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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

2012

Open to Public Inspection

For calendar year 2012, or tax year beginning 01-01-2012 , and ending 12-31-2012

Name of foundation BLANCHE FISCHER FOUNDATION		A Employer identification number 93-0790099	
Number and street (or P O box number if mail is not delivered to street address) 1509 SW SUNSET BLVD NO 1-B		B Telephone number (see instructions) (503) 246-4921	
City or town, state, and ZIP code PORTLAND, OR 97239		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,672,323		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities.	42,201	42,201	42,201	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	12,400			
	b Gross sales price for all assets on line 6a _____ 178,498				
	7 Capital gain net income (from Part IV , line 2)		12,400		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	9,057	9,057	9,057	
	12 Total. Add lines 1 through 11	63,658	63,658	51,258	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages	19,064	0	19,064	19,064
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,851	950	1,901	1,901
	c Other professional fees (attach schedule)	17,960	17,010	950	950
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	7,289	5,465	1,824	1,824
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	6,876	0	6,876	6,876
	21 Travel, conferences, and meetings	1,171	0	1,171	1,171
	22 Printing and publications				
	23 Other expenses (attach schedule)	5,136	60	3,254	5,076
	24 Total operating and administrative expenses. Add lines 13 through 23	60,347	23,485	35,040	36,862
	25 Contributions, gifts, grants paid	32,192			32,192
	26 Total expenses and disbursements. Add lines 24 and 25	92,539	23,485	35,040	69,054
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-28,881			
	b Net investment income (if negative, enter -0-)		40,173		
c Adjusted net income (if negative, enter -0-)				16,218	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	12,458	-1,595	-1,595
	2	Savings and temporary cash investments	25,789	29,461	29,461
	3	Accounts receivable ▶ 14,374			
		Less allowance for doubtful accounts ▶		14,374	14,374
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,371,009	1,340,983	1,399,616
	c	Investments—corporate bonds (attach schedule).			
	11	Investments—land, buildings, and equipment basis ▶			
Liabilities		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	227,700	227,700	227,700
	14	Land, buildings, and equipment basis ▶ 9,611			
		Less accumulated depreciation (attach schedule) ▶ 9,611			
	15	Other assets (describe ▶)	2,767	2,767	2,767
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,639,723	1,613,690	1,672,323
	17	Accounts payable and accrued expenses	1,152	4,018	
	18	Grants payable	18		
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	1,170	4,018	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶			
		and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	1,638,553	1,609,672	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶			
		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see page 17 of the instructions)	1,638,553	1,609,672	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	1,639,723	1,613,690	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	1,638,553
2	Enter amount from Part I, line 27a	2	-28,881
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,609,672
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,609,672

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	12,400
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	0

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011	84,614	1,603,146	0 052780
2010	55,032	1,477,644	0 037243
2009	74,052	1,359,129	0 054485
2008	98,240	1,730,641	0 056765
2007	116,936	1,957,142	0 059748

2	Total of line 1, column (d).	2	0 261021
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 052204
4	Enter the net value of noncharitable-use assets for 2012 from Part X, line 5.	4	1,615,055
5	Multiply line 4 by line 3.	5	84,312
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	402
7	Add lines 5 and 6.	7	84,714
8	Enter qualifying distributions from Part XII, line 4. If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions	8	69,054

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

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 here ☐ and enter 1% of Part I, line 27b		1	803
c		All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of 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	0
3		Add lines 1 and 2.		3	803
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	803
6		Credits/Payments			
a		2012 estimated tax payments and 2011 overpayment credited to 2012	6a	800	
b		Exempt foreign organizations—tax withheld at source	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld	6d		
7		Total credits and payments Add lines 6a through 6d.		7	800
8		Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached		8	11
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	14
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	
11		Enter the amount of line 10 to be Credited to 2013 estimated tax ☐	Refunded ☐	11	

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?			No
	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.			
c	Did the foundation file Form 1120-POL for this year?.	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ _____ 0 (2) On foundation managers ☐ \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		No
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	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • 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?	6	Yes	
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	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ OR _____			
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 .	8b	Yes	
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	9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶ WWW BFF ORG				
14	The books are in care of ▶ MICHAEL MILLHOLLEN Telephone no ▶ (503) 936-7746			
	Located at ▶ 1509 SW SUNSET BLVD 1-B PORTLAND OR ZIP +4 ▶ 97239			
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 ▶	15		
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No
See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ▶				

Part 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
1a	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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ 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)? ☐ Yes ☒ No			
	(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). ☐ Yes ☒ No			
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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐	1b		No
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		No
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? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	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 all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.</i>).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☒

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
KIRT TOOMBS	PRESIDENT	0	0	0
C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND,OR 97239	2 00			
TOM HAYS	SECRETARY	0	0	0
C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND,OR 97239	2 00			
MICHAEL MILLHOLLEN	TREASURER	0	0	0
C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND,OR 97239	4 00			
GINNY BAYNES	DIRECTOR	0	0	0
C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND,OR 97239	1 00			

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 CHARITABLE ACTIVITIES CONSIST SOLELY OF GIVING MONEY TO OR FOR DISABLED OR PHYSICALLY HANDICAPPED PEOPLE SHOWING FINANCIAL NEED IN THE STATE OF OREGON	36,863
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See page 24 of the instructions	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,372,248
b	Average of monthly cash balances.	1b	36,755
c	Fair market value of all other assets (see instructions).	1c	230,647
d	Total (add lines 1a, b, and c).	1d	1,639,650
e	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	1,639,650
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	24,595
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,615,055
6	Minimum investment return. Enter 5% of line 5.	6	80,753

Part XI

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.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2012 from Part VI, line 5.	2a	
b	Income tax for 2012 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part 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	69,054
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		
a	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	69,054
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 (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	69,054
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7			
2	Undistributed income, if any, as of the end of 2012			
a	Enter amount for 2011 only.			
b	Total for prior years 20____, 20____, 20____			
3	Excess distributions carryover, if any, to 2012			
a	From 2007.			
b	From 2008.			
c	From 2009.			
d	From 2010.			
e	From 2011.			
f	Total of lines 3a through e.			
4	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.			
e	Remaining amount distributed out of corpus			
5	Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
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 been previously assessed.			
d	Subtract line 6c from line 6b Taxable amount—see instructions			
e	Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see instructions			
f	Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013.			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).			
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions). . . .			
9	Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a.			
10	Analysis of line 9			
a	Excess from 2008.			
b	Excess from 2009.			
c	Excess from 2010.			
d	Excess from 2011.			
e	Excess from 2012.			

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☒ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2012	(b) 2011	(c) 2010	(d) 2009	
		16,218	5,407	73,882	0	95,507
b	85% of line 2a	13,785	4,596	62,800	0	81,181
c	Qualifying distributions from Part XII, line 4 for each year listed.	69,054	90,099	55,032	74,052	288,237
d	Amounts included in line 2c not used directly for active conduct of exempt activities.	0	0	0	0	0
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.	69,054	90,099	55,032	74,052	288,237
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	53,835	53,438	49,255	45,304	201,832
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

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

Check here ☒ 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 or e-mail of the person to whom applications should be addressed

BLANCHE FISCHER FOUNDATION
1509 SW SUNSET BLVD 1-B
PORTLAND, OR 97239
(503) 246-4921

b

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

PER APPLICATION - SEE COPY OF APPLICATION ATTACHED

c

Any submission deadlines

NONE

d

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

APPLICANTS MUST HAVE DISABILITIES OF A PHYSICAL NATURE AND DEMONSTRATE FINANCIAL NEED WHILE RESIDING IN THE STATE OF OREGON

Part XV

Supplementary Information (continued)

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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	32,192
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities. . . .					42,201
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					9,057
8	Gain or (loss) from sales of assets other than inventory					12,400
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory. .					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). .		0		0	63,658
13	Total. Add line 12, columns (b), (d), and (e).					63,658

[illegible]

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash. (2) Other assets. b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received		Yes	No
	1a(1)		No
	1a(2)		No
	1b(1)		No
	1b(2)		No
	1b(3)		No
	1b(4)		No
	1b(5)		No
	1b(6)		No
	1c		No

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

*****	2013-08-08	*****
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☒	PTIN P00224781
	DEAN J ROTHENFLUCH CPA	DEAN J ROTHENFLUCH CPA	2013-08-07		
	Firm's name ☐	DEAN J ROTHENFLUCH CPA		Firm's EIN ☐ 93-0876611	
		7912 SW 35TH AVE SUITE 2			
Firm's address ☐	PORTLAND, OR 972192427		Phone no (503) 245-2254		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
192 179 SH NEUBERGER BERMAN	P	2011-03-07	2012-12-31
8587 848 SH PIMCO STOCKPLUS	P	2011-03-07	2012-07-10
1312 130 SH THOMAS WHITE INT'L	P	2011-03-07	2012-12-31
287 056 SH ALLIANZ DIVIDEND VALUE	P	2011-03-07	2012-10-23
318 226 SH AMER CENT MIDCAP	P	2011-03-07	2012-12-31
1941 273 SH ARTISON INT'L INV	P	2011-03-07	2012-07-10
4227 130 SH INVESCO SMALL CAP	P	2011-03-07	2012-12-31
249 444 SH JANUS GR & INCOME	D	2011-03-07	2012-04-30
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
2,624		2,255	369
73,423		68,921	4,502
21,948		23,042	-1,094
3,637		3,412	225
4,113		4,119	-6
41,900		43,082	-1,182
13,411		13,232	179
8,482		8,035	447
8,960			8,960

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			369
			4,502
			-1,094
			225
			-6
			-1,182
			179
			447
			8,960

Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARAUZA JUAN 186 N 5TH CORNELIUS,OR 97413	NONE	N/A	LIFT FOR VAN	1,000
ARNOLD JOHN 30904-A REDWOOD HWY CAVE JUNCTION,OR 97523	NONE	N/A	FIREWOOD	700
BARAJAS MARCO 951 SE 13TH 171 HILLSBORO,OR 97123	NONE	N/A	7-LEVEL COMMUNICATOR	412
BERRY JULIE 400 N MILL ST 32 CRESWELL,OR 97426	NONE	N/A	COMPRESSION STOCKINGS	128
BRADY NICOLE 3340 SW REDFERN PL GRESHAM,OR 97080	NONE	N/A	IPAD	700
BUTLER MELISSA SUE 6925 SW 78TH AVE PORTLAND,OR 97223	NONE	N/A	HOYER-TYPE LIFT	1,000
COCKEY MEGAN 18085 COUNTRY CILLAGE DR OREGON CITY,OR 97045	NONE	N/A	IPAD & APPS	648
COLE DEBBIE 705 10TH ST 9 OREGON CITY,OR 97045	NONE	N/A	BLIND	1,000
DOLAN MARK 221 NE BLAIR ST 14 SHERIDAN,OR 97378	NONE	N/A	HOME RETROFIT	600
EADES JUDY 1275 SW 5TH AVE ONTARIO,OR 97914	NONE	N/A	LIFT CHAIR	1,000
EICHORST THOMAS 1000 NE BUTLER MKT 5 BEND,OR 97701	NONE	N/A	COMPRESSION STOCKINGS	380
FARRAR LAURIE 11590 SE POWELL CT PORTLAND,OR 97266	NONE	N/A	PC BATTERIES	320
FIELDS EVELYN JOY 3113 BRISTOL AVE 26 KALAMATH FALLS,OR 97601	NONE	N/A	DIABETES SHOES/SOCKS	205
FIELDS EVELYN JOY 3113 BRISTOL AVE 26 KALAMATH FALLS,OR 97601	NONE	N/A	COMPRESSION SLEEVES	179
FIGGENS BRYTEN 221 SE CURRIN ST ESTACADA,OR 97023	NONE	N/A	IPAD	700

Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FREISINGER CASEY 18832 NE HALSEY PORTLAND,OR 97230	NONE	N/A	CAR SEAT	698
GARIBAY MARGIE 20300 SE MORRISON TERR C1010 GRESHAM,OR 97030	NONE	N/A	GLASSES	60
GIBSON ROSE PO BOX 54 FT ROCK,OR 97735	NONE	N/A	COMPRESSION STOCKINGS	448
HARRELL PAMELA 212 WINDSOR WAY CENTRAL POINT,OR 97502	NONE	N/A	RAMP	250
HEIDLEBAUGH WAYNE 11360 SE 34TH AVE MILWAUKIE,OR 97222	NONE	N/A	DRAGON NATURALLY SPEAKING	180
HILLIARD KERMIT 6520 NE 6TH 2 PORTLAND,OR 97211	NONE	N/A	RAMP	455
HOGAN-BECKERLE BREANNA 4807 SE BOARDMAN AVE 11 MILWAUKIE,OR 97267	NONE	N/A	HIPPOTHERAPY	1,000
HOLMAN GARY 239 SE 18TH ST TROUTDALE,OR 97060	NONE	N/A	27" MONITOR MACINTOSH	1,000
HOOD ANDREA 367 S IVY ST CORNELIUS,OR 97113	NONE	N/A	IPAD & APPS	600
HOPKINS TRILBY 360 STANLEY LANE LAKESIDE,OR 97449	NONE	N/A	LAPTOP COMPUTER	746
HUTCHINSON LARRY 777 STANTON BLVD 3-B03B ONTARIO,OR 97914	NONE	N/A	TV	219
HUTCHINSON LARRY 777 STANTON BLVD 3-B03B ONTARIO,OR 97914	NONE	N/A	DENTAL CO-PAY	280
KEPLER PATRICIA 5850 SW 177TH ALOHA,OR 97007	NONE	N/A	CSUN SCHOLARSHIP	1,000
KOTTKE ALDEN 6319 PONY CT WEST LINN,OR 97068	NONE	N/A	SPECIALIZED WALKER	949
LOVINCEY BERTHA 15751 NW ATHENS PORTLAND,OR 97229	NONE	N/A	LAPTOP COMPUTER	348

Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOPEX KAREN 166 REAGER ST 1 MEDFORD,OR 97501	NONE	N/A	RAMP	185
LUNSFORD BREANN 171 DESSERTY DR EAGLE POINT,OR 97524	NONE	N/A	COMM DEVICE	740
MASON DAKOTA 63207 WISHING WELL LANE BEND,OR 97701	NONE	N/A	ITUNES	190
MCGUIRE MEGAN 620 SE 174TH APT 17 PORTLAND,OR 97233	NONE	N/A	LAPTOP COMPUTER	600
MITCHELL MEGAN 917 E 8TH THE DALLES,OR 97058	NONE	N/A	PROTECTIVE BEDDING	150
MOBLEY JOHN 839 41ST WAY NE SALEM,OR 97301	NONE	N/A	DENTAL CO-PAY	1,000
MOHAMED ABDI 280 SE 12TH B507 HILLSBORO,OR 97123	NONE	N/A	LIFT PRESS	372
MORAN GEORGENA 244 NE 69TH AVE PORTLAND,OR 97213	NONE	N/A	HAND CONTROLS	1,000
OLIVER SUZETTE 262 FALCON 51 WHITE CITY,OR 97503	NONE	N/A	RAMP	395
ROMERO ROLAND 3030 SE CENTER ST PORTLAND,OR 97202	NONE	N/A	TV AMPLIFIER	80
ROSS DARLENE 236 NE KILLINGSWORTH ST 307 PORTLAND,OR 97217	NONE	N/A	LIFT CHAIR	775
SALINAS MARY 1133 OLIVE ST 220 EUGENE,OR 97401	NONE	N/A	LOWER DENTURE	650
SAYRE COLLEEN 122 ABBOTT ST GLIDE,OR 97443	NONE	N/A	EXERCISE EQUIPMENT	534
SCHMECKEL CHESTER 13815 NE HWY 240 NEWBERG,OR 97132	NONE	N/A	BATHROOM RETROFIT	915
SCHMOLKE LEE PO BOX 550 UMATILLA,OR 97882	NONE	N/A	HAND CONTROLS	985

Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHOLLEY VERONICA 2400 GABLE RD 318 ST HELENS,OR 97051	NONE	N/A	KINDLE	86
SMITH HERBERT 51361 SE HOODVIEWDR SCAPPOOSE,OR 97056	NONE	N/A	WALKER	549
SMITH MYRNA 4129 SE 66 AVE PORTLAND,OR 97206	NONE	N/A	FURNACE REPAIR, OIL	913
STAIR ANGEL 2432 LANSING AVE NE SALEM,OR 97301	NONE	N/A	IPAD & APPS	889
STOKES PAULETTE 910 SW PARK APT 201 PORTLAND,OR 97205	NONE	N/A	BRAILLER	1,000
TAYLOR CHRISTA 580 FENSTER ST EUGENE,OR 97401	NONE	N/A	MOBILITY	1,000
THOMAS SHANNON 7415 SE 19TH ST PORTLAND,OR 97202	NONE	N/A	HOME ACCESS	1,000
WASHINGTON CECIL 7930 NE WYGANT PORTLAND,OR 97218	NONE	N/A	SENSORY	249
WATSON DANIELLE 442 FLAGLINE DR BEND,OR 97701	NONE	N/A	INDEPENDENCE	695
WITHERSPOON LILLIAN 7041 NE KILLINGSWORTH 58 PORTLAND,OR 97218	NONE	N/A	FANNY PACK	35
Total ▶ 3a				32,192

TY 2012 Accounting Fees Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	2,851	950	1,901	1,901

TY 2012 General Explanation Attachment

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Identifier	Return Reference	Explanation
SUPPLEMENTARY INFORMATION - COPY OF APPLICATION	FORM 990-PF PART XV LINE 2B	BLANCHEFISCHERFOUNDATION1509 S W SUNSET BLVD , SUITE 1-BPORTLAND, OR 97239PHONE 503 246 4921E-MAIL INFOBFF@QWESTOFFICE.NET WEB WWW BFF ORGTHE BLANCHE FISCHER FOUNDATION IS A PRIVATE, NONPROFIT CHARITABLE INSTITUTION FOUNDED IN 1981 FOR THE PURPOSE OF ASSISTING PERSONS WHO HAVE A DISABILITY THAT CHALLENGES THEM PHYSICALLY AND WHO HAVE FINANCIAL NEED THERE ARE THREE CRITERIA FOR CONSIDERATION FOR A GRANT FROM THE FOUNDATION 1 YOU MUST BE AN OREGON RESIDENT,2 YOU MUST HAVE A DISABILITY OF A PHYSICAL NATURE, AND3 YOU MUST DEMONSTRATE FINANCIAL NEED APPLICANTS MAY APPLY FOR FINANCIAL AID FOR EDUCATION, SPECIAL EQUIPMENT OR FOR SUCH OTHER PURPOSES AS THE FOUNDATION FINDS APPROPRIATE.PLEASE NOTE?? THE APPLICATION MUST BE FILLED OUT COMPLETELY AND SIGNED BY THE APPLICANT OR APPLICANT'S LEGAL GUARDIAN ?? MEDICAL OR OTHER SATISFACTORY VERIFICATION OF DISABILITY (LETTER FROM PHY SICIAN OR OTHER HEALTH CARE PROFESSIONAL) IS REQUIRED ?? WE DO NOT ACCEPT FAXED APPLICATIONS YOU MUST MAIL THE ORIGINAL, ALONG WITH DOCUMENTATION, TO THE FOUNDATION THIS IS NECESSARY FOR THE FOUNDATION TO COMPLY WITH STATE AND FEDERAL REQUIREMENTS GRANT APPLICATIONNAME OF APPLICANT (PERSON FOR WHOM ASSISTANCE IS REQUESTED) ADDRESS STREET NO APT /UNIT CITY ZIPTELEPHONE/TTY () E-MAIL PAGE 1 OF 4I INFORMATION ABOUT YOUR DISABILITY 1 BRIEFLY DESCRIBE YOUR DISABILITY 2 HOW LONG HAS THIS CONDITION EXISTED?3 IS YOUR CONDITION PERMANENT? YES NOIF NO, EXPECTED DURATION 4 HOW DOES THIS AFFECT YOUR DAILY LIFE AND INDEPENDENCE?5 FOR WHAT PURPOSE ARE YOU REQUESTING FUNDING?6 HOW MUCH DOES IT COST? \$7 HOW MUCH DO YOU NEED THE BLANCHE FISCHER FOUNDATION TO CONTRIBUTE? \$8 HOW WILL THIS GRANT IMPROVE YOUR QUALITY OF LIFE?9 NAME AND ADDRESS OF VENDOR OR SUPPLIER (ATTACH COPY OF PRICE QUOTE OR ORDER INFORMATION) YES, ITS ATTACHED'10 HAVE YOU APPLIED FOR GRANTS FROM ANY OTHER SOURCE (S)? YES NOFROM WHOM? HOW MUCH? \$11 HAVE ANY BEEN APPROVED? YES NOBY WHOM? IN WHAT AMOUNT(S)? \$12 HAVE YOU EVER RECEIVED VOCATIONAL TRAINING? YES NO13 FROM WHOM (STATE AGENCY , FEDERAL, PRIVATE ORGANIZATION)?WHEN?DID THIS TRAINING RESULT IN EMPLOYMENT? YES NO14 ATTACH A LETTER OR REPORT FROM YOUR DOCTOR OR OTHER LICENSED HEALTH CARE PROFESSIONAL (SOCIAL WORKER, CASE MANAGER, ETC) VERIFYING YOUR DISABILITY YES, ITS ATTACHED' PAGE 2 OF 4II APPLICATION FOR BENEFITNOTE ALL HOUSEHOLD MEMBERS MUST BE CONSIDERED IN REPLY ING TO INCOME-RELATED QUESTIONS GENERAL INFORMATIONAPPLICANT'S BIRTH DATEIF A MINOR, NAME OF PARENT(S) OR GUARDIAN(S) AGE OF EACH CHILD IN HOUSEHOLD NUMBER AND RELATIONSHIP (PARENT, SPOUSE, CAREGIVER, ETC) OF ADULTS IN HOUSEHOLD NUMBER OF WAGE EARNERS IN HOUSEHOLD OCCUPATION(S) EMPLOYER(S) NAME(S) WORK PHONE (IF APPLICABLE) () INCOME AND EXPENSESA MONTHLY INCOME SALARY AND WAGES 1 PRIMARY WAGE-EARNER GROSS MONTHLY SALARY \$MONTHLY TAKE-HOME PAY \$2 SECOND WAGE-EARNER GROSS MONTHLY SALARY \$MONTHLY TAKE-HOME PAY \$B MONTHLY INCOME OTHERSOCIAL SECURITY \$CHILD SUPPORT \$FOOD STAMPS/OREGON TRAIL \$OTHER (DESCRIBE) \$C MONTHLY EXPENSESCATEGORY MONTHLY PAYMENT BALANCE OWEDFOOD \$CLOTHING \$UTILITIES \$HEALTH CARE (MEDICAL, DENTAL, VISION, PRESCRIPTIONS, ETC) \$ \$INSURANCE \$PAYMENTS (CREDIT CARDS, CAR PAYMENTS, LOANS, ETC) \$ \$OTHER (DESCRIBE) \$ \$D WHAT KIND OF MEDICAL INSURANCE, IF ANY, DO YOU HAVE? CHECK ALL APPLICABLE RESPONSES NONEPRIVATE HEALTH INSURANCE YES NOMEDICARE YES NOOREGON HEALTH PLAN YES NOOTHER (DESCRIBE) YES NO PAGE 3 OF 4E ASSETSDO YOU RENT OR OWN YOUR RESIDENCE? RENT OWNWHAT IS YOUR MONTHLY PAYMENT? \$DO YOU OWN ANY OTHER REAL PROPERTY ? YES NOIF YES, PLEASE DESCRIBE AUTOMOBILE(S) AUTOMOBILE 1MAKE AND YEAR VALUE \$AUTOMOBILE 2MAKE AND YEAR VALUE \$AMOUNT OF CASH IN BANK ACCOUNTS AND ANY STOCKS, BONDS OR SECURITIES, INCLUDING RETIREMENT PLANS AND LIVING TRUSTS DESCRIBE VALUE \$III OTHER INFORMATION YOU MAY WISH US TO CONSIDER (ATTACH LETTER, IF DESIRED) ALL GRANTS MADE ASSUME THE ACCURACY OF THIS APPLICATION I UNDERSTAND THAT IF A GRANT IS AWARDED, PAYMENT CAN BE MADE ONLY TO THE SUPPLIER OF GOODS OR SERVICES I FURTHER UNDERSTAND THAT ALL DECISIONS AS TO ELIGIBILITY AND GRANTS ARE MADE AT THE SOLE DISCRETION OF THE BLANCHE FISCHER FOUNDATION AND THAT ITS DECISIONS ARE FINAL I UNDERSTAND THAT ALL GRANTS AWARDED BY THE BLANCHE FISCHER FOUNDATION MUST BE REPORTED ON THE FOUNDATION'S FEDERAL AND STATE TAX RETURNS, AND AS SUCH, GRANTEEES' NAMES, ADDRESSES AND GRANT AMOUNTS ARE A MATTER OF PUBLIC RECORD SIGNATURE(S) APPLICANT PARENT/GUARDIAN (CIRCLE WHICHEVER IS APPROPRIATE)DATE PARENT/GUARDIAN (CIRCLE WHICHEVER IS APPROPRIATE)YOUR RESPONSE TO THE FOLLOWING QUESTION WILL NOT INFLUENCE IN ANY WAY THE OUTCOME OF THIS GRANT APPLICATION WOULD YOU LIKE US TO SEND YOU A VOTER REGISTRATION CARD, ALONG WITH THE NAMES OF YOUR STATE SENATOR, REPRESENTATIVE AND U S CONGRESSIONAL REPRESENTATIVE? YES NOBEFORE MAILING THIS APPLICATION 1 ARE ALL SECTIONS COMPLETE?2 HAVE YOU ATTACHED DOCUMENTATION FROM A MEDICAL OR OTHER PROFESSIONAL VERIFY ING DISABILITY ?3 HAVE YOU ATTACHED A COPY OF YOUR VENDORS PRICE QUOTE?MAIL THE COMPLETED APPLICATION AND DOCUMENTATION TO BLANCHE FISCHER FOUNDATION1509 S W SUNSET BLVD , SUITE 1-BPORTLAND, OR 97239 PAGE 4 OF 4

Identifier	Return Reference	Explanation
INVESTMENTS IN CORPORATE STOCK	FORM 990- PF PART II LINE 10B	BEG OF YEAR END OF YEAR END OF YEAR BOOK VALUE BOOK VALUE MKT VALUE 10706 514 SH ALLIANZ NFJ DIVIDEND VALUE FD 127265 04 126573 31 135235 96 8202 594 SH AMERICAN CENTURY MID CAP VALUE 106161 52 106656 24 107435 75 5859 832 SH ARTISAN INTERNATIONAL INVESTOR 130046 61 88040 58 97433 35 5862 843 SH CREDIT SUISSE COMMD RTRN STRTGY 57146 71 57146 71 47078 63 3058 167 SH GATEWAY FUND 80840 63 97276 83 99457 47 2766 386 SH INVESCO SMALL CAP GROWTH 87010 59 80508 01 79349 32 5356 932 SH JANUS GROWTH AND INCOME 172565 23 167457 74 177375 10 4566 213 SH MERGER FUND 0 00 72143 42 72283 15 5792 033 SH NEUBERGER BERMAN REAL ESTATE 67965 57 68635 74 78658 4336635 182 SH PIMCO STOCKSPUS TOTAL RETURN 294006 70 247214 49 270063 72 2481 965 SH SSGA EMERGING MARKETS 54576 55 55391 54 52354 67 7306 757 SH THOMAS WHITE INTERNATIONL 128884 19 107638 96 106625 71 5186 250 SH WELLS FARGO UTILITY & TELECOMM 64539 55 66299 15 76265 20 1371008 89 1340982 72 1399616 46

TY 2012 Investments Corporate Stock Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VARIOUS MUTUAL FUNDS	1,340,983	1,399,616

TY 2012 Investments - Other Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ROCK QUARRY	AT COST	227,700	227,700

TY 2012 Other Assets Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ARTIFACTS AND PAINTINGS, DRIFTWOOD LIBRARY	2,767	2,767	2,767

TY 2012 Other Expenses Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES & FEES	50	0	50	50
OFFICE AND TELEPHONE	3,204	0	3,204	3,204
BANK CHARGES & FEES	60	60	0	0
INSURANCE	1,822	0	0	1,822

TY 2012 Other Income Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
SALE OF ROCK IN PLACE FROM QUARRY	8,942	8,942	8,942
GRANT REFUND	115	115	115

TY 2012 Other Professional Fees Schedule**Name:** BLANCHE FISCHER FOUNDATION**EIN:** 93-0790099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OUTSIDE SERVICES	950	0	950	950
INVESTMENT FEES	17,010	17,010	0	0

TY 2012 Taxes Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	1,824	0	1,824	1,824
INTERNAL REVENUE SERVICE	4,625	4,625	0	0
OREGON DEPT OF JUSTICE	299	299	0	0
FOREIGN TAXES	541	541	0	0