Form **990-PF**

EXTENDED TO NOVEMBER 16, 2020 **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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

10,180.

Form 990-PF (2019)

Department of the Treasury Internal Revenue Service For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number 81-2552110 WATTS FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 319-338-4100 425 E OAKDALE BLVD City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CORALVILLE, ΙA 52241 Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Amended return Final return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated 04 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Accrual I Fair market value of all assets at end of year J Accounting method F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 658,949. (Part I, column (d), must be on cash basis.) ▶\$ (d) Disbursements for charitable purposes (cash'basis only) Analysis of Revenue and Expenses Part I (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income income 102,928 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 10.180. 10,180. 10,180. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 80,384 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 142.247. 80,384. Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain R Income modifications 9 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 193,492 90,564 10,180, 12 Total Add lines 1 through 11 0. Λ. 0. 0. 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits d Administrative Expenses 16a Legal fees 925. 925. 0. ٥. STMT 2 **b** Accounting fees c Other professional fees RECEIVED 17 Interest Taxes AUG **2 0** 2020 Depreciation and depletion Occupancy Travel, conferences, and meetings OGDEN 22 Printing and publications
23 Other expenses S
24 Total operating and administrative expenses. Add lines 13 through 23
25 Contributions, gifts, grants paid 2,979 2,979. 0. 0. STMT 3 3,904. 3,904. 0 111,000. 111,000. 25 Contributions, gifts, grants paid Total expenses and disbursements. 114,904. 3,904. 111,000. 0. Add lines 24 and 25 27 Subtract line 26 from line 12: 78,588 a Excess of revenue over expenses and disbursements 86,660. b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

Page 2

Part II Balance She	ets Attached schedules and amounts in the description	Beginning of year	End of	
Part II Balance one	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bea	ring	9,747.	7,332.	7,332.
2 Savings and temporary	cash investments			
3 Accounts receivable				
Less allowance for dou	btful accounts ►			
4 Pledges receivable				
Less, allowance for dou	btful accounts >			•
5 Grants receivable				
6 Receivables due from o	fficers, directors, trustees, and other			
disqualified persons				
7 Other notes and loans receivable	•			
Less: allowance for dou	btful accounts			
0 Investoring for cole or i				
9 Prepaid expenses and o				
10a Investments - U.S. and	state government obligations			
b Investments - corporate				
c Investments - corporate				
11 Investments - land, buildings, and				
Less accumulated depreciation		······		
12 Investments - mortgage	e loans			
13 Investments - other	STMT 4	406,984.	487,987.	651,617.
14 Land, buildings, and eq				
Less accumulated depreciation	utpritorit dasis			
15 Other assets (describe)				
16 Total assets (to be con				···
instructions. Also, see p		416,731.	495,319.	658,949.
17 Accounts payable and a			230,70221	100,000
18 Grants payable	du ded expenses			
10 Deferred revenue		.,		
8 1	s, trustees, and other disqualified persons			
21 Mortgages and other no				
22 Other liabilities (describ	` · ·			
,	,			
23 Total liabilities (add lir	nes 17 through 22)	0.	0.	
Foundations that follow	v FASB ASC 958, check here ▶ □			1
ω and complete lines 24,	25, 29, and 30			
24 Net assets without done	or restrictions		_	
25 Net assets with donor r	estrictions			
Foundations that do no	t follow FASB ASC 958, check here 🕨 🗓			,
and complete lines 26	through 30.			
ਰ 26 Capital stock, trust prin		0.	0.	
27 Paid-in or capital surplu	is, or land, bldg., and equipment fund	0.	0.	
28 Retained earnings, accu	mulated income, endowment, or other funds	416,731.	495,319.	
Net assets without done of the part of the	d balances	416,731.	495,319.	
1	accets/fund halanges	416,731.	495,319.	
Part III Analysis of	Changes in Net Assets or Fund Ba		155,515.	
				
	ces at beginning of year - Part II, column (a), line	29		416 721
, -	figure reported on prior year's return)		1	416,731.
Enter amount from Part I, line			2	78,588.
Other increases not included	in line 2 (itemize)		3	405 310
4 Add lines 1, 2, and 3	0 (//		4	495,319.
Decreases not included in line		olumn (h) lung 20	5 6	495,319.
Total net assets or fund balan	ces at end of year (line 4 minus line 5) - Part II, co	normi (D), mie 29	101	Form 990-PF (2019)

1	Pa	Λ	۵	9
- 1		u	г.	

L	Part IV Capital Gains a	and Losses fo	r Tax on Inves	tment	Income						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)					ĮΡ	How ac - Purc - Dona	nase	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)	
12	LPL FINANCIAL	LONG TERM						7	VARI	ous	12/31/19
	b										
_	c				· · ·	_					
	<u> </u>					├			_		
_	<u>e </u>	/fl Danmaraha	11d	/=\ Co	at ar ather basis	Щ			(b) C	our or /loog	<u> </u>
	(e) Gross sales price	(f) Depreciatio (or allowa			st or other basis expense of sale	_				ain or (loss s (f) minus	(g))
;					61,86	3.					80,384.
_!											
	<u>c</u>										
	d										
	Complete only for assets showing	ng gain in column (h)	and owned by the fo	undation	on 12/31/69.		-	(1)	Gains (C	ol. (h) gain	minus
-		(j) Adjusted			cess of col. (I)			còl.	(k), but r	not less tha	n -0-) or
	(i) FMV as of 12/31/69	as of 12/3			col. (j), if any				Losses	(from col. ((n))
	a										80,384.
_1	b										
_	C										
_	d										
_	e					-					
2	Capital gain net income or (net ca	ipital loss) { If	gain, also enter in P (loss), enter -0- in P	art I, line Part I, line	7 7	}	2				80,384.
3	Net short-term capital gain or (los	•									
ŭ	If gain, also enter in Part I, line 8,		(2)	•)					
_	If (loss), enter -0- in Part I, line 8		40.40/a\ fan Da	J al	Tay on Nat		3				0.
ш	Part V Qualification U							ent inco			
(F	or optional use by domestic private	e foundations subject	to the section 4940(a) tax on	net investment in	come.	.)				
lf	section 4940(d)(2) applies, leave th	nis part blank.									
14/	as the foundation liable for the sec	tion 4042 tay on the	dietzihiitable amount	of any ve	ar in the hase ner	nud2					Yes X No
	"Yes," the foundation doesn't qualif										
1	Enter the appropriate amount in e					ntries.					
	(a) Base period years		(b)			(c)			İ	Distril	(d) oution ratio
_	Calendar year (or tax year beginnii	ng in) Adjuste	d qualifying distribut					(col. (b) divided by col. (c))			
_	2018			100.				0,245	•		.049192
_	2017		1,	891.				2,307			.819679
_	2016			0.				0.	•		.000000
_	2015								+		
_	2014	<u> l</u>							+		
2	Total of line 1, column (d)								2		.868871
	Average distribution ratio for the	5-vear base period -	divide the total on lin	e 2 hv 5.0), or by the number	er of v	/ears		-		
Ĭ	the foundation has been in exister				-,, ···-				3		.289624
		•									
4	Enter the net value of noncharitab	le-use assets for 201	19 from Part X, line 5						4		484,150.
5	Multiply line 4 by line 3								5		140,221.
6	Enter 1% of net investment incom	ne (1% of Part I, line	27b)						6		867.
											1.41 000
7	Add lines 5 and 6								7		141,088.
8	Enter qualifying distributions fron	n Part XII, line 4							8		111,000.
-	If line 8 is equal to or greater than See the Part VI instructions.		x in Part VI, line 1b, a	and comp	olete that part usin	g a 19	% tax r	ate.			

	1 990-PF (2019) WATTS FAMILY FOUNDATION	(-\ A	040/5) 4040/5) 5 4 46	81-2552			age 4	<u>.</u>		
	rt VI Excise Tax Based on Investment Income (Section 4940			948 - see in	struc	tions	s)	7		
1a	Exempt operating foundations described in section 4940(d)(2), check here and en	nter "N//	A" on line 1.							
	Date of ruling or determination letter: (attach copy of letter if nec	essary-	see instructions)]		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1		1,7	<u>33.</u>					
	of Part I, line 27b					1				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%					J				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, oth	2			0.	_				
	Add lines 1 and 2			3		1,7	33.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, of	4			0.					
5										
-	Credits/Payments:							Ì		
	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	705.					į.		
	Exempt foreign organizations - tax withheld at source	6b	0.							
	Tax paid with application for extension of time to file (Form 8868)	6c	2,000.							
	Backup withholding erroneously withheld	6d	0.					1		
	Total credits and payments. Add lines 6a through 6d			7		2,7	05.	'		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched		8			0.	•		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	JIIVU	_	9				•		
-	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10		9	72.	•		
	Enter the amount of line 10 to be: Credited to 2020 estimated tax		972. Refunded	11			0.	•		
	irt VII-A Statements Regarding Activities	•	J / Z • Netunded					-		
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or	did it participate or intervene	ın	T	Yes	No	-		
14		iation of	old it participate of intervene		1a		X	•		
_	any political campaign?									
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition									
	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. © Did the foundation file Form 1120-POL for this year?									
		1c		X	ĺ					
d										
	(1) On the foundation. > \$ 0. (2) On foundation managers.				i					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	lure lax	imposed on foundation							
_	managers. ► \$						X	ı		
2	Has the foundation engaged in any activities that have not previously been reported to the IR	151			2		Α.	ì		
_	If "Yes," attach a detailed description of the activities.		-t -ut-lf							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	istrume	nt, articles of incorporation, of				X	ı		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	^			3		$\frac{\Lambda}{X}$			
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	′		N/A	4a			•		
_	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		Х			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5			î		
_	If "Yes," attach the statement required by General Instruction T									
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ner.						l		
	By language in the governing instrument, or		11 . 1 0 . 1	I.e.						
	By state legislation that effectively amends the governing instrument so that no mandatory	/ airecti	ons that conflict with the state	iaw			X	ı		
	remain in the governing instrument?				6	Х		-		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	lete Par	i II, col. (c), and Part XV		7			ì		
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns. $ ightharpoonup$	·							
	IA (5 cooperation)		2							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney (enerai (or designate)		<u> </u>	 -		i		
	of each state as required by General Instruction G? If "No," attach explanation		4043403		8b	Х		i		
9	Is the foundation claiming status as a private operating foundation within the meaning of sec			naar				12		
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp				9		X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing t	heir names and addresses		m 99 0	DE	X	-		
				Foi	m サタし	,-PF	(2019)	i		

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
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	
	Website address ► N/A			
14	The books are in care of ► GARY WATTS Telephone no. ► 319 – 33	8-4	100	
	Located at ► 425 E OAKDALE BLVD, CORALVILLE, IA ZIP+4 ► 52			
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	N	/A	
16	At any time during calendar year 2019, 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 FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt 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	Nο
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)?			
	(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.)			
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 instructions N/A	1b		
	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			
Ī	before the first day of the tax year beginning in 2019?	1c		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)).			
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years		ŀ	
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.) N/A	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.		ĺ	
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2019 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 Form 4720,			_
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	İ	X
	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 2019?	4b		Х

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

Form 990-PF (2019) WATTS FAMILY FOUNDATION 81-2552110 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Con NONE Total number of others receiving over \$50,000 for professional services 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. 1 N/A Expense	Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 NONE Total number of others receiving over \$50,000 for professional services 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. 1 N/A	
(c) Con NONE Total number of others receiving over \$50,000 for professional services 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. 1 N/A	
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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. 1 N/A Expense	
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. 1 N/A Expense	0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
	S
2	
2	
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	
1 N/A	
2	
All other program-related investments. See instructions.	
3	

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Total. Add lines 1 through 3

WATTS FAMILY FOUNDATION

ĮP.	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	481,877.
	Average of monthly cash balances	1b	481,877. 9,646.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	491,523.
	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	491,523.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,373.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	484,150.
6	Minimum investment return. Enter 5% of line 5	6	24,208.
ĮP.	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		· · · · · · · · · · · · · ·
1	Minimum investment return from Part X, line 6	1	24,208.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,733.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,475.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,475.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	22,475.
R	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	111,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	111,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	111,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the	esection

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

					
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,	go.peo			
	line 7			<u> </u>	22,475.
2	Undistributed income, if any, as of the end of 2019			_	
;	a Enter amount for 2018 only			0.	
ı	b Total for prior years:				
			0.		
	Excess distributions carryover, if any, to 2019				
	a From 2014				-
	b From 2015				
	c From 2016				}
	d From 2017 2,823.				
	e From 2018	2,823.			
	f Total of lines 3a through e	2,023.			
4	Qualifying distributions for 2019 from Part XII, line 4: ►\$ 111,000.				
				0.	
	a Applied to 2018, but not more than line 2a			· · · · · · · · · · · · · · · · · · ·	
	b Applied to undistributed income of prior		0.		
	years (Election required - see instructions)				
	c Treated as distributions out of corpus (Election required - see instructions)	0.			
	` '	•			22,475.
	d Applied to 2019 distributable amount e Remaining amount distributed out of corpus	88,525.		·	22, 175
	Excess distributions carryover applied to 2019	00,323.			
J	(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6	Enter the net total of each column as indicated below:				
:	2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	91,348.			
	b Prior years' undistributed income. Subtract				
	line 4b from line 2b		0.		
	c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which				
	the section 4942(a) tax has been previously assessed		0.		
	d Subtract line 6c from line 6b. Taxable				1
	amount - see instructions		0.		
•	e Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount - see instr.			0.	
1	f Undistributed income for 2019. Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2020				0.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				;
	section 170(b)(1)(F) or 4942(g)(3) (Election	0			
	may be required - see instructions)	0.			
8	Excess distributions carryover from 2014	0			
_	not applied on line 5 or line 7	0.		· · · · · · · · · · · · · · · · · · ·	
9	Excess distributions carryover to 2020	91,348.	-		
	Subtract lines 7 and 8 from line 6a	JI, 340.	-		
	Analysis of line 9:				
	a Excess from 2015 b Excess from 2016				'
	Excess from 2017 2,823.				
	d Excess from 2018				
	e Excess from 2019 88,525.				
					

	FAMILY FOUND		<u>, , , , , , , , , , , , , , , , , , , </u>	81-255	2110 Page 10
Part:XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	it is a private operating			
foundation, and the ruling is effective for	or 2019, enter the date of t	he ruling	>		
b Check box to indicate whether the found	dation is a private operating	g foundation described		4942(j)(3) or494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		ļ			
alternative test relied upon					
a "Assets" alternative test - enter:					
(1) Value of all assets	<u> </u>				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on	1				
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in					
section 4942(J)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV, Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000 or more	in assets
at any time during t	the year-see instr	uctions.)	ir the loundation	nau ψο,σσο σι more	111 433013
1 Information Regarding Foundation		<u>-</u>			
a List any managers of the foundation wi	_	than 2% of the total con	tributions received by the	foundation before the close of	of any tax
year (but only if they have contributed			and an one received by an	Todination boldes (no dioco (or uny tax
SEE STATEMENT 5	. , , ,	, , , , ,			
b List any managers of the foundation when the bull of the foundation when the foundat	no own 109/ or more of th	a stock of a corporation	/or an aqually large ports	ion of the ownership of a partr	aerehin or
other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a parti	iersnip or
- ·	to a 1070 or ground minores				
NONE		0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
2 Information Regarding Contribut					to for friends. If
Check here X if the foundation the foundation makes gifts, grants, etc.	-	•	-		.s for lunas. If
a The name, address, and telephone num	iber or email address of th	e person to whom appli	cations should be addres	sseo,	
L The form in which and in the little	ho out and and and and and	on and makeus to the con-	hould individe:		-
b The form in which applications should	be submitted and informat	ion and materials they s	rioula include:		
Any submission deadlings					
c Any submission deadlines:					
d Any restrictions or limitations on award	is, such as by geographica	ıl areas, charıtable fields	, kınds of ınstitutions, or	other factors:	

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year UI CENTER FOR ADVANCEMENT/AYA FOR UNRESTRICTED USE BY RECIPIENT 1,000. IOWA CITY, IA 52242 KICKOFF TO KINNICK FOR UNRESTRICTED USE BY RECIPIENT 10,000. IOWA CITY, IA 52240 ARENACO FOR UNRESTRICTED USE BY RECIPIENT 100,000. CORALVILLE, IA 52241 **▶** 3a 111,000. Total b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		-		
a		<u> </u>			
b					
c			-		
d					
e					
g Fees and contracts from government agencies					
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					10,180.
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					
8 Gain or (loss) from sales of assets other					
than inventory					80,384.
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.	90,564. 90,564.
13 Total Add line 12, columns (b), (d), and (e)				13	90,564.
(See worksheet in line 13 instructions to verify calculations.)				 	
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than by					
4 INCOME FROM PASSIVE INVI 8 INCOME FROM PASSIVE INVI	STMEN.	L PORTFOLIO			
8 INCOME FROM PASSIVE INVI	POIMPIN.	PORTFOLIO			
					<u> </u>
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
					·····
					· · · · · · · · · · · · · · · · · · ·
				_ .	
	· · · · · ·			<u> </u>	
					200 DF

	Exempt Organi	izations								
1 Did the or	ganization directly or indir	ectly engage in any	of the followin	ig with any other orga	nızatıor	n described in sect	on 501(c)		Yes	No
	n section 501(c)(3) organ									
	from the reporting founda									, ,
(1) Cash	· · · · ·							1a(1)		X
(2) Other								1a(2)		Х
b Other tran									• .	1, 1,
(1) Sales	of assets to a noncharital	ble exempt organizat	ion					1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization								1b(2)		Х
(3) Rental of facilities, equipment, or other assets								1b(3)		Х
	bursement arrangements							1b(4)		Х
, ,	s or loan guarantees							1b(5)		Х
, ,	rmance of services or me	mbership or fundrais	sing solicitatio	ns				1b(6)		Х
, ,	f facilities, equipment, mai							1c		Х
-	wer to any of the above is				uld alw	ays show the fair i	narket value of the o	oods, other ass	ets,	
or service	s given by the reporting fo	oundation. If the four	ndation receive	ed less than fair marke	et value	in any transaction	or sharing arranger	nent, show in		
	I) the value of the goods,									
a) Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization		(d) Description	of transfers, transactio	ns, and sharing arra	ıngemen	ts
	_		N/A							
						 				
						ļ				
								-		
						+				
	-									
						 				
				·						
2a Is the four	ndation directly or indirect	ly affiliated with, or i	related to, one	or more tax-exempt of	organiza	ations described				
	501(c) (other than section	•			-			Yes	X	No
	omplete the following sche									
	(a) Name of org	anızatıon		(b) Type of organiza	tion		(c) Description of re	elationship		
	N/A					· -	 -			
1										
	penalties of perjury, I declare the elief, it is true, correct, and com	nat i nave examined this plete. Declaration of pre	return, including parer (other than	taxpayer) is based on all ii	ano siai nformatio	on of which preparer h	as any knowledge	May the IRS d	scuss the	nis er
Sign Here	V2. 11			1 8/14/		DIRECT		shown below?	See ins	tr
	nature of officer or to stee		·····			Title	OK	_ X Yes		J No
Sigi	nature of officer or trostee Print/Type preparer's na	me	Preparer's s	Date	ı	Date	Check If	PTIN		
	Trinitrype preparer sila		, repaici 3 3	ignatur (Date	self- employed			
Paid	DENNIS CRA	VEN CPA	DENNIS	CRAVEN C	ים א	08/03/20	· F · -)	P00094	196	
Preparer	Firm's name ► BER			011111111	- 1	2, 33, 23	Firm's EIN ▶ 4			
Use Only									-	
	Firm's address ▶ 24	51 OAKDAL	E BLVD	- STE 204	:					
		RALVILLE,					Phone no. 31			
								Form 990	-DE	(2010)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990. Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

Name of the organization WATTS FAMILY FOUNDATION 81-2552110 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

WATTS FAMILY FOUNDATION

81-2552110

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GARY WATTS 2881 SADDLECLUB ROAD NE IOWA CITY, IA 52240	\$51,464.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BECKY WATTS 2881 SADDLECLUB ROAD NE IOWA CITY, IA 52240	\$51,464.	Person X 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 Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

WATTS FAMILY FOUNDATION

81-2552110

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
(a) No. from Part I	, (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			

Name of organization

Employer identification number

WATTS	FAMILY FOUNDATION		81-2552110				
Part III	from any one contributor. Complete columns (a	I through (e) and the following line entr	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the yeary. For organizations				
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	ess for the year (Enter this info once)				
(a) No.	Use duplicate copies of Part III if additional	Space is needed					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Parti							
L							
		(e) Transfer of gift					
}	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Furpose of gift	(c) Ose of gift	(d) Bescription of now girt is neigh				
							
-		(e) Transfer of gift					
		· · · · · · ·					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No.	415	(-) - - - - - - - -	(d) Describer of how with a held				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		<u></u>					
	(e) Transfer of gift						
	(-) 5. 5						
	Transferee's name, address, a	Relationship of transferor to transferee					
(a) No. from			(1) D				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift						
		(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
ſ							

FORM 990-PF DIVI	DENDS	AND INTER	EST FROM	SECUR	ITIES S'	PATEMENT 1
GRC SOURCE AMC	SS UNT	CAPITAL GAINS DIVIDEND	REVE	NUE	(B) NET INVEST- MENT INCOME	
HILLS BANCORP LPL FINANICAL 10	153.		0. 0. 10	153. ,027.	153. 10,027.	153. 10,027.
TO PART I, LINE 4	,180.		0. 10	,180.	10,180.	10,180.
FORM 990-PF		ACCOUNTI	NG FEES	· =	S	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	ST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX RETURN PREPARATION FE	ES	925.		925.	0.	0.
TO FORM 990-PF, PG 1, LN	16B	925.		925.	0.	0.
FORM 990-PF		OTHER E	XPENSES		S	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	-	2,979.	2,5	979 .	0.	0.
INVESTMENT FEES						

FORM 990-PF (OTHER INVESTMENTS		STATEMENT 4
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS EQUITY AND OPTIONS HILLS BANCORPORATION	FMV COST COST	136,577. 321,203. 30,207.	145,033. 485,020. 21,564.
TOTAL TO FORM 990-PF, PART II, I	LINE 13	487,987.	651,617.

PART XV - LINE 1A STATEMENT 5 FORM 990-PF LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

GARY WATTS BECKY WATTS