did the organization report and s15,000 of grants or other assistance to or for any foreign organization report more than \$15,000 of expenses for professional fundraising services 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 G, Part I       16       X         18       Did the organization report more	d				
<ul> <li>e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X</li> <li>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? /f "Yes," complete Schedule D, Part X</li> <li>11e X</li> <li>12a Did the organization obtain separate, independent audited financial statements for the tax year? // if "Yes," complete Schedule D, Parts XI and XII</li> <li>b Was the organization included in consolidated, independent audited financial statements for the tax year?</li> <li>if "Yes," and if the organization a school described in section 170(b)(11/4)(0)? /f "Yes," complete Schedule D, Parts XI and XII is optional</li> <li>12b X</li> <li>13 X</li> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization report on Neart IX, column (A), line 3, more than \$10,000 form grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued a \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14 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 II and IV</li> <li>16 Did the organization report more than \$15,000 total of fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I</li> <li>17 X</li> <li>18 Did the organization report more than \$15,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II</li> <li>17 X</li> <li>18 Did the organization report more than \$15,000 of grants or other assistance to or for any \$15,000 total of fundraising event gross income and contributions on Part IX, lines 1, column (A) line 3, more than \$5,0</li></ul>	-		11d		х
f       Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       111       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization naintain an office, employees, or agents outside of the United States?       14a       X         b       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 report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       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 G, Part I       16       X         18       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 G, Part I       16       X	е	Did the organization report an amount for other liabilities in Part X. line 25? If "Yes " complete Schedule D. Part X		Х	
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       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave aggregate revenues or expenses of more than \$10,000 form 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 II and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report nore than \$15,000 of expenses for professional fundraising services 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 G, Part I       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3, more than \$5,000 of aggregate grants or other assis					
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         b       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization aschool described in section 170(b)(1/(A)(ii)? If "Yes," complete Schedule E       14a       X         15       Did the organization neore assistance to any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       14b       X         16       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 individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       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 G, Part II       17       X         18       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization report more than \$15,000 of gross			11f	х	
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a       X       14a       X         b       Did the organization nave 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       X         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 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 II 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 3, more than \$2,000 of grants on Part VIII, lines 9a? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 16, Dotto of aggregate grants or other assistance to oromplete Schedule G,	12a				
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)?       ////r "yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X       14a       X         b       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       14b       X       14a       X         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 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 II and IV       15       X         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 G, Part I       16       X         17       Did the organization report nore than \$15,000 tof appreses 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 of gross income from gaming activiti			12a		Х
13       is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14b       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       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         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 II 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 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X	b	,			
13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       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       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         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 II and IV       16       X         17       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 G, Part II       17       X         18       Did the organization report more than \$15,000 of trans ing event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X		If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
<ul> <li>14a Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b 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</li> <li>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 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 II and IV</li> <li>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</li> <li>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</li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," and IX and 8a? If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?</li> <li>20b</li> <li>20b</li> <li>20c</li> <li>21</li> </ul>	13		13		X
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or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         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       X         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 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X	b				
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foreign organization? // ff "Yes," complete Schedule F, Parts II and IV       15       X         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? // ff "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? // ff "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 1 c and 8a? // ff "Yes," complete Schedule G, Part II       17       X         19       Did the organization oreport more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // ff "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? // ff "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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? // f"Yes," complete Schedule I, Parts I and II       20a       X			14b	Х	
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18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       18       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21       X	17				37
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,"       19       X         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       20b         21       X			17		<u> </u>
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization operate on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II       21       X	18				
complete Schedule G, Part III       19       X         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       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			18		<u> </u>
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       20b         21       Did the organization operate one or 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	19				v
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	~~				
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					
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			20b		<u> </u>
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 Form 990 (2019)
 DKT INTERNATIONAL, INC.
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 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 Ves
 No

			Yes	No
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		<u> </u>
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			37
	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	051		х
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		<u></u>
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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a		28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
C		28c		х
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		- 23
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization required, errinnate, or dissorte and cease operations? <i>If 'Yes, 'Complete Schedule N, Part 1</i>			
02	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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		х
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		х
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		Х
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	Х	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 45			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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	<u>990 (2019)</u> DKT INTERNATIONAL, INC. 58-1593	137	Р	<sub>age</sub> 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_	77	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country <b>SEE SCHEDULE O</b>			
<b>F</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>F</b> -		x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		A X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		x
<b>L</b>	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6h		
7	were not tax deductible?	6b		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b> 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		x
		7a 7b		- 23
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
U	to file Form 8282?	7c		x
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	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		
9	Sponsoring organizations maintaining donor advised funds.	-		
	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		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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 13b			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2019)

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Form 990 (	2019)
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Check if Schedule O contains a response or note to any line in this Part VI

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 on Schedule O. See instructions. X

		I	I	<b>c</b> 1		Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		6			
	If there are material 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 on Schedule 0.			_			
b	Enter the number of voting members included on line 1a, above, who are independent	1b		5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other				
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision	I			
	of officers, directors, trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	s filed?		4		X X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap						
	more members of the governing body?				7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st						
	persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea						
а	The governing body?	2	0		8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
5	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u></u>	O = d = 1	<u></u>	<u> </u>		
	tion B. Ponoicos (This Section B requests information about policies not required by the internal Re	venue	Code.)			Yes	No
10-	Did the exercitive have lead charters brenches as efficience?			ſ	10-	X	
	Did the organization have local chapters, branches, or affiliates?				10a	~	
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch					v	
	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the fo	orm?	11a	Х	
	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," de	escribe				
	in Schedule O how this was done				12c	Х	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by ind	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a	Х	
	Other officers or key employees of the organization				15b		Х
	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 arrangen	nent w	ith a				
	taxable entity during the year?				16a	Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	•	•				
	exempt status with respect to such arrangements?				16b	х	
Sec	tion C. Disclosure			<u></u>	100		
17	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	NO 000	T (Section 5	01(c)(3)c		availa	blo
10		10 330		01(0)(0)3	Only)	avalla	DIE
	for public inspection. Indicate how you made these available. Check all that apply.	-					
-	Own website Another's website X Upon request Other (explain			P	<b>C</b>		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	I IIIICT O	n interest po	icy, and	mano	ial	
~~	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 boc CHRISTOPHER H. PURDY - 202-233-8780	oks and	records	►			
	1001 CONNECTICUT AVENUE, NW, NO. 800, WASHINGTON, D	DC	20036			990	

Form 990 (2019) DKT INTER	NATIONA	L,	I	NC	•				58-15	<u>93137</u>	/	Page <b>8</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	<b>(B)</b> Average hours per week	erage Position (do not check more than one box, unless person is both an				than c s both	an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related	tion an		ited it of er
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C) or a	mpens from t ganiza nd rela ganiza	he ation ated
										_		
1b Subtotal							-	2,808,750.	50,442	1, 9;	34.4	452.
c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c)								2,808,750.	50,442	1. 93	\$4,4	<u>452.</u>
2 Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable			41
											Yes	1
<b>3</b> Did the organization list any <b>former</b> officer,		,			,	,			5			X
<ul><li>line 1a? If "Yes," complete Schedule J for st</li><li>For any individual listed on line 1a, is the su</li></ul>										3		
and related organizations greater than \$150	,		•							4	X	
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." <i>com</i>										5		x
Section B. Independent Contractors		; ] /(	JI SU		Jers	011 .				<u>   U</u>		
1 Complete this table for your five highest con	-									nsation f	rom	
the organization. Report compensation for t (A) Name and business		ear e	nain	ig w		or wi	nin	<u>the organization's tax y</u> (B) Description of s		Comp	( <b>C)</b> ensati	on
MARCUM LLP, 1899 L STREET	, NW, S	UΙ	ΤE	8	50	,		-				
WASHINGTON, DC 20036 JENNER & BLOCK LLP							_	AUDITING SER	VICES	24	.7,(	059.
353 N. CLARK STREET, CHIC	AGO, IL	6	06	54				LEGAL SERVIC	ES	15	55,0	.000
EQUAL JUSTICE UNDER LAW,	400 7TH				т,							
<u>NW #602, WASHINGTON, DC 2</u> DWYN ANN WEN	0004						-	LEGAL SERVIC	£S	14	3,2	241.
3311 UNICK ROAD, FERNDALE								CONSULTANT		12	<u>27,8</u>	368.
NEGUS ASSOCIATES, INC., 1		TR	EE'	т,	Ν	W				1 (		195
<b>#300, WASHINGTON, DC 2000</b> <b>2</b> Total number of independent contractors (ir		ot lin	nited	to t	thos	se lis	-	CONSULTANT above) who received mo	ore than	12	.,,4	<u>485.</u>
\$100,000 of compensation from the organiz	-				7	-		,				

Form **990** (2019)

932008 01-20-20



		/111									
			Check if Schedule O o	conta	ains a res	sponse	or note to any lin	e in this Part VIII (A)	(B)	(C)	D
								Total revenue	Related or exempt	Unrelated	Revenue excluded
								rotarrovende	function revenue	business revenue	from tax under
											sections 512 - 514
nts nts	1					a					
3rai our			Membership dues			b					
S, C			Fundraising events			c					
Gift lar		d	Related organizations		1	d					
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contr			e	15,457,345.				
		f	All other contributions, gifts,	grants	s, and						
ibu <sup>-</sup>			similar amounts not included	labov	e 1	f	45,285,845.				
d O		g	Noncash contributions included in	lines 1a	a-1f <b>1</b>	g \$					
Co an		h	Total. Add lines 1a-1f				►	60,743,190.			
							Business Code				
e	2	а	FAMILY PLANNING SALE	ES			900099	162,657,141.	162,657,141.		
e vic		b									
Se		с									
am		d									
Program Service Revenue		е									
Pr		f	All other program service	rever	nue						
		g	Total. Add lines 2a-2f					162,657,141.			
	3		Investment income (includ	ding c	dividend	s, intere	est, and				
			other similar amounts)				►	2,499,176.			2,499,176.
	4		Income from investment of								
	5		Royalties				►				
					(i) F		(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
			Rental income or (loss)	6c							
		d	Net rental income or (loss)	)			• • • • • • • • • • • • • • • • • • •				
	7	а	Gross amount from sales of			urities	(ii) Other				
			assets other than inventory	7a	23,35	0,382.					
		b	Less: cost or other basis								
е			and sales expenses	7b	17,65	4,016.					
Revenue		с	Gain or (loss)		5,69						
Rev			Net gain or (loss)				<b>&gt;</b>	5,696,366.			5,696,366.
ř	8		Gross income from fundraisi								
Othe			including \$								
-			contributions reported on								
			Part IV, line 18		-						
		b	Less: direct expenses								
			Net income or (loss) from								
	9		Gross income from gamin		-						
			Part IV, line 19								
		b									
			Net income or (loss) from			····					
	10		Gross sales of inventory, I	0	0						
			and allowances			10a					
		b	Less: cost of goods sold								
			Net income or (loss) from								
						· j · ·	Business Code				
SNC	11	а	OTHER INCOME				900099	942,756.			942,756.
nec		b						, ,			, ,
scellaneo Revenue		c									
Miscellaneous Revenue			All other revenue								
Σ			Total. Add lines 11a-11d					942,756.			
	12		Total revenue. See instruction		<u></u>			232,538,629.	162,657,141.	0.	9,138,298.
93200							F	, , , ,	, , , =•		Form <b>990</b> (2019)

DKT INTERNATIONAL, INC.

Form 990 (2019)

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932010 01-20-20

Check here

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

#### 1,154,085. 1,538,780. 200,041. 184,654. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 35,518,491. 34,193,046. 1,068,524. 256,921. Other salaries and wages Pension plan accruals and contributions (include 4,396,554. 4,137,675. 214,237. section 401(k) and 403(b) employer contributions) 1,546,598. 1,620,331. 60,224. Other employee benefits 3,147,648. 2,928,660. 182,470. Payroll taxes Fees for services (nonemployees): Management 469,433. 434,356. 35,077. Legal 430,392. 398,233. 32,159. Accounting Lobbying Professional fundraising services. See Part IV, line 17 135. 135. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 16,253,052. 15,408,761. 839,917. column (A) amount, list line 11g expenses on Sch 0.) 36,036,250. 36,036,250. Advertising and promotion 4,810,450. 4,578,474. 231,976. Office expenses \_\_\_\_\_ 256,920. 237,723. 19,197. Information technology Royalties 6,404,448. 6,491,862. 87,414. Occupancy 10,725,026. 10,625,712. 99,314. Travel Payments of travel or entertainment expenses for any federal, state, or local public officials .... 4,082,057. 4,060,038. 22,019. Conferences, conventions, and meetings 1,359,743. 121. 1,359,864. Interest Payments to affiliates 2,895,644. 2,890,279. 5,365. Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 95,475,219. 95,475,219. COST OF SALES 3,933,240. LICENSES AND TAXES 3,941,104. 7,864. 591,083. 591,083. REPAIRS AND MAINTENANCE 387,554. 387,554. d BAD DEBT 346,046. 163,307. 182,739. e All other expenses 230,773,895.225,990,440. 4,242,837. 540,618. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization

DKT INTERNATIONAL, INC. Part IX Statement of Functional Expenses

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

Form 990 (2019)

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14 15

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22 23

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h

С

25 26

Do not include amounts reported on lines 6b,

Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21

organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members

Compensation of current officers, directors,

Grants and other assistance to domestic individuals. See Part IV, line 22

Grants and other assistance to foreign

7b, 8b, 9b, and 10b of Part VIII.

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

(A)

Total expenses

(C) Management and general expenses

(B)

Program service expenses

**(D)** Fundraising

expenses

44,642.

13,509.

36,518.

4,374.

Form 990 (2019)

1

DKT INTERNATIONAL, INC.

Form 990 (2019)
Part X Balance Sheet

58-1593137 Page 11

		Check if Schedule O contains a response or note	to any	lino in this Part V			
		Check in Scheddle O contains a response of hote	to any		(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			39,778,174.	1	45,975,472.
	2	Savings and temporary cash investments	390,710.	2	2,502,620.		
	3	Pledges and grants receivable, net	31,868,746.	3	23,686,830.		
	4	Accounts receivable, net			45,583,880.	4	52,099,645.
	5	Loans and other receivables from any current or fo					
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifie				-	
		under section 4958(f)(1)), and persons described in				6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			34,035,049.	8	41,833,503.
As	9				4,310,706.	9	3,846,701.
٩		Land, buildings, and equipment: cost or other				-	
		basis. Complete Part VI of Schedule D	10a	22,696,415.			
	b	Less: accumulated depreciation	9,810,972.	10c	11,174,570.		
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11	90,968,845.	12	106,407,616.		
	13	Investments - program-related. See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	3,800,218.	15	4,306,554.		
	16	Total assets. Add lines 1 through 15 (must equal			260,547,300.	16	291,833,511.
	17	Accounts payable and accrued expenses	46,364,430.	17	58,329,099.		
	18	Grants payable			18		
	19	Deferred revenue			6,590,861.	19	8,047,011.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Pa	art IV c	of Schedule D		21	
ŝ	22	Loans and other payables to any current or former	r office	er, director,			
Liabilities		trustee, key employee, creator or founder, substar	ntial co	ontributor, or 35%			
iab		controlled entity or family member of any of these	perso	ns		22	
_	23	Secured mortgages and notes payable to unrelate			14,087,248.	23	14,517,125.
	24	Unsecured notes and loans payable to unrelated t				24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1	7-24).	Complete Part X	0		140 885
		of Schedule D			0.	25	148,775.
	26				67,042,539.	26	81,042,010.
s		Organizations that follow FASB ASC 958, check	k here				
nce	07	and complete lines 27, 28, 32, and 33.		151,689,409.	07	181,785,656.	
alaı	27	Net assets without donor restrictions	41,815,352.	27	29,005,845.		
d B	28	Net assets with donor restrictions	41,015,552.	28	29,005,045.		
Ľ.		Organizations that do not follow FASB ASC 958	s, cne	ck nere 🕨 🛄			
or F	20	and complete lines 29 through 33.				20	
ŝts	29	Capital stock or trust principal, or current funds				29 20	
SSE	30	Paid-in or capital surplus, or land, building, or equi				30 31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco			193,504,761.	31 32	210,791,501.
Ž	32 33	Total net assets or fund balances			260,547,300.	32 33	291,833,511.
	33	Total liabilities and net assets/fund balances			200,547,500.	33	

Form 990 (2019)



Form	DKT INTERNATIONAL, INC.	58-2	1593137	Pa	<sub>ge</sub> 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12)         Total expenses (must equal Part IX, column (A), line 25)         Revenue less expenses. Subtract line 2 from line 1         Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))         Net unrealized gains (losses) on investments         Donated services and use of facilities         Investment expenses         Prior period adjustments         Other changes in net assets or fund balances (explain on Schedule O)	1 2 3 4 5 6 7 8 9	232,53 230,77 1,76 193,50 15,52	3,8 4,7 4,7	95. 34. 61.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	210,79	1,5	<u>01.</u>		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	X No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_	162	NU		
20	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule		2a		x		
Zđ	Were the organization's financial statements compiled or reviewed by an independent accountant?     If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a     separate basis, consolidated basis, or both:     Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:						
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			х			
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>				
30	If the organization changed either its oversight process or selection process during the tax year, explain on Scho As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin						
Jd	As a result of a federal award, was the organization required to undergo an audit of audits as set forth in the Sin Act and OMB Circular A-133?	gie Audit	3a		x		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit	<u>Ja</u>		<u> </u>		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b				
			_	000	(		

Form **990** (2019)

932012 01-20-20

Department of the Treasury Internal Revenue Service

(	Form	990	or	990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public Inspection

Employer	ide	nt	ifi	са	ıti	or	۱r	number
-	~		-	~	~		~	-

		INTERNATIO						8-1593137		
Part I Reas	on for Public	Charity Status (/	All organizations must co	omplete th	is part.) Se	e instructions	6.			
The organization is	not a private found	dation because it is: (F	For lines 1 through 12, c	heck only	one box.)					
1 🗌 A churc	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2 🗌 A schoo	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3 🗌 A hospi	al or a cooperative	e hospital service orga	nization described in se	ection 170	<b>)(b)(1)(A)(i</b> i	ii).				
4 A medic	al research organiz	zation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,		
city, and										
			lege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in		
section	170(b)(1)(A)(iv). (	Complete Part II.)								
6 A federa	l, state, or local go	overnment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7 🔄 An orga	nization that norma	ally receives a substar	ntial part of its support fr	rom a gove	ernmental	unit or from th	ne general j	oublic described in		
section	170(b)(1)(A)(vi). (C	Complete Part II.)								
8 🔄 A comm	unity trust describ	ed in section 170(b)(	1)(A)(vi). (Complete Par	t II.)						
9 An agric	ultural research or	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college		
or unive	sity or a non-land-	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	e or		
universi										
			than 33 1/3% of its supp							
			t to certain exceptions,					-		
			(less section 511 tax) fro	om busines	sses acqui	red by the org	anization a	after June 30, 1975.		
	tion 509(a)(2). (Co	-								
·	-	-	vely to test for public sa	•				_		
-	-		vely for the benefit of, to				-			
•		•	d in <b>section 509(a)(1)</b> d					Sheck the box in		
	-	• •	f supporting organizatior		-		-			
			upervised, or controlled	• • • •	-					
	-		gularly appoint or elect a	majority c	of the aired	tors or truste	es of the st	ipporting		
		complete Part IV, Se		ion with its		d organizatio	n(a) hy hay	vin a		
			or controlled in connect			-		-		
	-		anization vested in the sa	ame perso	ns that co	ntroi or mana	ye ine supp	Joned		
		st complete Part IV,	g organization operated	in connoct	tion with	and functional	ly intograte	od with		
	-		). You must complete I				iy integrate	a with,		
			orting organization oper				ted organia	zation(s)		
			ation generally must sat				-			
	-		nplete Part IV, Sections	•		-				
	-	-	vritten determination fro				II. Type III			
	0		nally integrated supporti			. ) po ., . ) po	, . , p e			
	ber of supported									
		n about the supporte								
(i) Name of		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount of	f monetary	(vi) Amount of other		
organ	zation		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)		
Total										

\_1

#### Schedule A (Form 990 or 990-EZ) 2019 DKT INTERNATIONAL, INC. Part II

5	8 –	1	5	9	3	1	3	7	Page 2	2
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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2019 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	%
<b>16</b> a	33 1/3% support test - 2019. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and <b>stop I</b>	<b>here.</b> Explain in Pa	rt VI how the organ	ization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a	publicly supported	organization		
b	10% -facts-and-circumstances test	- 2018. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is <sup>.</sup>	10% or
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	neck this box and	stop here. Explair	n in Part VI how the	•
	organization meets the "facts-and-circ	umstances" test.	The organization o	jualifies as a public	cly supported orgai	nization	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	nd see instructions	
					0.1	dulo A (Earm 000	

Schedule A (Form 990 or 990-EZ) 2019

932022 09-25-19



### Schedule A (Form 990 or 990-EZ) 2019 DKT INTERNATIONAL, INC.

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(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	<u>39124751.</u>	<u>97787203.</u>	38981452.	<u>54771608.</u>	<u>60743190.</u>	291408204			
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	104848789	120461876	145662227	143193393	162657141	676823426			
3	Gross receipts from activities that are not an unrelated trade or bus-									
	iness under section 513									
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities furnished by a governmental unit to									
	the organization without charge									
6	Total. Add lines 1 through 5	143973540	218249079	184643679	197965001	223400331	968231630			
	Amounts included on lines 1, 2, and									
	3 received from disqualified persons	1000000.	723,552.	1500000.	1000000.	1000000.	5223552.			
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the									
	amount on line 13 for the year	1114590.		1	4398946.		9347520.			
	Add lines 7a and 7b	2114590.	1937148.	1500000.	5398946.		14571072.			
	Public support. (Subtract line 7c from line 6.)						953660558			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
	Amounts from line 6	143973540	218249079	184643679	197965001	223400331	968231630			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2949861.	3764796.	3584627.	3345823.	2499176.	16144283.			
b	Unrelated business taxable income									
	(less section 511 taxes) from businesses acquired after June 30, 1975									
с	Add lines 10a and 10b	2949861.	3764796.	3584627.	3345823.	2499176.	16144283.			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on									
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	641,598.		1041725.						
	••						989763069			
14	First five years. If the Form 990 is fo	e e					·			
Sec	check this box and stop here ction C. Computation of Public									
15	Public support percentage for 2019 (	line 8, column (f), d	ivided by line 13, o	column (f))		15	96.35 %			
	Public support percentage from 2018					16	95.20 %			
	ction D. Computation of Invest									
17	Investment income percentage for 20	019 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	1.63 %			
	Investment income percentage from					18	1.73 %			
19a	33 1/3% support tests - 2019. If the	-								
-	more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization									
b	<b>b</b> 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and									
20	line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									
		I UIU NOT CNECK A	box on line 14, 19	a, or isp, check th			O or 990-EZ) 2019			
<del>9</del> 3202	3 09-25-19		15		SCN	edule A (FUIII 990				

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2

3a

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990-EZ) 2019

1

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	
1				
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	4		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
000			Vaa	Ne
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
-	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	-		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	.	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2019

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#### Schedule A (Form 990 or 990-EZ) 2019 DKT INTERNATIONAL, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
<b>1</b> N	et short-term capital gain	1		
<b>2</b> R	ecoveries of prior-year distributions	2		
<b>3</b> O	ther gross income (see instructions)	3		
<b>4</b> A	dd lines 1 through 3.	4		
5 D	epreciation and depletion	5		
6 P	ortion of operating expenses paid or incurred for production or			
c	ollection of gross income or for management, conservation, or			
m	aintenance of property held for production of income (see instructions)	6		
7 0	ther expenses (see instructions)	7		
8 A	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
<b>1</b> A	ggregate fair market value of all non-exempt-use assets (see			
in	structions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
	verage monthly cash balances	1b		
c Fa	air market value of other non-exempt-use assets	1c		
d To	otal (add lines 1a, 1b, and 1c)	1d		
e D	iscount claimed for blockage or other			
fa	ctors (explain in detail in <b>Part VI</b> ):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
<b>3</b> S	ubtract line 2 from line 1d.	3		
<b>4</b> C	ash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
se	ee instructions).	4		
5 N	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 M	lultiply line 5 by .035.	6		
	ecoveries of prior-year distributions	7		
8 M	linimum Asset Amount (add line 7 to line 6)	8		
Section	C - Distributable Amount			Current Year
<b>1</b> A	djusted net income for prior year (from Section A, line 8, Column A)	1		
	nter 85% of line 1.	2		
<b>3</b> M	linimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Ei	nter greater of line 2 or line 3.	4		
	come tax imposed in prior year	5		
	istributable Amount. Subtract line 5 from line 4, unless subject to			
	nergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrated	Type III supporting orga	nization (see

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990 or 990-EZ) 2019



Schedule A (Form 990 or 990-EZ) 2	019 DKT	INTERNATIONAL,	INC
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Par	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
C	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

2015 AMOUNT: \$	641,598.
2016 AMOUNT: \$	275,762.
2017 AMOUNT: \$	1,041,725.
2018 AMOUNT: \$	2,485,315.
2019 AMOUNT: \$	942,756.
932028 09-25-19	Schedule A (Form 990 or 990-EZ) 20

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

#### \*\* PUBLIC DISCLOSURE COPY \*

## Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

# 2019

Employer identification number

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	DKT INTERNATIONAL, INC.
Organization type (chec	sk one):
Filers of:	Section:
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization

 Form 990-PF
 501(c)(3) exempt private foundation

 4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is charitable, etc., burpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set of the parts unless to the set of the year for an *exclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set of the parts unless to the set of the year for an *exclusively* set of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* set of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* set of the parts unless the **General Rule** applies to the parts unless the **General Rule** applie

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)



Name of organization

58-1593137

## DKT INTERNATIONAL, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>13,347,247.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>10,568,534.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>9,228,170.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$4,888,811.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>4,704,014.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$2,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

10231112 150872 DKT

2019.05000 DKT INTERNATIONAL, INCCORY\_1

Name of organization

Page 3 Employer identification number

58-1593137

#### DKT INTERNATIONAL, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

923453 11-06-19

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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Page 4

ame of or	ganization		Employer identification number
KT IN	VTERNATIONAL, INC.		58-1593137
Part III	Exclusively religious, charitable, etc., contrib	(a) through (e) and the following line e s, charitable, etc., contributions of <b>\$1,000 o</b>	section 501(c)(7), (8), or (10) that total more than \$1,000 for the ye
a) No. from	· · · · ·		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	 ft
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
a) No			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	[
-	Transferee's name, address,		Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of g	ft
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		· · · · · · · · · · · · · · · · · · ·	
ŀ		(e) Transfer of g	
ŀ	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
3454 11-06-	-19		Schedule B (Form 990, 990-EZ, or 990-PF) (2

27 2019.05000 DKT INTERNATIONAL, INC**CORY**1

	m 990) Complete if the	ntal Financial Statement organization answered "Yes" on Form 990	).	OMB No. 1545-0047
Denar	tment of the Treasury	, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12 ▶ Attach to Form 990.	2b.	Open to Public
	Al Revenue Service Go to www.irs.gov/For	m990 for instructions and the latest inform		Inspection
lam	e of the organization	TNO	Emplo	over identification number
Pa	DKT INTERNATIONAI		or Accounts	<u>58-1593137</u>
<u> </u>	organization answered "Yes" on Form 990, Part IV			
		(a) Donor advised funds	(b) Funds	and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors		sed funds	
	are the organization's property, subject to the organizatio	-		Yes No
6	Did the organization inform all grantees, donors, and don			
	for charitable purposes and not for the benefit of the don	or or donor advisor, or for any other purpose	conferring	
	impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	-	🗌 Yes 📃 No
Ра	rt II Conservation Easements. Complete if the	e organization answered "Yes" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organi	zation (check all that apply).		
	Preservation of land for public use (for example, red	creation or education) Preservation o	of a historically in	portant land area
	Protection of natural habitat	Preservation o	of a certified histo	pric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a q	ualified conservation contribution in the form	of a conservatio	n easement on the last
	day of the tax year.		н	eld at the End of the Tax Yea
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
с	Number of conservation easements on a certified historic	structure included in (a)	2c	
d	Number of conservation easements included in (c) acquir	ed after 7/25/06, and not on a historic struct	ure	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred	, released, extinguished, or terminated by the	e organization du	iring the tax
	year 🕨			
4	Number of states where property subject to conservation	easement is located		
5	Does the organization have a written policy regarding the	periodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easemen			
6	Staff and volunteer hours devoted to monitoring, inspecti	ng, handling of violations, and enforcing con	servation easem	ents during the year
	•			
7	Amount of expenses incurred in monitoring, inspecting, h	andling of violations, and enforcing conserva	ation easements	during the year
-				
8	Does each conservation easement reported on line 2(d) a			
~	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conser			
	balance sheet, and include, if applicable, the text of the fe	potnote to the organization's financial statem	ients that describ	bes the
Pa	organization's accounting for conservation easements. rt III Organizations Maintaining Collections	of Art Historical Treasures or O	ther Similar	Accota
1 4	Complete if the organization answered "Yes" on F			
1.			and balance aba	
Ia	If the organization elected, as permitted under FASB ASC	· ·		
	of art, historical treasures, or other similar assets held for		-	DIIC
h	service, provide in Part XIII the text of the footnote to its f			orko of
b				
	art, historical treasures, or other similar assets held for puprovide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		▶ ¢	
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historica			
2	the following amounts required to be reported under FAS		a gain, provide	
		-	▶ ¢	
~	· · · · · · · · · · · · · · · · · · ·			
a h	Assets included in Form QQO Part Y		- D	
b	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instruct			chedule D (Form 990) 201

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9	٥	5	٥	0	Λ	Т

Sche		ERNATIONAL						58-15			age <b>2</b>
Par	t III   Organizations Maintaining C	ollections of Ar	t, Histori	cal Trea	asures, o	r Other	Simila	r Assets	(contir	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check an	ny of the fo	llowing that	make si	gnificant ι	use of its			
	collection items (check all that apply):										
а	Public exhibition	d			ange progra						
b	Scholarly research	e	e 🔄 Otł	ner							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how they	further the	e organizatio	n's exen	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of				-	er similar	assets		-	_	-
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the or	ganization	answered '	'Yes" on	Form 990	), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
<b>1</b> a	Is the organization an agent, trustee, custodi								٦		٦
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing tabl	e:							
									Amoun	t	
	Beginning balance										
	Additions during the year										
	Distributions during the year										
	Ending balance								7		
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII.						LY ?		Yes		No ∣
Par							0	<u></u>			
		(a) Current year	(b) Prio		(c) Two year			/ears back	(e) Four	vears	hack
1a	Beginning of year balance	(a) Odirent year		i ycai		3 DUCK		Juis buck		yours	buok
h	Contributions										
č	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
-	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		e (line 1a. c	olumn (a))	held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment										
		%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse		ation that ar	re held and	d administer	ed for th	e organiza	ation			
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on Sche	edule R?					Зb		
4	Describe in Part XIII the intended uses of the		wment fund	ds.							
Par	t VI Land, Buildings, and Equipm	ient.									
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, lir	ne 11a. Se	e Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o		(b) Cost		. ,	ccumulate		<b>(d)</b> Boo	k valu	е
		basis (investr	nent)	basis (		dep	preciation				
	Land				5,172.				3,19		
	Buildings				4,460.		251,1			3,2	
	Leasehold improvements				2,498.		<u>77,7</u>			<u>4,7'</u>	
	Equipment			-	5,218.		706,6		1,36		
	Other				9,067.		786,2		<u>5,61</u>		
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X. column (</u>	( <u>B), line 10</u>	<u>c.)</u>			▶   1 Sebedule	1,17	-	
											0040

Schedule D (Form 990) 2019



	orm 990) 2019		INTERNATIONAL,	INC.
Part VII I	nvestments - C	Other Se	curities.	

Part VII	Investments - Other Securities.	

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) EQUITIES	43,697,087.	END-OF-YEAR MARKET VALUE
(B) MUTUAL FUNDS	62,710,529.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X. col. (B) line 12.)	106,407,616.	

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### Other Assets. Part IX

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X       Other Liabilities.	

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (b) Book value (a) Description of liability

1.	(a) Description of hability	(b) DOOK value
	Federal income taxes	
(2)	CONTRACT LIABILITIES	148,775.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	Column (b) must equal Form 990. Part X. col. (B) line 25.)	148,775.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

932053 10-02-19



Sche	edule D (Form 990) 2019 DKT INTERNATIONAL, INC.			58-	1593137	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents Wit	h Revenue per Re	turn		
	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	248,060,	500.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	15,522,006.			
b	Donated services and use of facilities	<b>2</b> b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3	232,538,	494.
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	135.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		135.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	232,538,	629.
	(This Hust codd I of the TET			<u> </u>	202/000/	025.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents Wi	th Expenses per I	Retur	r <b>n.</b>	0250
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12	n <b>ents W</b> i a.	ith Expenses per F	Retur	r <b>n.</b>	
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Staten	n <b>ents W</b> i a.	ith Expenses per F	Retur	rn. 230,591,	
	<b>rt XII Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	n <b>ents W</b> i a.	ith Expenses per F	Retur	r <b>n.</b>	
1	Reconciliation of Expenses per Audited Financial Staten           Complete if the organization answered "Yes" on Form 990, Part IV, line 12           Total expenses and losses per audited financial statements	n <b>ents W</b> i a.	ith Expenses per F	Retur	r <b>n.</b>	
1 2	<b>rt XII Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents Wi a. 2a	ith Expenses per F	Retur	r <b>n.</b>	
1 2 a	<b>rt XII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses	nents Wi a. 2a 2b 2c	ith Expenses per F	Retur	r <b>n.</b>	
1 2 a b	<b>rt XII Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	nents Wi a. 2a 2b 2c	ith Expenses per F	Retur	r <b>n.</b>	
1 2 a b	<b>rt XII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other value	2a           2b           2c           2d	ith Expenses per F	Retur	rn. 230,591,	0.
1 2 b c d	<b>rt XII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a           2b           2c           2d	ith Expenses per F	Retur	r <b>n.</b>	0.
1 2 b c d e	<b>rt XII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines <b>2a</b> through <b>2d</b>	2a           2b           2c           2d	ith Expenses per F	1 2e 3	rn. 230,591,	0.
1 2 b c d e 3	T XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a           2b           2c           2d	ith Expenses per F	1 2e 3	rn. 230,591,	0.
1 2 b c d 3 4	T XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a           2b           2c           2d	ith Expenses per F	1 2e 3	m. 230,591, 230,591,	<u>0.</u> 121.
1 2 b c d 3 4	<b>TXII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)         Add lines 4a and 4b	2a           2b           2c           2d	135. 182,639.	1           2e           3           4c	m. 230,591, 230,591, 182,	<u>0.</u> 121.
1 2 d e 3 4 b c 5	<b>TXII Reconciliation of Expenses per Audited Financial Statem</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2b           2c           2d	135. 182,639.	1           2e           3           4c	m. 230,591, 230,591,	<u>0.</u> 121.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

DKT EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEAR ENDED DECEMBER

31, 2019, AND DETERMINED THAT THERE ARE NO MATTERS THAT WOULD REQUIRE

RECOGNITION IN THE COMBINED FINANCIAL STATEMENTS OR WHICH MIGHT HAVE ANY

EFFECT ON DKT'S TAX-EXEMPT STATUS.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

#### FOREIGN CURRENCY EXCHANGE

182,639.

932054 10-02-19

Schedule D (Form 990) 2019

Department of the Treasury			Attach to Form 990.				to Public
Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Inspe	
Name of the organization					Employer i	identifi	cation number
DKT INTERNATION	NAL, INC.				58-159	9313	7
Part I General Info	ormation on A	ctivities Out	side the United States. Compl	ete if the orgar	ization answe	ered "Y	es" on
Form 990, Part	IV, line 14b.						
-	-		ds to substantiate the amount of its gra				
the grantees' eligibility	for the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	stance?	📖	Yes 🔄 No
2 For grantmakers. Des United States.	scribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistanc	e outsi	de the
	The following Part	L line 3 table ca	an be duplicated if additional space is r	leeded )			
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (	d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,		expenditures
	in the region	independent	gram services, investments, grants to		e specific type		for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the regi	on	in the region
EAST ASIA AND THE				SALE AND DI	STRIBUTION	N OF	
PACIFIC	7	387	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	25,888,541.
FUDODE / INCLUDING							
EUROPE (INCLUDING ICELAND & GREENLAND)	3	25	PROGRAM SERVICES	SALE AND DI FAMILY PLAN			7 708 820
ICELIAND & GREENLAND/		25	FROGRAM SERVICES	FAMILI FLAN	MING FRODU	5015	7,708,820.
MIDDLE EAST AND				SALE AND DI	STRIBUTION	N OF	
NORTH AFRICA	2	100	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	1,985,279.
				SALE AND DI	STRIBUTION	N OF	
NORTH AMERICA	2	171	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	10,292,545.
						1 01	
SOUTH AMERICA	10	102	DROGRAM GERUITGEG	SALE AND DI			14 070 010
SOUTH AMERICA	10	103	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	14,279,819.
				SALE AND DI	STRIBUTION	N OF	
SOUTH ASIA	4	1103	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	19,152,679.
				SALE AND DI	STRIBUTION	N OF	
SUB-SAHARAN AFRICA	12	907	PROGRAM SERVICES	FAMILY PLAN	INING PRODU	JCTS	43,993,031.
EAST ASIA AND THE	_						1 005 000
PACIFIC	40	0 2796	INVESTMENTS				1,225,608.
<b>3 a</b> Subtotal		2/90					124,526,322.
b Total from continuation sheets to Part I		0					38,738,239.
c Totals (add lines 3a							, , , – , – , – ,

**Statement of Activities Outside the United States** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

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

40

2796

Schedule F (Form 990) 2019

163,264,561.

OMB No. 1545-0047

Q

932071 10-12-19

and 3b)

SCHEDULE F (Form 990)

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Schedule F (Form 990) Part I Continuatio	DKT INTE	RNATIONA	L, INC.	58-15931	37 Page
(a) Region	(b) Number of offices in the region		<ul> <li>(Schedule F (Form 990), Part I, line 3)</li> <li>(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)</li> </ul>	<b>(e)</b> If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND					
NORTH AFRICA	0	0	INVESTMENTS		353,765
EUROPE (INCLUDING					1 600 000
ICELAND & GREENLAND)	0	0	INVESTMENTS		1,600,000
SOUTH AMERICA	0	0	INVESTMENTS		26,504,173
SOUTH AMERICA	0	0	INVESTMENTS		20,304,173
COLUMN A GTA		0	INVESTMENTS		10 200 201
SOUTH ASIA	0	0	INVESTMENTS		10,280,301
Totals	•				38,738,239

932181 04-01-19 DKT INTERNATIONAL, INC.

58-1593137

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
			ecognized as charities by the f				1	1	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter								

Schedule F (Form 990) 2019

Page 2

Schedule F (Form 990) 2019	DKT	INTERNATIONAL,	INC.
Schedule F (F0111 990) 2019	DICI	TIGT DIGULT T OTGELD /	TT10.

58-1593137

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. **—** 

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

**—** 

Schedule F (Form 990) 2019

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1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2019

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:

#### THE ACCRUAL METHOD OF ACCOUNTING WAS USED TO ACCOUNT FOR FOREIGN

EXPENDITURES.

Schedule F (Form 990) 2019

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932075 10-12-19

10251112 150872 DKT

SC	CHEDULE J			OMB No. 1	1545-004	47
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			2019		<u> </u>
		Compensated Employees		ZU	IJ	)
Dono	tment of the Treasury	<ul> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 23.</li> <li>Attach to Form 990.</li> </ul>		Open to		ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nam	e of the organizatio			identificatio		nber
_		DKT INTERNATIONAL, INC.	58-2	159313	7	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a	Check the appropr	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or	v i	nal use			
	X Travel for con					
		cation and gross-up payments Health or social club dues or initiation fee				
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
b	-	on line 1a are checked, did the organization follow a written policy regarding payment or			37	
				<u>1b</u>	X	
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х	
-						
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
		ation of the CEO/Executive Director, but explain in Part III.				
	X Compensatio					
		compensation consultant				
	X Form 990 of c	ther organizations X Approval by the board or compensation of	ommittee			
4	During the year di	A only nervous listed on Form 000. Port VII. Section A line 1s, with respect to the filing				
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
~	organization or a re			4a		x
a b		e payment or change-of-control payment? ceive payment from, a supplemental nonqualified retirement plan?			х	
					21	x
U	c Participate in, or receive payment from, an equity-based compensation arrangement?					<u> </u>
	I Tes to any of i					
	Only section 501/	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
Ū	contingent on the					
а	-			5a	х	
		ation?			Х	
		or 5b, describe in Part III.				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the					
а						
b		ation?				X
		or 6b, describe in Part III.				
7	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	;			
		nes 5 and 6? If "Yes," describe in Part III		7	Х	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
				8		X
9		id the organization also follow the rebuttable presumption procedure described in				
	Regulations sectio		<u></u>	9		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Schee	dule J (Forn	n 990)	2019

10251112 150872 DKT



#### 58-1593137

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

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	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
(1) CHRISTOPHER H. PURDY	(i)	308,000.	113,231.	138.	675,739.	24,884.	1,121,992.	0.	
PRESIDENT & CEO	(ii)	49,000.	1,441.	0.	4,900.	0.	55,341.	0.	
(2) TODD M. CALLAHAN	(i)	127,375.	236,297.	134,641.	30,738.	19,190.	548,241.	0.	
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) JUAN GARCIA	(i)	126,404.	257,008.	73,541.	12,400.	12,860.	482,213.	0.	
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) DIMOS SAKELLARIDIS	(i)	121,333.	132,717.	132,776.	12,133.	19,190.	418,149.	0.	
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) RORY HARRINGTON	(i)	127,000.	146,276.	78,041.	12,700.	12,860.	376,877.	0.	
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) DANIEL MARUN	(i)	123,833.	150,254.	54,906.	13,134.	31,915.	374,042.	0.	
PROGRAM MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) KERI STOCKLAND	(i)	228,000.	38,095.	60.	22,800.	9,816.	298,771.	0.	
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2019

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1B:

HOME LEAVE IS IN ADDITION TO ANNUAL LEAVE, AND IS ALLOWED AFTER 24 MONTHS

(2 YEARS) OF EMPLOYMENT AND EACH TWO YEARS THEREAFTER FOR INTERNATIONAL

EMPLOYEES ONLY. THOSE EMPLOYEES WHO SERVE IN THE COUNTRY OF WHICH THEY ARE

CITIZENS ARE NOT ENTITLED TO HOME LEAVE. EVERY TWO YEARS DKT WILL PROVIDE

ROUNDTRIP COACH AIRFARE FOR THE EMPLOYEE AND MEMBERS OF HIS/HER IMMEDIATE

FAMILY TO THE HOME LEAVE DESTINATION OF THE EMPLOYEE'S CHOICE. DKT GROSSES

UP THE EMPLOYEES' PAYROLL TAXES PAID ON RELOCATION EXPENSES. DKT ALSO

PROVIDES HOUSING ALLOWANCE FOR SOME OVERSEAS EMPLOYEES.

DKT GROSSES UP RELOCATION EXPENSES.

THE FOREIGN COUNTRY DIRECTOR'S HOUSING IS PROVIDED BY DKT.

PART I, LINE 4B:

IN 2019, CHRISTOPHER H. PURDY, PRESIDENT & CEO, ACCRUED \$644,939 FROM HIS

PARTICIPATION IN A SUPPLEMENTAL, NON-QUALIFIED 457(F) RETIREMENT PLAN.

COPY

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### PART I, LINE 5:

DKT PAYS COMMISSIONS BASED ON CASH COLLECTIONS FOR REACHING SALES GOALS OF

CONTRACEPTIVE PRODUCTS. DKT ALSO PAYS COMMISSIONS FOR FUNDRAISING RESULTS,

ACHEIVEMENTS TO SUPPORT OUR MAIN KPI, THE CYP, AND REMITTANCES.

PART I, LINE 7:

DKT PAYS COMMISSIONS FOR FUNDRAISING RESULTS.

Schedule J (Form 990) 2019



SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.

EZ
OMB No. 1545-0047
2019
Open to Public
Inspection
Employer identification number

58-1593137

DKT INTERNATIONAL, INC.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLIC ABOUT THE BENEFITS OF MODERN CONTRACEPTION.

TO IMPROVE AVAILABILITY, DKT BUILDS THE CAPACITY OF MEDICAL PROVIDERS

TO DISPENSE THESE PRODUCTS SAFELY AND COMPETENTLY. IN SEVERAL

COUNTRIES, DKT'S SOCIAL FRANCHISES OFFER CONTRACEPTIVE PRODUCTS AND

SERVICES AT SUBSIDIZED RATES IN ORDER TO DIRECTLY INCREASE ACCESS AND

AVAILABILITY. FOUNDED IN 1989, DKT HAS BEEN A LEADER IN DYNAMIC FAMILY

PLANNING PROGRAMMING FOR OVER 25 YEARS. IN 2019, DKT PROVIDED AND SOLD

806.8 MILLION MALE AND FEMALE CONDOMS, 92.9 MILLION CYCLES OF ORAL

CONTRACEPTIVES, 13.2 MILLION EMERGENCY CONTRACEPTIVES, 30.4 MILLION

INJECTABLE CONTRACEPTIVES, 3.6 MILLION IUDS AND HORMONAL IUS ,19.6

MILLION MISOPROSTOL PILLS, 4.2 MILLION MIFEPRISTONE/COMBI PACK, 222,000

MANUAL VACUUM ASPIRATION(MVA) KITS, 1.8 MILLION CANNULAE, 1.8 MILLION

HORMONAL IMPLANTS, 2 MILLION SUPPOSITORIES AND FOAMING TABLETS AND

45,800 TUBAL LIGATIONS AND VASECTOMIES.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

INDONESIA, PHILIPPINES, BRAZIL, ETHIOPIA,

URUGUAY, GHANA, INDIA, MEXICO,

EGYPT, MOZAMBIQUE, VIETNAM, CHINA,

CONGO, DEM REP, TANZANIA, BURMA, NIGERIA,

PAKISTAN, BOLIVIA, TURKEY, FRANCE,

LIBERIA, SIERRA LEONE, UNITED KINGDOM, ARGENTINA,

CHILE, ECUADOR, PARAGUAY, PERU,

PANAMA, COLOMBIA, AFGHANISTAN, SINGAPORE,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932211 09-06-19 Schedule O (Form 990 or 990-EZ) (2019)

1

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization DKT INTERNATIONAL, INC.	Employer identification number 58-1593137
IRAN, SENEGAL, CAMEROON, COTE D IVOIRE,	
UGANDA	
FORM 990, PART VI, SECTION B, LINE 11B:	

THE PRESIDENT, CFO, AND MEMBERS OF THE AUDIT/FINANCE COMMITTEE REVIEW THE FEDERAL FORM 990 AGAINST THE AUDITED FINANCIAL STATEMENTS TO ENSURE ACCURACY AND AGREEMENT BETWEEN THE TWO DOCUMENTS. THE PRESIDENT AND/OR CFO POSE QUESTIONS TO THE TAX PREPARER FOR CLARIFICATION AFTER THE REVIEW BY THE FINANCE/AUDIT COMITTEE IF NECESSARY. THE FULL BOARD OF DIRECTORS REVIEWS FEDERAL FORM 990 BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE REQUIRED TO COMPLETE THE FORM INITIALLY AND THEN REVIEW AND REVISE PERIODICALLY AS RELEVANT CHANGES MAY BE INDICATED BY BOARD MEMBERS. A DECISION IS MADE TO DETERMINE WHETHER THE MEMBER MUST ABSTAIN IN VOTING ON ANY MATTERS WHERE THE CONFLICT MAY BE AN ISSUE.

FORM 990, PART VI, SECTION B, LINE 15A:
THE BOARD OF DIRECTORS OBTAINS COMPARABILITY STATISTICS FROM ORGANIZATIONS
OF SIMILAR SIZE AND WHICH HAVE EMPLOYEES WITH SIMILAR LEVELS OF
RESPONSIBILITY. THEY ALSO CONSIDER SUCH FACTORS AS SENIORITY, WHERE THERE
ARE POSTED AND SPECIAL SKILLS NEEDED FOR THE PARTICULAR POSITION. THE BOARD
OF DIRECTORS MUST THEN VOTE ON THE LEVELS OF COMPENSATION FOR THE PRESIDENT
& CEO. DKT HAS ENGAGED THE SERVICES OF AN INDEPENDENT COMPENSATION
CONSULTANT TO EVALUATE ITS POLICIES AND COMPENSATION PLAN.

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

932212 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

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FORM 990, PAGE 1, LINE 5:	
THE TOTAL NUMBER OF US CITIZENS R	ECEIVING FORM W-2S IS 27 AND THE TOTAL
EMPLOYEES WORLDWIDE THAT ARE NOT	US CITIZENS NOT RECEIVING FORM W-2S
ARE 2,789. THEREFORE, THE TOTAL E	MPLOYEES FOR THE ORGANIZATION
WORLDWIDE IS 2,816.	

Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

DKT INTERNATIONAL, INC.

FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS

Employer identification number 58-1593137

Page 2

# **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

### Department of the Treasury Internal Revenue Service

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

Name of the organization

DKT INTERNATIONAL, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
	-				
	-				
	-				
	-				

# Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity	cont	<b>g)</b> 512(b)(13) trolled tity?
				501(c)(3))		Yes	No
DKT INDIA							
67 A LINKING ROAD, SANTA CRUZ	SALE AND DISTRIBUTION OF						
MUMBAI, INDIA	FAMILY PLANNING PRODUCTS	INDIA	N/A		DKT	X	
DKT INTERNATIONAL FOUNDATION UK							
50 BROADWAY							
LONDON, UNITED KINGDOM SW1H0BL	FAMILY PLANNING	UNITED KINGDOM	N/A		dkt	x	
FEMHEALTH USA, INC 46-4144274							
1156 15TH STREET, NW							
WASHINGTON, DC 20005	FAMILY PLANNING	DISTRICT OF COLUMBIA	501(C)(3)	LINE 7	dkt	x	
YAYASAN DKT INDONESIA							
GRAHA SUCOFINDO LT., 12 JALAN RAYA PASA	SALE AND DISTRIBUTION OF						
JAKARTA, INDONESIA	FAMILY PLANNING PRODUCTS	INDONESIA	N/A		DKT	x	

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



Schedule R (Form 990) 2019

OMB No. 1545-0047

2019
Open to Public Inspection

Employer identification number 58 - 1593137

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.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Gener mana partr	al or Pe ging er?	ercentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No	
										+		

Part IV 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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	512( cont	(i) ction (b)(13) trolled ttity?
		country)						Yes	No
DINK KISTET LETENA	SALE AND DISTRIBUTION								
P.O. BOX 8744	OF FAMILY PLANNING								
ADDIS ABABA, ETHIOPIA	PRODUCTS	ETHIOPIA	DKT	C CORP	5,898,024.	8,949,611.	100%	Х	
DKT ARGENTINA S.A.	SALE AND DISTRIBUTION								
CERRITO 1070, PISO 3 ,OFICINA 71	OF FAMILY PLANNING								
BUENOS AIRES, ARGENTINA	PRODUCTS	ARGENTINA	DKT	C CORP	12,072.	36,921.	100%	х	
ASIA RH SUPPLY PTE. LTD	SALE AND DISTRIBUTION								
30 CECIL STREET, #19-08, PRUDENTIAL TOWER	OF FAMILY PLANNING								
SINGAPORE, SINGAPORE 049712	PRODUCTS	SINGAPORE	DKT	C CORP	0.	0.	100%	Х	
DKT BOLIVIA	SALE AND DISTRIBUTION								
AVENIDA LAS AMERICAS ESQUINA, #7	OF FAMILY PLANNING								
SAAVEDRA, BOLIVIA	PRODUCTS	BOLIVIA	DKT	C CORP	55,209.	191,150.	95.00%	х	
DKT CHILE S.A.	SALE AND DISTRIBUTION								
EL GOLF 150, FLOOR 4, LAS CONDES	OF FAMILY PLANNING								
SANTIAGO, CHILE	PRODUCTS	CHILE	DKT	C CORP	336,374.	2,154,553.	100%	х	

#### 932162 09-10-19

Schedule R (Form 990) 2019

(a) Name, address, and EIN	<b>(b)</b> Primary activity	(c) Legal domicile	(d) Direct controlling	(e) Type of entity	<b>(f)</b> Share of total	<b>(g)</b> Share of	(h) Percentage	Sec 512(1	( <b>i)</b> ction b)(13) rolled
of related organization		(state or foreign country)	entity	(C corp, S corp, or trust)	income	end-of-year assets	ownership	ent	tity?
DKT COLOMBIA S.A.	SALE AND DISTRIBUTION							Yes	No
CL 70 A NR. 4-41	OF FAMILY PLANNING								
BOGOTA COLOMBIA	PRODUCTS	COLOMBIA	DKT	C CORP	20,966.	265,718.	100%	x	
DKT DE MEXICO SA DE DV	SALE AND DISTRIBUTION				, .	, -			<u> </u>
AV. MIGUEL ANGEL DE QUEVEDO 696, DELEGACION C	OF FAMILY PLANNING								
LAS LOMAS, MEXICO	PRODUCTS	MEXICO	DKT	C CORP	9,712,654.	12,873,826.	99.99%	x	
DKT DO BRASIL PRODUTOS DE USO PESSOAL, LTDA.	SALE AND DISTRIBUTION				, ,	, ,			
AVENIDA BRIGADEIRO FARIA UMA 1912	OF FAMILY PLANNING								
SAO PAULO, BRAZIL	PRODUCTS	BRAZIL	DKT	C CORP	12,093,608.	13,722,384.	99.99%	x	
DKT DR CONGO	SALE AND DISTRIBUTION								
AVENUE DU MILITANT NO.1/3691, CROISEMENT DES	OF FAMILY PLANNING	CONGO							
BARUMBU, CONGO (KINSHASA)	PRODUCTS	(KINSHASA	DKT	C CORP	12,727,830.	25,331,128.	100%	x	
DKT ECUADOR S.A.	SALE AND DISTRIBUTION								
AV. REPUBLICA DEL SALVADOR 1082, TORRE PARIS	OF FAMILY PLANNING								
QUITO, ECUADOR	PRODUCTS	ECUADOR	DKT	C CORP	10,693.	104,436.	100%	x	
DKT EGYPT	SALE AND DISTRIBUTION				· · · ·				
17 AL-TAQA ST	OF FAMILY PLANNING								
CAIRO, EGYPT	PRODUCTS	EGYPT	DKT	C CORP	106,036.	٥.	96.00%	x	
DKT HEALTH	SALE AND DISTRIBUTION								
80 EAST RODRIGUEZ JR. AVENUE, C-5 LIBIS	OF FAMILY PLANNING								
QUEZON CITY, PHILIPPINES 1110	PRODUCTS	PHILIPPIN	IDKT	C CORP	18,875,241.	18,454,567.	99.99%	x	
DKT INDONESIA PT	SALE AND DISTRIBUTION								
GRAHA SUCOFINDO LT. 12, JL. RAYA PASAR MINGGU	OF FAMILY PLANNING								
JAKARTA, INDONESIA 12780	PRODUCTS	INDONESIA	DKT	C CORP	6,488,801.	13,377,130.	99.00%	x	
DKT INTERNATIONAL - CAMEROON	SALE AND DISTRIBUTION								
BONAMOUSSADI OPPOSITE QUIFEUROU SABLE	OF FAMILY PLANNING								
DOULA, CAMEROON	PRODUCTS	CAMEROON	DKT	C CORP	1,836,455.	1,151,512.	100%	x	
DKT INTERNATIONAL - IRAN	SALE AND DISTRIBUTION								
TOOBA TOWER, UNIT 33, DADMAN STREET, SHAHRAK	OF FAMILY PLANNING								
TEHRAN, IRAN 1466765191	PRODUCTS	IRAN	DKT	C CORP	462,799.	1,727,145.	99.99%	x	
DKT INTERNATIONAL - IVORY COAST	SALE AND DISTRIBUTION								
COCODY, ANGR 8M TRANCHE LOT 565, ILOT 38	OF FAMILY PLANNING	COTE							
ABIDJAN, COTE D'IVOIRE (IVORY COAST)	PRODUCTS	D'IVOIRE	DKT	C CORP	134,640.	954,873.	100%	X	
DKT INTERNATIONAL - SENEGAL	SALE AND DISTRIBUTION								
ROUTE DES ALMADIES, LOT 25	OF FAMILY PLANNING								
DAKAR, SENEGAL	PRODUCTS	SENEGAL	DKT	C CORP	654,839.	2,331,689.	100%	X	

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512( cont	(i) ction (b)(13) trolled tity?
		country)						Yes	No
DKT INTERNATIONAL - VIETNAM OFFICE	SALE AND DISTRIBUTION								
13TH FLOOR, ICON4 TOWER, 243A DE LA THANH STR	4								
HANOI, VIETNAM	PRODUCTS	VIETNAM	DKT	C CORP	399,077.	699,272.	100%	X	<u> </u>
DKT INTERNATIONAL INC. LIBERIA	SALE AND DISTRIBUTION								
MONTSERRADO, BUSHROD ISLAND, ACROSS FROM TOYO									
SAYON TOWN, LIBERIA	PRODUCTS	LIBERIA	DKT	C CORP	0.	0.	100%	X	<u> </u>
DKT INTERNATIONAL, INC. GHANA	SALE AND DISTRIBUTION								
HSC327/14MII BONEY ST DZORWULU	OF FAMILY PLANNING								
ACCRA, GHANA	PRODUCTS	GHANA	DKT	C CORP	3,669,451.	4,935,703.	100%	X	
DKT JANANI FAMILY CARE PRIVATE LIMITED	SALE AND DISTRIBUTION								
FLAT-253, PLOT-4, THE SETH VIHAR CGHS, SECTOR	OF FAMILY PLANNING								
DELHI, INDIA 110078	PRODUCTS	INDIA	DKT	C CORP	Ο.	٥.	100%	X	
DKT KENYA	SALE AND DISTRIBUTION								
BOA HOUSE, 5TH FLOOR, WESTLANDS	OF FAMILY PLANNING								
NAIROBI, KENYA	PRODUCTS	KENYA	DKT	C CORP	2,391,712.	1,930,447.	98.00%	x	
DKT LIMITED LIABILITY COMPANY	SALE AND DISTRIBUTION								
17 AL-TAQA ST	OF FAMILY PLANNING								
CAIRO, EGYPT	PRODUCTS	EGYPT	DKT	C CORP	1,128,828.	1,557,093.	92.00%	x	
DKT MOZAMBIQUE, LIMITADA	SALE AND DISTRIBUTION								
RUA PEREIRA DO LAGO, 56 SOMMERSCHEI	OF FAMILY PLANNING								
MAPUTO, MOZAMBIQUE	PRODUCTS	MOZAMBIQU	DKT	C CORP	2,931,111.	1,701,707.	97.50%	x	
DKT MYANMAR	SALE AND DISTRIBUTION								
NO. 02,7/1 YAN AUNG LANE 2	OF FAMILY PLANNING								
YANKIN TOWNSHIP, BURMA	PRODUCTS	BURMA	DKT	C CORP	1,790,520.	1,813,674.	100%	x	
DKT NIGERIA	SALE AND DISTRIBUTION								
GRACE HOUSE, NO. 2, IWAYA ROAD, ONIKE-YABA	OF FAMILY PLANNING								
LAGOS, NIGERIA	PRODUCTS	NIGERIA	DKT	C CORP	8,441,201.	12,827,100.	100%	x	
DKT PAKISTAN	SALE AND DISTRIBUTION					,			<u> </u>
SUITE NO. 14 4TH FLOOR, KHALID TARAKAY MARKET	OF FAMILY PLANNING								
KARACHI PAKISTAN	PRODUCTS	PAKISTAN	DKT	C CORP	4,385,802.	6,547,755.	99.99%	x	
DKT PARAGUAI S.A.	SALE AND DISTRIBUTION				, , , -	, , -	-		<u> </u>
JUAN DE SALAZAR, 657	OF FAMILY PLANNING								
ASSUNCIN_ PARAGUAY	PRODUCTS	PARAGUAY	DKT	C CORP	28,361.	172,785.	100%	x	
DKT PERU S.A.C.	SALE AND DISTRIBUTION					,		<u> </u>	<u> </u>
AV. VICTOR ANDRES BELAUNDE, 147	OF FAMILY PLANNING								
SAN ISIDRO, PERU	PRODUCTS	PERU	DKT	C CORP	181,739.	508,296.	100%	x	

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	Sec 512(i contr	(i) ction b)(13) rolled tity?
		country)						Yes	No
DKT PHILLIPINES, INC.	SALE AND DISTRIBUTION								
80 EAST RODRIGUEZ JR. AVENUE, C-5 LIBIS	OF FAMILY PLANNING				- / . / .				
QUEZON CITY, PHILIPPINES 1110	PRODUCTS	PHILIPPIN	DKT	C CORP	-74,940.	10,532,251.	100%	X	
DKT REPRODUCTIVE HEALTH, INC.	SALE AND DISTRIBUTION								
80 EAST RODRIGUEZ JR. AVENUE, C-5 LIBIS	OF FAMILY PLANNING								
QUEZON CITY, PHILIPPINES 1110	PRODUCTS	PHILIPPIN	DKT	C CORP	25,248.	4,351,832.	99.99%	X	
DKT SIERRA LEONE	SALE AND DISTRIBUTION								
1 BETTS FARM, OFF SIR SAMUEL LEWIS ROAD, MURR	OF FAMILY PLANNING	SIERRA							
FREETOWN, SIERRA LEONE	PRODUCTS	LEONE	DKT	C CORP	٥.	٥.	100%	X	
DKT SOUTH AMERICA HOLDING INC	SALE AND DISTRIBUTION								
AVE. PASEO DEL MAR, COSTA DEL ESTE	OF FAMILY PLANNING								
PANAMA CITY, PANAMA	PRODUCTS	PANAMA	DKT	C CORP	-777,818.	1,637,513.	100%	x	
DKT TURKEY	SALE AND DISTRIBUTION								
TALATPASA BULVARI AKGUN	OF FAMILY PLANNING								
ALSANCAK-IZMIR, TURKEY 35/5 3522	PRODUCTS	TURKEY	DKT	C CORP	993,644.	1,807,561.	92.46%	x	
DKT UGANDA	SALE AND DISTRIBUTION								
14-18 COOPER ROAD, 4TH FLOOR ACACIA MALL	OF FAMILY PLANNING								
KAMPALA, KENYA	PRODUCTS	KENYA	DKT	C CORP	89,031.	866,320.	98.00%	x	
DKT URUGUAY, S.A.	SALE AND DISTRIBUTION								
CALLE COLONIA, 810 APTO. 403	OF FAMILY PLANNING								
MONTEVIDEO BRAZIL	PRODUCTS	BRAZIL	DKT	C CORP	10,294.	282,406.	100%	x	
DKT WOMANCARE GLOBAL SERVICES	SALE AND DISTRIBUTION				,				
43 AVENUE DE LA GRANDE-ARMEE	OF FAMILY PLANNING								
PARIS, FRANCE 75116	PRODUCTS	FRANCE	DKT	C CORP	2,088,070.	673,718.	100%	x	
GOLDEN CHOICE COMPANY LIMITED	SALE AND DISTRIBUTION								
13TH FLOOR, ICON4 TOWER, 243A DE LA THANH STR	OF FAMILY PLANNING								
HANOI, VIETNAM	PRODUCTS	VIETNAM	DKT	C CORP	1,051,667.	1,348,569.	100%	x	
HEALTHSENSE, INC.	SALE AND DISTRIBUTION				, , -	, , -			<u> </u>
80 EAST RODRIGUEZ JR. AVENUE, C-5 LIBIS	OF FAMILY PLANNING								
QUEZON CITY PHILIPPINES 1110	PRODUCTS	PHILIPPIN	DKT	C CORP	13,502.	221,578.	99.99%	x	
INDIA HEALTHCARE	SALE AND DISTRIBUTION				,	,=			<u> </u>
HEM-DIL, 2ND FLOOR, 67-A LINKING ROAD, SANTAC	•								
MUMBAI, INDIA 400054	PRODUCTS	INDIA	DKT	C CORP	7,200,126.	4,573,440.	99.99%	x	
JANANI	SALE AND DISTRIBUTION				.,,	_,_,0,_10,			<u> </u>
	OF FAMILY PLANNING								
DELHI, INDIA 110017	PRODUCTS	INDIA	DKT	C CORP	6,747,439.	3,978,235.	100%	x	

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp,	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year	(h) Percentage ownership	512(I contr	i) b)(13) rolled tity?
		country)		or trust)		assets		Yes	No
MODERN CHOICE EXPERTS CO., LTD.	SALE AND DISTRIBUTION								
NO. 02,7/1 YAN AUNG LANE 2	OF FAMILY PLANNING								
YANKIN TOWNSHIP, BURMA	PRODUCTS	BURMA	DKT	C CORP	107,639.	352,665.	100%	Х	
PHILIPPINES REGIONAL HEADQUARTERS	SALE AND DISTRIBUTION								
80 EAST RODRIGUEZ JR. AVENUE, C-5 LIBIS	OF FAMILY PLANNING								
QUEZON CITY, PHILIPPINES 1110	PRODUCTS	PHILIPPIN	DKT	C CORP	70,472.	2,665,693.	99.00%	х	
PT DHARMENDRA KUMAR TIYAGI INDONESIA	SALE AND DISTRIBUTION								
TAMAN TEKNO BSD SEKTOR XI G-3 NO. 29, SETU	OF FAMILY PLANNING								
TANGERANG, INDONESIA	PRODUCTS	INDONESIA	DKT	C CORP	1,512,019.	16,605,131.	100%	Х	
SYB SALUD Y BELLEZA INTERNACIONAL, S.A.	SALE AND DISTRIBUTION								
RUTA 8 KM 17500 - MONTEVIDEO ZONA AMERICA	OF FAMILY PLANNING								
SAO PAULO, URUGUAY	PRODUCTS	URUGUAY	DKT	C CORP	1,438,132.	7,184,602.	100%	Х	
TANZANIA	SALE AND DISTRIBUTION								
PLOT NUMBER 1087 , MERERANI ROAD , MSASANI PE	OF FAMILY PLANNING								
DAR ES SALAAM, TANZANIA 23471	PRODUCTS	TANZANIA	DKT	C CORP	1,709.	2,386.	100%	х	
TANZANIA LIMITED	SALE AND DISTRIBUTION								
PLOT NUMBER 1087 , MERERANI ROAD , MSASANI PE	OF FAMILY PLANNING								
DAR ES SALAAM, TANZANIA 23471	PRODUCTS	TANZANIA	DKT	C CORP	0.	464.	90.00%	х	
WOMANCARE GLOBAL TRADING CIC	SALE AND DISTRIBUTION								
50 BROADWAY	OF FAMILY PLANNING	UNITED							
LONDON, UNITED KINGDOM	PRODUCTS	KINGDOM	DKT	C CORP	5,537,964.	7,450,142.	100%	Х	
									<b></b>
									<u> </u>
									<b> </b>

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

te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es
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	?		
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
Gift, grant, or capital contribution to related organization(s)		X	5
Gift, grant, or capital contribution from related organization(s)			
Loans or loan guarantees to or for related organization(s)		X	5
Loans or loan guarantees by related organization(s)	<u>1e</u>	X	-
Dividends from related organization(s)	1f		
3 Sale of assets to related organization(s)	1g		
Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)	11		
Lease of facilities, equipment, or other assets to related organization(s)			4
Lease of facilities, equipment, or other assets from related organization(s)	<u>1k</u>		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
Sharing of paid employees with related organization(s)			_
Reimbursement paid to related organization(s) for expenses	<u>1p</u>		
Reimbursement paid by related organization(s) for expenses			_
Other transfer of cash or property to related organization(s)	<u>1r</u>	_	
Other transfer of cash or property from related organization(s)	1s	X	5

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.

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) DKT MYANMAR	В	1,225,608.	CASH
(2) TANZANIA	В	1,149,623.	CASH
(3) DKT PAKISTAN	В	6,763,318.	CASH
(4) DKT MOZAMBIQUE, LIMITADA	В	2,882,210.	CASH
(5) DKT NIGERIA	В	5,069,160.	CASH
(6) DKT INTERNATIONAL, INC. GHANA	В	4,221,559.	CASH

COPY

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

<b>(a)</b> Name of other organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amount involved
(7)WOMANCARE GLOBAL TRADING CIC	В	1,600,000.	CASH
(8)DKT INDIA	В	3,516,983.	CASH
(9)FEMHEALTH USA, INC.	В	1,850,000.	CASH
(10)DINK KISTET LETENA	В	635,226.	CASH
(11)DKT DR CONGO	В	10,882,587.	CASH
DKT DO BRASIL PRODUTOS DE USO PESSOAL, (12)LTDA.	D	3,724,871.	FMV
(13)DKT INTERNATIONAL, INC. GHANA	D	11,410,090.	FMV
	D	1,187,532.	FMV
(15)DKT DE MEXICO SA DE DV	E	3,197,484.	FMV
(16)TANZANIA	Е	1,280,098.	FMV
	E	1,250,000.	FMV
	R	1,023,592.	FMV
(19)DKT PHILLIPINES, INC.	R	3,426,048.	FMV
	R	11,410,090.	FMV
(21)DKT LIMITED LIABILITY COMPANY	R	2,813,887.	FMV
(22)DKT INDONESIA PT	R	1,109,262.	FMV
(23)DKT DE MEXICO SA DE DV	R	3,200,000.	FMV
(24)DKT MYANMAR	R	1,017,811.	FMV

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

<b>(a)</b> Name of other organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount involved
(7) TANZANIA LIMITED	R	3,086,921.	FMV
(8) DKT TURKEY	R	1,498,321.	FMV
(9) DKT INTERNATIONAL – IRAN	R	893,305.	FMV
(10) WOMANCARE GLOBAL TRADING CIC	R	2,171,327.	FMV
DKT DO BRASIL PRODUTOS DE USO PESSOAL, (11) LTDA.	R	6,000,000.	FMV
(12) DKT INTERNATIONAL - IVORY COAST	R	2,430,695.	FMV
(13) GOLDEN CHOICE COMPANY LIMITED	R	650,000.	FMV
(14) DKT DR CONGO	R	510,493.	FMV
(15) DKT INTERNATIONAL - CAMEROON	R	307,991.	FMV
(16) DKT UGANDA	R	450,000.	FMV
(17) DKT SOUTH AMERICA HOLDING INC	R	250,000.	FMV
(18) FEMHEALTH USA, INC.	R	86,000.	FMV
_ (19)			
(20)			
(21)			
(22)			
(23)			
(24)			

### Schedule R (Form 990) 2019 DKT INTERNATIONAL, 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 EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	<b>(g)</b> Share of end-of-year assets	(h Dispro tion allocat Yes	) opor- ate ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managin partner Yes No	(k) Percentage ownership

Schedule R (Form 990) 2019

rt VII	Supple	emental	Inform	nation
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Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2019

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