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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

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

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE PARRISH ART MUSEUM, INC.		D Employer identification number 11-1782495
	Doing Business As		E Telephone number 631-283-2118
	Number and street (or P O box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 6,246,687.
	279 MONTAUK HIGHWAY		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code WATER MILL, NY 11976		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: TERRIE SULTAN SAME AS C ABOVE		H(c) Group exemption number ▶ I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ▶ WWW.PARRISHART.ORG	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation 1897 M State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	27
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	46
	6	Total number of volunteers (estimate if necessary)	6	100
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 4,704,714.	Current Year 3,488,500.
	9	Program service revenue (Part VIII, line 2g)	571,667.	1,149,161.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,830,918.	<127,782.>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	719,027.	1,051,559.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,826,326.	5,561,438.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), line 1)	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)	1,902,291.	2,270,632.
16a		Professional fundraising fees (Part IX, column (A), line 11)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,120,813.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f, 11g, 11h, 11i, 11j, 11k, 11l, 11m, 11n, 11o, 11p, 11q, 11r, 11s, 11t, 11u, 11v, 11w, 11x, 11y, 11z)	1,757,663.	3,356,834.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,659,954.	5,627,466.	
19	Revenue less expenses. Subtract line 18 from line 12	4,166,372.	<66,028.>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 47,207,557.	End of Year 45,582,213.
	21	Total liabilities (Part X, line 26)	6,868,800.	5,317,656.
	22	Net assets or fund balances. Subtract line 21 from line 20	40,338,757.	40,264,557.

Part II Signature Block

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

Sign Here	Signature of officer	Date		
	TERRIE SULTAN, DIRECTOR	<i>Terrie Sultan</i>	9/18/14	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	PATRICK YU, CPA, PARTNER	<i>Patrick Yu</i>	9/18/14	P00675982
	Firm's name	Firm's EIN		
	BAKER TILLY VIRCHOW KRAUSE, LLP	39-0859910		
	Firm's address	Phone no		
	125 BAYLIS ROAD MELVILLE, NY 11747-3823	(631) 752-7400		

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

SCANNED OCT 15 2014

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Part III Statement of Program Service Accomplishments

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

X

1 Briefly describe the organization's mission.

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 \$ 2,889,257. including grants of \$) (Revenue \$ 1,149,161.)

SEE SCHEDULE O

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 2,889,257.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

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

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.		
	27		
1b	Enter the number of voting members included in line 1a, above, who are independent.		
	27		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	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
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official	X	
15b	b Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 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 or note to any line in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) FREDERIC M. SEEGAL CHAIR	2.00 0.00	X		X				0.	0.	0.
(2) H. PETER HAVELES PRESIDENT	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) ALEXANDRA STANTON VICE PRESIDENT	2.00 0.00	X		X				0.	0.	0.
(5) NORMAN L. PECK TREASURER	2.00 0.00	X		X				0.	0.	0.
(6) JAY B. GOLDBERG ASSISTANT TREASURER	2.00 0.00	X		X				0.	0.	0.
(7) DOROTHY LICHTENSTEIN SECRETARY	2.00 0.00	X		X				0.	0.	0.
(8) IRA DRUCKIER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(9) ROBERT KISSANE BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(10) CHAD A. LEAT BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(11) DAVID M. DUBIN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(12) MILDRED C. BRINN BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(13) ALLISON MORROW BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(14) WILLIAM H. WRIGHT II BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(15) CARLO BRONZINI VENDER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(16) PHILIP H. ISLES BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(17) MICHELE PESNER 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) BARBARA J. SLIFKA BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(19) MARCIA DUNN SOBEL BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(20) DEBORAH F. BANCROFT BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(21) NANCY HARDY BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(22) ETTA PROIO BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(23) DAVID K. WASSONG BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(24) DAN K. WASSONG BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(25) ADAM SENDER BOARD MEMBER	2.00 0.00	X						0.	0.	0.
(26) TIMOTHY G. DAVIS 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								537,162.	0.	19,387.
d Total (add lines 1b and 1c)								537,162.	0.	19,387.

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	2,106,786.
FITZ & CO, 423 WEST 14TH STREET, SUITE 429-2F, NEW YORK, NY 10014	PUBLIC RELATIONS	124,114.
MARSHALL FINE ARTS, LTD, 135 EAST INDUSTRY COURT, DEER PARK, NY 11729	FINE ART SERVICES	122,437.
OLIVIER CHENG CATERING & EVENTS 12-16 VESTRY STREET, NEW YORK, NY 10013	CATERING SERVICES	119,395.

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 **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	8,070.				
	c Fundraising events	1c	273,450.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	473,930.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,733,050.				
	g Noncash contributions included in lines 1a-1f \$		113,107.				
	h Total. Add lines 1a-1f		3,488,500.				
	Program Service Revenue	2 a MEMBERSHIP	Business Code 711300	496,300.	496,300.		
b TUITION FEES		711130	464,384.	464,384.			
c ADMISSIONS		711130	188,477.	188,477.			
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			1,149,161.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		41,910.			41,910.	
	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					
		b Less cost or other basis and sales expenses			169,692.		
		c Gain or (loss)			<169,692.>		<169,692.>
	d Net gain or (loss)			<169,692.>		<169,692.>	
	8 a Gross income from fundraising events (not including \$ 273,450. of contributions reported on line 1c). See Part IV, line 18	a		1,071,976.			
		b Less: direct expenses		390,768.			
c Net income or (loss) from fundraising events			681,208.			681,208.	
9 a Gross income from gaming activities. See Part IV, line 19	a		1,450.				
	b Less: direct expenses		0.				
	c Net income or (loss) from gaming activities		1,450.			1,450.	
10 a Gross sales of inventory, less returns and allowances	a		259,390.				
	b Less: cost of goods sold		124,789.				
	c Net income or (loss) from sales of inventory		134,601.	134,601.			
Miscellaneous Revenue		Business Code					
11 a OTHER REVENUE		900099	234,300.	234,300.			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			234,300.			
12 Total revenue. See instructions			5,561,438.	1,518,062.	0.	554,876.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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	556,548.	163,253.	259,850.	133,445.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,394,059.	966,679.	58,059.	369,321.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	23,290.	14,962.	1,516.	6,812.
9 Other employee benefits	135,854.	84,197.	11,451.	40,206.
10 Payroll taxes	160,881.	103,670.	16,702.	40,509.
11 Fees for services (non-employees):				
a Management				
b Legal	8,521.		8,521.	
c Accounting	40,000.		40,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	588,425.	318,529.	151,473.	118,423.
12 Advertising and promotion	46,448.	41,275.		5,173.
13 Office expenses	549,967.	473,535.	22,706.	53,726.
14 Information technology				
15 Royalties				
16 Occupancy	392,261.	313,763.	53,377.	25,121.
17 Travel	42,603.	25,387.	4,365.	12,851.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,761.		3,761.	
20 Interest	288,836.	158,780.	55,559.	74,497.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	789,104.	6,822.	781,119.	1,163.
23 Insurance	174,637.	112,362.	27,677.	34,598.
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 FDRSNG EVENT PRODUCTS	113,107.			113,107.
b EQUIPMENT RENTAL	75,522.	24,702.	45,211.	5,609.
c SERVICE CONTRACTS	68,726.	4,415.	61,851.	2,460.
d RECEPTIONS	46,330.	38,730.	2,040.	5,560.
e All other expenses	128,586.	38,196.	12,458.	77,932.
25 Total functional expenses . Add lines 1 through 24e	5,627,466.	2,889,257.	1,617,696.	1,120,513.
26 Joint costs . Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	255,095.	1	55,680.
	2 Savings and temporary cash investments	4,662,073.	2	3,849,464.
	3 Pledges and grants receivable, net	5,011,204.	3	3,305,037.
	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	47,305.	8	66,462.
	9 Prepaid expenses and deferred charges	112,895.	9	169,034.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 38,797,583.		
	b Less accumulated depreciation	10b 884,269.	36,884,912.	10c 37,913,314.
	11 Investments - publicly traded securities	105,738.	11	101,965.
	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	114,257.
16 Total assets. Add lines 1 through 15 (must equal line 34)	47,207,557.	16	45,582,213.	
Liabilities	17 Accounts payable and accrued expenses	1,686,715.	17	517,827.
	18 Grants payable		18	
	19 Deferred revenue	182,085.	19	124,022.
	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	5,000,000.	23	4,675,807.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	6,868,800.	26	5,317,656.
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	35,478,086.	27	35,877,579.
	28 Temporarily restricted net assets	540,442.	28	27,160.
	29 Permanently restricted net assets	4,320,229.	29	4,359,818.
	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	40,338,757.	33	40,264,557.
	34 Total liabilities and net assets/fund balances	47,207,557.	34	45,582,213.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,561,438.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,627,466.
3	Revenue less expenses Subtract line 2 from line 1	3	<66,028.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	40,338,757.
5	Net unrealized gains (losses) on investments	5	<3,672.>
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<4,500.>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	40,264,557.

Part XII Financial Statements and Reporting

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

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

Form 990 (2013)

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1469370.	5615604.	4944310.	4704714.	3488500.	20222498.
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	1469370.	5615604.	4944310.	4704714.	3488500.	20222498.
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)						3587490.
6 Public support. Subtract line 5 from line 4						16635008.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	1469370.	5615604.	4944310.	4704714.	3488500.	20222498.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	123,613.	100,639.	98,518.	55,806.	41,910.	420,486.
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.)					234,300.	234,300.
11 Total support. Add lines 7 through 10						20877284.
12 Gross receipts from related activities, etc. (see instructions)					12	3,624,200.
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 2013 (line 6, column (f) divided by line 11, column (f))	14	79.68 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	87.87 %
16a 33 1/3% support test - 2013. 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 - 2012. 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 - 2013. 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 - 2012. 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2013.** 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 - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12
Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER REVENUE

2013 AMOUNT: \$ 234,300.

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.

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

OMB No 1545-0047

2013

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

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	3,308,538.	3,105,243.	3,109,440.	3,123,696.	3,047,579.
b Contributions	160,000.	175,000.		20,000.	121,000.
c Net investment earnings, gains, and losses	25,718.	31,245.	38,080.	40,821.	13,842.
d Grants or scholarships					
e Other expenditures for facilities and programs	54,246.	2,885.	42,212.	74,987.	58,500.
f Administrative expenses	65.	65.	65.	90.	225.
g End of year balance	3,439,945.	3,308,538.	3,105,243.	3,109,440.	3,123,696.

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 98.00 %
- c Temporarily restricted endowment .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.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		3,870,424.		3,870,424.
b Buildings		34,770,771.	771,451.	33,999,320.
c Leasehold improvements				
d Equipment		156,388.	112,818.	43,570.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 37,913,314.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	5,694,079.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a	<3,672.>	
b	Donated services and use of facilities	2b	136,313.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	132,641.	
3	Subtract line 2e from line 1	3	5,561,438.	
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	5,561,438.	

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

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

1	Total expenses and losses per audited financial statements		1	5,763,779.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	136,313.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	136,313.	
3	Subtract line 2e from line 1	3	5,627,466.	
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	5,627,466.	

Part XIII Supplemental Information.

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

PART III, LINE 1A:

EXPLANATION: 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, ARE DESIGNATED BY THE BOARD OF TRUSTEES AND ARE TO BE USED SOLELY FOR THE PURCHASE OF ARTWORK. NEARLY THREE THOUSAND OBJECTS ARE IN THE CARE OF THE MUSEUM AND ARE HOUSED IN THE MUSEUM'S CLIMATE CONTROLLED COLLECTION

Part XIII Supplemental Information (continued)

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:

EXPLANATION: 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 AND TO COLLECT OBJECTS D'ART. UNDER THE MUSEUM'S CARE AND CUSTODIANSHIP IS A COLLECTION OF APPROXIMATELY 3,000 OBJECTS. IN ADDITION, WE MAINTAIN A DIGITAL ARCHIVE AVAILABLE TO EVERYONE WORLD WIDE, FEATURING PRIMARY RESEARCH, BIBLIOGRAPHIES, INTERVIEWS, PHOTOGRAPHS AND VIDEOS ON MORE THAN 600 ARTISTS, ENTITLED "EAST END STORIES." THE MUSEUM PROMOTES THE SITE, AND PERIODICALLY PRESENTS IN-PERSON PROGRAMS RELATED TO THE ARCHIVE, SUCH AS "EAST END STORIES ON SCREEN." THE CORE HOLDINGS CONSIST OF 19TH AND 20TH-CENTURY AMERICAN ART--INCLUDING PAINTINGS, SCULPTURE, PRINTS, DRAWINGS, AND PHOTOGRAPHS. THE MUSEUM HAS DEVELOPED A COMPREHENSIVE EDUCATIONAL PROGRAM THAT USES ITS COLLECTIONS AND EXHIBITIONS TO EMPHASIZE THE HISTORY OF AMERICAN ART, THE REGION'S IMPORTANT CONTRIBUTIONS TO THIS

Part XIII Supplemental Information (continued)

HISTORY, AND THE SOCIAL AND INTELLECTUAL ASPECTS AND RELATIONS OF ART.

PART V, LINE 4:

EXPLANATION: 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 MR. AND MRS. RAYMOND J. HOROWITZ FUND FOR PUBLICATIONS - THIS FUND WAS ENDOWED AND PROVIDED BY MR. AND MRS. RAYMOND J. HOROWITZ, WITH THE INCOME TO BE USED FOR PUBLICATIONS WITH A FOCUS ON THE ART AND ARTISTS OF THE EAST END OF LONG ISLAND. THE MUSEUM OBTAINED PERMISSION FROM MR. AND MRS.

Part XIII Supplemental Information (continued)

RAYMOND J. HOROWITZ TO EXPEND A PORTION OF THE PRINCIPAL EACH YEAR IN SUPPORT OF PUBLICATIONS.

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 X, LINE 2:

EXPLANATION: 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 2010, 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 MIDSUMMER PARTY	(b) Event #2 LANDSCAPE PLEASURES	(c) Other events 3	(d) Total events (add col (a) through col (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	1,120,725.	92,850.	131,851.	1,345,426.
	2	Less: Contributions	180,400.	84,000.	9,050.	273,450.
	3	Gross income (line 1 minus line 2)	940,325.	8,850.	122,801.	1,071,976.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	342,493.	4,876.	43,399.	390,768.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				390,768.
	11	Net income summary. Subtract line 10 from line 3, column (d)				681,208.

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. Subtract line 7 from line 1, column (d)			

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		%

 - a The organization's facility
 - b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ▶ _____

Address ▶ _____

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions

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

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (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)**

Compensation Information

OMB No 1545-0047

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

2013

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

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

THE PARRISH ART MUSEUM, INC.

Employer identification number

11-1782495

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input checked="" type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2013

Part III Supplemental Information

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

PART I, LINE 1A:

EXPLANATION: 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:

EXPLANATION: THE MUSEUM DIRECTOR'S CONTRACT AND COMPENSATION PACKAGE WAS

BASED ON COMPARABLE INDUSTRY DATA FOR MUSEUMS WITH SIMILAR OPERATING

BUDGETS, RESPONSIBILITIES, AND GEOGRAPHIC LOCATION. CONTRACT NEGOTIATIONS

TAKE PLACE BETWEEN THE COMPENSATION COMMITTEE AND THE DIRECTOR. OTHER KEY

EMPLOYEES ARE HANDLE IN A SIMILAR FASHION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization: **THE 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	<input checked="" type="checkbox"/>	20			
2	<input type="checkbox"/>				
3	<input type="checkbox"/>				
4	<input type="checkbox"/>				
5	<input type="checkbox"/>				
6	<input type="checkbox"/>				
7	<input type="checkbox"/>				
8	<input type="checkbox"/>				
9	<input checked="" type="checkbox"/>	1	25,054.	FAIR MARKET VALUE	
10	<input type="checkbox"/>				
11	<input type="checkbox"/>				
12	<input type="checkbox"/>				
13	<input type="checkbox"/>				
14	<input type="checkbox"/>				
15	<input type="checkbox"/>				
16	<input type="checkbox"/>				
17	<input type="checkbox"/>				
18	<input type="checkbox"/>				
19	<input type="checkbox"/>				
20	<input type="checkbox"/>				
21	<input type="checkbox"/>				
22	<input type="checkbox"/>				
23	<input type="checkbox"/>				
24	<input type="checkbox"/>				
25	<input checked="" type="checkbox"/>	147	113,107.	FAIR MARKET VALUE	
26	<input type="checkbox"/>				
27	<input type="checkbox"/>				
28	<input type="checkbox"/>				

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? b If "Yes," describe the arrangement in Part II.		X
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? b If "Yes," describe in Part II.	X	
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) (2013)

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

SCHEDULE M, LINE 32B:

EXPLANATION: THE ORGANIZATION USES BROKERS TO SELL STOCKS GIFTED TO THE ORGANIZATION.

SCHEDULE M, LINE 33:

EXPLANATION: 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. APPROXIMATELY 3,000 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.

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

OMB No 1545-0047

2013

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:

THE PARRISH ART MUSEUM, INC. IS LOCATED IN WATER MILL NEW YORK AND
ACCREDITED BY THE AMERICAN ALLIANCE OF MUSEUMS. THE MUSEUM WAS FOUNDED
IN 1897 BY SAMUEL LONGSTRETH PARRISH AND WAS CHARTERED BY THE

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

Schedule O (Form 990 or 990-EZ) (2013)

332211
09-04-13

Name of the organization THE PARRISH ART MUSEUM, INC.	Employer identification number 11-1782495
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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 2013 THE MUSEUM ORGANIZED THREE MAJOR EXHIBITIONS WHICH TOURED NATIONALLY: ALICE AYCOCK, POLLOCK, OSSORIO, DUBUFFET AND JENNIFER BARTLETT. THE ACCOMPANYING CATALOGS FOR EACH EXHIBITION WERE DISTRIBUTED BY YALE UNIVERSITY PRESS. THE PARRISH ALSO PRESENTED ARTISTS CHOOSE ARTISTS, A JURIED EXHIBITION OF WORK SELECTED FROM MORE THAN 300 ENTRANTS. IN ADDITION, THE MUSEUM PRESENTED WORK BY ARTISTS JOSEPHINE MECKSEPER AND MOUNTED TWO OFFSITE EXHIBITIONS IN THE LOCAL COMMUNITY AS A PART OF ITS SUMMER ROAD SHOW SERIES. THE MUSEUM'S PERMANENT COLLECTION WAS RE-INSTALLED FOR THE SECOND TIME SINCE OPENING IN ITS NEW BUILDING IN NOVEMBER 2012. IN 2013, THE MUSEUM RECEIVED GIFTS AND ACQUISITIONS BY ARTISTS INCLUDING DENNIS OPPENHEIM, ROBERT DASH, JENNIFER BARTLETT, DOROTHEA ROCKBURNE, AND CAIO FONSECA. THE EDUCATION DEPARTMENT CONDUCTED GROUP TOURS AND GROUP TOURS/WORKSHOPS FOR STUDENTS SERVING APPROXIMATELY 9,800 CHILDREN AND ADULTS. THE MUSEUM WELCOMED 60,000 VISITORS IN TOTAL IN 2013, MORE THAN DOUBLE ITS AVERAGE ANNUAL ATTENDANCE FOR THE LAST 7 YEARS.

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

EXPLANATION: 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:

EXPLANATION: PRIOR TO ITS FILING, THE 990 IS REVIEWED AND APPROVED BY THE

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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:

EXPLANATION: 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:

EXPLANATION: THE MUSEUM DIRECTOR'S CONTRACT AND COMPENSATION PACKAGE WAS BASED ON COMPARABLE INDUSTRY DATA FOR MUSEUMS WITH SIMILAR OPERATING BUDGETS, RESPONSIBILITIES, AND GEOGRAPHIC LOCATION. CONTRACT NEGOTIATIONS TAKE PLACE BETWEEN THE COMPENSATION COMMITTEE AND THE DIRECTOR. OTHER KEY EMPLOYEES ARE HANDLE IN A SIMILAR FASHION.

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

EXPLANATION: 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 -4,500.