Return of Private Foundation

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

OMB No 1545-0047 2019

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

		dar year 2019 or tax year beginning	, 20)19, and		r identification numbe	, 20
		ndation			' '		•
_		HEDS FOUNDATION	l ne	/o.uto		166068	ons)
Nur	nber and	street (or P O box number if mail is not delivered to street address)	l Ho	om/suite	, , , , , , , , , , , , , , , , , , , ,		
		ST CORONADO ROAD				988-5642	
_		state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pendi	ng, check here ▶
		FE NM 87505-2606	- , , ,			•	
G	Check		•	lic charity	D 1. Foreigr	n organizations, check h	nere
		Final return Amended				n organizations meeting	
-		Address change Name cha		- 0.1	1	here and attach compu	_
Н		type of organization: Section 501(c)(3) exempt p		-		foundation status was t 07(b)(1)(A), check here	erminated under
`!-		on 4947(a)(1) nonexempt charitable trust Other ta					ب ٠
. 1		narket value of all assets at J Accounting method		Accruai		ndation is in a 60-month ction 507(b)(1)(B), check	
	line 16	f year (from Part II, col (c), Other (specify)	*****		under sec	, tion 301 (0)(1)(0), check	There
	art I		e on cash basis)				(d) Disbursements
	aiti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	41	ncome ,	income ,	purposes (cash basis only)
	1 4		1,157,200	Y-1966		eren er	VIVOTO MEDICALEI
	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check ▶ ☐ if the foundation is not required to attach Sch. B	1,157,200				
	3	Interest on savings and temporary cash investments	124		124	COME NOTICE AND ASSESSMENT AND ASSESSMENT AND ASSESSMENT ASSESSMEN	AND
	4	Dividends and interest from securities	87,030	_	87,030.		A STATE OF THE STA
	5a	Gross rents	67,030	-	81,030.		72.74
•	b	Net rental income or (loss)	5*6*2522223		H. Transport	N. 100 November 200 Sep	
·	6a	Net gain or (loss) from sale of assets not on line 10	(2) 日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日	1030	******		
Revenue	b	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2), .			7483 24		**************************************
æ	8	Net short-term capital gain					
	9	Income modifications	\$695 4 (2) 9 4		RMAN, MA		TABLE AND
	10a	Gross sales less returns and allowances		M CHAN		*********	CHARLES AND
	b	Less. Cost of goods sold .		思認從	数的影響	TO STATE OF THE ST	SHOW WHAT
•	С	Gross profit or (loss) (attach schedule)		爱数数			1462183339
	,11	Other income (attach schedule)	CENTED				Selection of the last of the l
_	12	Total. Add lines i through 11	UF, 1244, 12/54		87,154.		
Ø	13	Compensation of officers, directors, trustees, etc.		181			
Se	14	Other employee salaries and wages .	₹ 2 9 2020	191			
ĕ	15	Pension plans, employee benefits					•
Expenses	16a	Legal fees (attach schedule)	DENTIT	' -			
ø	Ь		DEN, 37400	<u> </u>			
aţį.	C	Other professional fees (attach schedule)					<u> </u>
šť	17 18	Interest Taxes (attach schedule) (see instructions) See Stmt	1,266				
Ë	19	Depreciation (attach schedule) and depletion	1,200	-			Danesa esta
Ξ	20	Occupancy					東公立 まっかんなど AC 12 14 14 14 14 15 12 14
¥	21	Travel, conferences, and meetings					
, E	22	Printing and publications				- -	
a	23	Other expenses (attach schedule)	<u></u>				
ij	24	Total operating and administrative expenses.	-				
Operating and Administrativ		Add lines 13 through 23	3,966	; . '			
e le	25	Contributions, gifts, grants paid	210,000		CARACTOR TO	3432 X 148 F 10	210,000.
0	26	Total expenses and disbursements. Add lines 24 and 25	213,966				210,000.
, —	27	Subtract line 26 from line 12 ⁻			Tax to		2 (2)
,	a	Excess of revenue over expenses and disbursements	1,030,388	1.		March March	741331
, د	b	Net investment income (if negative, enter -0-) .	32746875		87,154.	928644869	NATION AND A STATE OF
ડ		Adjusted net income (if negative, enter -0-) .	TO THE PARTY.		VII. 2011. S		30000 TO
ر S Fo	Papen	work Reduction Act Notice, see instructions.				Fo	rm 990-PF (2019)

For Paperwork Reduction Act Notice, see instructions.

REV 02/25/20 PRO

15

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	58,246.	49,280.	49,280.
	2	Savings and temporary cash investments	29,625.	61,778.	61,778.
	3	Accounts receivable ▶	\$ 1787 S 14 18 9 9	77.44 (19.8% (19.8%)	19.740.72.14.53
		Less allowance for doubtful accounts ▶			WIELER CONTROL OF MARINETINE
	4	Pledges receivable ▶	100 C 20 C 20 M A C T :	Set (8715) Sec. (5	666 B 1 1 4 3 1 4 3 1 4 3 1
		Less. allowance for doubtful accounts ► :			
	5	Grants receivable			
•	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			1
	'7	Other notes and loans receivable (attach schedule) ▶	######################################		
	,	Less. allowance for doubtful accounts ▶	1		
S	8	Inventories for sale or use			
set	9	Prepaid expenses and deferred charges		•	
Assets	10a	Investments—U.S. and state government obligations (attach schedule)		_	
'	ь	Investments—corporate stock (attach schedule) L-10b Stmt	3,027,949.	3,919,253.	3,919,253.
	C	Investments—corporate bonds (attach schedule)	3,021,949.	3,919,233.	3,919,233.
	11	Investments—land, buildings, and equipment basis ▶			THE PARTY OF THE P
	•••	Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	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)	3,115,820.	4,030,311.	4,030;311.
_	17	Accounts payable and accrued expenses	3,113,620.	4,030,311.	4,030,311.
	18	Grants payable			
Liabilities	19	Deferred revenue		•	40239190912430033
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			Part Control of Contro
ap	21	Mortgages and other notes payable (attach schedule) .	,		All the second of the second
	22	Other liabilities (describe ►)	,	•	CASSES THE STATE OF
	23	Total liabilities (add lines 17 through 22)		-	
S		Foundations that follow FASB ASC 958, check here			44.56 A.
Balances		and complete lines 24, 25, 29, and 30.			
a	24	Net assets without donor restrictions	3,115,820.	4,030,311.	
Ba	25	Net assets with donor restrictions	3,113,020.	1,030,311.	STATE OF THE STATE
О		Foundations that do not follow FASB ASC 958, check here ▶ □	,		
5		and complete lines 26 through 30.			
-	26	Capital stock, trust principal, or current funds			
ိုင္က	27	Paid-in or capital surplus, or land, bldg , and equipment fund			
ē	28	Retained earnings, accumulated income, endowment, or other funds			1425 C C C C
Net Assets or Fun	29	Total net assets or fund balances (see instructions)	3,115;820.	4,030,311.	1-24-1-12-1-1-1-1
7	30	Total liabilities and net assets/fund balances (see	0,220,000,	2,000,022.	
ž		instructions)	3,115,820.	4,030,311.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	st agree with	
	end-	. 1	3,115,820.		
2	Ente	2	1,030,388.		
3				3	1
4		lines 1, 2, and 3	· · · · ·	. 4	4,146,208.
5		reases not included in line 2 (itemize) ► UNREALIZED LOSS (ON INVESTMENTS	5	115,897.
6		I net assets or fund balances at end of year (line 4 minus line 5)—			4,030,311.
					Form 990-PE (0010)

Capital Gains and Losses for Tax on Investment 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)				(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
c						
<u>d</u>						
<u> e </u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ain or (loss) s (f) minus (g))
а						
b						
c						
<u>d</u>						<u> </u>
е						
	Complete only for assets show	ving gain in column (h) and owned	by the foundation	on 12/31/69		Col (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		not less than -0-) or (from col (h))
а						
b						
С						
<u>d</u>						
ее						
2	Capital gain net income or		also enter in Pa , enter -0- in Pai		2	
3	Net short-term capital gain	or (loss) as defined in sections		_		
3	If gain, also enter in Part I	, line 8, column (c) See instru				
Dowl	Part I, line 8	er Section 4940(e) for Redu		let Investment	3	
Part		rate foundations subject to the				
Was t	s," the foundation doesn't q	section 4942 tax on the distribuualify under section 4940(e) Do	o not complete t	his part.		☐ Yes ⊠ No
	(a)	unt in each column for each ye				(d)
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value o	(c) f noncharitable-use ass	sets (col (i	Distribution ratio b) divided by col. (c))
٠,	2018	195,0	00.	3,762,90		0.051822
	2017	195,0		3,735,26		0.052205
	2016	151,2		2,793,23		0.054133
	2015	188,4		2,721,07		0.069257
	2014	185,4	48.	2,852,40	04.	0.065015
2	Total of line 1, column (d)				. 2	0.292432
3		for the 5-year base period—diundation has been in existence			by 3	0.058486
4	Enter the net value of nonc	charitable-use assets for 2019	from Part X, line	5	. 4	2,988,837.
5	Multiply line 4 by line 3				. 5	174,805.
6	Enter 1% of net investmen	t income (1% of Part I, line 27t	o) .		6	872.
7	Add lines 5 and 6 .				7	175,677.
8		ns from Part XII, line 4			. 8	210,000.
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box i	n Part VI, line 1b	o, and complete th	hat part using a	1% tax rate See the

Part		instru	ICTIO	ns)				
- 1a								
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)							
b	Y have the							
	here ► 🗵 and enter 1% of Part I, line 27b							
С	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		8	72.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	ļ		0.				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	AU/# \$21.550	8	372.				
6	Credits/Payments:							
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,730.							
b	Exempt foreign organizations—tax withheld at source							
C	Tax paid with application for extension of time to file (Form 8868) 6c							
d 7	Backup withholding erroneously withheld		7 7	720				
7 8	Total credits and payments. Add lines 6a through 6d			30.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1		-				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . > 10	1		358.				
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 858 . Refunded ▶ 11	<u> </u>						
	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i	1 多数	Yes	No				
	participate or intervene in any political campaign?	1a		×				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			×				
	Instructions for the definition	1b	25/80344	公				
	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	, J.						
С	Did the foundation file Form 1120-POL for this year?	1c	Length	×				
. d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	37,367		- C.				
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$							
e ·	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers. ▶ \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×				
•	If "Yes," attach a detailed description of the activities.	1						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	; <u>2</u> 2						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3	<u> </u>	×				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	ļ	×				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	 					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 **********	CAS-SAS-F	X				
· ·	If "Yes," attach the statement required by General Instruction T. Are the requirements of postume 500(a) (relating to continue 4041) through 4045) extrafied either.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			2				
	By language in the governing instrument, or		15.5					
	• 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	×					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XI		×	├				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	36943	10000					
ou	NM .							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-						
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	X					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	r 🚟		110				
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,		[
	complete Part XIV	9	<u> </u>	×				
10 ·	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			'				
	names and addresses	10	<u></u>	<u> </u>				
RAA	PEV 02/25/20 PRO	Form 99	JU-PF	(2019)				

Part	VII-A Statements Regarding Activities (continued)				
				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions $$.	controlled entity within the	11		×
12	Did the foundation make a distribution to a donor advised fund over which the person had advisory privileges? If "Yes," attach statement See instructions .	foundation or a disqualified	12		×
13	Did the foundation comply with the public inspection requirements for its annual return	ns and exemption application?	13	×	
	Website address ► N/A				
14	The books are in care of ► THE ORGANIZATION	Telephone no ► (505)			2
	Located at ▶ 302 EAST CORONADO ROAD SANTA FE NM	ZIP+4 ► 87505	-260	6	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form and enter the amount of tax-exempt interest received or accrued during the year	1041—check here	٠ .		▶ ⊔
16	At any time during calendar year 2019, did the foundation have an interest in or a over a bank, securities, or other financial account in a foreign country?	a signature or other authority	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114 the foreign country ▶	. If "Yes," enter the name of			
Part	VII-B Statements Regarding Activities for Which Form 4720 May I	Be Required	30.59.29	Kandad An	12500 300
	File Form 4720 if any item is checked in the "Yes" column, unless an excepti		33.00	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	· .		10/262	23
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified pers	son? . ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept	pt it from) a		710	
	disqualified person?	· · 🗌 Yes 🗵 No		3	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified pe				
1	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified pers				
	(5) Transfer any income or assets to a disqualified person (or make any of either the benefit or use of a disqualified person)?				
	(6) Agree to pay money or property to a government official? (Exception. Check	☐ Yes ☒ No			
	foundation agreed to make a grant to or to employ the official for a				1
	termination of government service, if terminating within 90 days)	□Yes ⊠No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under t	the exceptions described in			
	Regulations section, 53.4941(d)-3 or in a current notice regarding disaster assistant	nce? See instructions	1b		
•	Organizations relying on a current notice regarding disaster assistance, check her				
С	Did the foundation engage in a prior year in any of the acts described in 1a, oth were not corrected before the first day of the tax year beginning in 2019?	ner than excepted acts, that	1c	3.40	×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the operating foundation defined in section 4942(j)(3) or 4942(j)(5))	he foundation was a private			
а	At the end of tax year 2019, did the foundation have any undistributed income (Page 1)	art XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?	☐ Yes ☒ No			
, .	If "Yes," list the years ▶ 20 , 20 , 20 , 20	* 1.0.04.240			0.73
b	Are there any years listed in 2a for which the foundation is not applying the pro (relating to incorrect valuation of assets) to the year's undistributed income? (If a				
	all years listed, answer "No" and attach statement—see instructions.)	pplying section 4942(a)(2) to	2b	2000	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed i	in 2a list the years here.	323	9.48	3269Y
٠.	► 20 , 20 , 20 , 20 .	La, not and yours note.		W.	
3a	Did the foundation hold more than a 2% direct or indirect interest in any busines	ss enterprise			
	at any time during the year?	. 🗌 Yes 🕱 No			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any put				1.0
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or lor				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift of				
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Sched foundation had excess business holdings in 2019.)	uule 0, to determine ii the	3b	202	-
4a	Did the foundation invest during the year any amount in a manner that would jeopar	dize its charitable purposes?	4a	\vdash	×
b	Did the foundation make any investment in a prior year (but after December 31, 19		370		6656
	charitable purpose that had not been removed from leopardy before the first day of the		4h	A STATE OF THE PARTY OF THE PAR	X

Dago	6
Page	τ

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (conti	nued)		
5a ⁻	During	the year, did the foundation pay or incur	any am	ount to						Υe	s No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?										
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,										
		ctly or indirectly, any voter registration dr						Yes	⊠ No	F /// 2% UN &	
		vide a grant to an individual for travel, stu	-		•			☐ Yes	· 🔀 No		
		vide a grant to an organization other than tion 4945(d)(4)(A)? See instructions		ritable, etc.,	-	ation desc	ribea in				
		vide for any purpose other than religious				any or odu	 cational	∐ Yes	X No		
		poses, or for the prevention of cruelty to				iy, or educ	Janoria	∏Yes	⊠ No		
b		inswer is "Yes" to 5a(1)-(5), did any of th				fv under th	e excer		_	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		ilations section 53.4945 or in a current no								5b	201 20120
		zations relying on a current notice regardi							▶□		363
С		nswer is "Yes" to question 5a(4), does t			exem	ption from	the tax				
		e it maintained expenditure responsibility		•				TYes	☐ No		
C-		" attach the statement required by Regula									
6a		foundation, during the year, receive any ersonal benefit contract?	tunas,	airectly or in	airectiy	, to pay pre	emiums ,	_	□		
b	•	foundation, during the year, pay premiun	oc diro	othy or indire	othe on	a parcanal	Lbonofii	Yes	_⊠No ·₂	6b	×
		to 6b, file Form 8870	is, uii c	city of indirec	July, Ori	a personal	Denen	Contract	. :	· 3000 118	
7a		ime during the tax year, was the foundation	a party	to a prohibiti	ed tax s	helter trans	action?	☐ Yes	⊠ No		
b	If "Yes,	" did the foundation receive any proceed:	s or hav	ve any net ind	come a	ttributable	to the t	ransactio		7b	
8		oundation subject to the section 4960 ta			more t	han \$1,000),000 in	_			
- D		eration or excess parachute payment(s) di						Yes	⊠ No	31 40 44 7 1440	1 200
Par	VIII -	Information About Officers, Direct and Contractors	tors, I	rustees, F	ounda	tion Mana	agers,	Highly	Paid E	mployee	s,
1	List all	officers, directors, trustees, and found	ation r	nanagers ar	d their	compens	ation. S	See instri	uctions		
			(b) Title	e, and average	(c) Co	mpensation	(d) (Contribution	s to	(e) Expense	account.
		(a) Name and address		rs per week ed to position		not paid, iter -0-)		yee benefit erred comp		other allov	
DAV	ID W.	DOUGLAS .	PRES	IDENT		•					
		ORONADO ROAD SANTA FE NM 87505		3.00		0.			0.		0.
		DOUGLAS	RECORD:	ING SECRETARY		•			•		•
		ORONADO ROAD SANTA FE NM 87505	VICE	2.00 PRESIDENT		٠0.			0.		0.
	BOX	B MORNEAU 23825 GREEN BAY WI 54305	VICE	2.00		0.			0.		0.
	State			2.00		<u> </u>			<u> </u>		
	•			5.00		0.	<u> </u>		0.		0.
2		ensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1-	see instr	uction	s). If none	e, enter
	"NONE										
	(a) Nama a	ad address of each employee and more than \$50.00		(b) Title, and a		(a) Compos		(d) Contrib employee		(e) Expense	account,
	(a) Name a	nd address of each employee paid more than \$50,00	,	hours per v devoted to p		(c) Compe	isauon	plans and compen		other allow	vances
NONE	·							•			
	:	··································									
					•						
								'			
					_						
	·	······································			•						
Total	number	of other employees paid over \$50,000		I					. ▶	0	
DAA							·····	<u> </u>		Form 990-1	PF (2019)

4

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)						
3 I	ive highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."				
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation				
NONE						
		 				
		 				
Total no	umber of others receiving over \$50,000 for professional services	0				
Part I						
	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses				
1 1	N/A					
		0.				
2						
		 				
3						
4 —		-				
Part I	X-B Summary of Program-Related Investments (see instructions)					
	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount				
1						
2 -		+				
-						
	······································					
All oth	er program-related investments. See instructions	1				
3						
Total. A	dd lines 1 through 3					
		Form 990-PF (2019				

Part	see instructions.)	gn tou	indations,
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	89,846.
b	Average of monthly cash balances	1b	2,944,506.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,034,352.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,034,352.
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	45,515.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,988,837.
6	Minimum investment return. Enter 5% of line 5	6	149,442.
Part 2		ounda	
	and certain foreign organizations, check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	149,442.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 872.		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2019 (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	872.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	148,570.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	148,570.
6	Deduction from distributable amount (see instructions)	6	·
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	148,570.
Part	XII 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	210,000.
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.,		
	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	210,000.
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. See instructions	5	872.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209,128.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	XIII Undistributed Incom	e (see instruction	ons)			
•			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019	from Part XI,				148,570.
2	line 7	 the end of 2019			THE NAME OF STREET OF STREET	146,570.
a	Enter amount for 2018 only					
b	Total for prior years. 20 , 2	0 , 20		A COUNTY OF THE PARTY OF THE PA		
3	Excess distributions carryover,					
а	From 2014	44,530.				
b	From 2015	53,898.	and a support of the same of t			
C	From 2016	12,805.		P 25		
d	From 2017	9,585.				
e	From 2018 L	65,986.	106 004	72 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	APPER MARKET PROPERTY.	
4	Total of lines 3a through e . Qualifying distributions for 2019	 0 from Part VII	186,804.		3	
4	line 4. ► \$ 210,000.	9 IIOIII Fait All,				
а	Applied to 2018, but not more t	han line 2a				
b	Applied to undistributed incom-			, ,		n Service and American
	(Election required—see instruct	, ,				NAME
С	Treated as distributions out of or required—see instructions)	corpus (Election				
d	Applied to 2019 distributable ar	mount		***************************************	DECEMBER 1	148,570.
е	Remaining amount distributed of		61,430.		然你这些解释	经验的证据的
5	Excess distributions carryover a		_			
	(If an amount appears in colum amount must be shown in colum					
6	Enter the net total of each	ch column as				
2	indicated below: Corpus. Add lines 3f, 4c, and 4e.	Subtract line 5	248,234.			
b	Prior years' undistributed inc		240,234.	CANADAM AN METERINE AND		
	line 4b from line 2b	·		0.		
С	Enter the amount of prior years	s' undistributed				
	income for which a notice of					
	been issued, or on which the					
	tax has been previously assess					
d	Subtract line 6c from line amount—see instructions .	6b. Taxable		0.		
е	Undistributed income for 2018					
	4a from line 2a Taxable	amount-see				
_	instructions	· · ·			0.	TANGE CONTRACTOR
f	Undistributed income for 2019 4d and 5 from line 1. This ar					
	distributed in 2020 .	· ·				· 0.
7	Amounts treated as distribution	ns out of corpus				
-	to satisfy requirements impos	•				
	170(b)(1)(F) or 4942(g)(3) (Ele	ection may be				
	required—see instructions)					
8	Excess distributions carryover		44 530			
•	applied on line 5 or line 7 (see i	-	44,530.		(2) 10 10 10 10 10 10 10 10 10 10 10 10 10	
9	Excess distributions carryon Subtract lines 7 and 8 from line		203,704.			
10	Analysis of line 9:	. oa .	203,704.			A STATE OF THE STA
а	Excess from 2015	53,898.	Z FE GOOD TO			
b	Excess from 2016	12,805.				
С	Excess from 2017	9,585.		1000		
d	Excess from 2018	65,986.				
e	Excess from 2019 .	61,430.	THE STATE OF THE S	PORT SALES OF THE		TO SOUTH AND THE SOUTH

-	4	
Page	1	ı

Form 9	90-PF (2019)					Page 10
Part	XIV Private Operating Foundation	tions (see ınstru	ictions and Part	VII-A, question 9)	N/A
1 _a	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective for		_	▶		
b	Check box to indicate whether the four		operating founda		ction	(3) or 🔲 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	1,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7
	each year listed .				-	
b	85% of line 2a .					
С	Qualifying distributions from Part XII,					1
	line 4, for each year listed					
d	Amounts included in line 2c not used directly			1		}
	for active conduct of exempt activities .					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.		\			
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			X		
	alternative test relied upon		,			
а	"Assets" alternative test—enter		/	1 \		
	(1) Value of all assets .					
	(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 .		1			
С	"Support" alternative test—enter			 		 -
·	<u> </u>					
	(1) Total support other than gross investment income (interest,				`	
	dividends, rents, payments on			[u.	
	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 Information	n (Complete ti	nis part only if t	the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instructio	ns.)			
1	Information Regarding Foundation					
а	List any managers of the foundation v	who have contrib	uted more than 29	% of the total conti	ributions received	by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more th	nan \$5,000). (See s	ection 507(d)(2))	
	DAVID W. DOUGLAS					
b	List any managers of the foundation					arge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a	10% or greater into	erest.	
	N/A	0 1000	0 1 -11			
2	Information Regarding Contribution					d door not cooset
	Check here ▶ ☒ if the foundation unsolicited requests for funds. If the fo	•			•	•
	complete items 2a, b, c, and d See in		giris, grants, etc.,	, to marriadais or o	rganizations unde	si otrici conditions,
	The name, address, and telephone nu		drass of the nerse	on to whom applica	tions should be a	ddressed:
а	The hame, address, and telephone ha	imbel of email au	areas or the perso	to whom applica	andria andulu de a	,
b	The form in which applications should	be submitted an	d information and	materials they sho	uld include.	
_	The second secon					
	Any submission deadlines:					
d	Any restrictions or limitations on aw	vards, such as b	y geographical a	reas, charitable fie	elds, kinds of ins	stitutions, or other
	factors.					

Part XV Supplementary Information (continued)

3. Grants and Contributions Paid During t	If recipient is an individual,	T	Tare a dymone	T
Recipient Name and address (have as his areas)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ARCHOA		!		
P.O. BOX 1338 FREDERICKSBURG TX 78624		E0163	DEEODECEATION	20.000
CENTRE D'EXPERIMENTATION ET DE FORMATION AGRICOLE	NI / A	501C3	REFORESTATION	20,000
30W098 WILLOW LANE	N/A			
WARRENVILLE IL 60555		501C3	REFORESTATION	15,000
FIRST PRESBYTERIAN CHURCH OF SAN ANSELMO		30103	REPORESTATION	\ 13,000
72 KENSINGTON ROAD				
SAN ANSELMO CA 94960	N/A	501C3	REFORESTATION	15,000
YMCA WORLD SERVICE CAMPAIGN	,	0000		
101 N. WACKER DRIVE			PLANTING OLIVE	
CHICAGO IL 60606	N/A	501C3	TREES IN WEST BANK	35,000
PRESBYTERIAN CHURCH USA				·
100 WITHERSPOON STREET				
LOUISVILLE KY 40202	N/A	501C3	REFORESTATION	45,000
EPISCOPAL RELIEF AND DEVELOPMENT	İ			
815 SECOND AVENUE				
NEW YORK NY 10017	N/A	501C3	REFORESTATION	30,000
CATHOLIC RELIEF SERVICES				
228 W. LEXINGTON STREET	<u> </u>			
BALTIMORE MD 21201	N/A	501C3	REFORESTATION	25,000
PLANT WITH PURPOSE				
4747 MORENA BLVD STE 100				
SAN DIEGO CA 92117	N/A	501C3	REFORESTATION	25,000.
Total			▶ 3a	210,000
b Approved for future payment	I			210,000
a v pp. o. o. io. io. io. io.				
			<u> </u>	
Total			<u> ▶ 3b</u>	000 DE (004

nțer gro	oss amounts unless otherwise indicated	Unrelated but	siness income	Excluded by section	on 512, 513, or 514	(e)
4 -		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	gram service revenue.		<u> </u>			,
a				 		
b				-		
C				 		
d						
e				-		
,	Food and contracts from accurrement accounts	-		 		
9 2 Ma	Fees and contracts from government agencies mbership dues and assessments					
	erest on savings and temporary cash investments			14	124.	
	idends and interest from securities			14	87,030.	
	t rental income or (loss) from real estate		· · ;	1 1	07,030.	3 ,
	Debt-financed property	· 1		 		
	Not debt-financed property		-			
	t rental income or (loss) from personal property					
	ner investment income					
	n or (loss) from sales of assets other than inventory					
	t income or (loss) from special events .			1		
	oss profit or (loss) from sales of inventory .	-		 		-
	ner revenue: a					-
b						
С						
d						
е						
						
12 Sul	ototal. Add columns (b), (d), and (e)	,		, ,	87,154.	
	ototal. Add columns (b), (d), and (e)	, ,		<u> </u>	87,154. 13	87,154.
13 To						87,154.
13 To	tal. Add line 12, columns (b), (d), and (e)	s)				87,154.
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
l3 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
l3 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	
13 To See wor Part X Line No	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s) ccomplishm e	ent of Exemp	ot Purposes	13	

Part	XVII	Information Organization		sfers to and Transac	tions and P	lelationship	ps With No	oncharitat	le Ex	empt
	ın se			ngage in any of the follo					Yes	No
•	-		ortina foundation to	a noncharitable exemp	t organization	of				- 1
	(1) C		orting foundation to	a nonchantable exemp	t organization	Oi.		1a(.	×
		ther assets		• •		• •		1a(^
ь		transactions.			•		• •	. 100	" 	1
_			a noncharitable exen	not organization				1b(<u>.</u>	×
				npt organization . ole exempt organizatior				. 1b(^
			equipment, or other					. 1b(^
			• •	assets		•		. 1b(_	 ^
		eimbursement ai	_		• •			1b(-	 ^
		oans or loan gua								+
_				p or fundraising solicita			•	. 1b(4	×
		-		ts, other assets, or paid				. 10		×
	value value	of the goods, of in any transaction	ther assets, or servic on or sharing arrange	" complete the following es given by the reporting ment, show in column (ng foundation (d) the value o	If the found of the goods,	dation received	ved less thats, or service	n fair r es rece	narket eived.
(a) Line	no (b) Amount involved	(c) Name of noncha	aritable exempt organization	(d) Desc	nption of transfe	rs, transactions	s, and sharing a	rrangen	nents
				······································						
	_									
		 								
							_			
	descr	ribed in section 5		iliated with, or related tion 501(c)(3)) or in sect				,	∕es [2	⊠ No
		(a) Name of organ	ization	(b) Type of organiz	ation		(c) Description	of relationship		
					_					
				I this return, including accompar n taxpayer) is based on all inform				ny knowledge ar	d belief,	it is true,
Sign Here		\sim \sim	gler	04/13/2020 Date	Board Pres	•		May the IRS dis with the prepare See instructions	r shown	below?
	J.97	Print/Type preparer		Preparer's signature		Date		rszn . PTIN		
Paid				oparor o signature			Check	IXI if I	caaa.	
Prepa			LANE			04/02/2		nployed P01		23
Use (Only	Firm's name ▶	Lane & Compan				-	52-17385		
		Firm's address ▶	<u>1717 Pennsylv</u> Washington	rania Avenue NW,	Suite 425 DC 20006		Phone no (202)463-		F (2019)
BAA			"aprittid coll		DC 20006	,		FORM	JUTE	. (2019)

WATERSHEDS FOUNDATION

Form 990-PF: Return of Private Foundation

Continuation Statement Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

. 0 0 Expense account, other allowances 0 Contributions to employee benefit plans and deferred compensation 0 0 0 . 0 . 0 0 0 Compensation Title, and average hours per week devoted to position VICE PRESIDENT DIRECTOR 1.00 DIRECTOR 1 00 DIRECTOR 1.00 2.00 Name and address 221 CAMINO DE LA SIERRA 221 CAMINO DE LA SIERRA 2132 PASEO PONDEROSA SANTA FE, NM 87501 SANTA FE, NM 87508 JUDY CRAWFORD SANTA FE, NM 87501 SANTA FE, NM 87501 47 ALONDRA ROAD JIM BROWN DICK ROWE ANN ROWE

.

.

。

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL EXCISE TAX	1,266.			
Total	1,266.			

Legal and Professional Fees

Form 990-PF Part I, Lines 16a - 16c

Name		Employer Identification No
WATERSHEDS FOUND	ATION	85-0466068

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
					-
	.,				
	-				
al to Form 990	_ │ J-PF, Part I, Line 16a	-			

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LANE & CO. CPAS	TAX PREPARATION	2,700.			
Total to Form 990-	PF, Part I, Line 16b	2,700.			

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990	-PF, Part I, Line 16c				

Investments

Name WATERSHEDS FOUNDATION					yer Identification No
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Govern Obligati Book V	nment ions	f Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investme	ents - Corporate	Stock:	Bool Value	<	f Year Fair Market Value
CHEMOURS CO. CORTEVA INC. DOW INC. DUPONT DE NEMOURS INC. Totals to Form 990-PF, Part II, L	ine 10b		1,697	,327. ,455.	147,633. 1,697,838. 954,327. 1,119,455. 3,919,253.
Line 10c - Investme	nts - Corporate I	Bonds:	Bool Value	<	f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 10c				
Line 12 - Investme	ents - Mortgage I	oans:	Bool Value	<	f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 12				
Line 13 - Inve	estments - Other	:	Bool Value	<	f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 13				

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

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

2019

Employer identification number

WATERSHEDS FOUNDATION 85-0466068 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF ▼ 501(c)(3) exempt private foundation 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** 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 331/3% 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)

Name of organization
WATERSHEDS FOUNDATION

Employer identification number

85-0466068

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			
<u>1</u>	DAVID DOUGLAS 302 E CORONADO RD SANTA FE NM 87505	\$ 1,157,200.	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			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

Employer identification number

WATERSHEDS FOUNDATION 85-0466068 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I PUBLICLY TRADED SECURITIES 1__ \$ 1,007,200. 12/02/2019 (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given Part I (See instructions) (a) No. (c) (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I (c) FMV (or estimate) (a) No. (d) (b) from **Date received** Description of noncash property given Part I (See instructions) (a) No. (c) (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions)

WATERSHEDS FOUNDATION

Employer identification number

85-0466068

Part III	(10) that total more than \$1,000 fo	or the year from any ations completing Par	one contributor.	Complete columns (a) through (e) and of exclusively religious, charitable, etc.	
	Use duplicate copies of Part III if ad			se instructions.)	
a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held	
	Transferee's name, address, a	(e) Transt and ZIP + 4		nship of transferor to transferee	
a) No.					
a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
			•••••		
		(e) Transt	fer of gift		
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee		
			•••••		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		<u></u>	<u></u>		
		(e) Trans	fer of gift		
-	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee	
(a) No.		1			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	T		fer of gift	and the second s	
-	Transferee's name, address,	and ZIP + 4	Relatio	nship of transferor to transferee	

			i		

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or