

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE DETROIT INSTITUTE OF ARTS		D Employer identification number 38-1359510	
	Doing business as		E Telephone number 313-833-7900	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 5200 WOODWARD AVENUE		G Gross receipts \$ 380,147,339.	
	City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48202-4008		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	F Name and address of principal officer: SALVADOR SALORT-PONS SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.DIA.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1885** **M** State of legal domicile: **MI**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE DIA CREATES EXPERIENCES THAT HELP EACH VISITOR FIND PERSONAL MEANING IN ART.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	52
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	52
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	441
	6 Total number of volunteers (estimate if necessary)	6	795
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	6,507.
b Net unrelated business taxable income from Form 990-T, line 34	7b	5,507.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	50,206,766.	48,321,015.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,437,748.	3,426,856.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,636,470.	7,053,150.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,359,745.	188,108.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	83,640,729.	58,989,129.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	19,002,991.	19,876,529.
	b Total fundraising expenses (Part IX, column (D), line 25)	82,716.	48,613.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,108,301.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	22,277,203.	20,131,826.
19 Revenue less expenses. Subtract line 18 from line 12	41,362,910.	40,056,968.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	42,277,819.	18,932,161.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	299,784,728.	335,021,744.
		36,674,714.	28,827,431.
		263,110,014.	306,194,313.

Part II Signature Block

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

Sign Here

Signature of officer: *Robert Bowen* Date: **5/11/2018**

ROBERT BOWEN, EXECUTIVE VICE PRESIDENT/CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **LYNNE M. HUISMANN** Preparer's signature: **LYNNE M. HUISMANN** Date: **05/10/18** Check if self-employed: PTIN: **P00053811**

Firm's name: **PLANTE & MORAN, PLLC** Firm's EIN: **38-1357951**

Firm's address: **2601 CAMBRIDGE CT., STE. 500**
AUBURN HILLS, MI 48326 Phone no. (248) 375-7100

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part 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: THE DIA CREATES EXPERIENCES THAT HELP EACH VISITOR FIND PERSONAL MEANING IN ART AND WITH EACH OTHER.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 11,398,666. including grants of \$) (Revenue \$ 699,699.) CURATORIAL, EXHIBITIONS, AND COLLECTION STRATEGIES AND INFORMATION: THE CURATORIAL DIVISION MANAGES DIA'S WORLD-CLASS ART COLLECTION CONSISTING OF OVER 60,000 OBJECTS. THE CURATORIAL STAFF CONDUCTS RESEARCH ON THE MUSEUM'S COLLECTION, PRODUCES SCHOLARLY PUBLICATIONS, PROPOSES ART ACQUISITIONS AND CULTIVATES ART COLLECTORS. RESPONSIBILITIES ALSO INCLUDE DEVELOPING AND ORGANIZING ART EXHIBITIONS; MANAGING THE PERMANENT GALLERIES BY SUPERVISING THE COLLECTIONS MANAGEMENT STAFF IN THE INSTALLATION OF ARTWORKS; CONSULTING WITH CONSERVATORS WHO REGULARLY MONITOR THE CONDITION AND CONSERVATION NEEDS OF THE ARTWORKS; MAINTAINING COLLECTION RECORDS IN ACCORDANCE WITH ASSOCIATIONS OF AMERICAN MUSEUMS' DATA AND ARCHIVAL STANDARDS; COLLABORATING WITH THE LEARNING AND AUDIENCE ENGAGEMENT

4b (Code:) (Expenses \$ 7,931,416. including grants of \$) (Revenue \$ 428,214.) LEARNING AND AUDIENCE ENGAGEMENT AND COMMUNITY RELATIONS: THE LEARNING AND AUDIENCE ENGAGEMENT DIVISION (L&AE) HELP THE PUBLIC FIND PERSONAL MEANING IN ART THROUGH VISITOR-CENTERED INTERPRETIVE PLANNING AND MEDIA DEVELOPMENT FOR SPECIAL EXHIBITIONS AND GALLERY INSTALLATIONS; SERVICES FOR K-12 STUDENTS AND TEACHERS; AND GALLERY TOURS, ART TALKS AND ART MAKING BOTH IN THE MUSEUM AND OFF-SITE FOR ALL AGES. L&AE ALSO TRAINS AND COORDINATES THE EFFORTS OF MORE THAN 100 VOLUNTEERS WHO DELIVER SELECT L&AE PROGRAMS. DURING THE FISCAL YEAR, L&AE SERVED 245,000 PEOPLE. IN ADDITION, STAFF LED INTERPRETIVE PLANNING FOR 2 EXHIBITIONS WHICH WERE ATTENDED BY MORE THAN 125,600 VISITORS. EXHIBITIONS INCLUDED TEXTS, VIDEOS, HANDS-ON INTERACTIVES, AND VISITOR RESPONSE STATIONS, SOME OF WHICH WERE DEVELOPED WITH

4c (Code:) (Expenses \$ 3,483,926. including grants of \$) (Revenue \$ 0.) ART ACQUISITIONS: ACQUISITIONS RELATE TO THE ACQUIRING OF ART BY PURCHASE AND BY GIFT. FOLLOWING STANDARD MUSEUM ACCOUNTING PRACTICES, THE DIA RECOGNIZES THE ENTIRE AMOUNT AS AN EXPENSE AT THE TIME OF PURCHASE OR GIFT. THE DIA PURCHASED 51 PIECES TOTALING \$2,643,455 AND RECEIVED 62 GIFTS OF WORKS OF ART VALUED AT \$840,471. EACH ACQUISITION WAS ACCESSIONED INTO THE DIA'S PERMANENT COLLECTION. ALL ACQUISITIONS ARE REVIEWED BY THE COLLECTIONS COMMITTEE AND APPROVED BY THE BOARD OF DIRECTORS AND ARE PAID FOR USING RESTRICTED FUNDS DESIGNATED FOR THE ACQUISITION OF ART.

4d Other program services (Describe in Schedule O.) (Expenses \$ 6,964,179. including grants of \$) (Revenue \$ 2,386,384.)

4e Total program service expenses 29,778,187.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>		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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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 "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
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 A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

Part 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

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical input fields. Contains questions about Form 1096, Form W-2G, Form W-3, and various tax compliance requirements.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 1a 52 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 in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent 1b 52		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 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 direct supervision of officers, directors, or 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 990 was filed? 4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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 appoint one or more members of the governing body? 7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a	X	
b Each committee with authority to act on behalf of the governing body? 8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy? 14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a	X	
b Other officers or key employees of the organization 15b	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **MI**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **ROBERT BOWEN - 313-833-7900**
5200 WOODWARD AVE., DETROIT, MI 48202

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EUGENE A GARGARO JR CHAIRMAN	20.00 0.00	X		X				0.	0.	0.
(2) BONNIE LARSON VICE CHAIR	3.00 0.00	X		X				0.	0.	0.
(3) JOHN D LEWIS VICE CHAIR	3.00 0.00	X		X				0.	0.	0.
(4) ANDREA ROUNDEL DICKSON SECRETARY	3.00 0.00	X		X				0.	0.	0.
(5) STEPHEN BIEGUN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(6) LINDSEY FORD BUHL BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(7) HOWARD W BURDETT JR BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(8) ETHAN DAVIDSON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(9) LILLIAN DEMAS BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(10) MARLA DONOVAN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(11) MARK A DOUGLAS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(12) NICOLE E EISENBERG BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(13) JENNIFER FISCHER BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(14) CYNTHIA FORD BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(15) ANNE G FREDERICKS BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(16) LAWRENCE GARCIA BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(17) DR ANTOINE GARIBALDI BOARD MEMBER	2.00 0.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RALPH J GERSON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(19) JENNIFER GILBERT BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(20) THOMAS GUASTELLO BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(21) JOHN HANTZ BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(22) DR JAMES B JACOBS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(23) ROBERT JACOBS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(24) CHACONA W JOHNSON BAUGH BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(25) MARY KRAMER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(26) LORI MAHER BOARD MEMBER	1.00 0.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,788,343.	0.	156,397.
d Total (add lines 1b and 1c)								1,788,343.	0.	156,397.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **13**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3 X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4 X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO INC AND AFFILIATES 4880 PAYSHERE CIRCLE, CHICAGO, IL 60674	MANAGEMENT OF FOOD SERVICE	2,142,303.
PRUDENTIAL SECURITY 20600 EUREKA ROAD STE 900, TAYLOR, MI 48180	SECURITY AGENCY PERSONNEL	599,712.
STONERIDGE CONSTRUCTION 21840 WYOMING PLACE, OAK PARK, MI 48237	CONSTRUCTION	386,914.
SIEMENS INDUSTRY INC, 45470 COMMERCE CENTER DRIVE, PLYMOUTH TWP, MI 48170	CONTRACTOR	311,167.
MONTICELLO ASSOCIATES INC, 1800 LARIMER STREET SUITE 2100, DENVER, CO 80202	ADVISOR FINANCIAL INVESTMENT	275,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **20**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) HUBERT MASSEY BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(28) DR ALI MOIIN BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(29) JULIETTE OKOTIE-EBOH BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(30) PETER B OLEKSIK BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(31) TAKASHI OMITSU BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(32) LINDA ORLANS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(33) JAQUES PANIS BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(34) JENNIFER HUDSON PARKE BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(35) ALEX PARRISH BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(36) CYNTHIA J PASKY BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(37) DR IRVIN REID BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(38) DONALD RITZENHEIN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(39) TONY SAUNDERS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(40) MARC A SCHWARTZ BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(41) RENATA SEALS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(42) SANDRA SELIGMAN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(43) BUZZ THOMAS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(44) DR LORNA THOMAS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(45) REGINALD M TURNER JR BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(46) MOLLY VALADE BOARD MEMBER	2.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) PADMA VATTIRUTI BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(48) CAROL WALTERS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(49) DR CELESTE WATKINS-HAYES BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(50) RHONDA C WELBURN BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(51) HENRY WINEMAN III BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(52) MARK ZEFFIRO BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(53) MARK A DAVIDOFF BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X						0.	0.	0.
(54) AMY DEBRUNNER BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X						0.	0.	0.
(55) NATHAN FORBES BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X						0.	0.	0.
(56) ELEANOR B FORD BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X						0.	0.	0.
(57) VICTORIA MCINNIS BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X						0.	0.	0.
(58) SALVADOR SALORT-PONS DIRECTOR, PRESIDENT AND CEO	40.00 0.00			X				373,152.	0.	29,205.
(59) ROBERT BOWEN EXECUTIVE VICE PRESIDENT/CFO/TREASUR	40.00 0.00			X				217,801.	0.	12,210.
(60) MARGARET FALCON VICE PRESIDENT, DEVELOPMENT	40.00 0.00				X			194,867.	0.	16,792.
(61) ELLIOTT BROOM VICE PRESIDENT OF MUSEUM OPERATIONS	40.00 0.00				X			161,125.	0.	17,956.
(62) JENNIFER CZAJKOWSKI VICE PRESIDENT, LEARNING/AUDNC ENGAG	40.00 0.00				X			133,123.	0.	9,290.
(63) NII QUARCOPOME CO-CHIEF CURATOR & DEPT HEAD OF AOIA	40.00 0.00				X			129,679.	0.	24,158.
(64) SONDR A JENKINS EXECUTIVE DIRECTOR ORG DEVEL & HR	40.00 0.00				X			123,185.	0.	15,867.
(65) GRAHAM W J BEAL FORMER DIRECTOR, PRESIDENT AND CEO	40.00 0.00					X		142,500.	0.	0.
(66) ANNMARIE ERICKSON FORMER COO	40.00 0.00					X		312,911.	0.	30,919.
Total to Part VII, Section A, line 1c								1,788,343.		156,397.

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns					
	1 b	Membership dues	3,748,578.				
	1 c	Fundraising events	2,015,870.				
	1 d	Related organizations					
	1 e	Government grants (contributions)	23,853,455.				
	1 f	All other contributions, gifts, grants, and similar amounts not included above	18,703,112.				
	g	Noncash contributions included in lines 1a-1f: \$	956,735.				
	h	Total. Add lines 1a-1f	48,321,015.				
Program Service Revenue	2 a	ENTERPRISE ACTIVITIES	900099	1,283,551.	701,490.	582,061.	
	b	MUSEUM SERVICES	712110	921,163.	921,163.		
	c	EXHIBITIONS	712110	602,790.	602,790.		
	d	LEARNING & AUDIENCE ENGAGEMENT	712110	428,289.	428,289.		
	e	AUXILIARY & VOLUNTEER GROUPS	712110	94,229.	94,229.		
	f	All other program service revenue	900099	96,834.	96,834.		
	g	Total. Add lines 2a-2f		3,426,856.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		5,183,497.		6,507.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real	80,515.			
			(ii) Personal	0.			
				80,515.			
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		80,515.		80,515.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	321,398,222.			
			(ii) Other				
				319,528,569.			
				1,869,653.			
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
d	Net gain or (loss)		1,869,653.		1,869,653.		
8 a	Gross income from fundraising events (not including \$ 2,015,870. of contributions reported on line 1c). See Part IV, line 18	a	344,030.				
b	Less: direct expenses	b	921,547.				
c	Net income or (loss) from fundraising events		-577,517.		-577,517.		
9 a	Gross income from gaming activities. See Part IV, line 19	a					
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a	1,371,134.				
		b	708,094.				
			663,040.		663,040.		
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d	All other revenue	900099	22,070.	6,462.	15,608.		
e	Total. Add lines 11a-11d		22,070.				
12	Total revenue. See instructions		58,989,129.	3,514,297.	6,507.	7,147,310.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	659,185.		659,185.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	13,952,583.	10,800,881.	1,891,207.	1,260,495.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,357,167.	1,747,321.	405,928.	203,918.
9 Other employee benefits	1,836,472.	1,391,875.	282,161.	162,436.
10 Payroll taxes	1,071,122.	794,002.	184,458.	92,662.
11 Fees for services (non-employees):				
a Management				
b Legal	241,328.		241,328.	
c Accounting	229,060.		229,060.	
d Lobbying	11,837.		11,837.	
e Professional fundraising services. See Part IV, line 17	48,613.			48,613.
f Investment management fees	1,373,264.		1,373,264.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	2,949,795.	2,419,625.	209,407.	320,763.
12 Advertising and promotion	1,652,998.	1,403,087.	5,343.	244,568.
13 Office expenses	1,402,359.	822,460.	208,927.	370,972.
14 Information technology	728,491.	217,290.	437,997.	73,204.
15 Royalties				
16 Occupancy	124,800.	124,800.		
17 Travel	318,893.	275,308.	15,554.	28,031.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	34,959.	6,676.	28,027.	256.
20 Interest	155,084.	357.	154,727.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,074,087.	1,053,579.	20,508.	
23 Insurance	512,808.	397,776.	115,032.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ART ACQUISITIONS	3,483,926.	3,483,926.		
b UTILITIES	1,885,264.	1,885,264.		
c EQUIPMENT & FACILITIES	1,117,774.	1,043,202.	73,275.	1,297.
d BUS SUBSIDIES	507,592.	507,592.		
e All other expenses	2,327,507.	1,403,166.	623,255.	301,086.
25 Total functional expenses. Add lines 1 through 24e	40,056,968.	29,778,187.	7,170,480.	3,108,301.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1
	2	Savings and temporary cash investments	38,852,232.	2 31,017,830.
	3	Pledges and grants receivable, net	50,268,238.	3 46,368,609.
	4	Accounts receivable, net	2,540,613.	4 2,291,744.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use	331,860.	8 352,316.
	9	Prepaid expenses and deferred charges	789,698.	9 996,136.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 25,530,560.	
	b	Less: accumulated depreciation	10b 3,819,236.	10c 21,711,324.
	11	Investments - publicly traded securities	92,835,314.	11 106,413,882.
	12	Investments - other securities. See Part IV, line 11	94,953,993.	12 125,869,903.
	13	Investments - program-related. See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	Total assets. Add lines 1 through 15 (must equal line 34)	299,784,728.	16 335,021,744.	
Liabilities	17	Accounts payable and accrued expenses	1,505,099.	17 1,940,837.
	18	Grants payable		18
	19	Deferred revenue	12,178,843.	19 12,247,825.
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable to unrelated third parties	5,157,568.	24 4,937,295.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	17,833,204.	25 9,701,474.
	26	Total liabilities. Add lines 17 through 25	36,674,714.	26 28,827,431.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	120,168,118.	27 146,631,148.
	28	Temporarily restricted net assets	68,609,370.	28 75,909,284.
	29	Permanently restricted net assets	74,332,526.	29 83,653,881.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances	263,110,014.	33 306,194,313.
	34	Total liabilities and net assets/fund balances	299,784,728.	34 335,021,744.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	58,989,129.
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,056,968.
3	Revenue less expenses. Subtract line 2 from line 1	3	18,932,161.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	263,110,014.
5	Net unrealized gains (losses) on investments	5	19,097,358.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	5,054,780.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	306,194,313.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2016)

Part II 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	27241461.	17852569.	35211798.	26824213.	24467560.	131597601
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	10929381.	22203535.	22456004.	23382553.	23853455.	102824928
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	38170842.	40056104.	57667802.	50206766.	48321015.	234422529
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)						4290451.
6 Public support. Subtract line 5 from line 4.						230132078

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	38170842.	40056104.	57667802.	50206766.	48321015.	234422529
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5294164.	5902381.	7478993.	7066813.	5263682.	31006033.
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.)	768,208.	649,232.	289,365.	16548239.	344,030.	18599074.
11 Total support. Add lines 7 through 10						284027636
12 Gross receipts from related activities, etc. (see instructions)					12	28,052,249.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	81.02 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	78.83 %
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2016

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
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 (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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	
c 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	

Section 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 Part VI 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	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

	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	

Section 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).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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.		
a 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	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 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 A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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 II, LINE 10, EXPLANATION FOR OTHER INCOME:

GAIN ON EARLY EXTINGUISHMENT OF DEBT

2015 AMOUNT: \$ 16,235,426.

OTHER INCOME

2015 AMOUNT: \$ 13,052.

FUNDRAISING REVENUE

2012 AMOUNT: \$ 768,208.

2013 AMOUNT: \$ 649,232.

2014 AMOUNT: \$ 289,365.

2015 AMOUNT: \$ 299,761.

2016 AMOUNT: \$ 344,030.

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

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not 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

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 ▶ \$ _____

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) (2016)

Name of organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
--------------------------------------------------------------	-----------------------------------------------------

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>3,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ <u>2,512,700.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ <u>1,510,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ <u>1,014,858.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
--------------------------------------------------------------	-----------------------------------------------------

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
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
--------------------------------------------------------------	-----------------------------------------------------

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift			
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

(e) Transfer of gift			
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

(e) Transfer of gift			
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

(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**
- ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
--------------------------------------------------------------	-----------------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

632041 11-10-16

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	11,837.													
c	Total lobbying expenditures (add lines 1a and 1b)	11,837.													
d	Other exempt purpose expenditures	40,045,131.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	40,056,968.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total	
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c	Total lobbying expenditures	41,416.	8,919.	14,970.	11,837.	77,142.
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2016

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016 Open to Public Inspection

Name of the organization THE DETROIT INSTITUTE OF ARTS Employer identification number 38-1359510

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply). 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 3 Number of conservation easements modified... 4 Number of states where property subject to conservation easement is located... 5 Does the organization have a written policy regarding the periodic monitoring... 6 Staff and volunteer hours devoted to monitoring... 7 Amount of expenses incurred in monitoring... 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2016

632051 08-29-16

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	188,048,945.	170,939,059.	172,109,607.	152,192,545.	138,627,372.
b Contributions	9,321,788.	10,105,521.	4,799,631.	2,475,140.	7,896,223.
c Net investment earnings, gains, and losses	17,904,355.	-3,485,392.	-2,885,549.	20,408,512.	12,078,600.
d Grants or scholarships					
e Other expenditures for facilities and programs	-411,109.	-10,489,757.	3,084,630.	2,966,590.	6,409,650.
f Administrative expenses					
g End of year balance	215,686,197.	188,048,945.	170,939,059.	172,109,607.	152,192,545.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 45.00 %
- b Permanent endowment 39.00 %
- c Temporarily restricted endowment 16.00 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)	X	
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,667,703.		2,667,703.
b Buildings		15,551,863.	971,996.	14,579,867.
c Leasehold improvements		1,940,874.	91,815.	1,849,059.
d Equipment		1,423,205.	823,324.	599,881.
e Other		3,946,915.	1,932,101.	2,014,814.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				21,711,324.

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) ALTERNATIVE INVESTMENTS	125,869,903.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	125,869,903.	

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.)		

Part IX Other Assets.

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.)	

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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNFUNDED PENSION PLAN OBLIGATION	3,615,424.
(3) POST RETIREMENT HEALTHCARE	
(4) OBLIGATION	3,770,270.
(5) ACCRUED PAYROLL AND OTHER EMPLOYEE	2,315,780.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	9,701,474.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	78,150,069.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	19,097,358.	
	b Donated services and use of facilities	2b	647,676.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	1,629,641.	
	e Add lines 2a through 2d			2e 21,374,675.
3	Subtract line 2e from line 1		3	56,775,394.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,373,264.	
	b Other (Describe in Part XIII.)	4b	840,471.	
	c Add lines 4a and 4b			4c 2,213,735.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	58,989,129.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	40,120,550.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	647,676.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d			2e 647,676.
3	Subtract line 2e from line 1		3	39,472,874.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,373,264.	
	b Other (Describe in Part XIII.)	4b	-789,170.	
	c Add lines 4a and 4b			4c 584,094.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	40,056,968.

Part XIII Supplemental Information.

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 III, LINE 1A:

IN CONFORMITY WITH ALLOWABLE MUSEUM FINANCIAL STATEMENT PRESENTATION PRACTICE, THE VALUE OF THE ART COLLECTION IS EXCLUDED FROM THE STATEMENTS OF FINANCIAL POSITION, AND, AS SUCH, PURCHASES FOR THE COLLECTION ARE RECORDED AS EXPENDITURES FOR THE ACQUISITION OF ART OBJECTS ON THE STATEMENT OF ACTIVITIES IN THE YEAR IN WHICH THE OBJECTS ARE ACQUIRED. SUCH ART IS ACCESSIONED TO THE PERMANENT COLLECTION OF THE MUSEUM UPON APPROVAL OF THE BOARD.

PART III, LINE 4:

THE WORKS OF ART ARE HELD IN CHARITABLE TRUST FOR EDUCATIONAL, RESEARCH AND CURATORIAL SERVICES.

Part XIII Supplemental Information (continued)

PART V, LINE 4:

INCOME EARNED ON ENDOWMENT FUNDS IS USED TO FURTHER THE MISSION OF THE DIA INCLUDING FUNDING FOR A VARIETY OF ACTIVITIES WHICH ARE BOTH RESTRICTED AND UNRESTRICTED. THESE ACTIVITIES INCLUDE, BUT ARE NOT LIMITED TO, OPERATIONS, STAFF POSITIONS, ART ACQUISITIONS, ETC.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

EXPENSES OF SPECIAL EVENTS & ACTIVITIES	921,547.
COST OF GOODS SOLD	708,094.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,629,641.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GIFTS OF WORKS OF ART	840,471.
-----------------------	----------

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES OF SPECIAL EVENTS & ACTIVITIES	-921,547.
COST OF GOODS SOLD	-708,094.
GIFTS OF WORKS OF ART	840,471.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	-789,170.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2016
Open to Public
Inspection

Name of the organization

Employer identification number

THE DETROIT INSTITUTE OF ARTS

38-1359510

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		65,705,594.
3 a Sub-total	0	0			65,705,594.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			65,705,594.

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

Schedule F (Form 990) 2016

Part IV Foreign Forms

- 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)* 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; do not file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," 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)* 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? *If "Yes," 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)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," 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)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Schedule F (Form 990) 2016

Part V Supplemental Information

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.

Lined area for supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: **THE DETROIT INSTITUTE OF ARTS**
Employer identification number: **38-1359510**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RUFFALO CODY - PO BOX 3048, CEDAR RAPIDS, IA 52406	MEMBERSHIP RENEWAL CALLING		X	102,092.	38,639.	63,453.
FALCON FUNDRAISING, INC - 1690 WATERTOWER PLACE, SUITE	ANNUAL FUND AND LAPSED MEMBER CALLING		X	19,628.	9,974.	9,654.
Total				121,720.	48,613.	73,107.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

MI

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		GALA GRANDIOSA (event type)	FASH BASH (event type)	6 (total number)		
Revenue	1	Gross receipts	1,446,635.	491,900.	421,365.	2,359,900.
	2	Less: Contributions	1,339,495.	366,611.	309,764.	2,015,870.
	3	Gross income (line 1 minus line 2)	107,140.	125,289.	111,601.	344,030.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	196,044.	86,704.	20,000.	302,748.
	7	Food and beverages	192,180.	94,005.	96,956.	383,141.
	8	Entertainment	0.	7,075.	20,259.	27,334.
	9	Other direct expenses	126,465.	43,101.	38,758.	208,324.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				921,547.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-577,517.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility		13a	%
b An outside facility		13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: FALCON FUNDRAISING, INC

(I) ADDRESS OF FUNDRAISER:

1690 WATERTOWER PLACE, SUITE 400A, LANSING, MI 48823

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </p>		
<p> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) </p>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	X	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	X	
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </p>		
<p> <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>		
<p>a Receive a severance payment or change-of-control payment?</p>	X	
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		X
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p>		X
<p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>		
<p>a The organization?</p>		X
<p>b Any related organization?</p>		X
<p>If "Yes" on line 5a or 5b, describe in Part III.</p>		
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>		
<p>a The organization?</p>		X
<p>b Any related organization?</p>		X
<p>If "Yes" on line 6a or 6b, describe in Part III.</p>		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>		X
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>		X
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		

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

Schedule J (Form 990) 2016

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.

EXECUTIVE COMPENSATION; NO PUBLIC FUNDS (THE TRI-COUNTY MILLAGE) WERE USED TO PAY THIS AMOUNT. THE PAYMENT OF THIS AMOUNT WAS REVIEWED IN ADVANCE WITH THE THREE COUNTY ARTS AUTHORITIES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

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Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	62	840,471.	DONOR STATED VALUE
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		7,553.	DONOR STATED VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>IN KIND GIFTS</u>)	X	12	45,920.	DONOR STATED VALUE
26 Other ▶ (<u>IN KIND NAIAS</u>)	X	1	45,000.	DONOR STATED VALUE
27 Other ▶ (<u>FURNITURE</u>)	X	4	13,101.	DONOR STATED VALUE
28 Other ▶ (<u>TRAVEL</u>)	X	5	2,500.	DONOR STATED VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 19

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2016)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, OTHER TYPES OF PROPERTY:

SUPPLIES

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 2

(C) REVENUE REPORTED ON FORM 990, PART VIII § 2190.

(D) METHOD OF DETERMINING REVENUE: DONOR STATED VALUE

SCHEDULE M, LINE 32B:

THE DIA USES AUCTION HOUSES (PRIMARYLY SOTHEBY'S AND CHRISTIE'S) TO
SELL GIFTS OR WORKS OF ART NOT ACCEPTED INTO THE COLLECTION.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016
Open to Public
Inspection

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number
38-1359510

FORM 990, PART G, GROSS RECEIPTS:

GROSS RECEIPTS INCLUDES GROSS PROCEEDS FROM SALES OF INVESTMENT

SECURITIES RATHER THAN JUST NET GAIN. THIS ARTIFICIALLY INFLATES THE

GROSS RECEIPTS AMOUNT BY APPROXIMATELY \$319,500,000.

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

**STAFF TO DEVELOP AND CREATE INTERPRETIVE STRATEGIES AND MATERIALS FOR
EXHIBITIONS AND PERMANENT GALLERY PROJECTS, AS WELL AS CONDUCT TRAINING
FOR GALLERY TEACHERS AND DOCENTS; ASSISTING OUR DEVELOPMENT STAFF IN
DONOR CULTIVATION AND FUNDRAISING; AND PARTNERING WITH THE MUSEUM'S
AUXILIARIES TO DEVELOP PROGRAMS AROUND OUR ART INSTALLATIONS TO ENGAGE
THE MUSEUM'S DIVERSE AUDIENCES.**

**THE DIA EXHIBITIONS DEPARTMENT IS RESPONSIBLE FOR THE PLANNING AND
IMPLEMENTATION OF NUMEROUS EXHIBITIONS, BOTH IN-HOUSE AND TRAVELLING,
EACH FISCAL YEAR. THE IMPLEMENTATION INVOLVES NEARLY EVERY DEPARTMENT
ACROSS THE MUSEUM. FISCAL YEAR 2016-2017 IN-HOUSE EXHIBITIONS INCLUDED
OPEN ROAD: PHOTOGRAPHY AND THE AMERICAN ROAD TRIP, JUNE 17 - SEPTEMBER
11, 2016; GUEST OF HONOR: GALLERY OF THE LOUVRE, JUNE 16 - SEPTEMBER
18, 2016; OFRENDAS: CELEBRATING EL DIA DE MUERTOS, OCTOBER 21 -
NOVEMBER 6, 2016; BITTER SWEET: COFFEE, TEA & CHOCOLATE, NOVEMBER 20,
2016 - MARCH 5, 2017; THE EDIBLE MONUMENT: THE ART OF FOOD FOR
FESTIVALS, JANUARY 16 - APRIL 16, 2017; DETROIT AFTER DARK: PHOTOGRAPHS
FROM THE DIA COLLECTION, OCTOBER 21, 2016 - APRIL 23, 2017; DETROIT
PUBLIC SCHOOLS COMMUNITY DISTRICT EXHIBITION, APRIL 29 - MAY 28, 2017;
AND THALASSA, SEPTEMBER 24, 2016 - JUNE 24, 2017. FISCAL YEAR 2016-2017**

TRAVELING EXHIBITIONS INCLUDED DANCE! AMERICAN ART 1830-1960, AT THE

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

Schedule O (Form 990 or 990-EZ) (2016)

832211 08-25-16

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
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DENVER ART MUSEUM, JULY 10 - OCTOBER 2, 2016; AND CRYSTAL BRIDGES, OCTOBER 22, 2016 - JANUARY 16, 2017. THE DIA ALSO ORGANIZED FROM THE IMPRESSIONISTS TO PICASSO: EUROPEAN MODERN MASTERWORKS FROM THE DETROIT INSTITUTE OF ARTS THAT WAS SHOWN AT OSAKA CITY MUSEUM OF FINE ARTS, JULY 8, 2016 - SEPTEMBER 25, 2016; AND UENO ROYAL MUSEUM, TOKYO, OCTOBER 6, 2016 - JANUARY 22, 2017. ADDITIONALLY, THE DIA ORGANIZED TWO MICHIGAN STATEWIDE TOURING EXHIBITIONS: WPA PRINTS, SHOWN AT OAKLAND UNIVERSITY ART GALLERY, SEPTEMBER 9, 2016 - OCTOBER 9, 2016 AND SEASIDE SHOWN AT MUSKEGON MUSEUM OF ART, FEBRUARY 1, 2017 - MARCH 26, 2017 AND AT HOLLAND HISTORICAL TRUST, APRIL 6, 2017 - JULY 4, 2017.

THE COLLECTION STRATEGIES AND INFORMATION DIVISION SUPPORTS THE CORE STEWARDSHIP FUNCTIONS OF THE MUSEUM INCLUDING COLLECTING, CONSERVING, RESEARCHING, EXHIBITING AND INTERPRETING THE PERMANENT COLLECTION AS WELL AS MANAGING AND PRESERVING COLLECTIONS INFORMATION. THE DIVISION CONSISTS OF THE FOLLOWING DEPARTMENTS: CONSERVATION, COLLECTIONS MANAGEMENT, REGISTRATION, PUBLICATIONS AND COLLECTIONS INFORMATION, AND RESEARCH LIBRARY AND ARCHIVES. CONSERVATION OVERSEES THE CARE AND LONG-TERM PRESERVATION OF THE COLLECTION INCLUDING THE EXAMINATION, RESEARCH, SCIENTIFIC ANALYSIS, TECHNICAL IMAGING, DOCUMENTATION AND TREATMENT OF ARTWORKS OF ALL TYPES IN THE COLLECTION. COLLECTIONS MANAGEMENT IS RESPONSIBLE FOR THE INSTALLATION, MAINTENANCE, REPAIRS AND IMPROVEMENTS OF THE PERMANENT COLLECTIONS GALLERIES, AND THE PLANNING AND INSTALLATION OF SPECIAL EXHIBITIONS. THE DEPARTMENT ALSO COORDINATES ALL ART MOVEMENTS AND MONITORS THE CONDITION OF ARTWORKS IN STORAGE AND IN THE GALLERIES. THE REGISTRATION DEPARTMENT MAINTAINS COLLECTION RECORDS, OVERSEES ALL INCOMING AND OUTGOING LOANS OF ART, COORDINATES THE SHIPPING, INSURANCE, AND INSTALLATION OF ARTWORKS IN SPECIAL EXHIBITIONS, AND IS RESPONSIBLE FOR THE ACCESSIONING AND

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

DEACCESSIONING OF ARTWORKS IN THE COLLECTION IN COMPLIANCE WITH A RIGOROUS COLLECTIONS MANAGEMENT POLICY. THE PUBLICATIONS AND COLLECTIONS INFORMATION DEPARTMENT MANAGES THE PRODUCTION OF MUSEUM PUBLICATIONS INCLUDING COLLECTION AND EXHIBITION CATALOGUES AND THE DIA'S IN-HOUSE SCHOLARLY JOURNAL AS WELL AS EDITING PERMANENT GALLERY AND EXHIBITIONS LABELS. THE DEPARTMENT IS ALSO RESPONSIBLE FOR MANAGING AND PRESERVING COLLECTIONS INFORMATION IN THE MUSEUM'S REGISTRATION SYSTEM (TMS) AND STORING AND MANAGING COLLECTION DIGITAL IMAGES PRODUCED BY THE PHOTOGRAPHY DEPARTMENT IN THE MUSEUM'S DIGITAL ASSET MANAGEMENT SYSTEM (PICTION). FINALLY, THE RESEARCH LIBRARY AND ARCHIVES, AN INTEGRAL PART OF THE MUSEUM SINCE THE LATE 19TH CENTURY, SERVES AS AN INVALUABLE RESOURCE FOR MUSEUM STAFF, SCHOLARS AND STUDENTS WITH MORE THAN 191,000 VOLUMES, 300 PERIODICAL TITLES, AND 8,000 CUBIC FEET OF ARCHIVAL MATERIAL.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: COMMUNITY INPUT. SERVICES FOR K-12 STUDENTS AND TEACHERS CONTINUED TO EXPAND DURING THE FISCAL YEAR, WITH 67,000 STUDENTS BENEFITING FROM DIA FIELD TRIPS AND 1,400 TEACHERS PARTICIPATING IN WORKSHOPS AND INFORMATION SESSIONS. THE DIA ALSO PRESENTED THE 80TH ANNUAL JURIED DETROIT PUBLIC SCHOOLS STUDENT EXHIBITION. L&AE GUIDED 123,000 VISITORS ON GALLERY TOURS AND TALKS. PARTICIPANTS TOTALING 26,000 PEOPLE JOINED DROP-IN ART MAKING WORKSHOPS IN THE MUSEUM AND AT ART FAIRS AND FESTIVALS THROUGHOUT THE METRO DETROIT REGION, AND ANOTHER 4,300 TOOK ADVANTAGE OF THE DRAWING IN THE GALLERIES PROGRAM. DIA TEACHING ARTISTS AND TOUR GUIDES ALSO PROVIDED TWICE-WEEKLY HEALING ARTS PROGRAMS FOR PATIENTS AT CHILDREN'S HOSPITAL OF DETROIT AND SERIES VISITS FOR CLIENTS AT THE DINGELL VETERANS ADMINISTRATION HOSPITAL AND OTHER

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

COMMUNITY SERVICE ORGANIZATIONS. THE DIA ALSO COLLABORATES WITH THE MICHIGAN ALZHEIMER'S ASSOCIATION ON A GALLERY TALK AND ART MAKING PROGRAM FOR PEOPLE LIVING WITH THE DISEASE AND THEIR CAREGIVERS. ALL L&AE PROGRAMS AND INTERPRETIVE PLANS ARE BASED ON A LEARNER-CENTERED, CONSTRUCTIVIST MODEL THROUGH WHICH L&AE STAFF AND VOLUNTEERS CONTINUALLY DEEPEN THEIR UNDERSTANDING OF VISITORS IN ORDER TO FACILITATE EXPERIENCES THAT ENCOURAGE PEOPLE TO NOTICE MORE, WONDER, RECONSIDER AND EXPRESS IDEAS.

THE MUSEUM PROVIDES A FULL MENU OF PUBLIC PROGRAMMING DESIGNED TO PROVIDE EDUCATIONAL OPPORTUNITIES, ENGAGE MUSEUM VISITORS OF ALL AGES AND UTILIZE THE MUSEUM'S POSITION AS A REGIONAL ASSET TO EXTEND THE VISITOR-CENTERED MISSION BEYOND THE WALLS OF THE MUSEUM. MUSEUM PROGRAMS INCLUDE THE POPULAR FRIDAY NIGHT LIVE PROGRAM, BRINGING AN ARRAY OF LOCAL AND NATIONAL MUSICAL TALENT TO PERFORM IN THE MUSEUM. WEEKEND PROGRAMS FOR FAMILIES OFFER LIVE PERFORMANCES, ARTIST DEMONSTRATIONS AND ANIMATED FILMS. THE DIA ALSO PROGRAMMED THREE SEASONS OF THE DETROIT FILM THEATRE, THE DIA'S GALLERY OF MOTION PICTURE HISTORY AND CINEMATIC ART. COMMUNITY PARTNERSHIPS WITH LOCAL NON-PROFIT ORGANIZATIONS INCLUDE EVENTS WITH THE DETROIT CITY CHESS CLUB, MICHIGAN STUDENT FILM FESTIVAL, MOSAIC YOUTH THEATRE, ARAB AMERICAN NATIONAL MUSEUM, WSU, ARTLAB J, ALLIED MEDIA PROJECT, MIDTOWN DETROIT AND THE MICHIGAN THEATRE FOUNDATION. OVER THE COURSE OF THE FISCAL YEAR DIA PROGRAMS SERVED THE FOLLOWING AUDIENCES: DETROIT FILM THEATRE 58,750 VISITS; FRIDAY NIGHT LIVE! 25,886 VISITS; SUNDAY MUSIC BAR 14,931 VISITS; FAMILY SUNDAY PROGRAMS AND ARTIST DEMONSTRATIONS 25,627 VISITS; COMMUNITY PROGRAMMING 2,435 VISITS; MISCELLANEOUS PROGRAM VISITS (COMMUNITY PARTNERSHIPS, SPECIAL PERFORMANCES) 7,590 VISITS.

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
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THE COMMUNITY RELATIONS DEPARTMENT AT THE DIA ASSESSES THE NEEDS OF THE COMMUNITY AND SEEKS PARTNERSHIP OPPORTUNITIES THROUGH BROAD ACCESS, INVITATION AND COMMUNITY ENGAGEMENT STRATEGIES.

ACCESS PROGRAMS ARE DESIGNED TO SEEK OUT UNDERREPRESENTED GROUPS AND PROVIDE OPPORTUNITIES FOR THEM TO MAKE A PERSONAL CONNECTION WITH THE DIA; PROGRAMS INCLUDE DIA AWAY: THINK LIKE AN ARTIST, COUNTY DAYS, AND THURSDAYS AT THE DIA FOR SENIOR CITIZENS. EACH OF THESE ACTIVITIES IS DESIGNED TO INTRODUCE COMMUNITY MEMBERS TO THE MUSEUM BY PROVIDING THEM ENTRY LEVEL ENGAGEMENT THAT CAN INCLUDE TRANSPORTATION, PROVIDING AN EASE OF ACCESS TO THE MUSEUM.

COMMUNITY RELATIONS STAFF WORKS WITH DEPARTMENTS WITHIN THE DIA TO DEVELOP AND IMPLEMENT CREATIVE, COLLABORATIVE PROJECTS THAT CONNECT INDIVIDUALS TO THE DIA AND MEET OUR STRATEGIC MISSIONS. THE INSIDE|OUT PROGRAM TAKES HIGH QUALITY REPRODUCTIONS TO THE STREETS AND NEIGHBORHOODS OF THE COMMUNITIES WE SERVE AND GIVES COMMUNITY MEMBERS THE OPPORTUNITY TO LEARN ABOUT THE DIA'S COLLECTION IN THEIR OWN NEIGHBORHOOD WITH TEMPORARY, WALK-ABLE OUTDOOR GALLERIES. TO DATE, THE DIA HAS WORKED WITH OVER 130 CITIES, TOWNSHIPS AND VILLAGES AND HAS INSTALLED OVER 1,000 REPRODUCTIONS THROUGHOUT THE COMMUNITY. IN CONJUNCTION WITH THE BITTER SWEET: COFFEE TEA AND CHOCOLATE EXHIBITION COFFEE AND TEA SETS FROM THE DIA COLLECTION WERE DISPLAYED IN THE COMMUNITY AT ANTON ART CENTER, OAKLAND UNIVERSITY AND ARAB AMERICAN MUSEUM. COMMUNITY GROUPS AND THE DIA STAFF WORK TOGETHER TO HOST COMMUNITY BUILDING EVENTS SUCH AS TOURS, TALKS AND BIKE RIDES; SOME EVEN INCLUDE THE MUSEUM DIRECTOR SALVADOR SALORT-PONS. THE PROJECT HAS ENABLED THE MUSEUM TO DEVELOP LASTING RELATIONSHIPS WITH RESIDENTS AND COMMUNITY GROUPS THROUGHOUT THE REGION AND HAS BEEN A CATALYST FOR ADDITIONAL COMMUNITY ENGAGEMENT OPPORTUNITIES SUCH AS THE ARTS AND

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
------------------------------------------------------------------	-----------------------------------------------------

HEALING SYMPOSIUM.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER MARKETING, ENTERPRISE, MUSEUM ADMISSIONS, AUXILIARY AND VOLUNTEER GROUPS:

THE DIA SUPPORTS MUSEUM PROGRAMS AND EXHIBITIONS THROUGH COORDINATED MARKETING EFFORTS INCLUDING PAID ADVERTISING, ONLINE/SOCIAL MEDIA PLATFORMS, DIRECT MAIL, PARTNERSHIPS, EMAIL MARKETING AND MEDIA RELATIONS. THE ENTERPRISE ACTIVITIES INCLUDE PROGRAM SERVICES FOR THE PARKING LOT, RETAIL GIFT SHOP, CAF, CATERING AND CRYSTAL GALLERY.

GENERAL ADMISSIONS:

RESIDENTS OF WAYNE, OAKLAND, AND MACOMB COUNTIES RECEIVE FREE UNLIMITED GENERAL MUSEUM ADMISSION IN ACCORDANCE WITH THE PASSAGE OF THE COUNTY ART INSTITUTE AUTHORITY MILLAGE. FOR OTHERS, THE MUSEUM REQUIRES A MODEST GENERAL ADMISSION OF \$14 PER ADULT, \$9 PER SENIOR, \$6 PER YOUTH (AGES 6-17) AND \$8 PER COLLEGE STUDENT. GENERAL ADMISSION IS FREE FOR CHILDREN AGE FIVE AND UNDER. ADMISSION FOR MEMBERS CONTINUES TO BE FREE. VISITORS TO THE MUSEUM HAVE THE OPPORTUNITY TO VIEW THE PERMANENT COLLECTION IN THE GALLERIES, PARTICIPATE WITHOUT ADDITIONAL CHARGE IN MANY DIVERSE ACTIVITIES INCLUDING LECTURES, MUSICAL PERFORMANCES, DROP-IN WORKSHOPS, DOCENT-LED AND SELF-GUIDED TOURS. A LIMITED NUMBER OF TICKETED SPECIAL EXHIBITIONS REQUIRE AN ENTRY FEE THAT INCLUDES GENERAL ADMISSION TO THE MUSEUM. MEMBERS RECEIVE AN ALLOTMENT OF EXHIBITION TICKETS AS PART OF THEIR MEMBERSHIP BENEFITS. THE DIA HAS 12 AUXILIARIES AND SUPPORT GROUPS. EACH GROUP OFFERS ITS MEMBERS EXCITING OPPORTUNITIES TO EXPLORE COMMON INTERESTS, DEVELOP NEW TASTES, MAKE NEW FRIENDS, LEARN ABOUT COLLECTING AND BECOME PERSONALLY INVOLVED IN THE LIFE AND SUPPORT OF THE MUSEUM. OPEN EXCLUSIVELY TO DIA

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

MEMBERS, AUXILIARIES OFFER BEHIND THE SCENES EXPERIENCES, PRIVATE VIEWINGS OF GALLERIES AND SPECIAL EXHIBITIONS AND EXTRAORDINARY TRIPS. AUXILIARIES ARE ALSO INVOLVED IN FUND RAISING FOR SPECIAL MUSEUM PROJECTS AND THE ACQUISITION OF ART FOR THE DIA'S WORLD RENOWNED COLLECTION.

THE DIA VOLUNTEER COUNCIL SUPPORTS MUSEUM VISITORS, STAFF AND OTHER AUXILIARY SUPPORT GROUPS. VOLUNTEERS WORK FRONT LINE, OUTREACH AND BEHIND THE SCENES. IN ALL, 661 DIA VOLUNTEERS DONATED 59,697 HOURS OF SERVICE DURING THE FISCAL YEAR, WHICH WAS THEIR 55TH YEAR OF SERVICE TO THE DIA.

EXPENSES \$ 6,964,179. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,386,384.

FORM 990, PART VI, SECTION A, LINE 2:

DR. LORNA THOMAS AND BUZZ THOMAS HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

THE PROCESS USED BY THE DIA TO REVIEW THE FORM 990 WITH ITS GOVERNING BODY IS AS FOLLOWS: 1 - THE INITIAL DRAFT RETURN IS REVIEWED BY DIRECTOR OF ACCOUNTING AND CFO. 2 - AFTER COMPLETING STAFF REVIEWS, A PRESENTATION AND REVIEW IS CONDUCTED BY TAX FIRM PARTNER DURING THE AUDIT COMMITTEE MEETING. 3 - AFTER COMPLETION OF AUDIT COMMITTEE REVIEW, THE FORM 990 IS MADE AVAILABLE TO ALL BOARD MEMBERS IN ADVANCE OF EFILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE DIA'S CONFLICT OF INTEREST POLICY IS PROVIDED TO ALL STAFF UPON JOINING THE DIA. THE POLICY IS PART OF THE DIA PROFESSIONAL PRACTICES GUIDELINES. ALL STAFF MEMBERS ARE REQUIRED TO SIGN THEY HAVE READ, UNDERSTOOD AND AGREE TO ABIDE BY THE GUIDELINES. THE CONFLICT OF INTEREST POLICY IS FURTHER

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

REINFORCED IN THE DIA PURCHASING POLICY AND PROCEDURE MANUAL. BOTH DOCUMENTS ARE AVAILABLE ONLINE AND ARE DISTRIBUTED TO STAFF ANY TIME UPDATES OR CHANGES ARE MADE. NEW DIA BOARD MEMBERS ARE REQUIRED TO COMPLETE A FORM NOTING ALL AFFILIATIONS. ON AN ANNUAL BASIS DIA BOARD MEMBERS PROVIDE AN UPDATE OF RELATIONSHIPS AND AFFILIATIONS WHICH ARE REVIEWED TO DETERMINE POTENTIAL CONFLICT OF INTEREST. AS PART OF THE ANNUAL AUDIT, A THOROUGH REVIEW OF STAFF AND BOARD AFFILIATIONS AND TRANSACTIONS IS CONDUCTED TO ENSURE ALL ARE IN COMPLIANCE WITH DIA POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE COMPENSATION OF THE DIA'S DIRECTOR/CEO AND THE DIA'S EXECUTIVE VICE PRESIDENT/COO IS DETERMINED BY THE COMPENSATION COMMITTEE OF THE DIA'S BOARD OF DIRECTORS, IN ACCORDANCE WITH ALL APPLICABLE EMPLOYMENT AGREEMENT TERMS AND CONDITIONS. AMONG OTHER FACTORS, THE COMPENSATION COMMITTEE CONSIDERS COMPARABILITY DATA PROVIDED BY THE ASSOCIATION OF ART MUSEUM DIRECTORS ANNUAL SALARY SURVEY, LOCAL MARKET CONDITIONS, AND EXECUTIVE PERFORMANCE. ANY DEVIATION FROM TERMS CONTAIN IN ANY APPLICABLE EMPLOYMENT CONTRACT MUST BE MUTUALLY AGREED TO BY THE DIA AND THE IMPACTED EMPLOYEE. THE DIRECTOR IS EMPLOYED UNDER TERMS OF A CONTRACT EXPIRING 12/31/2020. TERMS WERE REVIEWED AND APPROVED BY THE TRI-COUNTY ARTS AUTHORITIES.

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

THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE POSTED TO THE INSTITUTION'S WEBSITE. GOVERNING DOCUMENTS AND CONFLICTS OF INTEREST ARE MADE AVAILABLE UPON REQUEST BY THE PUBLIC.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

DECREASE IN UNFUNDED PENSION PLAN OBLIGATION

4,812,265.

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
------------------------------------------------------------------	-----------------------------------------------------

CHANGE IN POST RETIREMENT HEALTHCARE OBLIGATION 242,515.

TOTAL TO FORM 990, PART XI, LINE 9 5,054,780.

FORM 990, PART XII, LINE 2C:

AUDIT COMMITTEE IS RESPONSIBLE FOR OVERSIGHT OF AUDIT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
FSDIA ACQUISITIONS CO - 38-3416266 5200 WOODWARD AVE DETROIT, MI 48202	INVESTMENT COMPANY	MI	THE DETROIT INSTITUTE OF ARTS	C CORP	-277,670.	1,000.	100%		X

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

