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990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury

_			y be able to use a copy of the				10/01
		lendar year 2012 or tax year beginning	12	2/06 ,2012	, and endi		12/31, 2012
		of foundation				A Employer identit	
_	THE	FIELDS GALLEY PRIVATE FOUNDA	TION			51-653232	.5
	Numb	er and street (or P O box number if mail is not delivered	l to street address)		Room/suite	B Telephone numb	per (see instructions)
						() –
	108	1 ELIZABETH STREET					
	City o	r town, state, and ZIP code					
						C If exemption applic	ation is
	BAL	DWIN, NY 11510				pending, check her	a
_		ck all that apply Initial return	Initial return	of a former r	ublic char	ity p 4 5	b b
_		Final return	Amended re	,		D 1 Foreign organiza 2 Foreign organiza	
		Address change	X Name chang			85% test, check	here and attach
Н	Che	ck type of organization X Section 501(computation •	
ï	_	ection 4947(a)(1) nonexempt chantable trust	Other taxable pr		tion		on status was terminated
+			unting method X C			,	o)(1)(A), check here . P
•			ther (specify)	asii Acc	, uai		s in a 60-month termination o)(1)(B), check here
			column (d) must be or	cash hasis))(1)(b), crieck field .
Į.		Analysis of Revenue and Expenses (The	<u> </u>	1 003/1 003/3 /	1		(d) Disbursements
L	art	total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	incon	ne	income	purposes
-		column (a) (see instructions))		 			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) . If the foundation is not required to	·····	 			
	2	Check ► □ attach Sch B			-		
	3	Interest on savings and temporary cash investments	5,107.		5,107.		Ameri 1
	4	Dividends and interest from securities	5,107.		5,107.		ATCH 1
	5 a	Gross rents					
	b	Net rental income or (loss)	4 664				
ne	6 a	Net gain or (loss) from sale of assets not on line 10	1,661.			ESPACE OF THE	
Revenue	b	Gross sales pnce for all assets on line 6a 1,661.				RECEIVE	
ev.	7	Capital gain net income (from Part IV, line 2) .			1,661.		
	8	Net short-term capital gain			ုံရာ	NOV 2 1 21	13 9
	9	Income modifications · · · · · · · · · · · ·			14	MOARTSI	1 10
	10 a	Gross sales less returns and allowances • • • • •					<u> </u>
	b	Less Cost of goods sold .				OCDEN	
	С	Gross profit or (loss) (attach schedule)			-		
	11	Other income (attach schedule)					<u></u>
_	12	Total. Add lines 1 through 11	6,768.		6,768.		
	13	Compensation of officers, directors, trustees, etc	0				
ģ	14	Other employee salaries and wages					
Jse	15	Pension plans, employee benefits					
be	14 15 16a b c 17 18 19	Legal fees (attach schedule)					
Ж	b	Accounting fees (attach schedule)					
ĕ	С	Other professional fees (attach schedule)					
rat	17	Interest					
iist	18	Taxes (attach schedule) (see instructions)					
Ë	19	Depreciation (attach schedule) and depletion					
þ	20	Occupancy					
þ	21	Travel, conferences, and meetings					
Operating and	22	Printing and publications					
ng	23	Other expenses (attach schedule) ATCH .2.	850.	1			850.
rat	24	Total operating and administrative expenses.					
be		Add lines 13 through 23	850.				850.
0	25	Contributions, gifts, grants paid				-	
	25 26	Total expenses and disbursements Add lines 24 and 25	850.	İ	o		850.
_	27	Subtract line 26 from line 12		İ			
		Excess of revenue over expenses and disbursements	5,918.				
		Net investment income (if negative, enter -0-)		-	6,768.		
		` •			-,		
-		Adjusted_net income (if negative, enter -0-)		L			<u> </u>

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Ð	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		nd of y	year
_	aiti	Balance Stieets	amounts only (See instructions)	(a) Book Value	(b) Book Value	丄	(c) Fair Market Value
	1	Cash - non-interest-bear	ing		102,95	1.	
	2	Savings and temporary	cash investments		34,98	6.	34,986.
	3	Accounts receivable ▶					
		Less allowance for dou	btful accounts ▶			\bot	
	4						
		Less allowance for dou	btful accounts ▶				
	5					L	
	6		officers, directors, trustees, and other				
			tach schedule) (see instructions)				
	7	Other notes and loans r	eceivable (attach schedule)			\Box	
			btful accounts ▶				
ts	8		se				
ssets	9		leferred charges				
Ä	10 a		e government obligations (attach schedule).				
	ь	Investments - corporate	stock (attach schedule) ATCH 3		50,00	0.	50,200.
			bonds (attach schedule) ATCH 4		30,00	0.	30,354.
	11	Investments - land, building					
	12 13	Investments - mortgage	loans		334,00	 	316,196.
	14	Land, buildings, and equipment basis	>		334,00	"	310,130.
		Less accumulated deprecase (attach schedule)				\dashv	
	15		-)			\dashv	
	16		completed by all filers - see the				
_			age 1, item I)		551,94	6.	534,687.
	17	Accounts payable and a	accrued expenses			_	
	18	Grants payable	. _			_	
es	19	Deferred revenue				_	
≣	20	Loans from officers, directo	ors, trustees, and other disqualified persons				
Liabilities	21		otes payable (attach schedule) L				
_	22	Other liabilities (describe	e ▶)			_	
_	23		es 17 through 22)	0		_0	
"			low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.				
Š	24	Unrestricted					
ilar	25				· · · · ·	\neg	
B	26					\neg	
pur			not follow SFAS 117,			7	
or Fund Balances			plete lines 27 through 31. \blacktriangleright X			- 1	
0	27		cipal, or current funds		551,94	6.	
Net Assets	28	•	r land, bldg , and equipment fund		·	\neg	
155	29		ulated income, endowment, or other funds			\neg	
et /	30		d balances (see instructions)	O	551,94	6.	
Ž	31		net assets/fund balances (see		 	\neg	
				o	551,94	6.	
P	art I		anges in Net Assets or Fund E	Balances	·		
			palances at beginning of year - Part I		must agree with	\top	·
•			d on pnor year's return)			1	
2						2	5,918.
3	Othe	er increases not includ	line 27a ATCH_6		· · · · · · · · · · · · · · · · · · ·	3	546,028.
					1 .	4	551,946.
		reases not included in	line 2 (rtemize)			5	
			alances at end of year (line 4 minus li	ne 5) - Part II, column (b		6	551,946.
<u> </u>				,			

IT	"Yes," the foundation does	not qualify under section 4940(e)	Do not complete this part	
1	Enter the appropriate am	ount in each column for each year	, see the instructions before making	g any entries
((a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	(d) Distribution ratio (col (b) divided by col (c))
	2011			
	2010			
_	2009			
	2008			
	2007			
2 3	Average distribution ratio number of years the foun)	e the total on line 2 by 5, or by the s than 5 years	3
5	Multiply line 4 by line 3			5
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6
7	Add lines 5 and 6			7
8	Enter qualifying distribution of the 8 is equal to or great VI instructions		n Part VI, line 1b, and complete	8 that part using a 1% tax rate. See the

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orm 9	90-PF(2012) THE FIELDS GALLEY PRIVATE FOUNDATION 51-65	32325	P	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	35.
	here Land enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of \mathcal{I}			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			2.5
	Add lines 1 and 2		1	35.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		-	 0
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			35.
	Credits/Payments			
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	Exempt foreign organizations - tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) 6c 400.			
	Tax paid with application for extension of time to line (1 of the 0000)			
	Backup withholding erroneously withheld		1	00.
	Total credits and payments Add lines 6a through 6d			
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	-		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2	65.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2013 estimated tax 265 Refunded 11			
	VII-A Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	П	Yes	No
	or intervene in any political campaign?		100	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
_	definition)?			Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c	N/A	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$ (2) On foundation managers \$:	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities	İ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes ATCH .7	. 3	Х	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		37 / 7	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. 4b	N/A	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	 	
	If "Yes," attach the statement required by General Instruction T	ł		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	1		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		_x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Va	FLORIDA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate			
~	of each state as required by General Instruction G? If "No," attach explanation	1	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
-	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	1		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
. •	addresses			Х
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Form	990-PF (2012) THE FIELDS GALLEY PRIVATE FOUNDATION 51-6532	325	F	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of \blacktriangleright NAT G. FIELDS Telephone no \blacktriangleright 631-414.	-400	0	
	Located at ▶1081 ELIZABETH STREET BALDWIN, NY ZIP+4 ▶ 11510			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/	Ą
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2012?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			٠,,
	all years listed, answer "No" and attach statement - see instructions)	2b_		Х
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	l		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
t	olf "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			ŀ
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	. .	N/	Δ
	foundation had excess business holdings in 2012)		11/	X
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a_	ļ	<u> </u>

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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Total number of other employees paid over \$50,000

3 Five high	nest-paid independent contractors for professional services (see inst	ructions). If none, enter "NONE	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
/A			
tal number o	of others receiving over \$50,000 for professional services		
	Summary of Direct Charitable Activities		
List the foundation	on's four largest direct charitable activities during the tax year. Include relevant statistical	information such as the number of	
	d other beneficianes served, conferences convened, research papers produced, etc	information such as the number of	Expenses
organizations and		minumation such as the number of	Expenses
			Expenses
organizations and		intolliation such as the number of	Expenses
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organizations and			Expenses
N/A		Thomason such as the number of	Expenses
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N/A	d other beneficianes served, conferences convened, research papers produced, etc	intolliation such as the number of	Expenses
N/A			Amount
nrganizations and	Summary of Program-Related Investments (see instructions)		
nrganizations and	Summary of Program-Related Investments (see instructions)		
nrganizations and N/A N/A art IX-B	Summary of Program-Related Investments (see instructions)		
art IX-B	Summary of Program-Related Investments (see instructions)		
art IX-B	Summary of Program-Related Investments (see instructions)		
art IX-B	Summary of Program-Related Investments (see instructions) Diargest program-related investments made by the foundation during the tax year on lines 1 air		
art IX-B Describe the two NONE	Summary of Program-Related Investments (see instructions)		

Form 990-PF (2012) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a 28,262. 1b 9,826. c Fair market value of all other assets (see instructions) 1c d Total (add lines 1a, b, and c) 38,088. 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) ________1e Acquisition indebtedness applicable to line 1 assets 2 2 Subtract line 2 from line 1d 3 38,088. Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions) 571. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 37,517. Minimum investment return. Enter 5% of line 5 133. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here > and do not complete this part) 133. 2a Tax on investment income for 2012 from Part VI, line 5 ______ 2a Income tax for 2012 (This does not include the tax from Part VI) ____ 2b 135. Distributable amount before adjustments Subtract line 2c from line 1 -2. 3 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 -2. Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 850. 1a Program-related investments - total from Part IX-B 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 850. Foundations that gualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 Adjusted qualifying distributions. Subtract line 5 from line 4 850. 6

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2012) Page 9 Part XIII Undistributed Income (see instructions) (d) (c) (a) (b) Corpus Years prior to 2011 2011 2012 Distributable amount for 2012 from Part XI, Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only **b** Total for pnor years 20 10 ,20 09 ,20 08 Excess distributions carryover, if any, to 2012 a From 2007 **b** From 2008 c From 2009 **d** From 2010 e From 2011 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ a Applied to 2011, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2012 distributable amount 850. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 850 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has d Subtract line 6c from line 6b Taxable amount - see instructions . . Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)... Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2013. 850 Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2008 . . . b Excess from 2009 . . . c Excess from 2010 . . . d Excess from 2011 . . . 850. e Excess from 2012 . . .

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Part X\	Supplementary Information (continued)			
3 Gr	ants and Contributions Paid Duri	ng the Year or Appr	oved for F	uture Payment	
-	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation		
- No	me and address (home or business)	any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
		or substantial contributor	recipient	· ·	***
a Pai	d during the year		1		
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Program service revenue Basness code Amount Exclusion code Amount (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See instruction (See in	er gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
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Part	XVII	Information R Exempt Organ		nsfers To an	d Transact	ions a	nd Relation	onshi	ps With Non	chari	table)
ı	ın sect	e organization direct ion 501(c) of the Co zations?									Yes	No
	_	ers from the reportin	g foundation to	a noncharitable	exempt organ	nization	of			-		
		sh								1a(1)		х
((2) Oth	ner assets								1a(2)		Х
b (Other t	transactions										
((1) Sal	les of assets to a no	ncharitable exem	pt organization						1b(1)		X
((2) Pui	rchases of assets fro	om a noncharitat	ole exempt orga	nization					1b(2)		Х
((3) Re	ntal of facilities, equi	pment, or other a	essets						1b(3)	_	X
((4) Re	imbursement arrange	ements					<i>.</i>		1b(4)		X
	(5) LO	ans or loan guarantee	es				• • • • • •		• • • • • • • •	1b(5)		X
	(b) Pei	rformance of service g of facilities, equipn	s or membershi	p or fundraising	solicitations .				• • • • • • •	1b(6)	-	X
d :	Stiatifi If the	answer to any of th	nem, mailing iist	s, other assets,	or paid employ	rees	Column #	· · · ·	d always show	1c	for m	
u ,	value d	of the goods, other	assets or service	es given by the	e reporting fo	undatio	n If the for	ındatını	n received less	than	fair m	iaike
		n any transaction or										
(a) Lin		(b) Amount involved		nchantable exempt		1			ansactions, and share			
		N/A		·		N/A	· · · · · · · · · · · · · · · · · · ·		·			-
		<u>-</u>					•					
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-	+				-							
		0										
						 						
	-											
	describ	foundation directly bed in section 501(c) " complete the follo	of the Code (otl								es X] No
	11 163	(a) Name of organization		(b) Type	of organization			(c) De	escription of relations	ship		
				, , , <u>, , , , , , , , , , , , , , , , </u>	v		-				_	
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Sign		r penalties of penury and calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calculation of the calcul	are that I have examining propagation to	ed this return, including opayer) is based on all i	ng accompanying s	preparer ha	nd statements, a as any knowledge	nd to the	best of my knowledg			
Here		nature of officer or trustee	UY III	Date	1/2013	Title	4516	5_	with the pr	eparer		below
				22.5					(see instruction	ا اردا	1 es [No
Paid		Print/Type preparer's	name	Preparer's sig	nature		Date \		Check If	NIT		
		JANIS MCDONAGE	н 🤇	M	Dom	\mathcal{A}	11111	113	self-employed	P001	7042	1
Prep		Firm's name ► MA	ARCUM LLP	2		1	V -	Firm	n's EIN ▶ 11-1			
Use	Only	Firm's address ▶ 10	MELVILLE F	ARK RD				1				
		MEME	LVILLE, NY	,		1	1747	Pho	one no 631 4:	14-4	000	
									F	am 99	0-PF	(2012

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of	Property	INS AND LC	Desc	ription		D D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
1,661.		WELLS FARGO					VAR 1,661.	VAR
TOTAL GAIN(L	oss)		· · · · · · · · · · · · · · · · · · ·		•••••		1,661.	
								į

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	899. 4,208. 5,107.	
REVENUE AND EXPENSES PER BOOKS	899. 4,208. 5,107.	
	TOTAL	
DESCRIPTION	WELLS FARGO - INTEREST INCOME WELLS FARGO - DIVIDEND INCOME	

ATTACHMENT 2

FORM 990PF, PART I - OTHER EXPENSES

<u>DESCRIPTION</u> IRS USER DETERMINATION FEE

REVENUE AND EXPENSES PER BOOKS 850.

850.

TOTALS

NET INVESTMENT INCOME

CHARITABLE
PURPOSES
850.

850.

ATTACHMENT 2 PAGE 16

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2	
23	
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2,000 SHS CITIGROUP CAP - PREF

ENDING BOOK VALUE

ENDING FMV

50,000.

50,200.

TOTALS

50,000.

50,200.

ATTACHMENT 4

- CORPORATE BONDS PART II FORM 990PF,

DESCRIPTION

FIXED INCOME: LASALLE BANK .07% 1/19/15

BOOK VALUE ENDING

ENDING FMV

30,000.

30,354.

30,354.

TOTALS

30,000.

ATTACHMENT 4 PAGE 18

ENDING <u>FMV</u>	59,048. 57,809. 96,647. 22,920. 79,772.	316,196.
ENDING BOOK VALUE	57,166. 56,826. 100,005. 20,000.	334,009.
DESCRIPTION	1118.968SH CAPITAL INCOME 3200.933SH INCOME FUND AMER IN 8,598.452 SHS PIMCO FDS PAC 1,000 SHS GUGGENHEIM BUILD 14,557 SHS GABELLI UTILITIES	TOTALS

51-6532325

ATTACHMENT 6

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

ASSETS HOLDINGS- COST BASIS- WF ASSET HOLDINGS- COST BASIS- ML

443,077. 102,951.

TOTAL

546,028.

ATTACHMENT 7

FORM 990PF, PART VII-A, LINE 3 - CONFORMED COPY OF THE CHANGES

AMENDMENT TO THE TRUST AGREEMENT CHANGES THE NAME FROM THE FIELDS-GORDON-GALLEY PRIVATE FOUNDATION TO THE FIELDS GALLEY PRIVATE FOUNDATION- DOCUMENTS ATTACHED.

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

COMPENSATION

TO EMPLOYEE

EXPENSE ACCT AND OTHER

CONTRIBUTIONS

ALLOWANCES

BENEFIT PLANS

0

0

0

10.00

TRUSTEE

GRAND TOTALS

ATTACHMENT 8 PAGE 22

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

2012

Employer identification number

	THE FIELDS GALLEY PRIVATE FOUN				51-653232	5	
Note	: Form 5227 filers need to complete only Pa						
Par	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo, day, yr)	(d) Sales pnce	(e) Cost or other ba	sis the en	or (loss) for itire year (e) from (d)
1a							<u> </u>
		<u> </u>			-		
		<u> </u>					
						_	
b	Enter the short-term gain or (loss), if any,	from Schedule D	0-1, line 1b			1b	
2	Short-term capital gain or (loss) from Forr	ns 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	ships, S corpora	tions, and other	r estates or trusts		3	
4	Short-term capital loss carryover Enter Carryover Worksheet					4 ()
5	Carryover Worksheet Net short-term gain or (loss). Combine column (3) on the back	lines 1a through	gh 4 in colum	n (f) Enter here an	d on line 13,	5	
Par	column (3) on the back	sses - Assets	Held More T	han One Year	<u></u>	<u> </u>	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)		(d) Sales price	(e) Cost or other ba (see instructions)	sis the en	or (loss) for itire year (e) from (d)
6a							
_	Enter the long-term gain or (loss), if any, fi	rom Schodulo D	1 line Sh				1,661.
b						5b	1,001.
7	7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824						
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts						
9	Capital gain distributions		9				
10	Gain from Form 4797, Part I						
11	Long-term capital loss carryover Enter Carryover Worksheet					11 ()
12	Net long-term gain or (loss). Combine in column (3) on the back	nes 6a through	1 11 in colum	n (f) Enter here and	l on line 14a,	12	1,661.
For F	Paperwork Reduction Act Notice, see the Instru	dule D (Form					

Sche	dule D (Form 1041) 2012					Page 2
Par	t III Summary of Parts I and II		(1) Beneficianes'	(2) Esta	te's	(2) Takel
	Caution: Read the instructions before completing this	part.	(see instr)	or trus	t's	(3) Total
13	Net short-term gain or (loss)	13				
14	Net long-term gain or (loss):					
а	Total for year	14a				1,661.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b				
С	28% rate gain	14c				<u> </u>
15	Total net gain or (loss). Combine lines 13 and 14a	15		<u> </u>		1,661.
Note	2: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 is, go to Part V, and do not complete Part IV. If line 15, column (3), is a n	or Fo	rm 990-T, Part I, line	4a) If lines 1-	1a and	15, column (2), are net
	ssary	7E1 703	s, complete rait iv a	no the Sapital		Carryover Workstreet as
Par	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ine 4c, if a trust), the s	maller of		
a Note	The loss on line 15, column (3) or b \$3,000 if the loss on line 15, column (3), is more than \$3,000, or if Form 1041,				<u>16 (</u>	<u> </u>
Loss	Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 98	90-1, line 34),	is a io	ss, complete the Capital
	t V Tax Computation Using Maximum Capital Gains Rate					
	n 1041 filers. Complete this part only if both lines 14a and 15 in col		(2) are gains, or an	amount is en	tered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor					
	tion: Skip this part and complete the Schedule D Tax Worksheet in the i	ınstru	ctions if			
	other line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
Forn	n 990-T trusts. Complete this part only if both lines 14a and 15 a	are ga	ins, or qualified div	idends are ir	ıclude	d in income in Part I
u ru Ifeit	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part her line 14b, col. (2) or line 14c, col. (2) is more than zero.	and c	complete the sched	uie D Tax w	orksn	eet in the instructions
			1 1			
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	· · 17			
18	Enter the smaller of line 14a or 15 in column (2)			}	ŀ	
40	but not less than zero			ł		
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified			ŀ		
20	dividends included in income in Part I of Form 990-T) 19		\dashv \mid	ŀ		
20 24	Add lines 18 and 19		 			
21	If the estate or trust is filing Form 4952, enter the		1			
22	amount from line 4g, otherwise, enter -0		⊢			
22	Subtract line 21 from line 20 If zero or less, enter -0	• • •	22			
23	Subtract line 22 from line 17 If zero or less, enter -0		23			
24	Enter the amplian of the amount on line 47 or \$2,400					
24 25	Enter the smaller of the amount on line 17 or \$2,400		24			
25	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
			25		-	
26	No. Enter the amount from line 23		26			
27	Are the amounts on lines 22 and 26 the same?		20			
	Yes. Skip lines 27 thru 30; go to line 31 No. Enter the smaller of line 17 or line	ne 22	27			
	103. Skip lines 27 tind 33, go to line 31	1 0 22				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
			20			
29	Subtract line 28 from line 27		. 29			
30	Multiply line 29 by 15% (15)				30	
31	Figure the tax on the amount on line 23 Use the 2012 Tax Rate				-	
	(see the Schedule Ginstructions in the instructions for Form 1041)			I	31	
	, and the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the same state of the sa	• • •				
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2012 Tax Rate	e Sch	edule for Estates a			
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 l					
	G, line 1a (or Form 990-T, line 36)		·	I .	34	
		•	<u> </u>			ule D (Form 1041) 2012
						,

lame of estate or trust as shown on Form 1041 [o not enter name and emp	loyer identification numb	per if shown on the other sid	1	
THE FIELDS GALLEY PRIVATE				51-653232	25
Part I Long-Term Capital Gains	and Losses - Asse	ts Held More Th	an One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
Ga WELLS FARGO - LONG TERM CAPITAL GAIN DIVIDENDS			1 661		1 661
CAFITAL GAIN DIVIDENDS			1,661.		1,661.
		-			
_					
			-		
				•	
			<u> </u>		
	1		<u> </u>	<u> </u>	
Total. Combine the amounts in colu	mn (f) Enter here an	d on Schedule D, I	ine 6b		1,661.

SECOND AMENDMENT TO THE FIELDS-GORDON-GALLEY PRIVATE FOUNDATION

THIS SECOND AMENDMENT to the FIELDS-GORDON-GALLEY PRIVATE FOUNDATION dated the 14th day of January 2003 (the "Foundation"), made and entered into this 15 day of 100 day of 2013, by NAT G. FIELDS (hereinafter referred to as "Trustee").

WITNESSETH:

WHEREAS, NAT G. FIENDS is the Sole Trustee of the FOUNDATION; and WHEREAS, NAT G. FIELDS, the Trustee, is desirous of amending said Foundation, pursuant to Section 736.0412 Fla. Stat.;

NOW, THEREFORE, in consideration of the mutual covenants contained herein, THE FIELDS-GORDON-GALLEY PRIVATE FOUNDATION is hereby amended as follows:

1. Pursuant to Section 736.0412 Fla. Stats., the Trustee hereby exercises his right to amend the Trust as follows:

The name of the trust shall be: THE FIELDS GALLEY PRIVATE FOUNDATION.

2. In all other respects, the Trustee does hereby ratify and confirm each and every stipulation and covenant of FOUNDATION.

IN WITNESS HEREOF, the Trustee has duly executed this Second Amendment to THE FIELDS-GORDON-GALLEY PRIVATE FOUNDATION, the day and year first above written.

Nat G. Fields, Trustee.

This instrument was signed, sealed, published and declared by NAT G. FIELDS, the above-named Trustee, as the Second Amendment to THE FIELDS-GORDON-GALLEY PRIVATE FOUNDATION, in the presence of each of us, and we, at his request, in his presence

and in the presence of each other have hereunto	subscribed our names as witnesses this 5 day
of APR 2013.	
MICHAGE CHRISTOPHER	13/0LOCUST AUE
markael Chetip him	BOHEMIA NY 11916
Printed Name of Witness	Address (city and state)
(JANES)	4 SWALLOW LANE
CECELLA DAVIES	HAUPPAULE, NY 11788
Printed Name of Witness	Address – (city and state)

Form 8868

(Rev January 2013)

Application for Extension of Time To File an **Exempt Organization Return**

Department of the Treasury

OMB No 1545-1709

File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Chanties & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print FIELDS-GORDON-GALLEY PRIVATE FOUNDATION 51-6532325 File by the Number, street, and room or suite no If a P O box, see instructions Social security number (SSN) due date for 1081 ELIZABETH STREET filing your City, town or post office, state, and ZIP code For a foreign address, see instructions return See instructions BALDWIN, NY 11510 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990-T (corporation) 07 Form 990 or Form 990-EZ 01 Form 990-BL Form 1041-A 80 03 Form 4720 09 Form 4720- (individual) Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 990-T (trust other than above) Form 8870 The books are in the care of ► NAT G. FIELDS FAX No ▶ Telephone No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 13 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X | calendar year 2012 or tax year beginning ______, 20____, and ending If the tax year entered in line 1 is for less than 12 months, check reason ____ Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 400. nonrefundable credits. See instructions 3a |\$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3ь \$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 400. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 1-2013)

Form 8868 (Re	ev 1-2013)				Page 2
	filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part I	I and check this box	▶ X
	complete Part II if you have already been gra				
If you are	filing for an Automatic 3-Month Extension, o	complete o	only Part I (on page 1).		
Part II	Additional (Not Automatic) 3-Month Ex	xtension o	of Time. Only file the orig	inal (no copies needed).	
<u>-</u>			E	nter filer's identifying number, see	instructions
	Name of exempt organization or other filer, see in		Employer identification number (E		
Type or					
print	THE FIELDS GALLEY PRIVATE FOR	UNDATION	N	51-6532325	
-	Number, street, and room or suite no If a P O bo	Social security number (SSN)			
File by the due date for	1081 ELIZABETH STREET				
filing your	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.		
return See instructions	BALDWIN, NY 11510				
Enter the Re	eturn code for the return that this application	ıs for (file a	separate application for ea	ach return)	. 0 4
Application		Return	Application		Return
ls For		Code	Is For		Code
	r Form 990-EZ	01	7		, , ,
Form 990-B		02	Form 1041-A		08
Form 4720		03	Form 4720		09
Form 990-P		04	Form 5227		10
	(sec. 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870		12
	ot complete Part II if you were not already	granted an		sion on a previously filed Form	n 8868.
	s are in the care of NAT G. FIELDS	<u> </u>			
	e No ▶ 631 414-4000	F	FAX No. ▶		
	anization does not have an office or place of			nis box	ightharpoonup
	or a Group Return, enter the organization's fo				···
	le group, check this box ▶ ☐				
	names and EINs of all members the extension	_	g ,		
	est an additional 3-month extension of time ur		1	1/15 , 20 13 .	
5 Forca	lendar year, or other tax year beginni	na	12/06 .20 12 .an	id ending 12/31 ,	20 12
	ax year entered in line 5 is for less than 12 m		4 1	turn Final return	·
	Change in accounting period				
7 State	n detail why you need the extension ALL I	NFORMAT	ION REQUIRED TO FI	LE A COMPLETE AND	
	RATE RETURN IS NOT YET AVAILABLE				
	"				
8a If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tent	ative tax, less any	
nonref	undable credits. See instructions			8a \$	400.
b If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any refun	dable credits and	
estima	ited tax payments made. Include any pri	or year o	verpayment allowed as	a credit and any	
amoun	nt paid previously with Form 8868.			8b \$	400.
c Balanc	ce Due. Subtract line 8b from line 8a. Include	your paym	ent with this form, if requir	ed, by using EFTPS	<u></u>
(Electr	onic Federal Tax Payment System). See instru	ctions.		8c \$	
	Signature and Verifica	ation mus	st be completed for P	art II only.	
Under penalties	s of perjury, I declare that I have examined this form,		-		ge and belief,
	t, and complete, and that I am authorized to prepare this fo		, ,	,	· '
Signature >			Title ▶	Date ►	
				Form 8868	(Rev 1-2013)