

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 10-01-2017, and ending 09-30-2018

B Check if applicable
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
INSTITUTE OF CONTEMPORARY ART MIAMI INC
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
61 NE 41ST STREET
City or town, state or province, country, and ZIP or foreign postal code
MIAMI, FL 33137

D Employer identification number
47-1251523
E Telephone number
(305) 901-5272

F Name and address of principal officer
NICHOLAS MANDRUS
61 NE 41ST STREET
MIAMI, FL 33137

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

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

J Website: ICAMIAMI.ORG

H(c) Group exemption number

K Form of organization Corporation Trust Association Other

L Year of formation 2014

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE INSTITUTE OF CONTEMPORARY ART, MIAMI (ICA MIAMI), IS DEDICATED TO PROMOTING THE WORK OF CONTEMPORARY ARTISTS, AND TO THE EXCHANGE OF ART AND IDEAS THROUGHOUT THE MIAMI REGION AND INTERNATIONALLY THROUGH AN ENERGETIC CALENDAR OF EXHIBITIONS AND PROGRAMS, AND ITS COLLECTIONS, ICA MIAMI PROVIDES AN INTERNATIONAL PLATFORM FOR THE WORK OF ESTABLISHED AND EMERGING ARTISTS, AND ADVANCES THE PUBLIC APPRECIATION AND UNDERSTANDING OF THE MOST INNOVATIVE AND EXPERIMENTAL ART OF OUR TIME

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 29
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 29
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5 47
6 Total number of volunteers (estimate if necessary)	6 120
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0
7b Net unrelated business taxable income from Form 990-T, line 34	7b 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	19,156,068	8,428,127
9 Program service revenue (Part VIII, line 2g)	13,338	31,362
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,115	10,095
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-215,534	-691,740
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	18,962,987	7,777,844

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
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)	1,983,828	2,601,367
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 371,124		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,023,816	6,189,042
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,007,644	8,790,409
19 Revenue less expenses Subtract line 18 from line 12	13,955,343	-1,012,565

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	59,679,774	57,794,738
21 Total liabilities (Part X, line 26)	2,493,904	1,629,896
22 Net assets or fund balances Subtract line 21 from line 20	57,185,870	56,164,842

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: ***** Date: 2019-04-30
NICHOLAS MANDRUS DIRECTOR OF FINANCE
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: DAVID HOLLANDER Preparer's signature: DAVID HOLLANDER Date: PTIN: P00646430
Firm's name: MORRISON BROWN ARGIZ & FARRA LLC Firm's EIN: 01-0720052
Firm's address: 301 E LAS OLAS BLVD 4TH FLOOR FORT LAUDERDALE, FL 33301 Phone no: (954) 760-9000

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

THE INSTITUTE OF CONTEMPORARY ART, MIAMI (ICA MIAMI), IS DEDICATED TO PROMOTING THE WORK OF CONTEMPORARY ARTISTS, AND TO THE EXCHANGE OF ART AND IDEAS THROUGHOUT THE MIAMI REGION AND INTERNATIONALLY THROUGH AN ENERGETIC CALENDAR OF EXHIBITIONS AND PROGRAMS, AND ITS COLLECTIONS, ICA MIAMI PROVIDES AN INTERNATIONAL PLATFORM FOR THE WORK OF ESTABLISHED AND EMERGING ARTISTS, AND ADVANCES THE PUBLIC APPRECIATION AND UNDERSTANDING OF THE MOST INNOVATIVE AND EXPERIMENTAL ART OF OUR TIME

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 No

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 5,515,582 including grants of \$) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ 732,219 including grants of \$) (Revenue \$ 31,362)
See Additional Data

4c (Code) (Expenses \$ 777,096 including grants of \$) (Revenue \$)
See Additional Data

(Code) (Expenses \$ 778,867 including grants of \$) (Revenue \$)
COMMUNICATIONSTHROUGH ITS COMMUNICATIONS PROGRAM, ICA MIAMI COMMUNICATES ITS MISSION AND ACTIVITIES TO THE PUBLIC THE COMMUNICATIONS PROGRAM ALSO INFORMS THE PUBLIC ABOUT CONTEMPORARY ART AND ITS IMPORTANCE IN OUR SOCIETY THROUGH VARIOUS FORMS OF MEDIA

4d Other program services (Describe in Schedule O)
(Expenses \$ 778,867 including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 7,803,764

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>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	Yes	
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>		No
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>		No
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>		No
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>		No
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>		No
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>	Yes	
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>		No
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>	Yes	
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>	Yes	
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>		No
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>		No
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>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		No
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>	Yes	
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>	Yes	
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>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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>		No
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>		No
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>		No
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> (see instructions)		No
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>	Yes	
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>		No

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include 20a, 20b, 21, 22, 23, 24a, 24b, 24c, 24d, 25a, 25b, 26, 27, 28a, 28b, 28c, 29, 30, 31, 32, 33, 34, 35a, 35b, 36, 37, 38.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (29); 1b Enter the number of voting members included in line 1a, above, who are independent (29); 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? (Yes); 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? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (No); 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? (No); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 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 (No)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b 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? (No); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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 (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b 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

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (FL); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [] Own website, [X] Another's website, [X] Upon request, [] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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: NICHOLAS MANDRUS 61 NE 41ST STREET MIAMI, FL 33137 (305) 901-5272

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, or 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 dotted 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			
See Additional Data Table										

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 dotted 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			
See Additional Data Table										

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)	642,096	0	99,181

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 ▶ **4**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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
KVC CONSTRUCTORS INC 9499 NE 2ND AVE MIAMI, FL 33138	BUILDING CONSTRUCTION	3,694,693
OFFICE OF APPLIED IDEAS 14 NE FIRST AVE SUITE 507 MIAMI, FL 33132	DESIGN AND FABRICATION SERVICES	572,008
US ART 66 PACELLA PARK DRIVE RANDOLPH, MA 02368	FINE ART SHIPPING AND HANDLING	399,405
CONSTELLATION CULINARY GROUP 2151 NW 1ST CT MIAMI, FL 33127	CATERING	284,576
WOW FACTOR MARKETING GROUP 800 DOUGLAS RD SUITE 105 CORAL GABLES, FL 33134	EVENT PRODUCTION SERVICES	208,929

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 ▶ **12**

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	1a Federated campaigns	1a				
	b Membership dues	1b	630,982			
	c Fundraising events	1c	2,405,145			
	d Related organizations	1d				
	e Government grants (contributions)	1e	65,818			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,326,182			
	g Noncash contributions included in lines 1a-1f \$ _____		57,437			
	h Total. Add lines 1a-1f		8,428,127			
Program Service Revenue			Business Code			
	2a GIFT SHOP		900099	31,362	31,362	
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
g Total. Add lines 2a-2f		31,362				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		10,095		10,095	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ 2,405,145 of contributions reported on line 1c) See Part IV, line 18	a		393,900		
		b Less direct expenses	b	1,085,640		
c Net income or (loss) from fundraising events			-691,740		-691,740	
9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code					
11a						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See Instructions		7,777,844	31,362	0	-681,645	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
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, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	557,829	442,378	96,123	19,328
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.	1,573,344	1,172,303	250,597	150,444
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	129,806	102,941	22,368	4,497
9 Other employee benefits.	210,765	167,144	36,318	7,303
10 Payroll taxes.	129,623	102,796	22,336	4,491
11 Fees for services (non-employees)				
a Management.				
b Legal.				
c Accounting.	23,000		23,000	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	450,751	443,388	7,363	
12 Advertising and promotion.	395,566	395,191		375
13 Office expenses.	37,998	32,624	2,311	3,063
14 Information technology.				
15 Royalties.				
16 Occupancy.	41,827	41,827		
17 Travel.	260,839	242,298	8,882	9,659
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	540,580	524,363	13,514	2,703
23 Insurance.	220,758	218,840	1,598	320
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 CONTRACT SERVICES AND F	968,822	862,508	54,829	51,485
b ART SHIPPING AND CRATIN	767,434	767,434		
c EXHIBITION AND COLLECTI	652,782	652,782		
d FABRICATION AND CONSERV	480,554	480,554		
e All other expenses	1,348,131	1,154,393	76,282	117,456
25 Total functional expenses. Add lines 1 through 24e.	8,790,409	7,803,764	615,521	371,124
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 <input type="checkbox"/> 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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,424,972	1	565,816
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	14,479,248	3	13,114,325
	4 Accounts receivable, net		4	
	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 instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	309,317	9	141,699
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 43,964,205		
	b Less accumulated depreciation	10b 543,561	42,915,751	10c 43,420,644
	11 Investments—publicly traded securities	550,486	11	552,254
	12 Investments—other securities See Part IV, line 11		12	
	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)	59,679,774	16	57,794,738	
Liabilities	17 Accounts payable and accrued expenses	872,548	17	188,377
	18 Grants payable		18	
	19 Deferred revenue	1,621,356	19	1,441,519
	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		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,493,904	26	1,629,896
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	18,725,039	27	19,407,452
	28 Temporarily restricted net assets	14,452,142	28	12,748,701
	29 Permanently restricted net assets	24,008,689	29	24,008,689
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. 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	57,185,870	33	56,164,842
	34 Total liabilities and net assets/fund balances	59,679,774	34	57,794,738

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	7,777,844
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,790,409
3	Revenue less expenses Subtract line 2 from line 1	3	-1,012,565
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	57,185,870
5	Net unrealized gains (losses) on investments	5	-8,463
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	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	56,164,842

Part XII Financial Statements and Reporting

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

	Yes	No
<p>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</p>		
<p>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</p>		No
<p>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</p>	Yes	
<p>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</p>	Yes	
<p>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?</p>		No
<p>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</p>		

Additional Data

Software ID:

Software Version:

EIN: 47-1251523

Name: INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Form 990 (2017)

Form 990, Part III, Line 4a:

EXHIBITIONS AND COLLECTIONS - SEE SCHEDULE O

Form 990, Part III, Line 4b:

EDUCATION AND OUTREACH - SEE SCHEDULE O

Form 990, Part III, Line 4c:

PUBLIC PROGRAMS - SEE SCHEDULE O

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
ALDONA CZERNECKA TRUSTEE	2 00	X						0	0	0
ANDREW SMULIAN TRUSTEE	5 00	X						0	0	0
ARLENE MENDELSON TRUSTEE	2 00	X						0	0	0
BARBARA HERZBERG TRUSTEE	2 00	X						0	0	0
CHANDRA RUDD TRUSTEE	2 00	X						0	0	0
CYNTHIA FISKE TRUSTEE	2 00	X						0	0	0
DEAN COLSON TRUSTEE	5 00	X						0	0	0
DEBI WECHSLER TRUSTEE	5 00	X						0	0	0
DAPHNA BENTATA TRUSTEE	2 00	X						0	0	0
DR KIRA FLANZRAICH TRUSTEE	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
ELLA FONTANALS-CISNEROS TRUSTEE	2 00	X						0	0	0
EVAN REED TRUSTEE	2 00	X						0	0	0
IRMA BRAMAN TRUSTEE	8 00	X						0	0	0
JACKIE SOFFER TRUSTEE	2 00	X						0	0	0
JANICE LIPTON TRUSTEE	5 00	X						0	0	0
JOANNE KATZ TRUSTEE	2 00	X						0	0	0
JORGE GONZALEZ TRUSTEE	2 00	X						0	0	0
LAURIE LYNN STARK TRUSTEE	2 00	X						0	0	0
MANUEL KADRE TRUSTEE	5 00	X						0	0	0
MARGOT GREIG TRUSTEE	5 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
MICHAEL COLLINS TRUSTEE	2 00	X						0	0	0
NANCY GREEN TRUSTEE	2 00	X						0	0	0
PAULA MORABITO TRUSTEE	8 00	X						0	0	0
PETRA LEVIN TRUSTEE	5 00	X						0	0	0
RAY ELLEN YARKIN TRUSTEE	8 00	X						0	0	0
SHELDON ANDERSON TRUSTEE	2 00	X						0	0	0
ITCHKO EZRATTI TRUSTEE	2 00	X						0	0	0
ISADORE HECHT HAVERNICK TRUSTEE	2 00	X						0	0	0
KRIS HINSON TRUSTEE	2 00	X						0	0	0
EDWARD NICOLL TRUSTEE	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
ALEX GARTENFELD ARTISTIC DIRECTOR	40 00			X				157,634	0	25,397
ELLEN SALPETER FORMER DIRECTOR	40 00			X				248,896	0	35,777
NICHOLAS MANDRUS DIRECTOR OF FINANCE	40 00			X				106,958	0	24,097
THOMAS RALPH PACE DEPUTY DIRECTOR	40 00			X				128,608	0	13,910

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Employer identification number

47-1251523

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 12, 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 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)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - 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- 10 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), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	0	9,563,518	3,512,413	13,367,403	4,748,770	31,192,104
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		9,563,518	3,512,413	13,367,403	4,748,770	31,192,104
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						31,192,104

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4		9,563,518	3,512,413	13,367,403	4,748,770	31,192,104
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		9,116	15,260	8,398	10,230	43,004
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						31,235,108
12	Gross receipts from related activities, etc (see instructions)					12	155,276

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**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2017.** 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
- b 33 1/3% support test—2016.** 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
- 17a 10%-facts-and-circumstances test—2017.** 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
- b 10%-facts-and-circumstances test—2016.** 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
- 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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. 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—2016. 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 on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
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).		
	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.		
	3a		
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.		
	3b		
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.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
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.		
	4b		
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.		
	4c		
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).		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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 .		
	6		
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).		
	7		
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).		
	8		
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 .		
	9a		
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 .		
	9b		
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 .		
	9c		
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 line 10b below.		
	10a		
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.)		
	10b		

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? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

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? <i>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.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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? <i>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.</i>		
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section 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)	1	
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	<input type="checkbox"/> 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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 47-1251523

Name: INSTITUTE OF CONTEMPORARY ART MIAMI
INC

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)

Facts And Circumstances Test

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
2017
Open to Public Inspection

Name of the organization
INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Employer identification number
47-1251523

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

	(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 an 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 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 | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 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 in 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	550,486	537,612	526,540	428,568	
b Contributions					
c Net investment earnings, gains, and losses	1,768	12,874	11,072	6,128	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	552,254	550,486	537,612	434,696	

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 19 320 %
 - b** Permanent endowment ▶ 74 000 %
 - c** Temporarily restricted endowment ▶ 6 680 %
- 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
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		25,986,706		25,986,706
b Buildings		17,467,267	410,555	17,056,712
c Leasehold improvements				
d Equipment		33,925		33,925
e Other		476,307	133,006	343,301
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				43,420,644

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

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. (Column (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.

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	8,535,927
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-8,463
b	Donated services and use of facilities	2b	66,446
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	57,983
3	Subtract line 2e from line 1	3	8,477,944
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-700,100
c	Add lines 4a and 4b	4c	-700,100
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	7,777,844

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

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

1	Total expenses and losses per audited financial statements	1	9,586,321
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	95,812
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	95,812
3	Subtract line 2e from line 1	3	9,490,509
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	-700,100
c	Add lines 4a and 4b	4c	-700,100
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	8,790,409

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 47-1251523

Name: INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Supplemental Information

Return Reference	Explanation
PART III, LINE 1A	THE ORGANIZATION HAS ELECTED, AS PERMITTED UNDER SFAS 116, NOT TO REPORT IN ITS REVENUE STATEMENT AND BALANCE SHEET THE WORKS OF CONTEMPORARY ART WHICH ARE HELD BY THE ORGANIZATION FOR PUBLIC EXHIBITION AND EDUCATION AND NOT FOR FINANCIAL GAIN

Supplemental Information

Return Reference	Explanation
PART III, LINE 4	COLLECTIONS AND RELATION TO EXEMPT PURPOSE ICA MIAMI'S PERMANENT COLLECTION ARTICULATES CORNERSTONE MOMENTS IN THE CAREERS OF SOME OF THE MOST SIGNIFICANT ARTISTS OF OUR TIME WORK IN THE COLLECTION ARE DEFINED BY THEIR ACHIEVEMENT IN ONE OR MORE OF THE FOLLOWING CATEGORIES MAGNITUDE TO AN ARTIST'S CAREER, IMPACT ON INTERNATIONAL CONTEMPORARY ART, THEMATIC RELATIONSHIP TO THE MIAMI REGION AND ITS DYNAMIC POLITICAL, CULTURAL AND ECONOMIC FORCES THE PERMANENT COLLECTION CONSISTS OF ITEMS BOTH DONATED TO AND PURCHASED BY ICA MIAMI AND IS HELD FOR PUBLIC DISPLAY ICA MIAMI IS OPEN TO THE GENERAL PUBLIC AT NO COST

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	ICA MIAMI IS A NON-PROFIT CORPORATION WHICH IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE ("CODE") AND, ACCORDINGLY, GENERALLY WOULD NOT INCUR INCOME TAXES AS A RESULT, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR INCOME TAX IN ADIITION, ICA MIAMI HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A "PRIVATE FOUNDATION" WITHIN THE MEANING OF SECTION 509(A) OF THE CODE ICA MIAMI RECOGNIZES AND MEASURES TAX POSITIONS BASED ON THEIR TECHNICAL MERIT AND ASSESSES THE LIKELIHOOD THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES AND INFORMATION AVAILABLE AT THE END OF EACH PERIOD INTEREST AND PENALTIES ON TAX LIABILITIES, IF ANY, WOULD BE RECORDED IN INTEREST EXPENSE AND OTHER NON-INTEREST EXPENSE, RESPECTIVELY THE U S FEDERAL JURISDICTION IS THE MAJOR TAX JURISDICTION WHERE ICA MIAMI FILES INCOME TAX RETURNS ICA MIAMI IS GENERALLY NO LONGER SUBJECT TO US FEDERAL EXAMINATIONS BY TAX AUTHORITIES FOR ALL YEARS BEFORE 2015

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	DIRECT EXPENSES FROM FUNDRAISING EVENTS -715,100 IN-KIND RENT ALLOCATED TO FUNDRAISING EVENT 15,000

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	DIRECT FUNDRAISING EXPENSES REPORTED UNDER REVENUE SECTION -715,100 IN-KIND RENT ALLOCATED TO FUNDRAISING EVENT 15,000

**SCHEDULE G
(Form 990 or 990-EZ)**

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No 1545-0047

2017

**Open to Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Employer identification number

47-1251523

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** 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			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 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

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)
		365 PARTY (event type)	ENCHANTED EVENINGS (event type)	1 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	2,281,865	183,980	333,200	2,799,045
	2 Less Contributions	2,175,465	170,180	59,500	2,405,145
	3 Gross income (line 1 minus line 2)	106,400	13,800	273,700	393,900
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	134,860		208,206	343,066
	8 Entertainment	3,570		11,400	14,970
	9 Other direct expenses	373,724	23,078	330,802	727,604
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				1,085,640
11 Net income summary Subtract line 10 from line 3, column (d) ▶				-691,740	

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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Revenue	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	%
b	An outside facility	%

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 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 (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Return Reference	Explanation
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Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Employer identification number
47-1251523

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 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 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 in 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	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	
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 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 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	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 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	No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b	No
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	No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b	No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
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	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2017

▶ **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**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Employer identification number
47-1251523

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	19		
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	X	2	57,437	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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	
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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?

	Yes	No
30a		No
31		No
32a		No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

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

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.

Return Reference	Explanation
PART I, LINE 33	ICA MAINTAINS COLLECTIONS OF WORKS OF ART AND DOES NOT VALUE THE PIECES IN ITS INVENTORY OR RECORD REVENUES FOR ANY DONATED PIECES THE DONATED WORKS OF ART ARE LISTED BY THE NUMBER OF PIECES DONATED THEY CONSIST OF PAINTINGS, SCULPTURES, PRINTS, AND DVDS

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
INSTITUTE OF CONTEMPORARY ART MIAMI
INC

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

47-1251523

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT	<p>EXHIBITIONS AND COLLECTIONS ICA MIAMI OPENED ITS NEW PERMANENT BUILDING IN DECEMBER 2017 WITH THE MAJOR INAUGURAL EXHIBITION "THE EVERYWHERE STUDIO " THE EXHIBITION SPANNED THE SECOND AND THIRD FLOOR GALLERY SPACES AND WAS ON VIEW FROM DECEMBER 1, 2017 THROUGH MARCH 4, 2018 "THE EVERYWHERE STUDIO" WAS A MAJOR GROUP EXHIBITION EXPLORING THE SIGNIFICANCE OF THE ARTIST'S STUDIO FROM THE POST-WAR PERIOD TO THE PRESENT DAY ENCOMPASSING SOME 100 WORKS IN PAINTING, SCULPTURE, VIDEO, AND INSTALLATION, THE EXHIBITION BROUGHT TOGETHER OVER 50 ARTISTS FROM THE PAST FIVE DECADES TO REVEAL THE ARTIST'S STUDIO AS A CHARGED SITE THAT HAS BOTH PREDICTED AND RESPONDED TO BROADER SOCIAL AND ECONOMIC CHANGES OF OUR TIME CONCURRENTLY, THE GROUND FLOOR OF ICA MIAMI'S NEW BUILDING OPENED WITH 6 SMALLER GALLERY SPACES -ROBERT GOBER'S LONG TERM INSTALLATION FEATURES THE ICONIC SCULPTURE UNTITLED (1993-94) AND A PORTFOLIO OF SIGNIFICANT PHOTOGRAPHS, 1978-2000 (1978-2000) -CHRIS OFILI'S EXTENDED- RUN INSTALLATION FEATURES A SERIES OF PAINTINGS AND PHOTOGRAPHS AND WILL EVOLVE OVER THE COURSE OF ITS DURATION, WITH WORKS BEING ADDED AND/OR SUBTRACTED OVER TIME -HELIO OITICICA PRESENTATION "BOLIDES" WAS ON VIEW FROM DECEMBER 1, 2017 THROUGH JULY 8, 2018 AND EXAMINED AN IMPORTANT SERIES OF WORKS CREATED BY HELIO OITICICA AT A CRUCIAL TRANSFORMATIONAL PERIOD IN THE ARTIST'S DEVELOPMENT -ED AND NANCY KIENHOLZ'S PRESENTATION WAS ON VIEW FROM DECEMBER 1, 2017 THROUGH APRIL 22, 2018 AND FOCUSED ON WORK FROM 1982 TO 1992 THE WORK DEMONSTRATED THE ARTISTS' EXPLORATION OF THE REPRESENTATION OF WOMEN IN A CONTEMPORARY, MEDIA-SATURATED SOCIETY AND FEATURED BOTH WORK FROM ICA MIAMI'S PERMANENT COLLECTION AS WELL AS SUPPORTING LOANS -TOMM EL-SAIEH'S SOLO MUSEUM DEBUT WAS ON VIEW FROM DECEMBER 1, 2017 THROUGH MAY 13, 2018 AND FEATURED A SUITE OF NEW PAINTINGS THAT EXPLORED AND PROBED THE MEANINGS OF ABSTRACTION BY INVOKING HAITIAN TRADITIONS OF FIGURATIVE SPIRITUAL ART -SENGA NENGUDI'S PRESENTATION WAS ON VIEW FROM DECEMBER 1, 2017 THROUGH APRIL 22, 2018 AND REPRESENTED A PIVOTAL ADVANCEMENT IN THE ARTIST'S INNOVATIVE APPROACH TO MATERIAL AND OFFERED IMPORTANT INSIGHT INTO HER CURRENT PRACTICE AS THE BUILDING OPENED SO DID THE ICA MIAMI'S BRAND NEW SCULPTURE GARDEN, WHICH FEATURES WORK BY MARK HANDFORTH, ALLORA AND CALZADILLA, GEORGE SEGAL, AND ABIGAIL DEVILLE ICA MIAMI ALSO FEATURED WORK IN THE COMMUNITY TWO OUTDOOR CONCRETE BLOCK STRUCTURES BY CONCEPTUAL PIONEER SOL LEWITT INAUGURATED ICA MIAMI'S PUBLIC SCULPTURE PROGRAM AND WERE ON VIEW IN THE MIAMI DESIGN DISTRICT FROM NOVEMBER 1, 2017 THROUGH MAY 31, 2019 IN ADDITION, FROM OCTOBER 17 THROUGH DECEMBER 31 2017, ICA MIAMI COMMISSIONED A LARGE-SCALE PUBLIC ARTWORK BY LOCAL MIAMI ARTIST JILLIAN MAYER, WHICH TOOK THE FORM OF A BILLBOARD AND HIGHLIGHTED THE MUSEUM'S ONGOING ROLE AS A PLATFORM FOR LEADING MIAMI- BASED ARTISTS LASTLY OUR INAUGURAL PROGRAM FEATURED BRAND NEW WORKS BY CHARLES GAINES WHICH WERE SHOWN IN ICA MIAMI'S M</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT	<p>AIN STAIRWELL CHARLES GAINES' MULTI-PANEL INSTALLATION ACTIVATED ICA MIAMI'S CENTRAL STAIRWELL AND EXPLORED THE ARTIST'S APPROACH TO SERIALITY THROUGH A UNIQUE VERTICAL COMPOSITION AS THE INAUGURAL PROGRAM CAME TO A CLOSE, MORE EXCITING EXHIBITIONS OPENED IN THEIR PLACES -IN APRIL OF 2017, THE SECOND FLOOR GALLERY SPACE FEATURED AN EXHIBITION OF WORKS BY DONALD JUDD WHICH OFFERED AN EXPANDED UNDERSTANDING OF THE ARTIST THROUGH THIS UNDERSTUDIED FACET OF HIS PRACTICE "DONALD JUDD PAINTINGS" MARKED THE FIRST MUSEUM EXHIBITION DEDICATED TO 14 RARELY EXHIBITED PAINTINGS, CREATED FROM 1959 TO 1961 WHEN THE ARTIST WAS DEVELOPING HIS IDEAS ABOUT COLOR, SPACE AND EXPLORING THE LIMITATIONS OF THE FLAT PLANE -IN MAY OF 2018, THE THIRD FLOOR GALLERY SPACE OPENED WITH "TERRY ADKINS INFINITY IS ALWAYS LESS THAN ONE," WHICH WAS A MAJOR THEMATIC SURVEY WHICH HIGHLIGHTED THE ARTIST'S CRUCIAL CONTRIBUTIONS TO THE MEDIUM OF SCULPTURE AND CULTURAL PROTEST, FEATURING MAJOR INSTALLATIONS THAT HAVE NOT BEEN VIEWED IN DECADES -FROM JULY 13 THROUGH NOVEMBER 4, 2018, THE SECOND FLOOR GALLERY SHOWCASED "SONDRA PERRY TYPHOON COMING ON," WHICH EXAMINED THE ARTIST'S INNOVATIVE USE OF VIDEO, MEDIA, INSTALLATION AND PERFORMANCE TO CREATE POWERFUL NARRATIVES THAT EXPLORE THE INTERSECTION OF BLACK IDENTITY, DIGITAL CULTURE AND POWER ADDITIONALLY, THE GROUND FLOOR GALLERIES ALSO OPENED NEW EXHIBITIONS IN THE SPRING OF 2018 -FROM MAY 17, 2018 THROUGH OCTOBER 28, 2018, ICA MIAMI PRESENTED "DIAMOND STINGILY LIFE IN MY POCKET," THE FIRST SOLO MUSEUM EXHIBITION BY THE EMERGING NEW YORK-BASED ARTIST FOR HER PRESENTATION AT ICA MIAMI, STINGILY CREATED A NEW INSTALLATION THAT SEES THE ARTIST USING THE FORM OF THE READYMADE TO EXPLORE PERSONAL AND SHARED MEMORIES OF SUBURBAN LIFE, BLACK GIRLHOOD, AND RACIAL VIOLENCE -FROM APRIL 26, 2018 THROUGH DECEMBER 2, 2018, A PRESENTATION OF PAINTINGS BY FRANCIS ALS BASED ON THREE IMPORTANT MULTI-PANEL WORKS IN THE MUSEUM'S PERMANENT COLLECTION WERE FEATURED, ALONG WITH SEVERAL LOANED WORKS FEATURED THE ARTIST'S "SIGN PAINTING PROJECT" SERIES (1993-97) -FROM APRIL 26, 2018 THROUGH JANUARY 6, 2019 "WALTER DARBY BANNARD 1959-1962" WAS A FOCUSED PRESENTATION OF A SERIES OF BREAKTHROUGH PAINTINGS THE ARTIST PRODUCED OVER A PERIOD OF SEVERAL YEARS, DURING WHICH HE ABANDONED GESTURAL BRUSHWORK AND DEVELOPED A PARED-DOWN GEOMETRIC VOCABULARY THE EARLY WORKS PRESENTED HAVE RARELY AND ONLY RECENTLY BEEN EXHIBITED ICA MIAMI'S PERMANENT COLLECTION CONTINUED TO ARTICULATE CORNERSTONE MOMENTS IN THE CAREERS OF SOME OF THE MOST SIGNIFICANT ARTISTS OF OUR TIME DURING FISCAL YEAR 2018, ICA MIAMI ADDED 22 ARTWORKS TO THE PERMANENT COLLECTION, INCLUDING WORK BY FRANCIS ALYS, THOMAS DEMAND, JOSEPH BEUYS, CINDY SHERMAN, SUSAN TEKAHURANGI KING, ROBERT CHAMBERS, SAMUEL FOSSO, ROBERT GOBER, THOMAS HIRSCHHORN, LOUISE LAWLER, DALTON PAUL A, JOHNATHAN LYNDON CHASE, DAMIEN ORTEGA, MICHAEL E. SMITH, NED VENA, JON PESTONI, AND TOM SCIACLUNA</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT	<p>EDUCATION AND OUTREACH ICA MIAMI'S YOUNG ARTISTS INITIATIVE IS AN APPLICATION-BASED ARTS PROGRAM DESIGNED FOR YOUNG ARTISTS (9TH-12TH GRADE) WHO ARE ENCOURAGED TO LOOK CRITICALLY AT CONTEMPORARY ART PRACTICES, WORK DIRECTLY WITH LEADING ARTISTS, AND FURTHER DEVELOP THEIR OWN PORTFOLIOS ICA MIAMI'S YOUNG ARTISTS INITIATIVE ENGAGES STUDENTS IN AN INTENSIVE, 20-WEEK PROGRAM OFFERED IN TWO 10-WEEK SESSIONS THAT RELATES ART HISTORY TO CONTEMPORARY ART PRACTICE FOR HIGH SCHOOL STUDENTS WITH A FOCUS ON APPLICABLE SKILLS THAT PREPARE SELF-SELECTING STUDENTS FOR CAREERS IN CONTEMPORARY ART DURING FISCAL YEAR 2018, APPROXIMATELY 35 STUDENTS PARTICIPATED IN EACH SEMESTER OF ICA MIAMI'S YOUNG ARTISTS INITIATIVE ICA MIAMI'S OUTREACH PROGRAMS PRESENT THE DIVERSE WORKS OF CONTEMPORARY ARTISTS TO UNDER-RESOURCED YOUTHS AND YOUNG ADULTS IN THE MIAMI REGION THROUGH A SERIES OF PARTNERSHIPS WITH MIAMI-DADE PUBLIC SCHOOLS AND LOCAL COMMUNITY ORGANIZATIONS, OUR CURRICULA AIM IS TO IMPROVE VISUAL LITERACY, WHILE EMPOWERING THE SOCIAL, CULTURAL AND GENDER-SPECIFIC IDENTITIES OF PARTICIPANTS DURING FISCAL YEAR 2018, ICA MIAMI OFFERED OVER 60 WORKSHOPS SERVING OVER 350 PARTICIPANTS ICA MIAMI, IN PARTNERSHIP WITH THE MIAMI DESIGN DISTRICT, ALSO HOSTS A MONTHLY "FAMILY DAY" ON THE SECOND SUNDAY OF EACH MONTH FAMILIES AND OTHER COMMUNITY MEMBERS ARE INVITED TO SPEND AN AFTERNOON EXPLORING THE CULTURAL OFFERINGS OF THE MUSEUM THROUGH VARIOUS INTERACTIVE ACTIVITIES WHICH PROMOTE CREATIVITY AND CRITICAL THINKING, INCLUDING STORY TELLING SESSIONS, MUSICAL PERFORMANCES, AND ART MAKING ACTIVITIES THE ACTIVITIES ARE TIED TO A THEME OR THE MUSEUMS CURRENT EXHIBITIONS ANNUALLY WE SERVE OVER 5,000 PEOPLE ICA MIAMI ALSO OFFERS COMPLEMENTARY TOURS OF CURRENT EXHIBITIONS TO SCHOOLS, SUMMER CAMPS, AND ADULT ORGANIZATIONS ICA HOSTED 80 TOURS DURING FISCAL YEAR 2018, REACHING OVER 1,200 PARTICIPANTS</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT	<p>PUBLIC PROGRAMS DURING FISCAL YEAR 2018, ICA MIAMI CONTINUED A ROBUST PROGRAM OF PUBLIC PRESENTATIONS, LECTURES, SEMINARS, FILM SCREENINGS, ARTISTS' TALKS, AND EVENTS BUILDING ON THE STRUCTURE THAT DIVIDES THE INSTITUTION'S PUBLIC PROGRAMS INTO FOCUSED COMPONENTS, PROGRAMS AND EVENTS WERE DEVELOPED UNDER THE FOLLOWING RUBRICS ART + RESEARCH CENTER, ICA IDEAS, ICA PERFORMS, AND ICA SPEAKS THROUGH ART + RESEARCH CENTER, THE MUSEUM OFFERS FREE COLLEGE-LEVEL SEMINAR CLASSES, OPEN TO YOUNG ADULTS AND LIFELONG LEARNERS, COVERING A WIDE RANGE OF THEMES FROM CONTEMPORARY ART AND RECENT ART HISTORY DURING FISCAL YEAR 2018, ICA MIAMI HOSTED INTENSIVE 4- WEEK FALL, SPRING AND SUMMER SEMESTERS ICA IDEAS EXPANDS THE REACH AND MEANING OF EXHIBITIONS ON VIEW, WHILE PROVIDING DYNAMIC MODES OF CREATION AND INTERACTION OUTSIDE THE EXHIBITION FORMAT AS PART OF THIS PROGRAM, ICA MIAMI HOSTED IDEA 008 THE STUDIO, WHICH INCLUDED A LECTURE BY ALEX BACON, A PANEL DISCUSSION WITH FLAVIN JUDD, A LAURE PROUVOST FILM SCREENING, AND A CONVERSATION WITH TOMM EL-SAIEH AND IDEA 009 FUGITIVE FORMS, WHICH INCLUDED A FRANTZ FANON SYMPOSIUM, ARTHUR JAJA FILM SCREENING, ABIGAIL DEVILLE LECTURE, NEW BLACK QUEER AUDIOVISUALS SYMPOSIUM, RINDON JOHNSON CONVERSATION WITH DIAMOND STINGLY, AND CHARLES GAINES PERFORMANCE ICA SPEAKS IS FOCUSED ON PROMOTING THE EXCHANGE OF ART AND IDEAS IT FEATURES ARTISTS WHOSE WORK IS IN THE MUSEUM'S PERMANENT COLLECTION, AND HIGHLIGHTS THE STRENGTH OF THE INSTITUTION'S HOLDINGS THROUGH ORIGINAL SCHOLARSHIP ON NOVEMBER 7, 2017, RENOWNED ARTIST AND SCULPTOR MARK HANDFORTH DISCUSSED RECENT EXHIBITIONS, INCLUDING A NEW SCULPTURE COMMISSIONED FOR ICA MIAMI'S PERMANENT NEW HOME ICA PERFORMS FOSTERS THE DEVELOPMENT OF NEW PERFORMANCE WORKS BY ENCOURAGING LEADING PERFORMANCE ARTISTS TO PRESENT NEW AND RECENT WORKS AT THE MUSEUM IN APRIL 2018 ICA MIAMI PRESENTED A MAJOR PERFORMANCE OF "TRISHA BROWN IN PLAIN SITE " TRISHA BROWN, A FOUNDING FIGURE OF THE AMERICAN MODERN DANCE MOVEMENT, AND HER RENOWNED CHOREOGRAPHY HAS INSPIRED GENERATIONS OF DANCE CREATORS INTO THE 21ST CENTURY THE FOUR PERFORMANCES HIGHLIGHTED A SELECTION OF SEMINAL DANCE PIECES BY BROWN, WHICH BUILT UPON THE SIGNIFICANCE OF ARTIST DONALD JUDD'S COLLABORATIONS AND SUPPORT OF HIS CONTEMPORARIES, ECHOING SOHO'S ARTISTIC COMMUNITY OF THE 1970S AND '80S</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THE TRUSTEES IRMA BRAMAN AND DEBI WESCHLER HAVE A FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A COMPLETE DRAFT OF FORM 990 WAS DISTRIBUTED TO, AND REVIEWED AND APPROVED BY, THE ORGANIZATION'S FINANCE COMMITTEE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ENFORCEMENT OF CONFLICTS OF INTEREST EACH DIRECTOR, PRINCIPAL, OFFICER, KEY EMPLOYEE AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELIGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY AND UNDERSTANDS THAT THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES IN ADDITION, THE ORGANIZATION CONDUCTS PERIODIC REVIEWS WHICH INCLUDE WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE AND WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENTS OR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INCREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION PROCESS FOR OFFICERS THE COMPENSATION PROCESS FOR KEY EMPLOYEES IS APPROVED BY THE ARTISTIC DIRECTOR IN CONSULTATION WITH THE DEPUTY DIRECTOR SALARY IS DETERMINED BASED ON THE ORGANIZATION'S BUDGET GUIDELINES AND REVIEW OF THE AMERICAN ALLIANCE OF MUSEUM SALARY SURVEY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENT DISCLOSURE EXPLANATION GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL	THE ORGANIZATION'S ARTISTIC DIRECTOR'S SALARY IS DETERMINED BY THE CO-CHAIR OF THE BOARD OF TRUSTEES IN CONSULTATION WITH THE EXECUTIVE COMMITTEE SALARY IS DETERMINED BASED ON THE ORGANIZATION'S BUDGET GUIDELINES AND REVIEW OF THE AMERICAN ALLIANCE OF MUSEUM SALARY SURVEY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	<p>ARTIST AWARDS AND FEES PROGRAM SERVICE EXPENSES 192,005 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 192,005 EQUIPMENT, STORAGE, REPAIR AND MAINTENANCE PROGRAM SERVICE EXPENSES 177,210 MANAGEMENT AND GENERAL EXPENSES 8,444 FUNDRAISING EXPENSES 2,615 TOTAL EXPENSES 188,269 PRINTING AND DELIVERY, INCLUDING CATALOGUES PROGRAM SERVICE EXPENSES 170,969 MANAGEMENT AND GENERAL EXPENSES 6,392 FUNDRAISING EXPENSES 7,497 TOTAL EXPENSES 184,858 UTILITIES PROGRAM SERVICE EXPENSES 149,460 MANAGEMENT AND GENERAL EXPENSES 5,782 FUNDRAISING EXPENSES 2,747 TOTAL EXPENSES 157,989 MEALS AND CONSUMABLES, INCLUDING EVENTS PROGRAM SERVICE EXPENSES 123,151 MANAGEMENT AND GENERAL EXPENSES 7,429 FUNDRAISING EXPENSES 6,312 TOTAL EXPENSES 136,892 SIGNAGE, INVITES AND COLLATERAL PROGRAM SERVICE EXPENSES 101,995 MANAGEMENT AND GENERAL EXPENSES 14,949 FUNDRAISING EXPENSES 760 TOTAL EXPENSES 117,704 BANK AND CREDIT CARD CHARGES PROGRAM SERVICE EXPENSES 21,865 MANAGEMENT AND GENERAL EXPENSES 18,195 FUNDRAISING EXPENSES 68,205 TOTAL EXPENSES 108,265 DUES AND LICENSES PROGRAM SERVICE EXPENSES 68,132 MANAGEMENT AND GENERAL EXPENSES 3,646 FUNDRAISING EXPENSES 26,196 TOTAL EXPENSES 97,974 ART STORAGE PROGRAM SERVICE EXPENSES 72,547 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 72,547 OTHER MISC EXPENSES PROGRAM SERVICE EXPENSES 45,036 MANAGEMENT AND GENERAL EXPENSES 11,445 FUNDRAISING EXPENSES 3,124 TOTAL EXPENSES 59,605 GIFT SHOP PURCHASES PROGRAM SERVICE EXPENSES 32,023 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 32,023</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX YEAR