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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 a Private Foundation
▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form
▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf

OMB No 1545-0052

2013

Inter	nal Rev	venue Service	► Inf	ormation abo	ut F	orm 990	-PF a	nd its sep	arate instruc	tions is at wv	vw.irs gov/form990	pf	Open to Public	Inspection
For	caler	ndar year 2013, o	r tax ye	ear beginnin	9			-	, ,	2013, and e	nding		, 20	
		foundation									A Employer id	dentifi	cation numbe	r
FL	ECK	<b>FAMILY</b>	FOUN	DATION	_						91-14609	66		
		and street (or P.O. I			deliv	ered to str	reet ad	dress)		Room/suite				ns)
<u>14</u>	<u>655</u>	SE 267T	H ST	·							(253) 639	-18	97	
_		wn, state or provii	nce, cou	intry, and ZIF	or f	ioreign p	ostal (	code			C If exempt app	lication	is pending, check	here 🕨 📗
KE	NT	WA 98042	_	•										
G	heck	all that apply	L	Initial return	ı	L	Initi	al return o	of a former p	ublic charity	D 1. Foreign o	rganıza	ations, check h	ere 🕨 📙
	Final return					ļ	Am	ended ret	urn		2. Foreign org	anızatıo	ins meeting the 8	5%
				Address ch	<u>~</u> _			me chang			test, check	here an	nd attach compute	ition 🕨 📗
H	heck	type of organizat	pou.	X Section 5	01(c	)(3) exer	npt pr	ivate foun	dation		E If private four terminated u			_
	ectio	n 4947(a)(1) none	exempt o	charitable tru	st	Oth	er tax	able priva	te foundation	<u>n</u>	507(b)(1)(A), check here ▶			
I Fa	ur ma	rket value of all a	ssets at	end of	J	Accounti	ng me	ethod	Cash 🛚 🔀	Accrual				
ye	ar (fro	om Part II, col (c)		•		Other					F If the founda			` _
▶ \$		<del> </del>		428,337		rt I, colu	mn (d	) must be	on cash bas	sis )	507(b)(1)(B)			▶
Ра	·•••	Analysis of Revo (The total of amou (c), & (d) may not amounts in colum	unts in c t necess in (a) (se	columns (b), arily equal th	e	(a) Revenue and expenses per books (b) Net investment income			(c) Adjusted n Income	et	(d) Disburse for charit purpos (cash basis	able es		
	1 2	Contributions, gifts (attach schedule). Check ► X if the to attach	_		red							_		
	3	Interest on savings	and temp	cash investme	nts									
	4	Dividends and in	nterest fr	om secunties	; [			52 <b>,</b> 815	,		52	,815		
		Gross rents		•	. [									
R	b	Net rental income or (loss)			$\Box$									
EV		Net gain/(loss) from		ssets not on lini	- 1			•	4,					
E	b	Gross sales price fo all assets on line 6a			#	1								
N	7	Capital gain net inco	ome (from	Part IV, line 2)						. 0				
U	8	Net short-term of	apıtal g	aın								0		
-	9	Income modifica	itions		_							0		
	Ι.	Gross sales less rtns & allowances			0									
	ם	Less Costof goods sold												
	l	Gross profit or (l	, ,		;)									
		Other income (a		•	ļ			FO: 04.6				0		<del></del>
_	12	Total. Add lines		gh 11	_			52,815		. 0	52	,815		
O P	13	directors, trustees,	etc						<u> </u>				L	
E	14	Other employee		_	٠٠			_			SECEN/FI	<b>)</b>	<b></b>	
R A	15	Pension plans, e									RECEIVE		<u> </u>	
Ĵ		Legal fees (attac		•	_ إ								)SC	
I N	I	Accounting fees						80	1	1=1	APR 0 1 201	4	121	
Ğ	l	Other profession	nal tees	(attach schedu	le)					12			K	
. &	17	Interest			`						OGDEN,	UT-		
. A	18	Taxes (attach sch			_			35	<u>'</u>		COULTY			
-} D	19	Depreciation (att	ach sch )	and depletio	n				ļ					
, <b>M</b> , I	20	Occupancy .							1					
N	21	Travel, conference	-	-					ļ					
Ę لو	22	Printing and pub			}									
X P	23	Other expenses	•	•	ŀ				-				<u></u>	
Е	24	Total operating						115		^		^		0
N S	200	expenses. Add		_	}			67,500		0		0		75 <b>,</b> 000
Ĕ S	25	Contributions, gi			}									
<u>s</u>	26	Total exp & disburs			a 25			67,615	<u>'</u>	0		0		75,000
		Subtract line 26 Excess of rever and disburseme	nue ove ents	er expenses		-	_	14,800						
		Net investment		-										
	С	Adjusted net in	come (	f neg., enter -0-	-)				<u> </u>		52	,815	<u> </u>	

Pa	rt II	Balance Sheets description column should be for	Beginning of year	End o	f year
<u> </u>		Balance Sheets description column should be for end-of-year amounts only (See inst )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing .	309,103		
	2	Savings and temporary cash investments		487,907	487,907
	3	Accounts receivable ▶			
		Less allowance for doubtful accts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
Α	7	Other notes and loans receivable (attach schedule)			
		Less allowance for	1		
S	8	Inventories for sale or use			
S E T	9	Prepaid expenses and deferred charges			
S	10a	Investments US and state govt obligations (attach sch#bale)	1,201,720	940,430	940,430
	b	Investments corporate stock (attach schedule)			
		Investments corporate bonds (attach schedule)			
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	nvestments mortgage loans			
	13	Investments other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	(attach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers see the			
	. •	instructions Also, see page 1, item I)	1,510,823	1,428,337	1,428,337
匸	17	Accounts payable and accrued expenses	1,010,020	1,120,00	
Ĭ	18	Grants payable.			ı
B	19	Deferred revenue			
L	20	Loans from officers, directors, trustees, and other disqualified persons			
Ī	21	Mortgages and other notes payable (attach schedule).			1
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0		;
	25	Foundations that follow SFAS 117, check here	0		
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted			,
ΕŅ		Temporarily restricted			
n		Permanently restricted .			ı
ŜΒ	20	Foundations that do not follow SFAS 117, ck. here			
ASSETS OR					
ΕĀ	27	and complete lines 27 through 31.  Capital stock, trust principal, or current funds			
ġΝ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			1
οĔ	20	, , , , , , , , , , , , , , , , , , , ,	1,510,823	1,428,337	•
RS		Retained earnings, accumulated income, endowment, or other funds	1,510,823	1,428,337	
	30	Total net assets or fund balances (see instructions)	1,510,823		
<b>D</b> -	31	Total liabilities and net assets/fund balances (see instructions)		1,428,337	
<del></del>	rt III	Analysis of Changes in Net Assets or Fund Bal			
1		I net assets or fund balances at beginning of year Part II, column	n (a), line 30 (must agree v		1 510 000
_		-of-year figure reported on prior year's return)		1	1,510,823
2		er amount from Part I, line 27a	2	-14,800	
3		er increases not included in line 2 (itemize) SEE ATTACHME	C# 1NI	3	1 400 000
4		lines 1, 2, and 3		4	1,496,023
5		reases not included in line 2 (itemize) SEE ATTACHMEN		5	67,686
6		I net assets or fund balances at end of year (line 4 minus line 5)			1,428,337
FDA	. 1	3 990PF2 BWF 990 Form Software Copyright 1996 - 2014 HRB T	ax Group, Inc		Form <b>990–PF</b> (2013)

Part IV Capital Gains a	and Losses for Tax on Inv	estment Incom		<del></del>	
	e kınd(s) of property sold (e g , rea		(b) Howacquired	(c) Date acquire	d (d) Date sold
	use; or common stock, 200 shs MI		P Purchase	(mo, day, yr)	(mo, day, yr)
1a	200,000		D Donation	(11.0), 623, 31.7	(1.10 ; 00); ); )
b			-		
c					<del>-</del>
d				_	
е					
(2) 0-2	(f) Depreciation allowed	(g) Cost or o	ther basis	(h) (	Gain or (loss)
(e) Gross sales price	(or allowable)	plus expens			s (f) minus (g)
а	· · · · · · · · · · · · · · · · · · ·	<u> </u>		, , , , , , , , , , , , , , , , , , ,	- ( )
b		<u></u>	· · · · · · · · · · · · · · · · · · ·		·
c					<del></del>
d					- · · · · · · · · · · · · · · · · · · ·
e					
Complete only for assets show	ving gain in column (h) and owned	by the foundation or	n 12/31/69	(I) Gains (C	Col (h) gain minus
	(j) Adjusted basis	(k) Excess			not less than -0-) <b>or</b>
(i) F M V. as of 12/31/69	as of 12/31/69	over col (	1,7	Losses	(from col (h))
а					
b					
С					-
d					
е					
2 Capital gain net income or (ne	t capital loss) If gain, a	also enter in Part I, lin	ne 7		
2 Capital gain het income or the		enter -0- ın Part I, lı		2	0
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),	7		
enter -0- in Part I, line 8			. 」	3	0
Part V Qualification U	nder Section 4940(e) for I	Reduced Tax or	n Net Investn	nent Income	
(For optional use by domestic pnv	ate foundations subject to the sect	ion 4940(a) tax on ne	et investment inco	me)	
If section 4940(d)(2) applies, leave	this part blank				
	·				
Was the foundation liable for the s				d?	∐ Yes ∑ No
If "Yes," the foundation does not q					
1 Enter the appropriate amoun	t in each column for each year, see	the instructions before	ore making any er	ntries	
(a)	(b)		(c) Net value of		(d) Distribution ratio
Base period years Calendar year (or tax year beg in)	Adjusted qualifying distribut	nonch.	arıtable-use assets	(col	(b) divided by col (c))
2012		,000	1,510,		0.050966
2011		, 435	1,470,		0.051968
2010		,000	1,461,		0.051984
2009		,000	1,514,		0.049505
2008		,000	1,518,	973	0.046742
				<del> </del>	0.251165
3 Average distribution ratio for	the 5-year base period divide th	ne total on line 2 by 5	5, or by the numb	er	
of years the foundation has b	een in existence if less than 5 year	s		3	<u>0.050233</u>
4 Enter the net value of noncha	aritable-use assets for 2013 from P	art X, line 5 ·	•	4	1,365,807
5 Multiply line 4 by line 3		•		5	68,609
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	
7 Add lines 5 and 6	-			7	68,609
8 Enter qualifying distributions	from Part XII, line 4	•		. 8	75,000
If line 8 is equal to or greater	than line 7, check the box in Part \	/I, line 1b, and comp	lete that part usin	g a 1% tax rate S	ee the Part VI
instructions.					

Pai	tever tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see inst	<u>ructi</u>	ons)					
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 inst.)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check							
	here A and enter 1% of Part I, line 27b							
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-)				0			
3	Add lines 1 and 2							
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				0			
6	Credits/Payments							
а	2013 estimated tax payments and 2012 overpayment credited to 2013 . 6a							
b	Exempt foreign organizations tax withheld at source							
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				0			
8	Enter any <b>penalty</b> 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							
10								
11 Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11								
Pa	tiVII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or	L		Yes	No			
	intervene in any political campaign?	Ļ	1a		X			
b	<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for							
	definition)? . Ib							
	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?							
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$	_0						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
_	on foundation managers > \$0	ŀ	_		x			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ŀ	2		<u> </u>			
_	If "Yes," attach a detailed description of the activities			į 1				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		_		×			
4	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ŀ	3	<del>  </del>	X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	 /A	4a	$\vdash$				
ь 5	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? N  Was there a liquidation, termination, dissolution, or substantial contraction during the year?	/ <del>^</del>	4b 5	$\vdash$	X			
3	If "Yes," attach the statement required by General Instruction T	-		$\vdash\vdash$				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	i						
Ü	By language in the governing instrument, or				Ì			
	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	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the yr? If "Yes," complete Part II, col (c), & Part XV	`	7	X				
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-						
oa	► WA							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	-						
U	designate) of each state as required by General Instruction G? If "No," attach explanation							
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	H		<u> </u>				
3	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		×			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	H						
.5	and addresses · · · · ·		10		x			
				DE	(			

FLECK FAMILY FOUNDATION 91-1460966

Page 4

Form 990~PF (2013)

Forn	n 990∢PF (2013)		Pa	age <b>5</b>
Pa	it 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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .	13	Х	
	Webste address ► N/A			
14	The books are in care of ▶ SEE ATTACHMENT #7 Telephone no ▶			
	Located at ▶ ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			<b>•</b>
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the			
	foreign country >			
Pa	TO VIEB 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	· · · · · · · · · · · · · · · · · · ·			i
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			ļ
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . L Yes 🔀 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?	į		
	(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	ļ	ļ	
	after termination of government service, if terminating within 90 days) . U Yes X No			
b		1		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С		İ		
	that were not corrected before the first day of the tax year beginning in 2013?	1c	1	X
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))			
а				
	and 6e, Part XIII) for tax year(s) beginning before 2013?		1	1

, 20

FDA

If "Yes," list the years

if the foundation had excess business holdings in 2013)

enterprise at any time during the year?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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?

**▶** 20 , 20 , 20

to all years listed, answer "No" and attach statement -- see instructions)

3a Did the foundation hold more than a 2% direct or indirect interest in any business

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)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

. . . . . 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

3b

4b

2b

Χ

orm	990-	PF (2013)	FLEC	K FA	AMILY FO	DUNDATIO	ON 91-14	460966										Pa	ige 6
Par	VII-	<u>-B∣S</u>	tatemen	its I	Rega	rding	Activ	ities for V	Vhich	Form	4720 May E	3e R	equire	d (cc	วกเกนย	ed)			
5a	Durir	ng the yea	ar did the fo	ounc	dation p	pay or in	cur ar	y amount to											
	(1)	Carry on	propagano	da, o	or othe	rwise atte	empt t	o influence le	gislatio	n (section	4945(e))?		. 🛛	Yes	N N	No.			
	(2)	Influence	the outcor	me c	of any s	specific p	public	election (see	section	1 4955), o	to carry		_		_				
		on, direct	tly or indire	ectly,	, any vo	oter regis	stratio	n drive? .					П	Yes	X r	40			
	(3)	Provide a	a grant to a	an in	dividua	al for trav	vel, stu	idy, or other s	simılar ı	purposes <sup>r</sup>	•		. П	Yes	N P	<b>1</b> 0			
	(4)	Provide a	a grant to a	an or	rganıza	tion othe	er than	a charitable,	etc, o	rganizatio	n described		_		_				
		ın sectior	n 509(a)(1),	, (2),	, or (3),	, or section	on 494	40(d)(2)? (see	ınstru	ctions)			П	Yes	X	No.			
	(5)	Provide f	or any pur	pose	e other	than reli	igious,	charitable, se	cientific	, literary,	or								
		education	nal purpose	es, c	or for th	ne preve	ntion o	of cruelty to c	hildren	or animal	s?			Yes	X N	No.			
b								•			der the excepti	ons d	سا escribed	l in					
	_										(see instructio				N/	Δ	5b		
								g disaster ass			•	,				i l		-	
С	_						-	foundation cla					·		٠ ١	-			
								or the grant?				N.	/A ∏	Yes		40			
				-		•	-	ons section 5	3 4945	-5(d)		14,	٠٠ ١		ш,				
6a					•	•	-			` '	ay premiums								
			benefit cor	-					0	,,	ay promisino		П	Yes	X N	lo l			
b		•				nav nre	mum		ndirecti	v on and	rsonal benefit	contr		103	КЛ .	•	6b		Х
_			file Form 8	-	-	, pu, p.o	,,,,,	o, anoony or r	i idii oot	iy, on a p	Journal Berieff	001111	uot .	• •					
7a		•				s the four	ndatio	n a narty to a	nrohih	uted tay e	helter transacti	on?		Yes	X N	<b>1</b> 0			
		-	_	-					•		stable to the tra			163	N/.	- 1	7b		
		_												اممل					
ı_aı	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors																		
1	l iet :					e found	dation	managere a	nd the	ir compe	nsation (see i	netru	ctions)						
•	LIST	an office	is, directo	13, 1	ii usice	;s, 10u110		b) Title, and a		Γ'			Contrib	utions	to I	(a) E			
		(a) Na	ame and ac	ddre	ess			hours per we	eek		npensation aid, enter -0-)	emp	loyee be	enefit į	plans		•	accou wance	
CEL	י א י	דייות כי נו	IMENT	# Q			-   0	levoted to po	sition	(	,	and	<u>d_deferre</u>	ea cor	mp	Oti	iei aiic	wance	
		LIACII	11.11.11	πΟ															
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												İ							
												1							
										<u> </u>	<u> </u>	<u> </u>							
2		-		nighe	est-pa	iid empl	oyees	(other than	those	included	on line 1 s	ee in:	structio	ns).					
	т по	ne, enter	r "NONE."							i		- (-I)	Calababa						
(a	) Nam	ne and ad	dress of ea	ach e	employ	vee paid	(	( <b>b)</b> Title, and					Contribi mployee			(e) Ex	pense	accou	unt.
	•		ore than \$5					hours per w		( <b>c</b> ) Cor	npensation	pla	ans and	defer	red			wance	
								devoted to po	Sillon			ļ	comper	satior	<u> </u>				
NON	ΙE																		
										1									

FLECK FAMILY FOUNDATION 91-1460966

Form 990-PF (2013)

Form 990+PF (2	013) FLECK FAMILY FOUNDATION 91-	-1460966	Page <b>7</b>
Pent VIII	Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Hig	phly Paid Employees,
3 Five highes	st-paid independent contractors for professional services (see	instructions). If none, enter "NO	
(a) Na	ame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			<u></u>
Total number of	f others receiving over \$50,000 for professional services	·	<u> </u>
Par IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant and other beneficiaries served, conferences convened, research papers produc		Expenses
1			
2			
3			-
4			

RandX≅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 instructions	
3	
<b>Total.</b> Add lines 1 through 3	
FDA 13 990PF7 BWF 990 Form Software Copyright 1996 - 2014 HRB Tax Group, Inc	Form <b>990-PF</b> (2013)

LP <sub>E</sub>	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes	Part of the second	
а	Average monthly fair market value of securities	1a	1,003,840
b	Average of monthly cash balances	1b	382,766
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,386,606
е	Reduction claimed for blockage or other factors reported on lines 1a and	- 1	
	1c (attach detailed explanation) 1e	16.50-	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,386,606
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	20,799
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,365,807
6	Minimum investment return. Enter 5% of line 5	6	68,290
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u>' </u>	
	foundations and certain foreign organizations check here  and do not complete this part )		
1	Minimum investment return from Part X, line 6.	1	68,290
2a	Tax on investment income for 2013 from Part VI, line 5	PK /	
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	68,290
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	68,290
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,	<del></del>	
-	line 1	7	68,290
General		<u> </u>	
Pā	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	75,000
b	Program-related investments total from Part IX-B	1b	•
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	<del> -</del>	
а	Suitability test (prior IRS approval required) .	3a	
b	Cash distribution test (attach the required schedule) .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	75,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del>  </del>	,
•	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	75,000
٠	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the		·
		e louiluado	11
	qualifies for the section 4940(e) reduction of tax in those years		

Form 9	990-PF (2013) FLECK FAMILY FOUN	DATION 91-1460966	3			Page <b>9</b>
Par	t XIII Undistributed Incor	ne (see instructi	ions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Pa	art XI,	Corpus	Years prior to 2012	2012	2013
	line 7	[				68,290
2	Undistributed income, if any, as of the end o	f 2013				
а	Enter amount for 2012 only					
b	Total for prior years 20, 20, 20					
3	Excess distributions carryover, if any, to 201	13				
а	From 2008 .					
b	From 2009 . 1	,586				
C	From 2010	892				
d	From 2011 2	,478				
е	From 2012 8	,948				
f	Total of lines 3a through e		13,904			
4	Qualifying distributions for 2013 from Part X	30,				
	line 4 ▶ \$ 75,000	]				
а	Applied to 2012, but not more than lir	ne 2a		1		
b	Applied to undistributed income of prior year	nrs				
	(Election required see instructions).					
С	Treated as distributions out of corpus	;				
	(Election required see instructions	)				
d	Applied to 2013 distributable amount					· · · · · · · · · · · · · · · · · · ·
е	Remaining amount distributed out of corpus	,				
5	Excess distributions carryover applied to 20	)13				
	(If an amount appears in column (d), the same	е -				
	amount must be shown in column (a) )					
6	Enter the net total of each column	as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e. Subtract lin	ne 5	13,904			
b	Prior years' undistributed income Su	btract				
	line 4b from line 2b	.				
C	Enter the amount of prior years' undistribute	ed				
	income for which a notice of deficiency has	been				
	issued, or on which the section 4942(a) tax i	has				
	been previously assessed .					
d	Subtract line 6c from line 6b Taxable	,				
	amount see instructions					
е	Undistributed income for 2012 Subtr	act				
	line 4a from line 2a Taxable amount					
	see instructions .					
f	Undistributed income for 2013 Subtr	ract				
	lines 4d and 5 from line 1. This amou	ınt				
	must be distributed in 2014			+		68,290
7	Amounts treated as distributions out	of	· -			
	corpus to satisfy requirements impos	ed				
	by section 170(b)(1)(F) or 4942(g)(3)	(see				
	instructions)					
8	Excess distributions carryover from 2	008				
	not applied on line 5 or line 7 (see	1				
	instructions)					
9	Excess distributions carryover to 2	2014.				
	Subtract lines 7 and 8 from line 6a .		13,904			
10	Analysis of line 9					
а	· ,	,586				
b	Excess from 2010	892				
c		2,478				
d		992				
е		,948				
FDA	<del> </del>	oftware Copyright	1996 - 2014 HRB	Tax Group, Inc		Form <b>900-PF</b> (2013)

Par	t XIV Private Operating Found	ations (see instru	ictions and Part VII-	A, question 9)		
	If the foundation has received a ruling or	determination letter	that it is a private or			
	foundation, and the ruling is effective for		•	<b>•</b>		
ь	Check box to indicate whether the foundation	*	erating foundation d	escribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2013	<b>(b)</b> 2012	(c) 2011	( <b>d</b> ) 2010	· · · · · · · · · · · · · · · · · · ·
_	year listed				_	0
	85% of line 2a .		<del></del>	<u>-</u>		<u> </u>
C	Qualifying distributions from Part XII,					o
d	Ine 4 for each year listed  Amounts included in line 2c not used		<del>                                     </del>			
u	directly for active conduct exempt act				•	o
е	Qualifying distributions made directly					
·	for active conduct of exempt activities					
	Subtract line 2d from line 2c					О
3	Complete 3a, b, or c for the alternative		<del>                                     </del>			<u>_</u>
	test relied upon					
а	"Assets" alternative test enter					
	(1) Value of all assets					О
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test enter					
	2/3 of min investment return shown in Part X, line 6 for each year listed					0
С	"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
Pa	Supplementary Informa		•	if the foundation	n had \$5,000 or	more in assets
1	at any time during the y Information Regarding Foundation Ma		structions.)			
' a	List any managers of the foundation who	•	nore than 2% of the t	total contributions rece	awed by the foundation	on before the
u	close of any tax year (but only if they have				eived by the loundan	on belore the
	NONE	o continuated more	τηση φο,σου) (σου σ	001011 007 (0)(2) )		
b	List any managers of the foundation who	own 10% or more	of the stock of a con	poration (or an equally	large portion of the	ownership
	of a partnership or other entity) of which		•		g. p	
	NONE		J			
2	Information Regarding Contribution, G	irant, Gift, Loan, S	cholarship, etc., Pr	ograms:		
	Check here ► X if the foundation only	makes contribution	s to preselected cha	ritable organizations a	nd does not accept i	unsolicited
	requests for funds If the foundation make	es gifts, grants, etc	(see instructions) to	ındıvıduals or organız	ations under other co	onditions,
	complete items 2a, b, c, and d					
а	The name, address, and telephone numb	er or e-mail of the	person to whom app	plications should be a	ddressed	
	SEE ATTACHMENT # 9					
	<u> </u>					
b	The form in which applications should be	submitted and info	ormation and materia	ils they should include		
C	Any submission deadlines					
		<del></del>				
đ	Any restrictions or limitations on awards,	such as by geograp	onical areas, charitab	ole fields, kinds of instr	tutions, or other facto	ors

Form 990~PF (2013) FLECK FAMILY FOUNDATION 91-1460966 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of **Amount** contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year SEE ATTACHMENT #10 ▶ 3a 67,500 Total Approved for future payment

▶ 3b

Form 990-PF (2013) FLECK FAMILY FOUNDATION 91-1460966

Page 12

Enter, gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Excl	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue	code		code		(Occ mondenons)
a					
b					· · · · · · · · · · · · · · · · · · ·
c					
d					
e					
1					
9 Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments .					
4 Dividends and interest from securities			14	52,815	
5 Net rental income or (loss) from real estate					
a Debt-financed property			-1		
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				•	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	"	•			
11 Other revenue: a					
b SEE ATTACHMENT #11					-
С			1		
d d					<del></del>
e					
12 Subtotal Add columns (b), (d), and (e)			0	52,815	0
13 Total. Add line 12, columns (b), (d), and (e)	•			13	52,815
(See worksheet in line 13 instructions to verify calcula	tions)				

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)

Form	990-	-PF (2013) FLEC	K FAMILY	FOUNDATION	91-1460	966			Pag	је <b>1</b>
Pa	rt X\			ransfers To and Tr	ansactions	and Relationsh	ips With No	ncharita	ble	
	·	Exempt Org		<del></del>		<del> </del>				
1		-		age in any of the following	=	=			Yes	No
_				(3) organizations) or in se	•	ng to political organi	zations?			
а			foundation to a r	noncharitable exempt orga	inization of					.,
		Cash · · · · ·				•		1a(1)		<u>X</u>
_		Other assets · ·	•		•			1a(2)		X
b		er transactions	ahartahla ayam	at arganization				45/4	ŀ	v
	(1) (2)	Sales of assets to a nor Purchases of assets fro	`	_	•••	•	•	1b(1)		<u>Х</u>
	(3)			• •		•		1b(2) 1b(3)		X
	(4)	Reimbursement arrange		3300	•		•	1b(4)		X
	(5)	Loans or loan guarante						1b(5)		X
	(6)	<del>-</del>		or fundraising solicitation	· S			1b(6)	1	X
С	٠,		•	other assets, or paid empl				1c		X
d			-	mplete the following sche	-	b) should always sh	ow the fair mark		the	<del></del>
(a) ∟	ine no.	(b) Amount involved	(c) Name of no	ncharitable exempt organ	zation (d) Des	scription of transfers, tr	ansactions, and sha	rıng arrange	ments	
2a			-	d with, or related to, one on 501(c)(3)) or in section 5		mpt organizations de	escribed in	Yes	$\square$	No
_ b		'es," complete the follow							ت	
		(a) Name of organiza	tion	(b) Type of orga	anızatıon	(c) D	escription of rela	tionship		
		Under penalties of periury.	I declare that I have	examined this return, includin	o accompanying sc	hedules and statement	s. and to the best of	f my knowle	dge an	nd .
Sig Her		belief, it is true, correct, and	P7leek	3/21/3	payer) is based on	all information of whic	May the IF with the p	nowledge IS discuss the reparer show	his ret	urn
		Signature of officer of	or trustee	Date /	Title		(see instru	ctions)?	Yes	ΧN
Paid	d	Print/Type prepare	's name 05 Z Y K	Pregarer's signature	eyeb	Date   3   2   1   1	Checkif self-employed	PTIN P0060	)59	37

Paid

FDA

Preparer

**Use Only** 

Α

ST SE

Firm's EIN ▶ 273271909

## 13\_EOPFGR91L

# 990 SCHEDULE OF GAIN/LOSS FROM SALE OF ASSETS OTHER THAN INVENTORY (Not Included in Part IV)

	•		Date Sold	2013-09			Deplecianol		 _
	<u></u>	Employer Identification Number 91-1460966				Gain or (Loss)			
	and ending	Employer ider   91 – 14609	How Acquired			Sales Expense			
				PURCHASED PURCHASED		Basis		155,000	_
PAGE 1, LINE 6	eriod beginning		Acquisition Date	2003-12 PUI	* *	Gross Sale Price		155,000	
ATTACHMENT 1: PAGE 1 - 990-PF PART I, PAG	OPEN TO PUBLIC INSPECTION For Calendar year 2013, or tax year period beginning	Name of Organization FLECK FAMILY FOUNDATION	Name of Security or Description of Property	OTHER NONINVENTORY ASSETS: DOUGLAS PUD-1 JEFFERSON COUNTY BOND		To Whom Sold		FLECK FAMILY FOUNDATION FLECK FAMILY FOUDATION	

L082813F

990 SCHEDULE OF ACCOUNTING FEES ATTACHMENT 2: - 990-PF PAGE 1, PART I, LINE 16B OPEN TO PUBLIC INSPECTION For calendar year 2013, or tax period beginning , and ending Name of Organization Employer Identification Number FLECK FAMILY FOUNDATION 91-1460966 Net Investment Adjusted Disbursements for **Accounting Category** Amount Income Net Income Charity 80 TAX PREP

FDA

## 990 SCHEDULE OF TAXES PAID

ATTACHMENT 3: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18 OPEN TO PUBLIC INSPECTION For calendar year 2013, or tax period beginning , and ending Name of Organization Employer Identification Number FLECK FAMILY FOUNDATION 91-1460966 Disbursements for Adjusted Net Investment Category **Amount** Charity Income Net Income 35 SECRETARY OF STATE 35 Total:

## 990 SCHEDULE OF INVESTMENTS - GOVERNMENT OBLIGATIONS

ATTACHMENT	4: PAGE 1 - 990-PF PAGE 2	, PAR	T II,	LINE	10A	
OPEN TO PUBLIC						
INSPECTION	For calendar year 2013, or tax period beginning			, and end	ling	
Name of Organization	n		a. <u>sa</u>	Employer Ide	ntification Number	
FLECK FAMI	LY FOUNDATION				91-1460	966
	Description	Cost	FMV at	-	Book Value	Fair Market Value
U S Government OI	Minatione		End of 1	eai		
	<u> </u>				940,430	940,430
	Government Obligations		L			
Total U.S. and State	Government Obligations · · · · ·				940,430	940,430

## 990 SCHEDULE OF OTHER INCREASES

ATTACHMENT 5: PAGE 1 - 990- PF P OPENTO PUBLI¢	AGE 2, PART	III, LINE 3	3
INSPECTION For calendar year 2013, or tax penod begins	oina	, and ending	
Name of Organization	<u>g</u>	, and ontaing	Employer Identification Number
FLECK FAMILY FOUNDATION			91-1460966
Description of In	crease	-	Total Amount
Description of m	Crease		Total Amount
			Total:

## 990 SCHEDULE OF OTHER DECREASES

TACHMENT 6: PAGE 1 - 990- PF PAGE 2, PART PEN TO PUBLIC ISPECTION For calendar year 2013, or tax period beginning		
ISPECTION For calendar year 2013, or tax period beginning ne of Organization	, and ending  Employer Identificatio	n Number
ECK FAMILY FOUNDATION	91-1460966	ir Number
Description of Decrease		al Amount
CASHED CHECKS		25,00
CREASE IN MARKET VALUE		42,68
	+	
	Total:	67,6

## 990 BOOKS ARE IN CARE OF

ATTACHMENT 7 - 990-PF PAGE 5, PART VII-	A, LINE 14
OPEN TO PUBLIC	
INSPECTION For calendar year 2013, or tax period beginning	, and ending
Name of Organization	Employer Identification Number
FLECK FAMILY FOUNDATION	91-1460966
Part VII-A - Line 14	
Individual Name	DUANE FLECK
or	
Business Name	
	4.4655 0- 0.65-11 4-
Street Address	14655 SE 267TH ST
U.S. Address	
U.S. Address	
Zip code 98042 City KENT	O [1]
, ,,	State <u>WA</u>
or Foreign Address	
Foreign Address	
City	
Province or State	
Country	
Country	
Southly	· · · · —
Postal code	· · · · <u>-</u>
	· · · —
Postal code	
Postal code	. (206) 310-8676

## 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 8: PAGE 1 - 990-PF PAGE 6, PART VIII OPENTO PUBLIC INSPECTION , and ending For calendar year 2013, or tax period beginning Name of Organization **Employer Identification Number** 91-1460966 FLECK FAMILY FOUNDATION (C) Compensation (If (E) Expense Account (A) Name and Address (B) Title and Average (D) Cont to Employee Hrs per Week not paid, enter 0) Ben Plans & Def Comp & Other Allowances BRIAN FLECK VICE 18921 3RD ST E PRESIDENT LAKE TAPPS, WA 98391 DUANE FLECK PRESIDENT 14655 SE 267TH ST KENT, WA 98042 SANDRA FLECK SECRETARY 14655 SE 267TH ST KENT, WA 98042

## 990 APPLICATION SUBMISSION INFORMATION

Restrictions on Awards Employer Identification Number 91-1460966 Submission Deadlines and ending Info and Materials Included PART XV, LINE 2 For Calendar year 2013, or tax year period beginning Phone Number or e-mail ATTACHMENT 9: PAGE 1 990-PF PAGE 10, OPEN TO PUBLIC FLECK FAMILY FOUNDATION Name Name of Organization

## 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU

INSPECTION For calendar year 2013, or tax period beginning , and ending

Name of Organization
FLECK FAMILY FOUNDATION

Employer Identification Number

FLECK FAMILY FOUNDATION			91-1	91-1460966				
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	Foundation Status of	Purpose of Grant or Contribution	Amount				
Name and Address (home or business)	or Substantial Contributor	Recipient						
FATHER JOE'S VILLAGES 3350 E STREET SAN DIEGO CA 92102-3332	UNRELATED		FOR EXEMPT PURPOSES	5,000				
FOCUS PO BOX 180023 CORONADO, CA 92178	UNRELATED		FOR EXEMPT PURPOSES	5,000				
AUBURN YOUTH RESOURCES 816 F ST AUBURN WA 98002-6121	UNRELATED		FOR EXEMPT PURPOSES	10,000				
YWCA OF PIERCE COUNTY 405 BROADWAY	UNRELATED		FOR EXEMPT PURPOSES	10,000				
TACOMA, WA 98402				2,500				
NATIONAL EASTING DISCORDERS ASSOCIATION 165 WEST 46TH ST SUITE 402	UNRELATED		FOR EXEMPT PURPOSES					
NEW YORK, NY 10036				2,500				
MILLIONAIR CLUB 2615 WESTERN AVE SEATTLE, WA 98121-1387	UNRELATED		FOR EXEMPT PURPOSES	10,000				
VAPS FISHER HOUSE 1660 SOUTH COLUMBIAN WAY SEATTLE, WA 98108-1587	UNRELATED		FOR EXEMPT PURPOSES	2,500				
FRIENDS OF ALZHEIMER'S UW MEDICINE BOS 359505 SEATTLE, WA 98195	UNRELATED		FOR EXEMPT PURI	2,500				
A PLUS YOUTH PROGRAM C/O TAVIO HOBSON 3815 S OTHELLO STE 100	UNRELATED		FOR EXEMPT PURPOSES	2,300				
PMB 134 SEATTLE, WA 98118				2,500				
				2,500				
UNION GOSPEL MISSION PO BOX 202 SEATTLE, WA 98111-0202	UNRELATED		FOR EXEMPT PURPOSES	2,500				
DEMITTE, WA 90111-0202				2,300				
ELKS NATIONAL FUNDATION INC 2750 N LAKEVIEW AVE	UNRELATED		FOR EXEMPT PURPOSES					
ELOO M THITTENATOM VAD	1		J	<u> </u>				

Total:

## 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10: PAGE 2 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU

INSPECTION For calendar year 2013, or tax period beginning , and endi

Name of Organization

Employer Identification Number

Recopent   State of Contributor   Name and Address (tome or business)   Or Substantial Contributor   State of Recopent   Sta	Name of Organization <u>FLECK FAMILY FOUNDATION</u>			Employer Identification Num 91–1460966				
Name and Agdress (nome or business)  **Substantial Contributor**  **CHICAGO, IL 60614-2256  **MASHINGTON ELKS THERAPY PROGRAM PO BOX 110760  **MEA CHILDREN'S FUND PO BOX 9100  **TACOMA, WA 98411-0760  **WEA CHILDREN'S FUND PO BOX 9100  **TEDERAL WAY, WA 98063-9100  **TACOMA PIERCE COUTY HABITAT FOR HUMANITY FO BOX 7124  **TACOMA, WA 98417  **TACOMA, WA 98417  **TACOMA, WA 98417  **Substantial Contributor  **FOR EXEMPT PURPOSES  **FOR EXEMPT PURPOSE HABITATED POR EXEMPT PURPOSE HABITATED PURPOSE PURPOSE HABITATED PURPOSE PURPOSE PURPOSE PURPOSE PURPOSE PURPOSE PURP	Recipient	Show any Relationship to	Status of	Purpose of Gran	nt or			
WASHINGTON ELKS THERAPY PROGRAM PO BOX 110760 TACOMA, WA 98411-0760 WEA CHILDREN'S FUND PO BOX 9100 FEDERAL WAY, WA 98063-9100 TACOMA PIERCE COUTY HABITAT FOR HUMANITY PO BOX 71.24 TACOMA, WA 98417  UNRELATED FOR EXEMPT PURPOSES  FOR EXEMPT PURPOSES  FOR EXEMPT PURPOSES  FOR EXEMPT PURPOSES  10,000  2,500		or Substantial Contributor	Hecipient			5 000		
PROGRAM PO BOX 110760 TACOMA, WA 98411-0760  WEA CHILDREN'S FUND PO BOX 9100 FEDERAL WAY, WA 98063-9100  TACOMA PIERCE COUTY HABITAT FOR HUMANITY PO BOX 7124 TACOMA, WA 98417  TACOMA, WA 98417  PURPOSES  FOR EXEMPT PURPOSE  FOR EXEMPT PURPOSE  2,500	CHICAGO, IL 60614-2256					5,000		
PO BOX 9100 FEDDERAL WAY, WA 98063-9100 TACOMA PIERCE COUTY HABITAT FOR HUMANITY PO BOX 7124 TACOMA, WA 98417  TACOMA, WA 98417  PURPOSES  FOR EXEMPT PURPOSE  2,500	WASHINGTON ELKS THERAPY PROGRAM PO BOX 110760 TACOMA, WA 98411-0760	UNRELATED		I .		5,000		
TACOMA PIERCE COUTY HABITAT FOR HUMANITY PO BOX 7124 TACOMA, WA 98417  TACOMA, WA 98417  TACOMA, WA 98417  TACOMA, WA 98417  TACOMA, WA 98417	WEA CHILDREN'S FUND PO BOX 9100 FEDERAL WAY, WA	UNRELATED						
HABITAT FOR HUMANITY PO BOX 7124 TACOMA, WA 98417  2,500	98063-9100					10,000		
TACOMA, WA 98417 2,500	TACOMA PIERCE COUTY HABITAT FOR HUMANITY	UNRELATED		FOR EXEMPT P	URPOSE			
	TACOMA, WA 98417					2 <b>,</b> 500		
						:		
					Total	22 500		

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990 SCHEDULE OF OTHER REVENUE ATTACHMENT 11: PAGE 1 - 990-PF PAGE 12, PART XVI-A, LINE 11 OPEN TO PUBLIC INSPECTION For calendar year 2013, or tax period beginning , and ending Name of Organization Employer Identification Number 91-1460966 FLECK FAMILY FOUNDATION Unrelated Business Income Excluded by Section 512, 513 or 514 (e) Related or Exempt Function Income (see instructions) (a) Business Code (c) Excl code Program Service Revenue Item (b) (d) Amount **Amount** RECALL OF BONDS