

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

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 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 5200 WOODWARD AVENUE City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48202-4008	D Employer identification number 38-1359510 E Telephone number 313-833-7900
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 281,998,773.
J Website: ▶ WWW.DIA.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1885 M State of legal domicile: MI
F Name and address of principal officer: SALVADOR SALORT-PONS SAME AS C ABOVE		
H(c) Group exemption number ▶		

Part I Summary

1	Briefly describe the organization's mission or most significant activities: THE DIA CREATES EXPERIENCES THAT HELP VISITORS 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	50
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	50
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	450
6	Total number of volunteers (estimate if necessary)	6	801
7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	73.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	591,557,603.	50,206,766.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,076,269.	6,437,748.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,571,191.	10,636,470.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	630,476.	16,359,745.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	606,835,539.	83,640,729.
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.
16 a	Professional fundraising fees (Part IX, column (A), line 11e)	17,513,536.	19,002,991.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,822,575.	125,048.	82,716.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	560,794,597.	22,277,203.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	578,433,181.	41,362,910.
19	Revenue less expenses. Subtract line 18 from line 12	28,402,358.	42,277,819.
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	339,563,454.	299,784,728.
22	Net assets or fund balances. Subtract line 21 from line 20	99,769,093.	36,674,714.
		239,794,361.	263,110,014.

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, EXECUTIVE VICE PRESIDENT/CFO Type or print name and title	Date 4/28/17
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Paid Preparer Use Only	Print/Type preparer's name LYNNE M. HUISMANN	Preparer's signature LYNNE M. HUISMANN	Date 04/24/17	Check if self-employed <input type="checkbox"/> PTIN P00053811	Firm's EIN ▶ 38-1357951 Phone no. (248) 375-7100
Firm's name ▶ PLANTE & MORAN, PLLC		Firm's address ▶ 2601 CAMBRIDGE CT., STE. 500 AUBURN HILLS, MI 48326			

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 VISITORS FIND PERSONAL MEANING IN ART, INDIVIDUALLY 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 \$ 5,605,988. including grants of \$) (Revenue \$ 361,081.)

LEARNING AND AUDIENCE ENGAGEMENT: THE ACTIVITIES OF 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 216,000 PEOPLE. IN ADDITION, STAFF LED INTERPRETIVE PLANNING FOR 3 EXHIBITIONS WHICH WERE ATTENDED BY MORE THAN 220,000 VISITORS. EXHIBITIONS INCLUDED TEXTS, VIDEOS, HANDS-ON INTERACTIVES, AND VISITOR RESPONSE STATIONS, SOME OF WHICH WERE DEVELOPED WITH

4b (Code:) (Expenses \$ 5,159,406. 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 94 PIECES TOTALING \$2,924,891 AND RECEIVED 219 GIFTS OF WORKS OF ART VALUED AT \$2,234,515. 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.

4c (Code:) (Expenses \$ 3,871,403. including grants of \$) (Revenue \$ 79,937.)

COLLECTIONS AND INFORMATION STRATEGIES: COLLECTIONS AND INFORMATION STRATEGIES ATTEND TO CORE FUNCTIONS OF THE ART MUSEUM: STEWARDSHIP OF THE PERMANENT COLLECTIONS AND THE MEANS OF PRESENTING THE COLLECTIONS AND EXHIBITIONS TO VISITORS OF THE DIA. COLLECTIONS MANAGEMENT ACTIVITIES INCLUDE THE PLANNING, INSTALLATION, MAINTENANCE, REPAIRS AND IMPROVEMENTS OF THE PERMANENT COLLECTIONS GALLERIES, AND THE PLANNING AND INSTALLATION OF SPECIAL EXHIBITIONS. THEY ALSO INCLUDE COORDINATING ALL ART MOVEMENTS, OVERSIGHT OF ART STORAGE, DAY-TO-DAY MONITORING OF THE COLLECTIONS AND LOCATION/INVENTORY CONTROL. THE REGISTRAR'S DEPARTMENT MAINTAINS COLLECTIONS RECORDS, ADMINISTERS ALL INCOMING AND OUTGOING LOANS OF ART, AND THE ACCESSIONS OF ART INTO THE COLLECTIONS AND DEACCESSIONS

4d Other program services (Describe in Schedule O.) (Expenses \$ 14,682,539. including grants of \$) (Revenue \$ 6,095,492.)

4e Total program service expenses 29,319,336.

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 Schedule B, Schedule of Contributors?	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

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Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		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? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II		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? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		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? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1099. Enter -0- if not applicable		
	1a 231		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 450		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? <i>Note. See the instructions for additional information the organization must report on Schedule O.</i>	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

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 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.		
1b Enter the number of voting members included in line 1a, above, who are independent		
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?	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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		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?		X
7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	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		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?		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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	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	X	
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?		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?		

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) JAMES B JACOBS VICE CHAIR	2.00 0.00	X		X				0.	0.	0.
(3) REGINALD TURNER JR VICE CHAIR	2.00 0.00	X		X				0.	0.	0.
(4) ANDREA DICKSON SECRETARY	3.00 0.00	X		X				0.	0.	0.
(5) STEPHEN BIRGUN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(6) LINDSEY FORD BUHL BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(7) HOWARD W BURDETT JR BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(8) MARK A DAVIDOFF BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(9) ETHAN DAVIDSON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(10) AMY DEBRUNNER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(11) LILLIAN DEMAS BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(12) MARLA DONOVAN BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(13) MARK A DOUGLAS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(14) NICOLE E BISENBERG BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(15) JENNIFER FISCHER BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(16) NATHAN FORBES BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(17) CYNTHIA FORD 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) ELEANOR B FORD BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(19) LAWRENCE GARCIA BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(20) DR ANTOINE GARIBALDI BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(21) RALPH J GERSON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(22) JENNIFER GILBERT BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(23) THOMAS GUASTELLO BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(24) JOHN HANTZ BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(25) ROBERT JACOBS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(26) CHACONA JOHNSON 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								2,167,776.	0.	188,898.
d Total (add lines 1b and 1c)								2,167,776.	0.	188,898.

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	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	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		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	1,819,263.
STONERIDGE CONSTRUCTION 21840 WYOMING PLACE, OAK PARK, MI 48237	CONSTRUCTION	530,732.
RAM CONSTRUCTION SERVICES 13800 ECKLES RD, LIVONIA, MI 48150	CONTRACTOR	330,748.
PREMIUM EVENT SERVICES 540 AVIS DR., SUITE P, ANN ARBOR, MI 48108	CONTRACTOR	304,765.
LEO BURNETT DETROIT 3310 W. BIG BEAVER, TROY, MI 48084	MARKETING CONSULTANT	284,209.

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 **19**

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	Honorarium			
(27) MARY KRAMER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(28) BONNIE LARSON BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(29) HUBERT MASSEY BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(30) VICTORIA MCINNIS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(31) DR ALI MOJIB BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(32) JULIETTE OKOTIE-EBCH BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(33) PETER B OLEKSIAK BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(34) TAKASHI OMITSU BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(35) LINDA ORLAND BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(36) JACQUES PANIS BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(37) JENNIFER HUDSON PARKE BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(38) ALEX PARRISH BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(39) CYNTHIA J PASKY BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(40) DR IRVIN REID BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(41) DONALD RITZENHEIN BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(42) MARC SCHWARTZ BOARD MEMBER	3.00 0.00	X						0.	0.	0.
(43) SANDRA SELIGMAN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(44) BUZZ THOMAS BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(45) DR LORNA THOMAS BOARD MEMBER	2.00 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) CAROL WALTERS BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(48) RHONDA C WELBURN BOARD MEMBER	3.00 0.00	X					0.	0.	0.	
(49) HENRY WINEMAN III BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(50) MARK ZEPPIRO BOARD MEMBER	3.00 0.00	X					0.	0.	0.	
(51) CHARLES BECKER BOARD MEMBER - PARTIAL YEAR	2.00 0.00	X					0.	0.	0.	
(52) MARY ANN GORLIN BOARD MEMBER - PARTIAL YEAR	2.00 0.00	X					0.	0.	0.	
(53) REUBEN A MUNDAY BOARD MEMBER - PARTIAL YEAR	1.00 0.00	X					0.	0.	0.	
(54) SALVADOR SALORT-PONS DIRECTOR, PRESIDENT AND CEO	40.00 0.00			X			165,470.	0.	21,023.	
(55) ANNMARIE ERICKSON COO	40.00 0.00			X			369,738.	0.	33,990.	
(56) ROBERT BOWEN EXECUTIVE VICE PRESIDENT/CFO/TREASUR	40.00 0.00			X			230,838.	0.	12,854.	
(57) MARGARET FALCON VICE PRESIDENT, DEVELOPMENT	40.00 0.00				X		189,524.	0.	16,215.	
(58) ELLIOTT BROOM VICE PRESIDENT OF MUSEUM OPERATIONS	40.00 0.00				X		156,036.	0.	17,403.	
(59) NII QUARCOOPOME CO-CHIEF CURATOR & DEPT HEAD OF AQIA	40.00 0.00				X		131,319.	0.	24,840.	
(60) JENNIFER CZAJKOWSKI VICE PRESIDENT, LEARNING/AUDNC ENGAG	40.00 0.00				X		126,519.	0.	8,972.	
(61) SONDRRA JENKINS EXECUTIVE DIRECTOR ORG DEVEL & HR	40.00 0.00				X		120,338.	0.	15,433.	
(62) GRAHAM W J BEAL FORMER DIRECTOR, PRESIDENT AND CEO	40.00 0.00					X	677,994.	0.	38,168.	
Total to Part VII, Section A, line 1c								2,167,776.		188,898.

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	1a				
	b Membership dues	1b	4,025,812.			
	c Fundraising events	1c	1,616,549.			
	d Related organizations	1d				
	e Government grants (contributions)	1e	23,708,991.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	20,855,414.			
	g Noncash contributions included in lines 1a-1f \$		2,317,655.			
	h Total. Add lines 1a-1f		50,206,766.			
Program Service Revenue	2 a EXHIBITIONS	Business Code 712110	3,844,659.	3,844,659.		
	b ENTERPRISE ACTIVITIES	900099	1,178,373.	562,411.		615,962.
	c MUSEUM SERVICES	712110	747,006.	747,006.		
	d LEARNING & AUDIENCE ENGAGEMENT	712110	361,081.	361,081.		
	e AUXILIARY & VOLUNTEER GROUPS	712110	168,275.	168,275.		
	f All other program service revenue	900099	138,354.	138,354.		
	g Total. Add lines 2a-2f		6,437,748.			
	3 Investment income (including dividends, interest, and other similar amounts)		7,037,563.		73.	7,037,490.
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
Other Revenue	6 a Gross rents	(i) Real 29,250.				
	b Less: rental expenses	(ii) Personal 0.				
	c Rental income or (loss)		29,250.			
	d Net rental income or (loss)		29,250.			29,250.
	7 a Gross amount from sales of assets other than inventory	(i) Securities 200,285,268.	(ii) Other			
	b Less: cost or other basis and sales expenses		196,686,361.			
	c Gain or (loss)		3,598,907.			
	d Net gain or (loss)		3,598,907.			3,598,907.
	8 a Gross income from fundraising events (not including \$ 1,616,549. of contributions reported on line 1c). See Part IV, line 18	a	299,761.			
	b Less: direct expenses	b	932,468.			
	c Net income or (loss) from fundraising events		-632,707.			-632,707.
	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	1,448,458.				
b Less: cost of goods sold	b	739,215.				
c Net income or (loss) from sales of inventory		709,243.	709,243.			
Miscellaneous Revenue		Business Code				
11 a GAIN ON EARLY EXTINGUISHMENT OF D		900099	16,235,426.			16,235,426.
b						
c						
d All other revenue		900099	18,533.	5,481.		13,052.
e Total. Add lines 11a-11d			16,253,959.			
12 Total revenue. See instructions.			83,640,729.	6,536,510.	73.	26,897,380.

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	981,530.		981,530.	
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	13,931,310.	10,812,749.	1,737,679.	1,380,882.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,354,545.	986,769.	241,757.	126,019.
9 Other employee benefits	1,697,292.	1,287,520.	245,344.	164,428.
10 Payroll taxes	1,038,314.	756,398.	185,317.	96,599.
11 Fees for services (non-employees):				
a Management				
b Legal	302,195.		302,195.	
c Accounting	298,659.		298,659.	
d Lobbying	14,970.		14,970.	
e Professional fundraising services. See Part IV, line 17	82,716.			82,716.
f Investment management fees	990,610.		990,610.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	2,016,457.	1,561,137.	417,427.	37,893.
12 Advertising and promotion	1,473,662.	1,289,294.	7,061.	177,307.
13 Office expenses	1,313,214.	704,051.	215,002.	394,161.
14 Information technology	451,362.	178,825.	218,272.	54,265.
15 Royalties				
16 Occupancy	124,800.	124,800.		
17 Travel	397,803.	373,989.	13,796.	10,018.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	34,661.	9,008.	25,326.	327.
20 Interest	2,148,634.	65.	2,148,569.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,064,266.	643,268.	420,998.	
23 Insurance	483,450.	382,119.	101,331.	
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	5,159,406.	5,159,406.		
b UTILITIES	1,857,813.	1,857,813.		
c EQUIPMENT & FACILITIES	1,594,023.	1,147,343.	446,680.	
d BUS SUBSIDIES	634,464.	634,464.		
e All other expenses	1,916,754.	1,410,318.	208,476.	297,960.
25 Total functional expenses. Add lines 1 through 24e	41,362,910.	29,319,336.	9,220,999.	2,822,575.
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	49,727,218.	2 38,852,232.
	3	Pledges and grants receivable, net	55,607,808.	3 50,268,238.
	4	Accounts receivable, net	1,673,586.	4 2,540,613.
	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	405,568.	8 331,860.
	9	Prepaid expenses and deferred charges	845,948.	9 789,698.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 22,300,114.	
	b	Less: accumulated depreciation	10b 3,087,334.	10c 19,212,780.
	11	Investments - publicly traded securities	79,477,121.	11 92,835,314.
	12	Investments - other securities. See Part IV, line 11	133,660,574.	12 94,953,993.
	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)	339,563,454.	16 299,784,728.	
Liabilities	17	Accounts payable and accrued expenses	2,399,266.	17 1,505,099.
	18	Grants payable		18
	19	Deferred revenue	11,906,164.	19 12,178,843.
	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	71,618,996.	24 5,157,568.
	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	13,844,667.	25 17,833,204.
	26	Total liabilities. Add lines 17 through 25	99,769,093.	26 36,674,714.
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	41,530,116.	27 120,168,118.
	28	Temporarily restricted net assets	133,973,211.	28 68,609,370.
	29	Permanently restricted net assets	64,291,034.	29 74,332,526.
	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	239,794,361.	33 263,110,014.
	34	Total liabilities and net assets/fund balances	339,563,454.	34 299,784,728.

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	83,640,729.
2	Total expenses (must equal Part IX, column (A), line 25)	2	41,362,910.
3	Revenue less expenses. Subtract line 2 from line 1	3	42,277,819.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	239,794,361.
5	Net unrealized gains (losses) on investments	5	-13,863,885.
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	-5,098,281.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	263,110,014.

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	2a	X
b 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	2b	X
c 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.	2c	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?	3a	X
b 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	3b	

Form 990 (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015
Open to Public
Inspection

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

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11a, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations:
 - g Provide the following information about the supported organization(s):

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	25211759.	27241461.	17852569.	35211798.	26824213.	132341800
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		10929381.	22203535.	22456004.	23382553.	78971473.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	25211759.	38170842.	40056104.	57667802.	50206766.	211313273
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)						8311549.
6 Public support. Subtract line 5 from line 4						203001724

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	25211759.	38170842.	40056104.	57667802.	50206766.	211313273
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4217893.	5294164.	5902381.	7478993.	7066813.	29960244.
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.)					16248478.	16248478.
11 Total support. Add lines 7 through 10						257521995
12 Gross receipts from related activities, etc. (see instructions)					12 49,380,192.	
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 2015 (line 6, column (f) divided by line 11, column (f))	14	78.83 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	76.86 %
16a 33 1/3% support test - 2015. 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 - 2014. 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 - 2015. 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 - 2014. 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"/>	

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

(Complete only if you checked the box on line 9 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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. 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 - 2014. 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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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 11a or 11b 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?		
b A family member of a person described in (a) above?		
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.		

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.		
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.		

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).		

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?		
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).		
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.		

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.		
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.		
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.		
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.		

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. 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 2015 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-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

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.

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

2015

Name of the organization <p align="center">THE DETROIT INSTITUTE OF ARTS</p>	Employer identification number <p align="center">38-1359510</p>
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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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not 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) (2015)**

Name of organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
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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
<u>1</u>	_____ _____ _____	\$ <u>5,025,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	_____ _____ _____	\$ <u>1,064,979.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	_____ _____ _____	\$ <u>2,012,950.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	_____ _____ _____	\$ <u>1,025,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	_____ _____ _____	\$ <u>1,265,653.</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.)

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

2015
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 expenditures ▶ \$ _____
- 3 Volunteer hours _____

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-

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)	14,970.													
c	Total lobbying expenditures (add lines 1a and 1b)	14,970.													
d	Other exempt purpose expenditures	41,347,940.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	41,362,910.													
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) 2012	(b) 2013	(c) 2014	(d) 2015	(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	932,000.	41,416.	8,919.	14,970.	997,305.
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					

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 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

2015
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 8.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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)

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

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)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

▶ \$ _____

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:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 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	170,939,059.	172,109,607.	152,192,545.	138,627,372.	132,293,179.
b Contributions	10,105,521.	4,799,631.	2,475,140.	7,896,223.	7,241,693.
c Net investment earnings, gains, and losses	-3,485,392.	-2,885,549.	20,408,512.	12,078,600.	4,784,546.
d Grants or scholarships					
e Other expenditures for facilities and programs	-10,489,757.	3,084,630.	2,966,590.	6,409,650.	5,692,046.
f Administrative expenses					
g End of year balance	188,048,945.	170,939,059.	172,109,607.	152,192,545.	138,627,372.

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

- a Board designated or quasi-endowment 44.00 %
- b Permanent endowment 40.00 %
- 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)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

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		1,016,699.		1,016,699.
b Buildings		15,551,863.	583,196.	14,968,667.
c Leasehold improvements		1,696,432.	35,548.	1,660,884.
d Equipment		1,182,573.	696,562.	486,011.
e Other		2,852,547.	1,772,028.	1,080,519.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				19,212,780.

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	94,953,993.	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.) ▶	94,953,993.	

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	11,423,926.
(3) POST RETIREMENT HEALTHCARE	
(4) OBLIGATION	4,089,241.
(5) ACCRUED PAYROLL AND OTHER EMPLOYEE	2,320,037.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	17,833,204.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 83,640,729.

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 41,362,910.

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	932,468.
COST OF GOODS SOLD	739,215.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,671,683.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GIFTS OF WORKS OF ART	2,234,515.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES OF SPECIAL EVENTS & ACTIVITIES	-932,468.
COST OF GOODS SOLD	-739,215.
GIFTS OF WORKS OF ART	2,234,515.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	562,832.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

▶ 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.

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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 region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		50,218,589.
3 a Sub-total	0	0			50,218,589.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			50,218,589.

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

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

1 (a) Name of organization	(b) IRS coda section and EIT (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

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

Part III can be duplicated if additional space is needed.

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

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

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.

Multiple horizontal lines for supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, lines 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.

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 <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |
- 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 ten 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	186,088.	58,881.	127,207.
FALCON FUNDRAISING, INC 1690 WATERTOWER PLACE, SUITE	ANNUAL FUND AND LAPSED MEMBER CALLING		X	39,392.	23,835.	15,557.
Total				225,480.	82,716.	142,764.

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

SEE PART IV FOR CONTINUATIONS

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	
		GALA CELEBRATION	FASH BASH	7	(add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	1,180,604.	429,211.	306,495.	1,916,310.
	2	Less: Contributions	1,081,340.	328,670.	206,539.	1,616,549.
	3	Gross income (line 1 minus line 2)	99,264.	100,541.	99,956.	299,761.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	190,305.	142,889.	41,443.	374,637.
	7	Food and beverages	109,692.	97,212.	107,610.	314,514.
	8	Entertainment		17,180.	14,045.	31,225.
	9	Other direct expenses	79,699.	63,594.	68,799.	212,092.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				932,468.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-632,707.

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 II, 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

Part IV Supplemental Information (continued)

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No 1545-0047

2015

Open to Public Inspection

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.

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
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.		
<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		
<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 (e.g., maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X
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 in line 1a?	2	X
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.		
<input checked="" type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<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		
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:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
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:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" to line 5a or 5b, describe in Part III.		
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:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
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	8	X
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

THE DETROIT INSTITUTE OF ARTS

38-1359510

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) SALVADOR SALORT-PONS DIRECTOR, PRESIDENT AND CEO	(i) 165,336.	0.	134.	0.	21,023.	186,493.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(2) ANNHARIE ERICSON COO	(i) 304,039.	65,000.	699.	0.	33,990.	403,728.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(3) ROBERT BOWEN EXECUTIVE VICE PRESIDENT/CFO/TREASUR	(i) 189,782.	40,000.	1,056.	0.	12,854.	243,692.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(4) MARGARET FALCON VICE PRESIDENT, DEVELOPMENT	(i) 187,783.	0.	1,741.	0.	16,215.	205,739.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(5) ELLIOTT BROOM VICE PRESIDENT OF MUSEUM OPERATIONS	(i) 155,729.	0.	307.	0.	17,403.	173,439.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(6) MII QUARCOPOME CO-CHIEF CURATOR & DEPT HEAD OF BOIA	(i) 130,947.	0.	372.	0.	24,840.	156,159.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(7) GRAHAM W J BEAL FORMER DIRECTOR, PRESIDENT AND CEO	(i) 244,886.	30,000.	403,108.	0.	38,168.	716,162.	0.
(ii) 0.	0.	0.	0.	0.	0.	0.	0.
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							
(i) 0.							
(ii) 0.							

Part III Supplemental Information

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

PART I, LINE 1A:

AS DIRECTOR FOR THE MUSEUM, SALVADOR SALORT-PONS ATTENDS FUNDRAISING AND OTHER PROFESSIONAL EVENTS IN WHICH HIS SPOUSE PARTICIPATES FOR THE BENEFIT OF THE ORGANIZATION. IN SUCH CASES, SPOUSAL TRAVEL IS PAID FOR BY THE ORGANIZATION. THE DIRECTOR RECEIVED A PAID MEMBERSHIP TO ONE BUSINESS CLUB, WHERE HE CONNECTS WITH SUPPORTERS OF THE ORGANIZATION, THE ARTS AND OTHER COMMUNITY, POLITICAL AND BUSINESS LEADERS OF IMPORTANCE TO THE ORGANIZATION.

PART I, LINE 4A:

SEE EXPLANATION FOR PART II, COLUMN (B)(III).

PART II, COLUMN (B)(II):

ALL EXECUTIVE BONUS AND INCENTIVE COMPENSATION WAS PAID USING FUNDS DONATED TO THE DIA SPECIFICALLY FOR SUPPORTING EXECUTIVE COMPENSATION, AND NO PUBLIC FUNDS (THE TRI-COUNTY MILLAGE) WERE USED TO PAY THESE AMOUNTS. AS A RESULT OF AN EXECUTIVE RESTRUCTURING PLAN, THE TOTAL AMOUNTS PAID TO ALL SENIOR DIA EXECUTIVES AS CURRENT COMPENSATION, INCLUDING EXECUTIVE BONUS AND INCENTIVE COMPENSATION, WERE LESS THAN IN

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.

THE PRIOR COMPARABLE PERIOD. THE PAYMENT OF THESE AMOUNTS WAS REVIEWED
IN ADVANCE WITH THE THREE COUNTY ARTS AUTHORITIES.

PART II, COLUMN (B)(III):

GRAHAM W.J. BEAL SERVED AS THE DIRECTOR OF THE DIA FROM 1999 UNTIL 2015
UNDER A SERIES OF EMPLOYMENT AGREEMENTS, THE FIRST OF WHICH BECAME
EFFECTIVE ON SEPTEMBER 20, 1999. PURSUANT TO THOSE AGREEMENTS, MR.
BEAL WAS ENTITLED TO RECEIVE WHEN HE RETIRED TWO SPECIFIED AMOUNTS
RELATING TO HIS LONG SERVICE TO THE DIA --\$142,500 AND \$163,000. BOTH
OF THOSE AMOUNTS WERE PAID USING FUNDS DONATED TO THE DIA SPECIFICALLY
FOR SUPPORTING EXECUTIVE COMPENSATION; NO PUBLIC FUNDS (THE TRI-COUNTY
MILLAGE) WERE USED TO PAY THESE AMOUNTS. THE PAYMENT OF THESE AMOUNTS
WAS REVIEWED IN ADVANCE WITH THE THREE COUNTY ARTS AUTHORITIES.

IN ADDITION, PURSUANT TO A DIA POLICY IN EXISTENCE UNTIL 2009,
APPLICABLE TO ALL SALARIED EMPLOYEES, MR. BEAL RECEIVED AT HIS
RETIREMENT \$97,000 OF ACCRUED PAID TIME OFF, WHICH WAS EARNED OVER HIS
TENURE AT THE DIA. THESE AMOUNTS AS WELL WERE PAID USING FUNDS DONATED
TO THE DIA SPECIFICALLY FOR SUPPORTING EXECUTIVE COMPENSATION, AND NO

Part III Supplemental Information

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

PUBLIC FUNDS (THE TRI-COUNTY MILLAGE) WERE USED TO PAY THESE AMOUNTS.

Multiple horizontal lines for supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public 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	219	2,234,515.	DONOR STATED VALUE		
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
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, LLO, 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 ▶ (IN KIND NAIAS)	X	1	45,000.	DONOR STATED VALUE		
26	Other ▶ (FURNITURE)	X	3	18,626.	DONOR STATED VALUE		
27	Other ▶ (IN KIND GIFTS)	X	11	17,345.	DONOR STATED VALUE		
28	Other ▶ (ADVERTISING)	X	2	2,169.	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	10		
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 is not required to be used for exempt purposes for the entire holding period?				30a		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 non-standard contributions?				31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				32a	X	
	b If "Yes," describe in Part II.						
33	If the organization did not 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) (2015)

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.

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)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2015

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE DETROIT INSTITUTE OF ARTS

Employer identification number

38-1359510

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

COMMUNITY INPUT. SERVICES FOR K-12 STUDENTS AND TEACHERS CONTINUED TO EXPAND DURING THE FISCAL YEAR, WITH 83,800 STUDENTS BENEFITING FROM DIA FIELD TRIPS AND 1,000 TEACHERS PARTICIPATING IN WORKSHOPS AND INFORMATION SESSIONS. THE DIA ALSO PRESENTED THE 79TH ANNUAL JURIED DETROIT PUBLIC SCHOOLS STUDENT EXHIBITION. L&AE GUIDED 70,000 VISITORS ON GALLERY TOURS AND TALKS. PARTICIPANTS TOTALING 23,000 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 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

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
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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 - 52,923 VISITS; FRIDAY NIGHT LIVE! - 25,002 VISITS; SUNDAY MUSIC BAR - 12,790 VISITS; FAMILY SUNDAY PROGRAMS - 9,715 VISITS; MISCELLANEOUS PROGRAM VISITS (ARTIST DEMONSTRATIONS, COMMUNITY PARTNERSHIPS, SPECIAL PERFORMANCES) - 7,523 VISITS. GROUP RESERVATIONS SCHEDULES GUIDED TOURS AND SELF-GUIDED TOURS TO ADULT GROUPS AND SCHOOL GROUPS. THE DIA OFFERS A DIRECT PHONE LINE OR WEBSITE FOR BOOKING AND CONFIRMING RESERVATIONS. GROUPS ARE RESERVED AND GUARANTEED IN ADVANCE OF THEIR ARRIVAL. EACH GROUP ARRIVAL IS PERSONALLY WELCOMED TO THE DIA TO ENSURE VISITOR SATISFACTION. A CUSTOMER SERVICE SATISFACTION SURVEY IS SENT TO EVERY GROUP PLANNER TO GAUGE SATISFACTION LEVELS; WE RESPOND AND REACT WHEN NECESSARY. A VERY STRONG FOCUS IS PLACED ON INCREASING THE GROUP ATTENDANCE IN SPECIAL EXHIBITIONS AND GENERAL ADMISSION. GROUP RESERVATIONS HOSTS DIA FAMILIARIZATION TOURS FOR LOCAL COMMUNITY LEADERS IN MARKET SPECIFIC AREAS. GROUP RESERVATIONS ACTIVELY PARTICIPATES IN COMMUNITY OUTREACH AND WORKS VERY CLOSELY WITH THE DETROIT METROPOLITAN CONVENTION AND VISITORS BUREAU.

Name of the organization THE DETROIT INSTITUTE OF ARTS	Employer identification number 38-1359510
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FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

FROM THE COLLECTIONS, IN COMPLIANCE WITH RIGOROUS COLLECTIONS MANAGEMENT POLICIES. THE DIA CREATES PUBLICATION QUALITY PHOTOGRAPHS OF THE COLLECTION (NOW DIGITAL FILES), MANAGES PHOTOGRAPHIC RECORDS, MANAGES RIGHTS AND REPRODUCTION REQUESTS AND PROVIDES SOME EVENT PHOTOGRAPHY SERVICES. PUBLICATION PROFESSIONALS OVERSEE THE EDITING AND PRODUCTION OF PERMANENT COLLECTION GALLERY AND EXHIBITION LABELS AND INTERPRETIVE MEDIA, EDIT MUSEUM EPHEMERA, AND PRODUCE ALL MUSEUM PUBLICATIONS SUCH AS COLLECTION AND EXHIBITION CATALOGUES. THE RESEARCH LIBRARY AND ARCHIVES HAVE BEEN AN INTEGRAL PART OF THE MUSEUM SINCE THE LATE 19TH CENTURY AND SERVES THE ART HISTORICAL NEEDS OF THE MUSEUM STAFF, SCHOLARS AND STUDENTS. THE COLLECTION CONTAINS MORE THAN 191,000 VOLUMES, 300 PERIODICAL TITLES AND 10,000 CUBIC FEET OF ARCHIVAL MATERIAL.

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

EXHIBITIONS:

EXPENSES FOR EXHIBITION PROJECTS ARE FUNDED FROM RESTRICTED FUNDS DESIGNATED FOR EXHIBITIONS: EXPENSES INCLUDE ORGANIZER'S FEES, SHIPPING AND INSURANCE COSTS, CONSTRUCTION, INSTALLATION COSTS, AND DIRECT SUPPORT PAYROLL COSTS. NEARLY ALL DIA STAFF PARTICIPATES IN SOME ASPECT OF EXHIBITION WORK. THE DIA HELD THE FOLLOWING EXHIBITIONS DURING FY 2015-16: DIEGO RIVERA AND FRIDA KAHLO IN DETROIT, MARCH 15 TO JULY 12, 2015; VIPS FROM THE PAUL MCPHARLIN PUPPETRY COLLECTION, MARCH 20 TO SEPTEMBER 20, 2015; ANCIENT MIDDLE EAST GALLERY OPENING WEEKEND, OCTOBER 2-4, 2015; 30 AMERICANS, OCTOBER 18, 2015 TO JANUARY 18, 2016; OFRENDA ALTARS, OCTOBER 23 TO NOVEMBER 1, 2015; DETROIT WEATHER: 365 DAYS, NOVEMBER 21, 2015 TO MAY 15, 2016; FIFTY YEARS OF COLLECTING:

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DETROIT INSTITUTE OF ARTS' FRIENDS OF PRINTS, DRAWINGS AND PHOTOGRAPHS ANNIVERSARY EXHIBITION, DECEMBER 15, 2015 TO JUNE 18, 2016; SHAKESPEARE FIRST FOLIO, MARCH 8 TO APRIL 3, 2016; DANCE! AMERICAN ART 1830-1960, MARCH 20 TO JUNE 12, 2016; AND 79TH ANNUAL DETROIT PUBLIC SCHOOLS STUDENT EXHIBITION APRIL 30 TO JUNE 5, 2016. THE DIA ENGAGED THE FOLLOWING TRAVELING EXHIBITIONS DURING FY 2015-16: WILLIAM BOUGUEREAU'S THE NUTGATHERS, FLINT INSTITUTE OF ARTS, AUGUST 3 TO OCTOBER 11, 2015; MIDLAND CENTER FOR THE ARTS, OCTOBER 17, 2015 TO JANUARY 3, 2016 AND FROM THE IMPRESSIONIST TO PICASSO: EUROPEAN MODERN MASTERWORKS FROM THE DETROIT INSTITUTE OF ARTS, PALAZZO DUCALE, GENOVA, ITALY, SEPTEMBER 24, 2015 TO APRIL 10, 2016; TOYOTA MUNICIPAL MUSEUM, JAPAN, APRIL 26 TO JUNE 26, 2016.

EXPENSES \$ 3,378,462. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,844,659.

CURATORIAL ACTIVITIES:

THE PRIMARY RESPONSIBILITIES OF OUR CURATORS INCLUDE THE FOLLOWING: MANAGING THE DIA'S WORLD-CLASS ART COLLECTION OF OVER 60,000 OBJECTS; CONDUCTING RESEARCH ON THE MUSEUM'S COLLECTION AND PRODUCING SCHOLARLY PUBLICATIONS; PROPOSING ART ACQUISITIONS AND CULTIVATING ART COLLECTORS; DEVELOPING AND ORGANIZING ART EXHIBITIONS; MANAGING PERMANENT GALLERIES BY SUPERVISING OUR COLLECTIONS MANAGEMENT STAFF TO INSTALL ARTWORKS; CONSULTING WITH OUR CONSERVATORS TO 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 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

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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.

EXPENSES \$ 2,696,484. INCLUDING GRANTS OF \$ 0. REVENUE \$ 38,915.

MARKETING AND COMMUNICATIONS:

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.

EXPENSES \$ 1,767,791. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

COMMUNITY RELATIONS:

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, COLLEGE NIGHT, AS WELL AS THURSDAY'S 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. EXAMPLES INCLUDE THE DIA'S INSIDE|OUT PROJECT AND DIA INSPIRED. INSIDE|OUT TAKES HIGH QUALITY REPRODUCTIONS TO THE STREETS AND NEIGHBORHOODS OF

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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. 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 HEALING SYMPOSIUM AND THE OSBORN NEIGHBORHOOD ALLIANCE MURAL PROJECT TO NAME A FEW.

DIA INSPIRED: 30 AMERICANS WAS A COMMUNITY ENGAGEMENT PROJECT THAT WAS DEVELOPED COLLABORATIVELY WITH COMMUNITY LITERARY ARTS ORGANIZATION INSIDEOUT LITERARY ARTS (IO). IO RESIDENT INSTRUCTORS WERE PROVIDED VISUAL THINKING STRATEGIES (VTS) TRAINING BY THE DIA'S EDUCATION STAFF. DIA STAFF REACHED OUT TO STUDENTS AND THE PUBLIC TO INVITE THEM TO PARTICIPATE IN A GALLERY EXPERIENCE, LED BY THE IO STAFF WHERE THEY CREATED SPOKEN WORD PIECES WHICH WERE THEN PERFORMED AT THE DIA ON NOEL NIGHT. DIA INSPIRED IS A WAY IN WHICH COMMUNITY MEMBERS CAN CONNECT PERSONALLY WITH AN EXHIBITION AND HAVE A CREATIVE RESPONSE.

EXPENSES \$ 1,754,666. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,510.

MUSEUM SERVICES:

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

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MODEST GENERAL ADMISSION OF \$12.50 PER ADULT, \$8 PER SENIOR, \$6 PER YOUTH (AGES 6-17) AND \$7 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. EXPENSES \$ 1,497,314. INCLUDING GRANTS OF \$ 0. REVENUE \$ 747,930.

ENTERPRISE ACTIVITIES:

THE ENTERPRISE ACTIVITIES INCLUDE PROGRAM SERVICES FOR THE PARKING LOT, RETAIL GIFT SHOP, CAFE, CATERING AND CRYSTAL GALLERY. THE REVENUE GENERATED FROM ENTERPRISE ACTIVITIES OF \$1,272,526 DOES NOT INCLUDE \$615,962 OF EXCLUDED REVENUE, AS SHOWN IN PART VIII, STATEMENT OF REVENUE, LINE 2B. THE EXPENSES INCLUDE PROGRAM OVERHEAD EXPENSES AND AN INDIRECT COST ALLOCATION FROM MUSEUM OPERATIONS. EXPENSES \$ 1,435,100. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,272,526.

CONSERVATION:

CONSERVATORS OVERSEE TREATMENT, REPAIR AND RESTORATION OF THE PERMANENT COLLECTIONS, AND MONITOR THE PHYSICAL CONDITION OF THE COLLECTIONS AND THE ENVIRONMENT IN WHICH IT IS DISPLAYED AND STORED. CONSERVATORS ALSO EXAMINE ALL OUTGOING LOANS FROM THE COLLECTION AND ALL INCOMING LOANS FOR SPECIAL EXHIBITIONS. EXPENSES \$ 1,173,081. INCLUDING GRANTS OF \$ 0. REVENUE \$ 15,992.

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AUXILIARY AND VOLUNTEER GROUPS:

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 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, 751 DIA VOLUNTEERS DONATED 65,439 HOURS OF SERVICE DURING THE FISCAL YEAR, WHICH WAS THEIR 54TH YEAR OF SERVICE TO THE DIA.

EXPENSES \$ 908,139. INCLUDING GRANTS OF \$ 0. REVENUE \$ 171,960.

CAPITAL PROJECTS:

DURING THE FISCAL YEAR THE DIA INCURRED COSTS TO PROVIDE A TEMPORARY PROJECT ROOM TO BE USED BY STAFF TO COLLABORATE AND SHARE IDEAS RELATED TO THE ASIAN GALLERY RENOVATION PROJECT THAT IS SET TO BEGIN IN FISCAL YEAR 2017.

EXPENSES \$ 71,502. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

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

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

THE PROCESS USED BY THE DIA TO REVIEW THE FORM 990 WITH ITS GOVERNING BODY IS AS FOLLOWS: 1 - THE INITIAL DRAFT RETURN IS COMPLETED BY PLANTE MORAN AND REVIEWED BY DIRECTOR OF ACCOUNTING AND CFO. 2 - AN IN DEPTH REVIEW IS SCHEDULED WITH THE MUSEUM DIRECTOR AND CEO. 3 - AFTER COMPLETING STAFF REVIEWS, A COMPREHENSIVE REVIEW IS SCHEDULED WITH A BOARD OF DIRECTORS SUBCOMMITTEE CONSISTING OF THE BOARD CHAIR, THE FINANCE COMMITTEE CHAIR, THE AUDIT COMMITTEE CHAIR AND THE GOVERNANCE AND NOMINATING COMMITTEE CHAIR. 4 - AFTER COMPLETION OF THE BOARD SUBCOMMITTEE 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'S 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 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

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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 CONTAINED 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:

INCREASE IN UNFUNDED PENSION PLAN OBLIGATION	-4,835,719.
CHANGE IN POST RETIREMENT HEALTHCARE OBLIGATION	-262,562.
TOTAL TO FORM 990, PART XI, LINE 9	-5,098,281.

FORM 990, PART XII, LINE 2C:

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

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

THE DETROIT INSTITUTE OF ARTS

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2015

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

CMB No. 1545-0047

2015

Open to Public
Inspection

Employer identification number
38-1359510

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			

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 513(b)(3) 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	112,484.	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)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) All of the partners are: S11619 S11619 S11619		(f) Share of total income	(g) Share of end-of-year assets	(h) Separate book 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		Yes	No	