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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ **Do not enter Social Security numbers on this form as it may be made public. By law, the IRS cannot redact the information on the form.**

▶ **Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013, or tax year beginning 01-01-2013 , and ending 12-31-2013

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

Room/suite

B Telephone number (see instructions)
(503) 246-4921

City or town, state or province, country, and ZIP or foreign postal code
PORTLAND, OR 97239

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name 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)*▶$ 1,898,763

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) ______
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

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))*

		Line	Description	(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	33,781	33,781	33,781	
	5a		Gross rents				
	b		Net rental income or (loss) ______				
	6a		Net gain or (loss) from sale of assets not on line 10	70,889			
	b		Gross sales price for all assets on line 6a 309,262				
	7		Capital gain net income (from Part IV, line 2)		70,889		
	8		Net short-term capital gain			0	
	9		Income modifications				
	10a		Gross sales less returns and allowances				
	b		Less Cost of goods sold				
	c		Gross profit or (loss) (attach schedule)				
	11		Other income (attach schedule)	38,916	38,916	38,916	
	12		**Total.** Add lines 1 through 11	143,586	143,586	72,697	
Operating and Administrative Expenses	13		Compensation of officers, directors, trustees, etc	0	0	0	0
	14		Other employee salaries and wages	18,534	0	18,534	18,534
	15		Pension plans, employee benefits				
	16a		Legal fees (attach schedule)				
	b		Accounting fees (attach schedule)	1,870	623	1,247	1,247
	c		Other professional fees (attach schedule)	19,709	18,629	1,080	1,080
	17		Interest				
	18		Taxes (attach schedule) (see instructions)	4,032	2,143	1,889	1,889
	19		Depreciation (attach schedule) and depletion				
	20		Occupancy	7,082	0	7,082	7,082
	21		Travel, conferences, and meetings	796	0	796	796
	22		Printing and publications				
	23		Other expenses (attach schedule)	5,128	11	5,117	5,117
	24		**Total operating and administrative expenses.** Add lines 13 through 23	57,151	21,406	35,745	35,745
	25		Contributions, gifts, grants paid	37,117			37,117
	26		**Total expenses and disbursements.** Add lines 24 and 25	94,268	21,406	35,745	72,862
	27		Subtract line 26 from line 12				
	a		**Excess of revenue over expenses and disbursements**	49,318			
	b		**Net investment income** (if negative, enter -0-)		122,180		
	c		**Adjusted net income** (if negative, enter -0-)			36,952	

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	-1,595	675	675
	2	Savings and temporary cash investments	29,461	62,427	62,427
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶	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 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)	1,340,983	1,368,406	1,605,194
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		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)	1,613,690	1,661,975	1,898,763
Liabilities	17	Accounts payable and accrued expenses	4,018	2,985	
	18	Grants payable			
	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)	4,018	2,985	
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	1,609,672	1,658,990	
	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)	1,609,672	1,658,990	
	31	**Total liabilities and net assets/fund balances** (see page 17 of the instructions)	1,613,690	1,661,975	

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	1,609,672
2	Enter amount from Part I, line 27a	2	49,318
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,658,990
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	1,658,990

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			(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	
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	70,889
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	-18

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))
2012	69,054	1,615,055	0 042756
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

2	**Total** of line 1, column (d).	2	0 244029
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 048806
4	Enter the net value of noncharitable-use assets for 2013 from Part X, line 5.	4	1,763,828
5	Multiply line 4 by line 3.	5	86,085
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	1,222
7	Add lines 5 and 6.	7	87,307
8	Enter qualifying distributions from Part XII, line 4.	8	72,862

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

Part VI Excise 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	2,444
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	2,444
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	2,444
6	Credits/Payments				
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	1,440		
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	1,440
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached			8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶			9	1,004
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 2014 estimated tax** ▶ **Refunded** ▶			11	

Part VII-A Statements Regarding Activities

			Yes	No
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?	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)?	1b		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 2013 or the taxable year beginning in 2013 (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 |

		Line	Yes	No
16	At any time during calendar year 2013, 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**

		Line	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)?	1b		No
	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 2013?	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 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? ☐ **Yes** ☑ **No**

If "Yes," list the years ▶ 20____, 20____, 20____, 20____

		Line	Yes	No
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**

		Line	Yes	No
b	If "Yes," did it have excess business holdings in 2013 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? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.).*	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 2013?	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
See Additional Data Table				

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	35,745
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	1,494,975
b	Average of monthly cash balances	1b	65,066
c	Fair market value of all other assets (see instructions)	1c	230,647
d	**Total** (add lines 1a, b, and c)	1d	1,790,688
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	1,790,688
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,860
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,763,828
6	**Minimum investment return.** Enter 5% of line 5	6	88,191

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 2013 from Part VI, line 5 — 2a:		
b	Income tax for 2013 (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	72,862
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	72,862
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	72,862

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 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2013				
a From 2008.				
b From 2009.				
c From 2010.				
d From 2011.				
e From 2012.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ $ ____________				
a Applied to 2012, 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 2013 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2013 *(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 2012 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				
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 2008 not applied on line 5 or line 7 (see instructions) . . .				
9 **Excess distributions carryover to 2014.** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2009. . . .				
b Excess from 2010. . . .				
c Excess from 2011. . . .				
d Excess from 2012. . . .				
e Excess from 2013. . . .				

Part XIV **Private 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 2013, 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2013	**(b)** 2012	**(c)** 2011	**(d)** 2010	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	36,952	16,218	5,407	73,882	132,459
b 85% of line 2a	31,409	13,785	4,596	62,800	112,590
c Qualifying distributions from Part XII, line 4 for each year listed	72,862	69,054	90,099	55,032	287,047
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	72,862	69,054	90,099	55,032	287,047
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	58,794	53,835	53,438	49,255	215,322
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 XV **Supplementary 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 address 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 Name and address (home or business)	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
a *Paid during the year* See Additional Data Table				
Total . . . . ▶ **3a**				37,117
b *Approved for future payment*				
Total . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

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. . . .					33,781
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.					38,916
8 Gain or (loss) from sales of assets other than inventory					70,889
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	143,586

13 **Total.** Add line 12, columns (b), (d), and (e). 13 143,586

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
3	THIS ORGANIZATION ENGAGES IN NO SERVICE PER SE, AND SEEKS NO
4	CONTRIBUTIONS IT MAINTAINS ITS INVESTMENTS AND FROM THAT SOURCE
7	OBTAINS THE FUNDS THAT IT PAYS OUT TO OR FOR QUALIFYING APPLICANTS
11	AND CHARITABLE ORGANIZATIONS, WHICH ALSO HAVE 501(C)(3) STATUS

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
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.	**1a(1)**		No
(2) Other assets.	**1a(2)**		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	**1b(1)**		No
(2) Purchases of assets from a noncharitable exempt organization.	**1b(2)**		No
(3) Rental of facilities, equipment, or other assets.	**1b(3)**		No
(4) Reimbursement arrangements.	**1b(4)**		No
(5) Loans or loan guarantees.	**1b(5)**		No
(6) Performance of services or membership or fundraising solicitations.	**1b(6)**		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	**1c**		No

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

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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

****** | 2014-05-12 | ******

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
DEAN J ROTHENFLUCH CPA		2014-05-09	☑	P00224781

Firm's name ▶	DEAN J ROTHENFLUCH CPA	Firm's EIN ▶ 93-0876611
Firm's address ▶	7912 SW 35TH AVE SUITE 2 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)
42 368 SSGE EMERGING MKTS	P	2013-03-07	2013-07-22
1515 826 ALLIANZGI NFJ DIV	P	2011-03-07	2013-07-22
1473 152 AMER CENT MID CAP VALUE	P	2011-03-07	2013-07-22
547 919 INVERSE SM CAP GROWTH	P	2011-03-07	2013-07-22
1462 584 JANUS GROWTH & INCOME	P	2011-03-07	2013-07-22
276 494 NEABERGER BERMON RE TRUST	P	2011-03-07	2013-05-23
8576 356 PIMCO STOCKPLUS ABSOLUTE	P	2011-03-07	2013-07-22
2481 965 SSGA EMERGING MKTS	P	2011-03-07	2013-07-22
40 59 THOMAS WHITE INT'L	P	2011-03-07	2013-05-23
693 495 WELLS FARGO UTILITY & TELECOMM	P	2011-03-07	2013-07-22
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)
797		815	-18
22,176		18,018	4,158
22,664		19,196	3,468
20,128		17,234	2,894
59,017		47,115	11,902
4,117		3,244	873
89,224		68,829	20,395
46,711		54,576	-7,865
757		716	41
11,279		8,630	2,649
32,392			32,392

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	
			-18
			4,158
			3,468
			2,894
			11,902
			873
			20,395
			-7,865
			41
			2,649
			32,392

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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 C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	PRESIDENT 2 00	0	0	0
MICHAEL MILLHOLLEN C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	TREASURER 4 00	0	0	0
GINNY BAYNES C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	SECRETARY 2 00	0	0	0
CATHY SANDERS C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	GRANT CHAIR 2 00	0	0	0
AARON JOINER C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	DIRECTOR 1 00	0	0	0
STACEY HASSEL C/O BLANCHE FISCHER FDN 1509 SW SUNSET BLVD 1-B PORTLAND, OR 97239	DIRECTOR 1 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
ADOW QASSIM 280 SE 12TH AVE 102 HILLSBORO, OR 97123	NONE	N/A	BUS PASS	432
ADOW QASSIM 280 SE 12TH AVE 102 HILLSBORO, OR 97123	NONE	N/A	TALKING SCALE	60
APONTE NOEL 20726 ALAN A DALE CT BEND, OR 97702	NONE	N/A	COMPUTER	957
BIXBY ROCKY 18126 SW 133RD TUALATIN, OR 97062	NONE	N/A	DRAGON DICTATE	172
BROMLEY JAY 340 SW RIMROCK WAY 68 REDMOND, OR 97556	NONE	N/A	WHEELCHAIR BATTERIES/TIRES	322
BURKE EMILY 127 SE WILSON ST BEND, OR 97702	NONE	N/A	LAPTOP, PRINTER	359
BURT BRADEN 16932 SE PINE PORTLAND, OR 97233	NONE	N/A	IPAD	598
BURT GAGE 16932 SE PINE PORTLAND, OR 97233	NONE	N/A	IPAD & APPS	607
BURT JACKSON 16932 SE PINE PORTLAND, OR 97233	NONE	N/A	IPAD & APPS	607
COOPER JEFF 1310 ORCHARD HEIGHTS RD 1310 SALEM, OR 97304	NONE	N/A	COMPUTER HARDWARE	994
CREIGHTON PAMELA 800 VALLEY VIEW RD TALENT, OR 97540	NONE	N/A	FUEL PUMP	162
CREIGHTON PAMELA 800 VALLEY VIEW RD TALENT, OR 97540	NONE	N/A	ELECTRIC BILL	695
DAVEE TARA 1950 2ND ST D104 SPRINGFIELD, OR 97477	NONE	N/A	COMPRESSION GARMENTS	740
DIAZ-GUITIERREZ JOSE 12365 SW CONESTOGA DR 50 BEAVERTON, OR 97008	NONE	N/A	BUS PASS	864
DURAN JOHN DAVID 5824 NE 42ND AVE PORTLAND, OR 97218	NONE	N/A	COMPUTER	1,000
Total . . . . ▶ **3a**				37,117

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
***a** Paid during the year*				
FIELDS JOY 3113 BRISTOL AVE 26 KLAMATH FALLS, OR 97601	NONE	N/A	COMPRESSION GARMENTS	365
FISCHER KELLY 2400 NE 27TH DR 103 GRESHAM, OR 97030	NONE	N/A	ORTHOPEDIC SHOES	180
FRAELICH NICHOLAS 8718 SE 92ND HAPPY VALLEY, OR 97086	NONE	N/A	LAPTOP, RECORDER	568
GAINES CHARLES 732 SE JACKSON ST 10 ROSEBURG, OR 97470	NONE	N/A	RENT ASSISTANCE	800
GLISAN SONRISA 5925 SE 128TH AVE PORTLAND, OR 97236	NONE	N/A	RENT ASSISTANCE	900
GRITTERS KIM 6909 SE ALBERTA ST PORTLAND, OR 97206	NONE	N/A	RAMP	360
GUSTAFSON NANCY 1655 NE HOYT TERR GRESHAM, OR 97230	NONE	N/A	SHOWER CHAIR	1,000
HANLON NICHOLE 410 NE OAK ST B15 MADRAS, OR 97741	NONE	N/A	TRAILER FOR WHEELCHAIR	500
HANLON NICHOLE 410 NE OAK ST B15 MADRAS, OR 97741	NONE	N/A	SWITCHES	324
HASSEL GARRETT 1696 SW BONNIE JEAN PL MCMINNVILLE, OR 97128	NONE	N/A	POWERCHAIR COPAY	1,000
HUSSEIN ABDIKADIR 12568 RAMONA ST PORTLAND, OR 97236	NONE	N/A	IPAD & APPS	688
JOHNSTON PETER 1665 OAK PATCH RD EUGENE, OR 97402	NONE	N/A	DENTAL	780
KERNES MICHELLE 377 W 8TH AVE 203 EUGENE, OR 97401	NONE	N/A	SERVICE DOG TRAINING	960
KONONEN KATIE 1310 ORCHARD HEIGHTS RD 1310 SALEM, OR 97304	NONE	N/A	DENTAL	1,000
LANDERS JONMICHAEL 324 SE 79TH AVE PORTLAND, OR 97215	NONE	N/A	COMPUTER, MONITOR	757
Total . . . . ▶ **3a**				37,117

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
LANE ANTHONY 8008 SE TETON DR GRESHAM, OR 97080	NONE	N/A	HIPPOTHERAPY	1,000
MARTIN MINTA 10 N 5TH ST LEBANON, OR 97355	NONE	N/A	IPAD	599
MEEKINS JORDAN PO BOX 514 HALSEY, OR 97348	NONE	N/A	SCHOOL EXPENSES	1,000
MENDELL RHONDA 91473 INDIAN CREEK RD SWISS HOME, OR 97480	NONE	N/A	ORTHOTICS	296
MOHAMED ABDI 280 SE 12TH B507 HILLSBORO, OR 97123	NONE	N/A	HAND CONTROLS	628
MORROW DAVID 6404 SE 23RD AVE 205 PORTLAND, OR 97202	NONE	N/A	WHEELCHAIR LIFT	988
NEIN MCKENZIE PO BOX 3333 BEND, OR 97708	NONE	N/A	BRAIN TRAINING PROGRAM	493
NICHOLSON JAKOB 1206 SE 163RD PL PORTLAND, OR 97211	NONE	N/A	WINDOW FOR VENTILATION	950
OLSEN LINDA 3802 HAYES ST 214 NEWBERG, OR 97312	NONE	N/A	MOBILITY DEVICES	891
OWEN JORDAN 61089 LARKSPUR LOOP BEND, OR 97702	NONE	N/A	BEHAVIOR MOD EQUIPMENT	276
OWEN LAWRENCE PO BOX 1015 DRAIN, OR 97405	NONE	N/A	SCOOTER MOUNT	750
PATTERSON ELEANOR 1293 HWY 99 N 4 EUGENE, OR 97402	NONE	N/A	COMPRESSION GARMENTS	960
PERDUR DEBRA 1062 MAIN ST 4 SPRINGFIELD, OR 97477	NONE	N/A	SERVICE DOG TRAINING	400
PLUNK TANYA 5235 NE 25TH PORTLAND, OR 97211	NONE	N/A	COMPRESSION GARMENTS	740
PORTER BILLIE 763 NE TIERRA RD BEND, OR 97701	NONE	N/A	SCOOTER MOUNT	1,000
Total . . . . ▶ **3a**				37,117

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
PURCELL COLLETTE 1278 SW 5TH AVE ONTARIO, OR 97914	NONE	N/A	COMPRESSION GARMENTS	1,000
QUINTERO RITA 1278 SW 5TH AVE ONTARIO, OR 97914	NONE	N/A	POOL PASS	246
QUINTERO RITA 1278 SW 5TH AVE ONTARIO, OR 97914	NONE	N/A	SWIM SUIT	50
RAY STORMY 715 CANYON 2 RD ONTARIO, OR 97914	NONE	N/A	TRANSPORTATION	256
RAY STORMY 715 CANYON 2 RD ONTARIO, OR 97914	NONE	N/A	VAN DOOR REPAIR	524
RONINGER LOGAN 34927 SUMMERTREE LANE CHILOQUIN, OR 97624	NONE	N/A	THRESHOLD RAMPS	474
SHANE KEIRA 200 SW FLORENCE AVE D4 GRESHAM, OR 97080	NONE	N/A	HIPPOTHERAPY	1,000
SOUTHWORTH JEFFREY 2606 NE LONGFELLOW CT BEND, OR 97701	NONE	N/A	IPAD & APPS	724
TATOM MARK 1712 21ST AVE FOREST GROVE, OR 97116	NONE	N/A	ARM PROTHESIS	862
TREAT BRANDON 39 NE 102ND 40 PORTLAND, OR 97220	NONE	N/A	CELL PHONE & SERVICE	430
VANDEHEY DAMON 2095 SE CURRIN LN HILLSBORO, OR 97123	NONE	N/A	SCREEN READER	614
VELLA MICHELE 2539 WILLAKENZIE RD 2 EUGENE, OR 97402	NONE	N/A	DEHUMIDIFIER	378
WARD EUNICE 2219 RADCLIFF AVE KLAMATH FALLS, OR 97601	NONE	N/A	RAMP	600
WILSON SANDRA 1633 NE 127TH AVE PORTLAND, OR 97220	NONE	N/A	EXERCISE EQUIPMENT	237
Total . . . . ▶ **3a**				37,117

TY 2013 Accounting Fees Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	1,870	623	1,247	1,247

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491134032034

TY 2013 General Explanation Attachment

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Identifier	Return Reference	Explanation
INVESTMENTS IN CORPORATE STOCK	FORM 990-PF PART II LINE 10B	FORM 990-PF - BLANCHE FISCHER FOUNDATIONFID # 93-0790099 2013SCHEDULE A BEG OF YEAR END OF YEARPART II LINE 10B, INVESTMENTS IN CORPORATE STOCK BOOK VALUE BOOK VALUE MKT VALUE 9340 845 ALLIANZ NFJ DIVIDEND VALUE FD 126573 31 111707 44 149360 117282 613 AMERICAN CENTURY MID CAP VALUE 106656 24 95516 84 114555 505082 443 ARTISAN INTERNATIONAL INVESTOR 88040 58 118879 10 154912 865862 843 CREDIT SUISSE COMMD RTRN STRTGY 57146 71 57146 71 42388 354381 671 GATEWAY FUND 97276 83 117406 90 127068 462131 218 INVESCO SMALL CAP GROWTH 80508 01 67690 59 87316 003794 849 JANUS GROWTH AND INCOME 167457 74 122937 99 168756 948855 206 LAZARD EMERG MRKT EQUITY BLEND 0 00 92636 06 96678 656842 737 MERGER FUND 72143 42 108650 71 109552 225981 431 NEUBERGER BERMAN REAL ESTATE 68635 74 70862 05 75545 4725250 693 PIMCO STOCKSPLUS TOTAL RETURN 247214 49 210368 37 252506 932481 965 SSGA EMERGING MARKETS 55391 54 0 00 0 007582 53 THOMAS WHITE INTERNATIONL 107638 96 134971 04 148010 994742 837 WELLS FARGO UTILITY & TELECOMM 66299 15 59632 64 78541 38 340982 72 1368406 44 1605193 86

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 503 819 8205E-MAIL BFF@BFF ORG 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 PHYSICIAN 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 AP090102 DOC PAGE 1 OF 4I INFORMATION ABOUT YOUR DISABILITY1 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, IT'S 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, IT'S ATTACHED! AP090102 DOC PAGE 2 OF 4II APPLICATION FOR BENEFITNOTE ALL HOUSEHOLD MEMBERS MUST BE CONSIDERED IN REPLYING 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 NOAP090102 DOC 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, GRANTEES' 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 VERIFYING DISABILITY?3 HAVE YOU ATTACHED A COPY OF YOUR VENDOR'S PRICE QUOTE?MAIL THE COMPLETED APPLICATION AND DOCUMENTATION TO BLANCHE FISCHER FOUNDATION1509 S W SUNSET BLVD , SUITE 1-BPORTLAND, OR 97239 AP090102 DOC PAGE 4 OF 4

TY 2013 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	1,368,406	1,605,194

TY 2013 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 2013 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

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TY 2013 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	2,790	0	2,790	2,790
BANK CHARGES & FEES	11	11	0	0
INSURANCE	1,742	0	1,742	1,742
VOLUNTEER RECOGNITION	143	0	143	143
DUES & SUBSCRIPTIONS	392	0	392	392

TY 2013 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	38,308	38,308	38,308
GRANT REFUNDS	608	608	608

TY 2013 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	1,080	0	1,080	1,080
INVESTMENT FESS	18,629	18,629	0	0

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TY 2013 Taxes Schedule

Name: BLANCHE FISCHER FOUNDATION

EIN: 93-0790099

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	1,889	0	1,889	1,889
INTERNAL REVENUE SERVICE	1,434	1,434	0	0
OREGON DEPT OF JUSTICE	226	226	0	0
FOREIGN TAXES	483	483	0	0