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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

## **Return of Private Foundation**

▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

DLN: 93491195008400 OMB No. 1545-0052

2019

Open to Public

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.

							Inspection
For	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , ar	nd er	nding 12-31-	2019	
		Indation MILY FOUNDATION			A Employer id	entification numbe	er
VV	HII3 FF	AMILE FOUNDATION			71-0882769		
		d street (or P.O. box number if mail is not delivered to street address)	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
3	641 441	TH AVE NW			(507) 285-9877	•	,
		n, state or province, country, and ZIP or foreign postal code	1			application is pendir	a shook bara
ROC	HESTER	R, MN 55901			C II exemption	аррисацоп із ренції	ig, check here
<b>G</b> Cl	neck al	Il that apply: $\qed$ Initial return $\qed$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check h	ere
		Final return Amended return				ganizations meeting k here and attach co	
		☐ Address change ☐ Name change			· ·	ındation status was	· -
_	,	/pe of organization: ✓ Section 501(c)(3) exempt private				n 507(b)(1)(A), che	
		n 4947(a)(1) nonexempt charitable trust Uother taxabl			-		
		from Part II col (c)	☑ Cash ☐ Accru	ıal		ation is in a 60-mont n 507(b)(1)(B), cheo	
		►\$ 896,865	be on cash basis.)				
			Ι	1			La zu
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions).)	books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach	35,000				
		schedule)	25,000				
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	15,854		15,854		
	5a	Gross rents					
æ	b	Net rental income or (loss)	20.110				
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	32,416				
Revenue	b	Gross sales price for all assets on line 6a 82,715			22.446		
ã	7   8	Capital gain net income (from Part IV, line 2)			32,416		
	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)					
	12	Total. Add lines 1 through 11	73,270		48,270		
	13	Compensation of officers, directors, trustees, etc.	0		0		1
	14	Other employee salaries and wages					
es es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
χ	b	Accounting fees (attach schedule)					
and Administrative Expenses	С	Other professional fees (attach schedule)	8,291		8,291		1
ati	17	Interest	<b>65-1</b> 4 222		4 222		
İstr	18	Taxes (attach schedule) (see instructions)	1,330		1,330		
Ë	19	Depreciation (attach schedule) and depletion		_			
Adı	20	Occupancy					
nd	21	Printing and publications					
	23	Other expenses (attach schedule)					
Operating	24	Total operating and administrative expenses.					
ære		Add lines 13 through 23	9,621		9,621		
Ö	25	Contributions, gifts, grants paid	53,559		·		53,55
	26	Total expenses and disbursements. Add lines 24 and					
		25	63,180		9,621		53,55
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	10,090				
	b	Net investment income (if negative, enter -0-)			38,649	·	
	l c	Adjusted net income (if negative, enter -0-)					

Cat. No. 11289X

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Attached schedules and amounts in the description column

Beginning of year

775,917

896,865

1

2

3

4

5

6

775,917

10,090

110,858

896,865

896,865 Form **990-PF** (2019)

0

Page 2

End of year

Form 990-PF (2019)

Total liabilities and net assets/fund balances (see instructions) .

**Analysis of Changes in Net Assets or Fund Balances** 

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . . Decreases not included in line 2 (itemize) ▶

30

Part III

2

3

	3	Accounts receivable P			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	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)	764,536	880,341	880,341
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	775,917	896,865	896,865
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
i lit	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
1	22	Other liabilities (describe ▶)			
	23	Total liabilities(add lines 17 through 22)	0	0	
5		Foundations that follow FASB ASC 958, check here			
ке		and complete lines 24, 25, 29 and 30.			
ılar	24	Net assets without donor restrictions			
Fund Balances	25	Net assets with donor restrictions			
nd		Foundations that do not follow FASB ASC 958, check here			
		and complete lines 26 through 30.			
or.	26	Capital stock, trust principal, or current funds	0	0	
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
ASS	28	Retained earnings, accumulated income, endowment, or other funds	775,917	896,865	
Net /	29	Total net assets or fund balances (see instructions)	775,917	896,865	
Ž		Tabliblibia and make a sate (found below as a found instruction a)	775.047	206.865	

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Tab	le				
b					
С					
d					
e					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)		(g) other basis ense of sale		(h) or (loss) (f) minus (g)
a See Additional Data Tab	le				
b					
c					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	vned by the foundation	on 12/31/69		(I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		<b>(k)</b> s of col. (i) l. (j), if any	col. (k), but n	. (h) gain minus ot less than -0-) <b>or</b> from col.(h))
a See Additional Data Tab	le				
b					
C					
d					
e					
2 Capital gain net income	(	If gain, also enter in F If (loss), enter -0- in		2	32,41
·	gain or (loss) as defined in sections art I, line 8, column (c) (see instruct	ions). If (loss), enter -0	)- }	3	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment Ir	ncome	
_	private foundations subject to the se				
If section 4940(d)(2) applies,	•	icalon 13 To(a) tax on in	et investment meer	ne.)	
	ne section 4942 tax on the distributa ot qualify under section 4940(e). Do		•	1?	Yes 🗹 No
1 Enter the appropriate ar	mount in each column for each year;	see instructions before	e making any entri	es.	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharital		<b>(d)</b> Distribution i (col. (b) divided b	
2018	53,143		814,541		0.065243
2017	42,745		788,896		0.054183
2016	94,408		721,501		0.130849
2015	47,791		757,046		0.063128
2014	50,764	•	782,446		0.064879
2 Total of line 1, column (	• •		2		0.378282
number of years the fou	o for the 5-year base period—divide ndation has been in existence if less oncharitable-use assets for 2019 fror	than 5 years	<u>3</u>		0.075656 823,846
5 Multiply line 4 by line 3		•			62,329
1 , ,	ent income (1% of Part I, line 27b)				386
					62,715
	tions from Part XII, line 4 ,				53,559
	eater than line 7, check the box in P			ng a 1% tax rate.	

Form	990-PF (20	019)								Р	age <b>6</b>
Pai	t VII-B	Statements Regard	ding	<b>Activities for Which</b>	Form 4720 May Be	Required (continued	1)				
5a	During the	year did the foundation	рау о	r incur any amount to:						Yes	No
	(1) Carry	on propaganda, or other	vise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes					
	(2) Influe	nce the outcome of any s	pecifi	public election (see sect	tion 4955); or to carry	□ res	Ľ.	NO			
on, directly or indirectly, any voter				egistration drive?		· · 🔲 Yes	<b>/</b>	No			
	(3) Provid	de a grant to an individual	for t	ravel, study, or other sim	ilar purposes?	Yes		No.			
	(4) Provid	le a grant to an organizat	ion ot	her than a charitable, etc	, organization described		ت	1			
	in section 4945(d)(4)(A)? See instructions.					· · □ Yes	<b>~</b>	No			
	(5) Provid	le for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	□ les	ت	1			
educational purposes, or for the pre			e prev	ention of cruelty to childr	en or animals?	· · 🔲 Yes	<b>~</b>	No			
b	If any ans	wer is "Yes" to 5a(1)-(5)	, did a	any of the transactions fa	il to qualify under the ex		<u></u>	110			
	Regulation	ns section 53.4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions		L	5b		
	Organizati	ions relying on a current r	notice	regarding disaster assist	ance check here		П				
С	If the ans	wer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the						
	tax becau	se it maintained expendit	ure re	sponsibility for the grant?	?	🗌 <sub>Yes</sub>	П	No			
	If "Yes," a	ttach the statement requ	ired b	y Regulations section 53.	4945-5(d).	□ les		"			
<b>6</b> a	Did the fo	undation, during the year	, rece	ive any funds, directly or	indirectly, to pay premit	ums on					
	a persona	I benefit contract?				· Yes	./	N			
b	Did the fo	undation, during the year	, pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?		NO	6b		No
	If "Yes" to	6b, file Form 8870.						Γ			
7a	At any tim	ne during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter tra	nsaction?		N.			
b	If "Yes", d	id the foundation receive	any p	roceeds or have any net	income attributable to th	ne transaction?		NO	7b		
8	Is the fou	ndation subject to the sec	tion 4	960 tax on payment(s) o	of more than \$1,000,000	in remuneration or		Γ			
	excess pa	rachute payment during t	he ye	ar?		· · 🗌 Yes					
		Information About							ees		
Pai	t VIII	and Contractors		,,	,	g,g,		,	,		
1	List all of	ficers, directors, truste	es. fo	oundation managers ar	nd their compensation	. See instructions					
		,	$\overline{}$	<b>b)</b> Title, and average	(c) Compensation (If		. [	(-) [		se acc	
	(a) Na	ame and address		hours per week	not paid, enter	employee benefit plans				lowanc	
ALLAN	LWATTC		VICE	devoted to position PRESIDENT	-0-)	deferred compensatio	0				
	I WATTS 44TH AVE NV	M	10.00		0		ᅦ				0
	ESTER, MN										
JULIE	WATTS			IDENT	0		0				0
	44TH AVE NV	· ·	10.00	)							
	Compans	ation of five highest-pa	id on	anlovace (other than t	 	 	non	o on	tor "I	NONE	<del>,,</del>
	Compens	ation of five nignest-pa	iiu eii	ipioyees (other than ti	lose included on line .	(d) Contributions to		ie, en	tei i	NONE.	
(a)	Name and a	address of each employee	paid	(b) Title, and average	(-) (	employee benefit	<b>'</b>	(e) E	xpens	e acco	unt,
. ,		ore than \$50,000	•	hours per week devoted to position	(c) Compensation	plans and deferred		oth	er all	owance	es .
						compensation					
NON	•										
							$\perp$				
							_				
Tota	l number o	f other employees paid ov	er \$5	0,000	<u></u> .						0
			_	·			_	Forn	- 001	)-PF (	2019)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (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		
<b>Total</b> 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 rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Into I through 5		Form <b>990-PF</b> (2019)

2a |

2b

773

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

41,192

773

40,419

40.419

40.419

53,559

53.559

53.559

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Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

40,419

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Pa	rt XIII	

c From 2016. .

d From 2017. . . . .

e From 2018. . . . .

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. .

**b** Excess from 2016. .

d Excess from 2018. .

e Excess from 2019. .

c Excess from 2017. . . .

Subtract lines 7 and 8 from line 6a . . . .

6 Enter the net total of each column as

**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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2014 not

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, 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). . . . . . . . .

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t XIII	VIII Undistributed Income (see instructions)							
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019			
		· '	'					

Distributable amount for 2019 from Part XI, line 7 40,419 2 Undistributed income, if any, as of the end of 2019:

102,000

13.140

115,140

13.054

102,086

a Enter amount for 2018 only. . . . . . Excess distributions carryover, if any, to 2019:

13.054

**b** Total for prior years: 20\_\_\_\_\_\_, 20\_\_\_\_\_\_ a From 2014. . . . . 11,447 **b** From 2015. . . . .

59.677

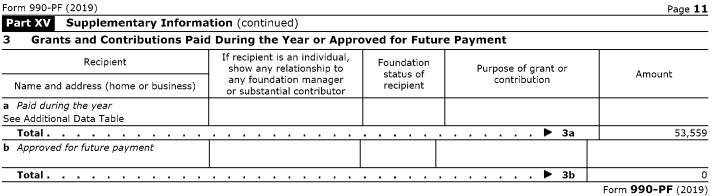
4.276 13,546

11.447 59,677

4.276

13,546

13.140



inter gros	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
е						
g Fees 2 Membe	and contracts from government agencies ership dues and assessments st on savings and temporary cash					
investi	ments					
<b>5</b> Net re	nds and interest from securities			14	15,854	
6 Net re	debt-financed property					
invent	r (loss) from sales of assets other than ory			18	32,416	
l <b>0</b> Gross l <b>1</b> Other	profit or (loss) from sales of inventory revenue: a					
e2 Subto 3 Total. (See w	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  T-B Relationship of Activities to the	llations.) ne Accomplisi	nment of Exem	pt Purposes	48,270 3	
e 2 Subto 3 Total. (See w	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  T-B Relationship of Activities to the	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	48,270
e 2 Subto 3 Total. (See w Part XV Line No.	tal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the second to	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3tted importantly to	

Form 990-PF (2019)		Pa	ge <b>13</b>
Part XVII  Information Regarding Transfers To and Transactions and Relationships With Noncha Exempt Organizations	ritable		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 50 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	1	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
<b>b</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

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation CAMBRIDGE PORTFOLIO STOCK SUMMARIZED ST 2018-06-26 2019-06-25 CAMBRIDGE PORTFOLIO STOCK SUMMARIZED LT 2015-06-30 2019-06-25 CAMBRIDGE CAPITAL GAIN DISTRBUTION BUFFALO SMALL CAP FUND - NONCOVERD 2003-04-25 2019-05-30 FIDELITY ADVISOR NEW INSIGHTS FUND CLASS I - NONCOVERED 2008-11-04 2019-11-26 TCF FINL CORP NEW COM - NONCOVERED 2008-11-04 2019-08-01 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 20,173 20,000 173 30.000 22,954 7,046 21,570 21,570 2,000 3,349 -1,3493,987 8,962 4,975 10 9 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 173 7,046 21.570 -1,3494,975

Form 990PF Part XV Line 1a - 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).

JULIE WATTS

ALLAN WATTS

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

▶ 3a

53,559

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
ABILITY BUILDING CENTER 1911 14TH STREET NW ROCHESTER, MN 55901	OTHER PUBLIC CHARITY	GENERAL SUPPORT	200
AMERICAN HELPER13565 HENNA AVE	OTHER	GENERAL SUPPORT	3,600

AMERICAN HELPER13565 HENNA AVE APPLE VALLEY, MN 55124	OTHER PUBLIC CHARITY	GENERAL SUPPORT	3,
THE ARC OF MINNESOTA	OTHER	GENERAL SUPPORT	

APPLE VALLEY, MN 55124	PUBLIC CHARITY	SENERAL SON SIX	5,0
THE ARC OF MINNESOTA 2446 UNIVERSITY AVE W STE 110	OTHER PUBLIC	GENERAL SUPPORT	2

	CHARITY		
THE ARC OF MINNESOTA 2446 UNIVERSITY AVE W STE 110 ST PAUL, MN 55114	OTHER PUBLIC CHARITY	GENERAL SUPPORT	200

THE ARC OF MINNESOTA	OTHER	GENERAL SUPPORT	200
2446 UNIVERSITY AVE W STE 110	PUBLIC		
ST PAUL, MN 55114	CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
ASSEMBLIES OF GOD 1445 N BOONEVILLE AVE SPRINGFIELD, MN 65802	PU	THER UBLIC HARITY	GENERAL SUPPORT	2,000
BEAR CREEK SERVICES 3108 HIGHWAY 52 NORTH	PU	THER (	GENERAL SUPPORT	200

recipient

▶ 3a

BEAR CREEK SERVICES 3108 HIGHWAY 52 NORTH ROCHESTER, MN 55901	OTHER PUBLIC CHARITY	GENERAL SUPPORT	2
BETHANY INTERNATIONAL	OTHER	GENERAL SUPPORT	1,0

3108 HIGHWAY 52 NORTH ROCHESTER, MN 55901	PUBLIC CHARITY		
BETHANY INTERNATIONAL	OTHER PUBLIC	GENERAL SUPPORT	1,00

ROCHESTER, MN 55901	CHARITY		
BETHANY INTERNATIONAL 6820 AUTO CLUB RD STE J	OTHER PUBLIC	GENERAL SUPPORT	1,000

··· -·· - · · · · · · · · · · · · · · ·			
BETHANY INTERNATIONAL 6820 AUTO CLUB RD STE J BLOOMINGTON, MN 55438	OTHER PUBLIC CHARITY	GENERAL SUPPORT	1,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year			
BETHEL UNIVERSITY3900 BETHEL DR ST PAUL, MN 55112	NON-PROFIT UNIVERSIT	GENERAL SUPPORT	500

31 FAOL, MN 33112	ONIVERSIT		
CAMP VICTORY58212 403RD AVE ZUMBRO FALLS, MN 55991	OTHER PUBLIC CHARITY	GENERAL SUPPORT	500
CAMPUS CRUSADE FOR CHRIST	OTHER PUBLIC	GENERAL SUPPORT	8,010

Total	 	▶ 3a	53,559
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DR ORLANDO, FL 32832	OTHER PUBLIC CHARITY	GENERAL SUPPORT	8,010
ZUMBRO FALLS, MIN 55991	CHARITY		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

KANSAS CITY, MO 64129

Total .

a Paid during the year			
CHANNEL ONE131 35TH ST SE ROCHESTER, MN 55904	OTHER PUBLIC CHARITY	GENERAL SUPPORT	200
CHRIST COMMUNITY CHURCH 4400 55TH ST NW ROCHESTER, MN 55901	OTHER PUBLIC CHARITY	GENERAL SUPPORT	11,200

CHARITY

▶ 3a

CHRIST COMMUNITY CHURCH 4400 55TH ST NW ROCHESTER, MN 55901	OTHER PUBLIC CHARITY	GENERAL SUPPORT	11,200
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS RD	OTHER PUBLIC	GENERAL SUPPORT	11,200

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
FOCUS ON THE FAMILY 8685 EXPLORER DR COLORADO SPRINGS, CO 80920		OTHER PUBLIC CHARITY	GENERAL SUPPORT	1,200
	· · · · · · · · · · · · · · · · · · ·	ı -	1	

COLORADO SPRINGS, CO 80920	CHARITY		
FRIENDS OF THE GREAT COMMISSION PO BOX 8000 PMB 15 SUMAS, WA 98295	OTHER PUBLIC CHARITY	GENERAL SUPPORT	200
IRONWOOD SPRINGS CHRISTIAN	OTHER	GENERAL SUPPORT	5,108

PO BOX 8000 PMB 15 SUMAS, WA 98295	PUBLIC CHARITY		
IRONWOOD SPRINGS CHRISTIAN RANCH 7291 COUNTY 6 RD SW STEWARTVILLE, MN 55976	OTHER PUBLIC CHARITY	GENERAL SUPPORT	5,108

SUMAS, WA 98295		CHARITY		
IRONWOOD SPRINGS CHRISTIAN RANCH 7291 COUNTY 6 RD SW STEWARTVILLE, MN 55976		OTHER PUBLIC CHARITY	GENERAL SUPPORT	5,108
Total				53.559

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

Recipient

If recipient is an individual, show any relationship to status of contribution

Recipient

Recipient

Amount

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
ROCHESTER PARKS & RECREATION 201 4TH STREET SE ROOM 150 ROCHESTER, MN 55904		OTHER PUBLIC CHARITY	GENERAL SUPPORT	300
MN ADULT & TEEN CHALLENGE 1530 ASSISSI DR NW ROCHESTER, MN 55901		OTHER PUBLIC CHARITY	GENERAL SUPPORT	2,781
NEW LIFE SERVICES1515 EAST 66TH ST RICHFIELD, MN 55423		OTHER PUBLIC	GENERAL SUPPORT	250

CHARITY

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

53,559

any foundation manager

Name and address (home or business)

Total .

Traine and dadress (name or business)	or substantial contributor			
a Paid during the year				
ONE CHILD MATTERS 15475 GLENEAGLE DR COLORADO SPRINGS, CO 80921		OTHER PUBLIC CHARITY	GENERAL SUPPORT	660
POSSABILITIES1808 3RD AVE SE		OTHER	GENERAL SUPPORT	500

POSSABILITIES1808 3RD AVE SE ROCHESTER, MN 55904	OTHER PUBLIC CHARITY	GENERAL SUPPORT	
SOUTHWEST COMMUNITY CHURCH	OTHER	GENERAL SUPPORT	1,

ROCHESTER, MN 55904	PUBLIC CHARITY	GENERAL SOLI ORI	
SOUTHWEST COMMUNITY CHURCH 44-174 WASHINGTON ST	OTHER PUBLIC	GENERAL SUPPORT	1,5

		CHARITY		
П	SOUTHWEST COMMUNITY CHURCH 44-174 WASHINGTON ST INDIAN WELLS, CA 92210	OTHER PUBLIC CHARITY	GENERAL SUPPORT	1,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient

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

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
SPECIAL OLYMPICS OF MN		OTHER	GENERAL SUPPORT	750

100 WASHINGTON AVE S MINNEAPOLIS, MN 55401	PUBLIC CHARITY	GENERAL SUPPORT	/50
STEIGER INTERNATIONALPO BOX 16146	OTHER	GENERAL SUPPORT	1,500

MINNEAPOLIS, MIN 55401	CHARITY		
STEIGER INTERNATIONALPO BOX 16146 MINNEAPOLIS, MN 55416	OTHER PUBLIC CHARITY	GENERAL SUPPORT	1,500

Total			▶ 3a	53,559
STEIGER INTERNATIONALPO BOX 16146 MINNEAPOLIS, MN 55416		OTHER PUBLIC CHARITY	GENERAL SUPPORT	1,500
CTCICCD INTCDNATIONALDO DOV 16116	1	OTHER	CENERAL CURRORT	1 500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491195008400				
TY 2019 Investments - Other Schedule						
Name:	WATTS FAMILY FO	UNDATION				
EIN:	71-0882769					
Investments Other Schedule 2						

Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
MUTUAL FUNDS	FMV	880,341	880,341	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491195008400		
TY 2019 Other Increases Schedule				
Name	WATTS FAMILY FOUNDATIO	N.		
	71-0882769			
EIN.				
De	Amount			

UNREALIZED INVESTMENT MARKET GAIN

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491195008400   TY 2019 Other Professional Fees Schedule					
	nme: WATTS FAM EIN: 71-0882769				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MN FILING FEES	50	50		0

8,241

8,241

ADVISORY FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data - DLN: 93491195008400					
TY 2019 Substantial Contributors						
Schedule						
Name: WATTS FAMILY FOUNDATION						
<b>EIN:</b> 71-0882769						
	, = 000=, 05					
Name			Address			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491195008400	
TY 2019 Taxes Schedule					
	: WATTS FAM: 71-0882769	ILY FOUNDATION			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
2018 FEDERAL TAX PAID	1,330	1,330		0	

Schedule B	O NOT PROCESS   As Filed Data -    Schedule of Contr		OMB No. 1545-0047			
(Form 990, 990-EZ, or 990-PF)		Attach to Form 990, 990-EZ, or 990-PF.				
Department of the Treasury Internal Revenue Service  ■ Go to <u>www.irs.gov/Form990</u> for the treasury    Mathematical Revenue Service   Properties   Properties			2019			
Name of the organization WATTS FAMILY FOUNDAT	ON		loyer identification number			
	sk one):		882769			
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> tre	eated as a private foundation				
	☐ 527 political organization	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treate	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation					
	tion filing Form 990, 990-EZ, or 990-PF that received, property) from any one contributor. Complete Parts I a					
Special Rules						
under sections 5 received from ar	on described in section 501(c)(3) filing Form 990 or 990 (0)(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A one contributor, during the year, total contributions of a 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and I	A (Form 990 or 990-EZ), Part II, I f the greater of <b>(1)</b> \$5,000 or <b>(2)</b>	ine 13, 16a, or 16b, and that			
during the year,	on described in section 501(c)(7), (8), or (10) filing Formulated contributions of more than \$1,000 exclusively for respectively for respectively for respectively of cruelty to children or animals. Complete the prevention of cruelty to children or animals.	religious, charitable, scientific, lite				
during the year, If this box is che purpose. Don't c	on described in section 501(c)(7), (8), or (10) filing Form contributions exclusively for religious, charitable, etc., puked, enter here the total contributions that were received mplete any of the parts unless the <b>General Rule</b> appliable, etc., contributions totaling \$5,000 or more during the	ourposes, but no such contribution yed during the year for an <i>exclus</i> lies to this organization because	ons totaled more than \$1,000. ively religious, charitable, etc. it received nonexclusively			
990-EZ, or 990-PF), but	n that isn't covered by the General Rule and/or the Spe it <b>must</b> answer "No" on Part IV, line 2, of its Form 990; art I, line 2, to certify that it doesn't meet the filing requi	; or check the box on line H of its	s Form 990-EZ			
For Paperwork Reduction A for Form 990, 990-EZ, or 99	ct Notice, see the Instructions Cat. No. 306	613X Schedule B (Fe	orm 990, 990-EZ, or 990-PF) (2019)			

ATTS FAMILY FO		71-0882769	n number
Part I ontributors	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	ALLAN AND JULIE WATTS		✓ Person
	3641 44TH AVE NW	\$ 25,000	☐ Payroll ☐ Noncash
	ROCHESTER, MN 55901		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		<u> </u>	☐ Payroll ☐ Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
			Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		\$	Payroll
			Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
	, , , , , , , , , , , , , , , , , , , ,		Person
			Payroll
			Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•		<del></del>	Payroll
	-		Noncash
			(Complete Part II for noncash contributions.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization MILY FOUNDATION			oyer identification number 882769
Part III	Exclusively religious, charitable, etc., contri than \$1,000 for the year from any one contri organizations completing Part III, enter the t the year. (Enter this information once. See in Use duplicate copies of Part III if additional span	outor. Complete colum otal of exclusively relig structions.)	ns (a) through (e	) and the following line entry. For
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer of gift d ZIP 4 Relationsh		ip of transferor to transferee
(2)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer		ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer	-	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer ⊇ 4		ip of transferor to transferee
			Schedi	ule B (Form 990, 990-EZ, or 990-PF) (2019)