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

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

101	caler	idar year 2011 or tax year t	beginning		, and ending		
Na	ne of	foundation				A Employer identification	number
		E E. FISHER (
		ST/FOUNDATION				27-6987019	<u> </u>
		and street (or P O box number if i	mail is not delivered to street	address)	Room/suite	B Telephone number	
		BOX 4335				610-865-10	18
		own, state, and ZIP code	10010			C If exemption application is p	ending, check here
			18018			<u> </u>	
G	ineck	''''	Initial return		ormer public charity	D 1. Foreign organizations	s, check here
			Final return	Amended return		Foreign organizations me 2. check here and attach co	eting the 85% test,
	hook		Address change	Name change		2. check here and attach co	omputation
<u>"-</u>	_	ction 4947(a)(1) nonexemp		kempt private foundation Other taxable private found:	ntion	E If private foundation sta	
		arket value of all assets at en			Accrual	under section 507(b)(1)	
		Part II, col. (c), line 16)	·	ther (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
	\$			mn (d) must be on cash	basis)	under section 507 (b)(1)	(D), clicck field
				(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
_		Analysis of Revenue and (The total of amounts in colum necessarily equal the amounts	ins (b), (c), and (d) may not s in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants		39,894.			
	2	Check I if the foundation i	is not required to attach Sch. B				
	3	Interest on savings and tempora cash investments	ary				
	4	Dividends and interest from	n securities	840.	840.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)					
Φ	6a	Net gain or (loss) from sale of as	ssets not on line 10				
Revenue	b	Gross sales price for all assets on line 6a					
ě	7	Capital gain net income (from Pa	art IV, line 2)		0.		
ш	8	Net short-term capital gain			NECEW		
	9	Income modifications Gross sales less returns			7-		
	10a	and allowances		ļ	2 MAY 10 7 20		
	b	Less Cost of goods sold			1 201		
	C	Gross profit or (loss)		<u></u>	OCOCI	\(\delta \)	
	11	Other income		10	JUEN U		
	12	Total Add lines 1 through		40,734.	840.	0.	
	13	Compensation of officers, direct	·	0.	0.	0.	0.
	14	Other employee salaries an	· ·			<u> </u>	
ses	15	Pension plans, employee b	enetits				
nse		Legal fees	amen o	400	400		
x		Accounting fees	STMT 2	490.	490.	0.	0.
E E	1	Other professional fees Interest					
ativ	17 18	Taxes					
Operating and Administrative Expen	19	Depreciation and depletion					
Ē	20	Occupancy			-		
Adn	21	Travel, conferences, and m	onitae				
힏	22	Printing and publications	icomiga				
<u>8</u>	23	Other expenses	STMT 3	15.	0.	0.	15.
Ē	24	Total operating and admir		1.7.	<u> </u>	<u> </u>	13.
era	-7	expenses. Add lines 13 thr		505.	490.	0.	15.
Ö	25	Contributions, gifts, grants	-	2,000.		·	2,000.
	26	Total expenses and disbut		2,000.			2,000.
		Add lines 24 and 25		2,505.	490.	0.	2,015.
	27	Subtract line 26 from line 1	12:				2,013.
	ł	Excess of revenue over expense		38,229.			
		Net investment income (if r			350.		
	C	Adjusted net income (if neg				0.	
1235 12-0	01 ?-11	LHA For Paperwork Rei	duction Act Notice, see	instructions.			Form 990-PF (2011)

For	m 99	0-PF (2011) TRUST/FOUNDATION		27-	5987019 Page 2
<u></u>	art	Balance Sheets Attached chedules and emounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u></u>	aπ	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		1,840.	1,840.
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	l	Less: allowance for doubtful accounts			
əts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 4	26,147.	63,041.	62,274.
	C	Investments - corporate bonds			
	11	tovestments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis	į		
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	l		06 145	64 001	64 444
_	$\overline{}$	Total assets (to be completed by all filers)	26,147.	64,881.	64,114.
	1	Accounts payable and accrued expenses		505.	
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		Takel Making And Image 47 Absorb 000		505	
_	23	Total liabilities (add lines 17 through 22)	0.	505.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted			
B	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Ē		Foundations that do not follow SFAS 117, check here And complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	26,147.	64,376.	
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	20,147.	04,370.	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
et/	29	Total net assets or fund balances	26,147.	64,376.	
Ž	30	Total liet assets of fullo datalices	20,147.	04,570.	
	31	Total liabilities and net assets/fund balances	26,147.	64,881.	
_				0 = , 0 0 1 .	
<u>P</u>	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	l net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	26,147.
2	-	r amount from Part I, line 27a		2	38,229.
		r increases not included in line 2 (itemize)	·	3	0.
4	Add	lines 1, 2, and 3		. 4	64,376.
5	Decr	eases not included in line 2 (itemize)		5	0.

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

		nd(s) of property sold (e.g. or common stock, 200 shs			I. b	How acquired - Purchase - Donation	(c) Date acqui (mo., day, yi		(d) Date sold (mo., day, yr.)
1a					-				
b NO	NE		. <u>-</u>						
d					-				
e								1	
(e) Gross sales price	(f) C	Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain oi (e) plus (f) n		
<u>a</u>									
b c									
d									
е									
Complete only for assets showing	g gain in i	column (h) and owned by	the foundation	on 12/31/69			(I) Gains (Col. (h		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		C	ol. (k), but not le Losses (fron		
a									
b									
C									
<u>d</u>									
e		C 16 ann alan anta		7	$\overline{}$				
2 Capital gain net income or (net ca	pital loss)		in Part I, line - in Part I, line	7	}	2			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8			nd (6):		}				
	nder S	ection 4940(e) for	Reduced	Tax on Net	: Inv	estment in	come		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation does not qual 1 Enter the appropriate amount in 6	tion 4942 ify under :	tax on the distributable am section 4940(e). Do not co	mplete this pa	irt.					Yes X No
(a) Base period years		(b) Adjusted qualifying dis	tributions	Net value of no	(c)	ritable-use asse	ts (aa)	Distribi	(d) ution ratio
Calendar year (or tax year beginnii 2010	ig in)		0.	1401 44140 07 110)11011u	25 - 41	100%	(D) aivi	ded by col. (c))
2009			<u> </u>			23,41	<u> </u>		.00000
2008									
2007									
2006	•								
2 Total of line 1, column (d)							2		.000000
3 Average distribution ratio for the state foundation has been in exister			on line 2 by 5,	or by the number	of ye	ears	3		.000000
4 Enter the net value of noncharitab	le-use ass	sets for 2011 from Part X.	line 5				4		40,013.
5 Multiply line 4 by line 3		•					5		0.
	na (10/ a²	Part I line 27h)	•						
6 Enter 1% of net investment incom	ic (176 01	רמוני, ווווע 270)					6		4.
7 Add lines 5 and 6							7		4.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usin	ıg a 1	% tax rate.	_ 8		2,015.

JANE E. FISHER CHARITABLE

	990-PF			27-	<u> 698701</u>	9	Page 4
Par		Excise Tax Based on Investment Income (Section 494)		or 4948	- see inst	ructi	ons)
		operating foundations described in section 4940(d)(2), check here and en			İ		
		ruling or determination letter; (attach copy of letter if nec			:		
þ í	Domesti	ic foundations that meet the section 4940(e) requirements in Part V, check here 🌗	► 🗶 and enter 1%	_1_			4.
		, line 27b					
c /	All other	r domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).				
2	Tax und	ler section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers enter -0-)	. 2			<u> </u>
3 /	Add line	es 1 and 2	•	3			4.
4 9	Subtitle	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)	4			0.
5	Tax bas	sed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•	_ 5			<u>4.</u>
6 (Credits/I	Payments:	1 1				
a 2	2011 es	stimated tax payments and 2010 overpayment credited to 2011	6a				
b ₹	empt	foreign organizations - tax withheld at source	6b				
C	Tax paid	d with application for extension of time to file (Form 8868)	6c				
d l	3ackup	withholding erroneously withheld	6d				
7	Fotal cre	edits and payments. Add lines 6a through 6d		7			0.
8 1	Enter an	ny penalty for underpayment of estimated tax. Check here 📖 if Form 2220 is attai	ched	8			
9	Tax due	If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9			4.
10	Overpay	yment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,	▶ 10			
		e amount of line 10 to be: Credited to 2012 estimated tax	Refunde	d ▶ 11			
Par	t VII-	A Statements Regarding Activities					
1a l	During t	the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or int	ervene in		Ye	s No
ā	any poli	tical campaign?			1:	1	X
Ы	Old It sp	pend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for definit	ou)?	11		<u> </u>
- 1	f the a	nswer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any matenals pu	ıblıshed or		-	
(distribu	ited by the foundation in connection with the activities.					j
		foundation file Form 1120-POL for this year?			10	:	X
		e amount (if any) of tax on political expenditures (section 4955) imposed during the					į
((1) On	the foundation. > \$ (2) On foundation managers	. ▶ \$	0.			
e l	Enter th	e reimbursement (if any) paid by the foundation during the year for political expendi	ture tax imposed on foundation	1			
ı	manage	ers. ► \$0 .					
2	Has the	foundation engaged in any activities that have not previously been reported to the IF	RS?		2		X
	•	attach a detailed description of the activities.					
3	Has the	foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorpora	ation, or			
ı	oylaws,	or other similar instruments? If "Yes," attach a conformed copy of the change	es		3		X
		foundation have unrelated business gross income of \$1,000 or more during the year	L)		4:	Ц_	X
		has it filed a tax return on Form 990-T for this year?		N	I/A 41	<u> </u>	ļ
		ere a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
		* attach the statement required by General Instruction T					
		requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:				
	-	nguage in the governing instrument, or					
•		ate legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with th	e state law			
		in in the governing instrument?			6		X
		foundation have at least \$5,000 in assets at any time during the year?			_ 7	X	1
1	f "Yes,	* complete Part II, col (c), and Part XV.			·		
		e states to which the foundation reports or with which it is registered (see instruction	ns) ►				
-	PA						
b l	f the an	iswer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Af	ttorney General (or designate)				
		state as required by General Instruction G? If "No," attach explanation			81	X	
		oundation claiming status as a private operating foundation within the meaning of sec		or calendar			1
		11 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," co	•		9		<u> </u>
10 [Old any	persons become substantial contributors during the tax year? if "Yes," attach a schedul	le listing their names and addresses	STMT	5 10	<u> </u>	

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

0.

Total. Add lines 1 through 3

All other program-related investments. See instructions.

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TRUST/FOUNDATION

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	38,570.
	Average of monthly cash balances	1b	2,052.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	40,622.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	40,622.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	609.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	40,013.
6_	Minimum investment return. Enter 5% of line 5	6	2,001.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	2,001.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	4.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,997.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,997.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,997.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		·
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,015.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,015.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	4.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,011.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies for th	e section

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4940(e) reduction of tax in those years.

TRUST/FOUNDATION

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7				1,997.
2 Undistributed income, if any, as of the end of 2011.				
a Enter amount for 2010 only			10.	
b Total for prior years:				
- Types databates are year to 2011.		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010	^			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part XII, line 4: ▶\$ 2,015.				
			10.	
a Applied to 2010, but not more than line 2a			10.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				1,997.
e Remaining amount distributed out of corpus	8.			1,331.
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	8.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		·
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 been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract		Ì		
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	8.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010	}			
e Excess from 2011 8.				· · · · · · · · · · · · · · · · · · ·

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here Fig. 1 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

JANE E FISHER, TRUSTEE, 610-865-1018

PO BOX 4335, BETHLEHEM, PA 18018

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information				<u> </u>
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<u> </u>
a Paid during the year				
NEW ENGLAND EYE INSTITUTE	NONE	OWNER DANK TO	CITODODE MUD VIONY OR	
940 COMMONWEALTH AVENUE SUITE 2	NONE	OTHER PUBLIC CHARITY	SUPPORT THE WORK OF DR. TREMPE	
BOSTON MA 02215-1203		CHARTI	DR. TREMPE	2,000
, ,				2,000
		- "		
				
Total	 		▶ 3a	2,000
b Approved for future payment				
NONE			1	
NONE				
			i	
	- 			
Total		·	▶ 3b	0
			For	m 990-PF (2011)

Part XVI-A Analysis of Income-Producing Activities

	Unrelated	business income	Excluded	by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	Turicular income
a			+ +-		
b	1 1				
c	1 1		+		
			 		
e					
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·	╂	· · · · · · · · · · · · · · · · · · ·	
2 Membership dues and assessments	' <u> </u>		+		
3 Interest on savings and temporary cash			 		
investments			1		
4 Dividends and interest from securities			14	840.	
5 Net rental income or (loss) from real estate:			+ = -	040.	
a Debt-financed property					
b Not debt-financed property			+ + +		
6 Net rental income or (loss) from personal			+		
property					
7 Other investment income			1 1		
8 Gain or (loss) from sales of assets other		·	 		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					·- ·-
a					
b					
C	I	······································			•
d	1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		840.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	840.
(See worksheet in line 13 instructions to verify calcul	ations.)				
Part XVI-B Relationship of Activ	vities to the Accor	nnlishment of F	vemnt P	urnosas	
-					
Line No Explain below how each activity for w			A contribute	d importantly to the accomp	lishment of
the foundation's exempt purposes (o	ther than by providing fund	is for such purposes).			
					
				<u>.</u>	
"	.,	-			
· · · · · · · · · · · · · · · · · · ·					
·· · · · · · · · · · · · · · · · · · ·					
					
				. <u> </u>	
					
					
					· -

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Part	XVII	Information Re			and Transactions	and Relations		charitable		age 13
		Exempt Organ							N/	
					ng with any other organizati		on 501(c) of		Yes	NO
					27, relating to political organ	nizations?				1
) Cash	from the reporting found	ation to a nonchanta	able exempt of	ganization of:			12/1		
	Other	accate					• •	1a(1)		X
		assets . sactions;	• •			•	•	1a(2)		X
		of assets to a noncharita	hle evemnt organiza	ation				15/11		v
		ases of assets from a no	• •					1b(1)		X
		l of facilities, equipment,		organization				1b(2)		X
•		oursement arrangements					•	1b(3)		X
•	•	or loan guarantees					•	1b(4)		X
		rmance of services or me	mharehin ar fundra	usina salieitatie	nne			1b(5)		X
		facilities, equipment, ma		-				1b(6)	1	X
	-		•		edule. Column (b) should al	wave chow the fair m	arket value of the a		L	<u> </u>
					ed less than fair market val				SG1S,	
) the value of the goods,				be in any transaction	or snaring arranger	non, snow m		
(a) Line i		(b) Amount involved			e exempt organization	(d) Description	of transfers, transaction	ns, and sharing a	rangeme	ents
(-/		(4)	(0)	N/A		(5) 5555.		70, W.G. G. G. H. H. G. G.	- angom	
				-11/11						
							···			
		-			. —					
					-	_	•			
		•			- · · · · · · · · · · · · · · · · · · ·					
									-	
2a is	the four	ndation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described	-			
		501(c) of the Code (other						Yes	X	ON [
		mplete the following sch	-	,, ,,						_
		(a) Name of org			(b) Type of organization		c) Description of re	ationship		
		N/A		-						
					ng accompanying schedules and			May the IRS	discuss	this
Sign	1	mier, it is true, correct, and cor	mpiete Declaration of p	reparer (otner tha	n taxpayer) is based on all inform	nation of which preparer	nas any knowledge	return with the shown below	e prepar	rer
Here		ne E F	Tsher		5/3/2012	_		_ Yes		No
	Sıgn	ature of officer or trustee		0	Date	Title		<u> </u>		
		Print/Type preparer's na	ame	Preparer'y	gritature	Date		PTIN		
		LUTHER R.	CAMPBELI	1/1/1/1/	8/ M// //		self- employed			
Paid		JR., CPA		1/1/4	MUCH	05/02/12		P00102	180	
Prep		Firm's name > CAM	PBELL RAP	POTTO &	YURASITS LI		Firm's EIN ► 23	3-13869	42	
Use	Only									
		Firm's address ▶ 10	33 S CEDA	AR CRES	T BLVD		1	·		

ALLENTOWN, PA 18103-5443

Phone no.

(610)435-7489

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

JANE E. FISHER CHARITABLE

OMB No 1545-0047

2011

Employer identification number

TRUST/FOUNDATION 27-6987019 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year. \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

JANE E. FISHER CHARITABLE

TRUST/FOUNDATION

Employer identification number

27-6987019

Part I	Contributors	(see instructions)	. Use duplicate copies	of Part I if additional space is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JANE E FISHER PO BOX 4335 BETHLEHEM, PA 18018	\$ 36,894.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JANE E FISHER PO BOX 4335 BETHLEHEM, PA 18018	\$3,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
0		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occuplete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

JANE E. FISHER CHARITABLE

Employer identification number

Noncash Property (see instructions). Use duplicate copies of Part I		
(b)	(c) FMV (or estimate)	(d)
Description of noncash property given	(see instructions)	Date received
300 SHARES PEPSICO AND 200 SHARES EXXON MOBIL	_	
	\$36,89 4 .	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions)	

	• •		Employer identification number							
	E. FISHER CHARITABLE /FOUNDATION		27-6987019							
Part III	the total of exclusively religious, charitable, et	c., contributions of \$1,000 or less fo	c)(7), (8), or (10) organizations that total more than \$1,000 for the ions completing Part III, enter or the year. (Enter this information once)							
(a) No. from Part I	Use duplicate copies of Part III if addition (b) Purpose of gift	al space is needed (c) Use of gift	(d) Description of how gift is held							
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
(a) No.										
TRUST / Part III	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
										
	(e) Transfer of gift									
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee							
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of git	ift							
	Transferee's name, address, al		Relationship of transferor to transferee							
(a) No.										
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
	(e) Transfer of gift									
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee							
	· -									

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A	۲)	
MORGAN STANLEY	-	840.		0.		840.		
TOTAL TO FM 990-PF, PART I, I	LN 4		840.		0.	8	40.	
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVEST- MENT INCOME		ADJUSTEI	CHARITA		
ACCOUNTANT	490		490.			0.	0.	
TO FORM 990-PF, PG 1, LN 16B		490.		490.		0.	0.	
FORM 990-PF	Oʻ	THER E	XPENSES			STATEMENT	3	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVEST- MENT INCOME		ADJUSTEI			
PA BCO FEE		15.		0.		0.	15.	
TO FORM 990-PF, PG 1, LN 23		15.		0.		0.	15.	
FORM 990-PF CORPORATE STOCK						STATEMENT	4	
DESCRIPTION					OK VALUE	FAIR MARKE VALUE	T	
600 SH PEPSICO INC 200 SH WELLS FARO & CO NEW 200 SH EXXON MOBIL					42,755.	39,8	10	
200 SH WELLS FARO & CO NEW					6,290. 13,996.	5,5 16,9	12.	

LIST OF SUBSTANTIAL CONTRIBUTORS 5 STATEMENT FORM 990-PF PART VII-A, LINE 10 NAME OF CONTRIBUTOR ADDRESS JANE E FISHER PO BOX 4335 BETHLEHEM, PA 18018