



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated/Amended return
 Application pending

C Name of organization
THE PARRISH ART MUSEUM, INC.
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
279 MONTAUK HIGHWAY
 City, town, or post office, state, and ZIP code
WATER MILL, NY 11976

D Employer identification number
11-1782495

E Telephone number
631-283-2118

F Name and address of principal officer: **TERRIE SULTAN**
SAME AS C ABOVE

G Gross receipts \$ **10,426,331.**

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

H(c) Group exemption number ▶

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

J Website: ▶ **WWW.PARRISHART.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1897** **M State of legal domicile:** **NY**

Part I Summary

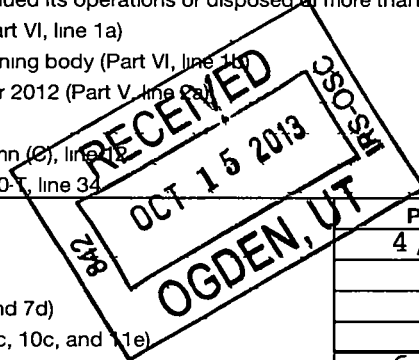
1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box 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	28
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	41
6 Total number of volunteers (estimate if necessary)	6	100
7a Total unrelated business revenue from Part VIII, column (C), line 7a	7a	0.
7b Net unrelated business taxable income from Form 990-E, line 34	7b	0.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	4,975,233.	4,704,714.
9 Program service revenue (Part VIII, line 2g)	519,254.	571,667.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	98,518.	1,830,918.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	799,579.	719,027.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,392,584.	7,826,326.
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)	1,785,646.	1,902,291.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,405,167.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,373,734.	1,757,663.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,159,380.	3,659,954.
19 Revenue less expenses. Subtract line 18 from line 12	3,233,204.	4,166,372.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	38,775,941.	47,207,557.
21 Total liabilities (Part X, line 26)	2,521,961.	6,868,800.
22 Net assets or fund balances. Subtract line 21 from line 20	36,253,980.	40,338,757.



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.

Signature of officer
TERRIE SULTAN, DIRECTOR
 Type or print name and title

Date
10/7/2013

Print/Type preparer's name
PATRICK YU, CPA, PARTNER

Preparer's signature
Patrick Yu

Date
10/1/13

Check if self-employed **PTIN**
P00675982

Firm's name ▶ **BAKER TILLY VIRCHOW KRAUSE, LLP**

Firm's address ▶ **125 BAYLIS ROAD**
MELVILLE, NY 11747-3823

Firm's EIN ▶ **39-0859910**

Phone no. (631) 752-7400

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

SCANNED BY 04/2013

617 18

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

X

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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 X

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 X

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 \$ 1,340,269. including grants of \$) (Revenue \$ 593,349.)

THE PARRISH ART MUSEUM, INC. IS LOCATED IN WATER MILL NEW YORK AND ACCREDITED BY THE AMERICAN ALLIANCE OF MUSEUMS. THE MUSEUM WAS FOUND IN 1897 BY SAMUEL LONGSTRETH PARRISH AND WAS CHARTERED BY THE UNIVERSITY OF THE STATE OF NEW YORK EDUCATION DEPARTMENT IN 1954. THE MUSEUM OPENED ITS NEW BUILDING DESIGNED BY HERZOG AND DE MEURON TO INTERNATIONAL ACCLAIM IN NOVEMBER 2012 ALLOWING IT TO EXHIBIT ITS PERMANENT ART COLLECTION SIDE-BY-SIDE WITH CHANGING EXHIBITIONS THROUGHOUT 12,000 SQUARE FEET OF GALLERY SPACE. IN 2012, THE MUSEUM PRESENTED EXHIBITIONS FEATURING THE WORK OF ESTABLISHED AND EMERGING ARTISTS INCLUDING MALCOLM MORLEY, ADAM BARTOS, HOPE SANDROW, AND MEL KENDRICK. THE MUSEUM ALSO EXHIBITED ART WORK PRODUCED BY THE REGION'S K-12 STUDENTS. THE INAUGURAL INSTALLATION OF THE PERMANENT COLLECTION

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,340,269.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
	28		
b	Enter the number of voting members included in line 1a, above, who are independent		
	28		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NY**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **JANET FERNANDEZ, PARRISH ART MUSEUM, INC. - 631-283-2118**
279 MONTAUK HIGHWAY, WATER MILL, NY 11976

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CARLO BRONZINI VENDER CO-CHAIR	2.00 0.00	X		X				0.	0.	0.
(2) DOUGLAS POLLEY CO-CHAIR	2.00 0.00	X		X				0.	0.	0.
(3) DAVID GRANVILLE-SMITH VICE PRESIDENT	2.00 0.00	X		X				0.	0.	0.
(4) H. PETER HAVELES VICE PRESIDENT	2.00 0.00	X		X				0.	0.	0.
(5) ALEXANDRA STANTON VICE PRESIDENT	2.00 0.00	X		X				0.	0.	0.
(6) NORMAN L. PECK TREASURER	2.00 0.00	X		X				0.	0.	0.
(7) JAY B. GOLDBERG ASSISTANT TREASURER	2.00 0.00	X		X				0.	0.	0.
(8) DOROTHY LICHTENSTEIN SECRETARY	2.00 0.00	X		X				0.	0.	0.
(9) IRA DRUKIER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(10) ROBERT KISSANE BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(11) FREDERIC M. SEEGAL BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(12) DAVID M. DUBIN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(13) MILDRED C. BRINN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(14) ALLISON MORROW BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(15) WILLIAM H. WRIGHT II BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(16) DONALD P. SULLIVAN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(17) JEAN-PIERRE LEHMANN BOARD MEMBER	2.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PHILIP H. ISLES BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(19) MICHELE PESNER BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(20) ADAM SENDER BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(21) BARBARA J. SLIFKA BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(22) MARCIA DUNN SOBEL BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(23) DEBORAH F. BANCROFT BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(24) NANCY HARDY BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(25) ETTA PROIO BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
(26) DAVID K. WASSONG BOARD MEMBER	2.00 0.00	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							619,599.	0.	22,142.	
d Total (add lines 1b and 1c)							619,599.	0.	22,142.	

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 **2**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BEN KRUPINSKI BUILDER & ASSOCIATES 99 NEWTOWN LANE, EAST HAMPTON, NY 11937	BUILDER	10,734,413.
DOUGLAS MOYER ARCHITECT PC 4824 NOYAC ROAD, SAG HARBOR, NY 11963	ARCHITECTURAL SVCS	216,000.
PROTECTIVE INVESTIGATION SERVICES 453 7 PONDS TOWD RD, WATER MILL, NY 11976	SECURITY SERVICES	107,493.
PATTERSON, BELKNAP, WEBB & TYLER LLP, 1133 AVENUE OF THE AMERICAS, NEW YORK, NY 10036	LEGAL SERVICES	103,058.
FITZ & CO, 423 WEST 14TH STREET, SUITE 429-2F, NEW YORK, NY 10014	PUBLIC RELATIONS	102,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	21,682.				
	c Fundraising events	1c	81,494.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	411,411.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,190,127.				
	g Noncash contributions included in lines 1a-1f \$		1,378,691.				
	h Total. Add lines 1a-1f		4,704,714.				
Program Service Revenue	2 a MEMBERSHIP	Business Code 711300	412,105.	412,105.			
	b TUITION FEES	711130	104,186.	104,186.			
	c ADMISSIONS	711130	55,376.	55,376.			
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		571,667.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		55,806.			55,806.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		1,085,020.	2,862,815.				
		b Less: cost or other basis and sales expenses		1,062,160.	1,110,563.		
		c Gain or (loss)		22,860.	1,752,252.		
	d Net gain or (loss)			1,775,112.		1,775,112.	
	8 a Gross income from fundraising events (not including \$ 81,494. of contributions reported on line 1c). See Part IV, line 18	a		1,042,453.			
		b Less: direct expenses		378,686.			
c Net income or (loss) from fundraising events			663,767.			663,767.	
9 a Gross income from gaming activities See Part IV, line 19	a		4,290.				
	b Less: direct expenses		2,145.				
	c Net income or (loss) from gaming activities		2,145.			2,145.	
10 a Gross sales of inventory, less returns and allowances	a		99,566.				
	b Less: cost of goods sold		46,451.				
	c Net income or (loss) from sales of inventory		53,115.	53,115.			
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			7,826,326.	624,782.	0.	2,496,830.	

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 to any question in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII</i>				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	641,740.	47,832.	118,076.	475,832.
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	959,895.	493,392.	267,584.	198,919.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	20,411.	7,922.	9,721.	2,768.
9 Other employee benefits	120,918.	33,282.	54,649.	32,987.
10 Payroll taxes	159,327.	35,108.	75,529.	48,690.
11 Fees for services (non-employees):				
a Management				
b Legal	517.		517.	
c Accounting	104,436.		104,436.	
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 Sch O.)	437,823.	205,059.	70,206.	162,558.
12 Advertising and promotion	53,356.	46,177.		7,179.
13 Office expenses	239,475.	147,283.	36,050.	56,142.
14 Information technology				
15 Royalties				
16 Occupancy	241,728.	207,076.	27,068.	7,584.
17 Travel	79,096.	18,268.	2,267.	58,561.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	48,535.	2,382.	24,197.	21,956.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,045.	31,640.	5,741.	1,664.
23 Insurance	83,608.	18,298.	65,310.	
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 GIFTS IN KIND	296,369.			296,369.
b EQUIPMENT RENTAL	50,721.	23,963.	26,758.	
c RECEPTIONS	34,985.	12,657.	1,930.	20,398.
d SERVICE CONTRACTS	27,578.	4,373.	14,460.	8,745.
e All other expenses	20,391.	5,557.	10,019.	4,815.
25 Total functional expenses. Add lines 1 through 24e	3,659,954.	1,340,269.	914,518.	1,405,167.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	239,227.	1	255,095.
	2	Savings and temporary cash investments	4,674,702.	2	4,662,073.
	3	Pledges and grants receivable, net	9,688,399.	3	5,011,204.
	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	7,000.	5	7,000.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	40,037.	8	47,305.
	9	Prepaid expenses and deferred charges	188,661.	9	112,895.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 38,162,992.		
	b	Less accumulated depreciation	10b 1,278,080.		
			23,707,247.	10c	36,884,912.
	11	Investments - publicly traded securities	109,333.	11	105,738.
	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	121,335.	15	121,335.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	38,775,941.	16	47,207,557.	
Liabilities	17	Accounts payable and accrued expenses	1,757,871.	17	1,686,715.
	18	Grants payable		18	
	19	Deferred revenue	61,525.	19	182,085.
	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	539,310.	23	5,000,000.
	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	163,255.	25	0.
	26	Total liabilities. Add lines 17 through 25	2,521,961.	26	6,868,800.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	19,360,704.	27	35,478,086.
	28	Temporarily restricted net assets	13,148,047.	28	540,442.
	29	Permanently restricted net assets	3,745,229.	29	4,320,229.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	36,253,980.	33	40,338,757.	
34	Total liabilities and net assets/fund balances	38,775,941.	34	47,207,557.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	7,826,326.
2	Total expenses (must equal Part IX, column (A), line 25)	3,659,954.
3	Revenue less expenses Subtract line 2 from line 1	4,166,372.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	36,253,980.
5	Net unrealized gains (losses) on investments	<1,595.>
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O)	<80,000.>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	40,338,757.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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.
- 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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization **THE PARRISH ART MUSEUM, INC.** Employer identification number **11-1782495**

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	6979505.	1469370.	5615604.	4944310.	4704714.	23713503.
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	6979505.	1469370.	5615604.	4944310.	4704714.	23713503.
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)						2296626.
6 Public support. Subtract line 5 from line 4						21416877.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	6979505.	1469370.	5615604.	4944310.	4704714.	23713503.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	281,873.	123,613.	100,639.	98,518.	55,806.	660,449.
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 IV.)						
11 Total support. Add lines 7 through 10						24373952.
12 Gross receipts from related activities, etc. (see instructions)					12	2,712,689.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	87.87	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	91.61	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2011. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>			

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 IV)						
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 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2012.** 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 - 2011.** 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 ►

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization **THE PARRISH ART MUSEUM, INC.** Employer identification number **11-1782495**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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" to 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 Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, 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" to 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) Revenues included in 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 Revenues included in 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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

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

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? 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" to 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	3,105,243.	3,109,440.	3,123,696.	3,047,579.	2,959,532.
b Contributions	175,000.		20,000.	121,000.	220,000.
c Net investment earnings, gains, and losses	31,245.	38,080.	40,821.	13,842.	10,093.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,885.	42,212.	74,987.	58,500.	140,791.
f Administrative expenses	65.	65.	90.	225.	1,255.
g End of year balance	3,308,538.	3,105,243.	3,109,440.	3,123,696.	3,047,579.

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

- a Board designated or quasi-endowment 2.00 %
- b Permanent endowment 97.00 %
- c Temporarily restricted endowment 1.00 %

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

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

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

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

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

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

Part VI Land, Buildings, and Equipment. 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		3,870,424.		3,870,424.
b Buildings		32,826,324.		32,826,324.
c Leasehold improvements		790,739.	651,242.	139,497.
d Equipment		675,505.	626,838.	48,667.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 36,884,912.

Part VII Investments - Other Securities. 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)		
(I)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶	

2. FIN 48 (ASC 740) Footnote. 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			
1	Total revenue, gains, and other support per audited financial statements		7,949,121.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a <1,595.>	
b	Donated services and use of facilities	2b 124,390.	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	122,795.
3	Subtract line 2e from line 1	3	7,826,326.
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	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,826,326.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements		3,784,344.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a 124,390.	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	124,390.
3	Subtract line 2e from line 1	3	3,659,954.
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	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,659,954.

Part XIII Supplemental Information

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

PART III, LINE 1A: IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, ART OBJECTS PURCHASED OR DONATED ARE NOT INCLUDED AS ASSETS ON THE BALANCE SHEET. THE VALUE OF OBJECTS ACQUIRED BY GIFT IS NOT REPORTED AS CONTRIBUTIONS AT THE TIME OF THE GIFT. WHEN WORKS OF ART ARE EITHER PURCHASED OR SOLD, THE PROCEEDS OR COSTS ARE REFLECTED AS AN INCREASE OR DECREASE IN UNRESTRICTED NET ASSETS - BOARD DESIGNATED ACCESSIONS IN THE STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS. PROCEEDS FROM THE SALE OF WORKS OF ART, AND ANY INVESTMENT INCOME DERIVED FROM THESE PROCEEDS,

Part XIII Supplemental Information (continued)

ARE DESIGNATED BY THE BOARD OF TRUSTEES AND ARE TO BE USED SOLELY FOR THE PURCHASE OF ARTWORK. NEARLY TWO THOUSAND SIX HUNDRED OBJECTS ARE IN THE CARE OF THE MUSEUM AND ARE HOUSED IN THE MUSEUM'S CLIMATE CONTROLLED COLLECTION STORAGE VAULT. THE COLLECTIONS ARE CATALOGUED AND MAINTAINED ACCORDING TO PROFESSIONAL STANDARDS ESTABLISHED AND MONITORED BY THE AMERICAN ASSOCIATION OF MUSEUMS. THE RESPONSIBLE MANAGEMENT OF THE COLLECTIONS IS GOVERNED BY A POLICY APPROVED BY THE COLLECTIONS COMMITTEE AND THE BOARD OF TRUSTEES WHICH ARTICULATES THE FOCUS OF THE COLLECTIONS, THEIR CARE AND HANDLING, INSURANCE, AND CONSERVATION MAINTENANCE. THE PARRISH ART MUSEUM MAINTAINS A FINE ARTS "WALL TO WALL" INSURANCE POLICY ON ITS COLLECTION THAT COVERS THE COLLECTION WHILE AT THE MUSEUM, IN TRANSIT, OR ON EXHIBITION ANYWHERE IN THE WORLD.

PART III, LINE 4: THE MISSION OF THE PARRISH ART MUSEUM IS TO COLLECT WORKS OF ART, TO PRESERVE AND CARE FOR THESE COLLECTIONS, TO DISPLAY THEM IN AN APPROPRIATE ENVIRONMENT, TO ENCOURAGE RESEARCH AND STUDY IN RELATION TO THEM, AND TO EDUCATE THE PUBLIC. ACCORDING TO THE ABSOLUTE CHARTER OF THE MUSEUM, OUR PURPOSE IS "TO PROTECT AND EXHIBIT THE ART COLLECTION PRESENTLY LOCATED IN THE PARRISH ART MUSEUM OR UPON ITS GROUNDS; TO COLLECT OBJECTS D'ART; AND TO MAINTAIN A READING ROOM WITH A LIBRARY OF ART BOOKS AND OTHER MATERIAL RELATED TO THE MUSEUM PROGRAM. UNDER THE MUSEUM'S CARE AND CUSTODIANSHIP IS A COLLECTION OF MORE THAN 2,000 OBJECTS. IN ADDITION, THERE IS A RESEARCH LIBRARY, ARCHIVAL COLLECTIONS, AND MUSEUM ARCHIVES. THE CORE HOLDINGS CONSIST OF 19TH AND 20TH-CENTURY AMERICAN ART--INCLUDING PAINTINGS, SCULPTURE, PRINTS, DRAWINGS, AND PHOTOGRAPHS. OLD MASTER PAINTINGS AND REPRODUCTIONS OF ANCIENT AND RENAISSANCE SCULPTURE BELONGS TO THE VILLAGE OF SOUTHAMPTON BUT IS IN THE MUSEUM'S CARE. THE MUSEUM HAS DEVELOPED A COMPREHENSIVE EDUCATIONAL

Part XIII Supplemental Information (continued)

PROGRAM THAT USES ITS COLLECTIONS AND EXHIBITIONS TO EMPHASIZE THE HISTORY OF AMERICAN ART, THE REGION'S IMPORTANT CONTRIBUTIONS TO THIS HISTORY, AND THE SOCIAL AND INTELLECTUAL ASPECTS AND RELATIONS OF ART.

PART V, LINE 4: THE ROBERT LEHMAN CURATORIAL FUND- THIS FUND WAS ENDOWED AND PROVIDED BY THE ROBERT LEHMAN FOUNDATION, INC. FOR THE POSITION TO BE KNOWN AS THE ROBERT LEHMAN CURATORSHIP, WITH THE INCOME GENERATED TO BE USED EXCLUSIVELY FOR DIRECT OPERATING EXPENSES AND ARTISTIC ACTIVITIES APPRECIATION, AS DEFINED IN THE AGREEMENT.

THE DRUCKENMILLER FUND FOR EDUCATION - THIS FUND WAS ENDOWED AND PROVIDED BY STANLEY AND FIONA DRUCKENMILLER, WITH INCOME TO BE USED IN AN EDUCATIONAL PLANNING PROGRAM FOR MUSEUM/SCHOOL COLLABORATIONS.

THE WERNER & MAREN OTTO ENDOWMENT FUND FOR THE STUDY OF THE ART OF EASTERN LONG ISLAND - THIS FUND WAS ENDOWED AND PROVIDED BY DR. AND MRS. WERNER OTTO, WITH THE INCOME GENERATED TO BE RESTRICTED AND USED FOR THE STUDY OF THE ART OF EASTERN LONG ISLAND, AS DEFINED IN THE DONOR AGREEMENT.

THE "LEWIS B. AND DOROTHY CULLMAN CHIEF CURATOR ART AND EDUCATION" POSITION - THIS FUND WAS ENDOWED AND PROVIDED BY THE LEWIS B. AND DOROTHY CULLMAN FOUNDATION TO FUND EXPENSES ASSOCIATED WITH THE POSITION OF CHIEF CURATOR (NAMED "THE LEWIS B. AND DOROTHY CULLMAN CHIEF CURATOR ART AND EDUCATION" POSITION).

THE OPERATING ENDOWMENT FUND - THIS FUND WAS ENDOWED AND PROVIDED BY VARIOUS DONORS, WITH THE INCOME TO BE USED FOR UNRESTRICTED PURPOSES FOR ONGOING OPERATIONS.

Part XIII Supplemental Information (continued)

PART X, LINE 2: MANAGEMENT EVALUATED THE MUSEUM'S TAX POSITIONS AND CONCLUDED THAT THE MUSEUM HAD TAKEN NO UNCERTAIN TAX PROVISIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF FASB ASC NO. 740. WITH FEW EXCEPTIONS, THE MUSEUM IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR THE YEARS BEFORE 2009, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		MIDSUMMER PARTY	PARRISH PRESENTS	3		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	639,590.	173,454.	310,903.	1,123,947.
	2	Less: Contributions	65,900.	3,300.	12,294.	81,494.
	3	Gross income (line 1 minus line 2)	573,690.	170,154.	298,609.	1,042,453.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	237,788.	40,468.	100,430.	378,686.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(378,686)
	11	Net income summary. Combine line 3, column (d), and line 10				663,767.

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate 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 operate 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 operated in:

13a		%
13b		%

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

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.
- c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer Employee Independent contractor

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

Part IV Supplemental Information. Complete this part to 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 complete this part to provide any additional information (see instructions).

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

THE PARRISH ART MUSEUM, INC.

Employer identification number

11-1782495

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2012

Part III Supplemental Information

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

PART I, LINE 1A: DISCRETIONARY SPENDING ACCOUNT-TERRIE SULTAN, DIRECTOR, IS THE ONLY EMPLOYEE WHO RECEIVES A DISCRETIONARY SPENDING ACCOUNT, AND IT IS NOT TAXABLE. HOUSING-TERRIE SULTAN, DIRECTOR, IS THE ONLY EMPLOYEE WHO RECEIVES A HOUSING ALLOWANCE, AND IT IS CONSIDERED TAXABLE COMPENSATION.

PART I, LINE 3: THE MUSEUM DIRECTOR'S CONTRACT AND COMPENSATION PACKAGE WAS BASED ON COMPARABLE INDUSTRY DATA FOR MUSEUMS WITH SIMILAR OPERATING BUDGETS, RESPONSIBILITIES, AND GEOGRAPHIC LOCATION. AN INDEPENDENT EMPLOYMENT AGENCY WAS USED TO FACILITATE THE SEARCH. THE FINAL CONTRACT NEGOTIATIONS TOOK PLACE BETWEEN THE MUSEUM'S TREASURER, CHAIRMAN OF THE BOARD, AND THE CANDIDATE. OTHER KEY EMPLOYEES ARE HANDELED IN A SIMILAR FASHION.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open To Public
Inspection

Name of the organization **THE PARRISH ART MUSEUM, INC.** Employer identification number **11-1782495**

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
			Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
TERRIE SULTAN				X	7,000.	7,000.		X	X		X	
(SECURITY DEPOSIT PAID ON MS. SULTAN'S BEHALF FOR MUSEUM PROVIDED HOUSING)												
Total						▶ \$	7,000.					

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization **THE PARRISH ART MUSEUM, INC.** Employer identification number **11-1782495**

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	132		
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	4	1,082,322.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>PRODUCT DONAT</u>)	X	20	296,369.	FAIR MARKET VALUE
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** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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?		X
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012)

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

SCHEDULE M, LINE 32B: THE ORGANIZATION USES BROKERS TO SELL STOCKS
GIFTED TO THE ORGANIZATION.

SCHEDULE M, LINE 33: IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY
MUSEUMS, ART OBJECTS PURCHASED OR DONATED ARE NOT INCLUDED AS ASSETS ON
THE STATEMENTS OF FINANCIAL POSITION. THE VALUE OF OBJECTS ACQUIRED BY
GIFTS IS NOT REPORTED AS CONTRIBUTIONS AT THE TIME OF THE GIFT. WHEN
WORKS OF ART ARE EITHER PURCHASED OR SOLD, THE PROCEEDS OR COSTS ARE
REFLECTED AS AN INCREASE OR DECREASE IN UNRESTRICTED NET ASSETS - BOARD
DESIGNATED ACCESSIONS IN THE STATEMENTS OF ACTIVITIES AND CHANGES IN
NET ASSETS. PROCEEDS FROM THE SALE OF WORKS OF ART, AND ANY INVESTMENT
INCOME DERIVED FROM THESE PROCEEDS, ARE DESIGNATED BY THE BOARD OF
TRUSTEES AND ARE TO BE USED SOLELY FOR THE PURCHASE OF ARTWORK. NEARLY
TWO THOUSAND SIX HUNDRED OBJECTS ARE IN THE CARE OF THE MUSEUM AND ARE
HOUSED IN THE MUSEUM'S CLIMATE CONTROLLED COLLECTION STORAGE VAULT. THE
COLLECTIONS ARE CATALOGUED AND MAINTAINED ACCORDING TO PROFESSIONAL
STANDARDS ESTABLISHED AND MONITORED BY THE AMERICAN ASSOCIATION OF
MUSEUMS. THE RESPONSIBLE MANAGEMENT OF THE COLLECTIONS IS GOVERNED BY A
POLICY APPROVED BY THE COLLECTIONS COMMITTEE AND THE BOARD OF TRUSTEES
WHICH ARTICULATES THE FOCUS OF THE COLLECTIONS, THEIR CARE AND
HANDLING, INSURANCE, AND CONSERVATION MAINTENANCE. THE PARRISH ART
MUSEUM MAINTAINS A FINE ARTS "WALL TO WALL" INSURANCE POLICY ON ITS
COLLECTIONS THAT COVERS THE COLLECTIONS WHILE AT THE MUSEUM, IN
TRANSIT, OR ON EXHIBITION ANYWHERE IN THE WORLD.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

THE PARRISH ART MUSEUM, INC.

Employer identification number

11-1782495

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MUSEUM ENCOURAGES AN APPRECIATION OF ART THROUGH EXHIBITIONS AND
EDUCATIONAL PROGRAMS, & PROMOTES AN UNDERSTANDING AND APPRECIATION OF
ARTWORK ON VIEW TO THE GENERAL PUBLIC.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE PARRISH ART MUSEUM IS DEVOTED TO THE COLLECTION, PRESERVATION,
INTERPRETATION AND DISSEMINATION OF AMERICAN ART WITH PARTICULAR FOCUS
ON THE ART OF THE EAST END OF LONG ISLAND. THE MUSEUM IS COMMITTED TO
BRINGING ART AND PEOPLE TOGETHER IN ITS EDUCATION AND OUTREACH
PROGRAMS. WHILE THE MUSEUM'S PROGRAMS, ITS EXHIBITIONS, COLLECTIONS,
EDUCATIONAL ACTIVITIES AND PUBLICATIONS ARE RELATED SPECIFICALLY TO
AMERICAN CULTURE, PAST AND PRESENT, EACH IS RELATED BROADLY TO OTHER
CULTURES, TO ARTIFACTS, TO ALL VISUAL FORMS AND TO AESTHETIC AND
HUMANIST CONCERNS. THROUGH ITS PROGRAMS, THE MUSEUM PURSUES INNOVATIVE
AND EXPERIMENTAL APPROACHES, AND STIMULATES DIALOGUE AND INQUIRY. IT
ALSO ENCOURAGES SCHOLARSHIP OF ITS PROFESSIONAL STAFF AND INITIATES
COLLABORATION WITH RELATED INSTITUTIONS. THE PARRISH SEEKS TO BE A
VITAL CULTURAL RESOURCE FOR THE REGION AND NEIGHBORING COMMUNITIES, AND
TO SERVE BEYOND THE REGION WITH ITS TRAVELING EXHIBITIONS AND
PUBLICATIONS.

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

FEATURED THE WORK OF AMERICAN MASTERS SUCH AS WILLIAM MERRITT CHASE,
ESTEBAN VICENTE, FAIRFIELD PORTER, DAN FLAVIN, AND LOUISE NEVELSON. IN
COMPLEMENT TO THESE EXHIBITIONS, THE MUSEUM OFFERED FREE PUBLIC TOURS,

Name of the organization

THE PARRISH ART MUSEUM, INC.

Employer identification number

11-1782495

LECTURES, AND WORKSHOPS FOR CHILDREN AND FAMILIES TO INCREASE
 UNDERSTANDING AND APPRECIATION OF BOTH WORKS ART AND THE CREATIVE
 PROCESS.

FORM 990, PART VI, SECTION A, LINE 2: FAMILY RELATIONSHIP - THERE IS ONE
 FATHER/SON RELATIONSHIP ON OUR BOARD OF TRUSTEES BETWEEN DAN K. WASSONG AND
 DAVID K. WASSONG.

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO ITS FILING, THE 990 IS
 REVIEWED AND APPROVED BY THE CO-CHAIR'S OF THE BOARD, AND THE CHAIRMAN OF
 THE FINANCE COMMITTEE WHO SERVES AS TREASURER. THE 990 IS THEN DISTRIBUTED
 AND REVIEWED BY THE FULL BOARD OF TRUSTEES BEFORE BEING FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE MUSEUM'S BOARD OF TRUSTEES,
 STAFF, AND VOLUNTEERS ARE COVERED BY THE CODE OF ETHICS. A CONFLICT MAY
 ARISE WHEN PERSONAL INTERESTS INTERFERE WITH THE POLICIES, OPERATIONS, AND
 INTERESTS OF THE MUSEUM. DEALINGS BETWEEN THOSE COVERED AND IMMEDIATE
 FAMILY MEMBERS SHOULD ALSO BE AVOIDED. DISCLOSURE STATEMENTS SHOULD BE
 SUBMITTED WHEN NECESSARY. MANAGEMENT CONDUCTS ONGOING REVIEWS OF ANY ISSUES
 THAT COULD BE A POTENTIAL CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE MUSEUM DIRECTOR'S CONTRACT AND
 COMPENSATION PACKAGE WAS BASED ON COMPARABLE INDUSTRY DATA FOR MUSEUMS WITH
 SIMILAR OPERATING BUDGETS, RESPONSIBILITIES, AND GEOGRAPHIC LOCATION. AN
 INDEPENDENT EMPLOYMENT AGENCY WAS USED TO FACILITATE THE SEARCH. THE FINAL
 CONTRACT NEGOTIATIONS TOOK PLACE BETWEEN THE MUSEUM'S TREASURER, CHAIRMAN
 OF THE BOARD, AND THE CANDIDATE. OTHER KEY EMPLOYEES ARE HANDELED IN A
 SIMILAR FASHION.

Name of the organization

THE PARRISH ART MUSEUM, INC.

Employer identification number

11-1782495

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

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

ACCESSIONS OF ART -80,000.