#### EXTENDED TO NOVEMBER 15, 2021

Form **990** 

Check if applicable:

Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning

C Name of organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. Open to Public Inspection and ending D Employer identification number

	Addre chang	SS WATERTOWN COMMUNITY FOUNDATION, INC.							
	Name chang	Doing business as		30-02293	98				
	Initial  return	, , , , , , , , , , , , , , , , , , , ,	Room/suite	E Telephone numbe					
	JFinal Jreturn termir			617-926-					
_	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	388,993.				
H	Jreturn ∏Applio	WAIERIOWN, MA 024/1		H(a) Is this a group re					
	Jtion pendi	F Name and address of principal officer:DAVID SIEGED		for subordinates					
		SAME AS C ABOVE		H(b) Are all subordinates in					
		empt status: X 501(c)(3) 501(c) ( )	or 527		list. See instructions				
		forganization: X Corporation Trust Association Other	I Veer	H(c) Group exemptio	-				
	rt I	Summary	L Year	or formation: 2003 N	M State of legal domicile: MA				
		Briefly describe the organization's mission or most significant activities: THE	FOIINDA	TTON SEEKS	TO PROMOTE				
Governance	1	A STRONG, CLOSE-KNIT COMMUNITY BY FOSTER:	TNG CC	NNECTIONS	RESPECT AND				
nar	2	Check this box if the organization discontinued its operations or dispose							
ver	3			l -	18				
ဗ	4	Number of independent voting members of the governing body (Part VI, line 1a)			18				
S S	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			1				
iţie	6	Total number of volunteers (estimate if necessary)			20				
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.				
		The difficulties business taxable mostle from one 1,1 arti, into 11		Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)		159,574.	335,881.				
n	9	Program service revenue (Part VIII, line 2g)		0.	0.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		45,108.	43,112.				
Ř	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		16,053.	9,455.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		220,735.	388,448.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		131,254.	234,899.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
ç	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		48,853.	54,235.				
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
ф		Total fundraising expenses (Part IX, column (D), line 25)  20,5	41.						
ώ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		23,246.	22,764.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		203,353.					
	19	Revenue less expenses. Subtract line 18 from line 12		17,382.	76,550.				
ets or lances			Ве	ginning of Current Year	End of Year				
set	20	Total assets (Part X, line 16)		2,224,993.	2,550,730.				
Jet As Jnd B	21	Total liabilities (Part X, line 26)		0.	0.				
<u>-</u> <u>u</u>	22	Net assets or fund balances. Subtract line 21 from line 20		2,224,993.	2,550,730.				
	rt II	Signature Block							
		alties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is				
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	nas any knowledge.					
٠.		Signature of officer		I Date					
Sigr		DAVID SIEGEL, CO-PRESIDENT		Dato					
Her	е	Type or print name and title							
		,	П	Date Check	TT PTIN				
Paid	l	Print/Type preparer's name  SANDRA M. BROWN, CPA  Preparer's signature  SANDRA M. BROWN	<b>I</b>	OHOOK L					
		Firm's name SMITH, SULLIVAN & BROWN, P.C.	, CFAI		43-1985162				
Preparer   Firm's name   SMITH, SULLIVAN & BROWN, P.C.   Firm's EIN   43-1985162   Use Only   Firm's address   80 FLANDERS ROAD - SUITE #200									
J36	Jilly	WESTBOROUGH, MA 01581		Phone no (5	08) 871-7178				
May	the	RS discuss this return with the preparer shown above? See instructions		FIIOIIE IIO. \ J	X Ves No				

Sign	Signature of officer		Date
Here	DAVID SIEGEL, CO-PR	ESIDENT	
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	SANDRA M. BROWN, CPA	SANDRA M. BROWN,	CPA11/09/21 f P01614103
Preparer	·	AN & BROWN, P.C.	Firm's EIN ► 43-1985162
Use Only	Firm's address 80 FLANDERS R	OAD - SUITE #200	
	WESTBOROUGH,	MA 01581	Phone no. (508) 871-7178
May the II	RS discuss this return with the preparer show	wn above? See instructions	X Vas No

032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2020)

Check if Schedulo Contains a response or note to any line in this Part III	Pai	Check if Cahadula Casataina a response our state to any line in this Bort III	
THE FOUNDATION COMMENCED OPERATIONS ON DECEMBER 29, 2003. THE FOUNDATION HAS BEEN ORGANIZED TO SUPPORT EDUCATIONAL AND OTHER NON-PROFIT ORGANIZATIONS IN THE TOWN OF WATERTOWN.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-62?	_		<u></u>
FOUNDATION HAS BERN ORGANIZED TO SUPPORT EDUCATIONAL AND OTHER	1		
NON-PROFIT ORGANIZATIONS IN THE TOWN OF WATERTOWN.    Did the organization undertake any significant program services during the year which were not listed on the prior Form 930 or 930 cet 27			
Did the organization undertake any significant program services during the year which were not listed on the prior Form 930 or 930 E2?  If "Yea," describe these new services on Schedule 0.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?			
prior Form 990 or 990-EZ?		NON-PROFIT ORGANIZATIONS IN THE TOWN OF WATERTOWN.	
prior Form 990 or 990-EZ?		Did the ergenization undertake any eignificant program convices during the year which were not listed on the	
the "res," describe these new services on Schedule 0.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?	2		Ves X Ne
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?			tes _21_INO
If "Yes," describe these changes on Schedule O.	•	·	V YN-
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.  Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  4	3		Yes _21_NO
Section 501 (c)(3) and 501 (c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  40 (Cook:) (Expenses \$			
4d (Code   ) (Expenses \$ 253, 272. Including grants of \$ 234,899.) (Revenue \$   )  THE FOUNDATION COMMENCED OPERATIONS ON DECEMBER 29, 2003. IT HAS BEEN ORGANIZED TO SUPPORT EDUCATIONAL RELATED ACTIVITIES AND OTHER NON-PROFIT ORGANIZATIONS IN THE TOWN OF WATERTOWN.  4b (Code   ) (Expenses \$   Including grants of \$   ) (Revenue \$   )  4c (Code   ) (Expenses \$   Including grants of \$   ) (Revenue \$   )  4d Other program services (Describe on Schedule O) (Expenses \$   Including grants of \$   ) (Revenue \$   )  4d Other program services (Describe on Schedule O) (Expenses \$   Including grants of \$   ) (Revenue \$   )  4d Other program services (Describe on Schedule O) (Expenses \$   Including grants of \$   ) (Revenue \$   )	4		
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<b>4e</b> Total program service expenses ▶ 253,272.	·u		)
	40		
			Form <b>990</b> (2020)

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11b		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	TID		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			177
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	domestic government on the transportation of the transportation of the transportation and the manufacture of the transportation of t	'		

Form 990 (	2020	WATERTOWN	COMMUNIT
Part IV	Ch	ecklist of Required Schedu	les (continued)

	one state of the quality of the state of the		· · ·	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Х	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
•	Schedule J	23		_X_
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		х
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Och ad to L. Do Ll	OEh		Х
06	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		Х
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		х
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		22
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
•	instructions, for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		***	
Da	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pal	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	Establis mark and a transfer of the Control of the		Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 12	1		
b		4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-		
	(Uaitibiliu) Willings to Dize Willes?	1 1c	ı	

## Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a 1					Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 26 X  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a IX to lit 'Yes,' has it filed a Form 990-T for this year? If 'No' to film 3b, provide an explanation on Schedule O 3b II 'Yes,' has it filed a Form 990-T for this year? If 'No' to film 3b, provide an explanation on Schedule O 3b II 'Yes,' has it filed a Form 990-T for this year? If 'No' to film 3b, provide an explanation on Schedule O 3b II 'Yes,' has it filed a form 990-T for this year? If 'No' to film 3b, provide an explanation on Schedule O 3c II 'Yes' to the the name of the foreign country (such as a bank account, securities account, or other financial account? A great in the schedule O 3c II 'Yes' to the the name of the foreign country (such as a bank account, securities account, or other financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  See instructions for filing requirements for FinCEN Form 88867 for See instructions of the dorganization foreign and services for foreign and for	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3 bid the organization have unrelated business gross income of \$1,000 or more during the year;  4 at Aray time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account; sourced in or other financial account)?  4 a X x interest the name of the foreign country \$\frac{1}{2}\$ be a bank account; sourced in or other financial accounts (FBAR).  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Was the organization a party to a prohibited fax shelter transaction at any time during the tax year?  5 a Was the organization have armual gross receipts that are normally greater than \$100,000, and did the organization solicit ary contributions that were not tax deductibles as charitable contributions?  5 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles as charitable contributions and party for goods and services provided to the payor?  7 a price of the organization business are solicitation and express statement that such contributions or gifts were not tax deductible?  7 organizations that may receive deductible contributions under section 170(c).  8 b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 b If "Yes," indicate the number of Forms 8282? Sind party is a contribution of quarty for goods and services provided to the payor?  7 b If "Yes," indicate the number of Forms 8282? lied during the year  1 b If "Yes," indicate the number of Forms 8282? lied during the year  2 b If the organization receive a paymentum, directly or indirectly, on a personal benefit contract?  7 c X  7 b If the organization received an antitability of the organization forms 880 as required?  1 b If "Yes," indicate the number of		filed for the calendar year ending with or within the year covered by this return	2a 1			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  4b If 1 Yes, * has it filed a Form 990 Tor the year of "Not * for is 3,0 your owice an explanation on Schedule O  5b If 1 Yes, * has it filed a Form 990 Tor the year "Not * for is 3,0 your owice an explanation on Schedule O  5c If Yes * to the the name of the foreign country (such as a bank account, securities account, or other francial account) or the financial account in a foreign country (such as a bank account, securities account, or other francial account) or the financial account in a foreign country (such as a bank account, securities account, or other francial account) or the financial account in a foreign country or the security of the	b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
b If "Yes," has it filled a Form 990-T to this year? If "No" to line 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a X  b If "Yes," either the name of the foreign country [such as a bank account, securities account, or other financial accounts (FBAP).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b ID day at yeastbe party notify the organization file Form 8888-17?  5c ID Did any texabile party notify the organization file Form 8888-17?  5c ID Did any texabile party notify the organization file Form 8888-17?  5c ID Did she was a manual gross receiption that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6c ID Section 900 organization she was not a supplementation include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that may receive deductible contributions under section 170(c).  8c ID If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 organizations that may receive deductible contributions under section 170(c).  8c ID ID IN SECTION SECTIO		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	)			
4a A any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5a Was the organization or party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file form \$886177.  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b X  5c If 'Yes' to line Sar of 5b, did the organization file form \$886177.  5c If 'Yes' to line Sar of 5b, did the organization file form \$886177.  5c If 'Yes' to line Sar of 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c X  5c If 'Yes' to the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c A X  6d If 'Yes,' fid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c A X  6d If 'Yes,' fid the organization include with every solicitation and party for goods and services provided to the payor?  6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6c Did the organization sell, exchange, or otherwise dispose of tangible personal penefit contract?  7c X  7d If 'Yes,' indicate the number of Forms 8282 filed during the year  9 If the organization received a contribution of organization five filed by the organization filed property of the organization filed property of the value of the organization filed property of the organizati	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X
b if "Yes," enter the name of the foreign country. ▶  b if "Yes," enter the name of the foreign country. ▶  see instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c I "Yes" to line Sa or 5b, did the organization file Form 8886-17?  6a Does the organization she annual gross recopists that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b I "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that many receive deductible contributions under section 170(c).  8 Did the organization receive apment in excess of \$5 made party as a contribution and party for goods and services provided to the payor?  7 Tes," did the organization notify the donor of the value of the goods or services provided?  8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Tes, I did the organization few any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Tes, I did the organization received a contribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1098-0?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4968?  9 Sponsoring organization make any taxable distributions under section 4968?  9 Sponsoring organization make any taxable distributions under section 4968?  10 bid the sponsoring organization make any taxable distri	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
b If "Yes," enter the name of the foreign country. ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization appray to a prohibited tax shefler transaction at any time during the tax year?  5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shefler transaction?  5c If "Yes" to line 5a or 5b, did the organization file Form 8886-7?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax edicutible as charitable contributions?  6a X  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  a Id the organization state any receive deductible contributions under section 170(c).  b If "Yes," did the organization nority the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8828?  d If "Yes," indicate the number of Forms 8282 filed during the year  E Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required?  7c X  7d Did the organization received a contribution of cars, boats, singlance, or other vehicles, did the organization file Form 8899 as required?  7a If the organization received a contribution of cars, boats, singlance, or other vehicles, did the organization file Form 889 as required?  7a If the organization received a contribution of cars, boats, singlance, or other vehicles, did the organization file Form 889 as required?  7b Did the organization received a contribution of cars, boats, singlance, or other vehicles, did the organization file Form 889 as required?  7b If the organization received a contributio	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
See instructions for filing requirements for FinCEN Form 114. Report of Foreign Bank and Financial Accounts (FBAR).  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 In 17 'Yes' to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 In 2 Was to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 In 2 Was to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 In 2 Was to line Sa or 5b, did the organization file Form 8886-17?  6 In 2 Was that were not tax deductible as charitable contributions?  6 In 3 Was that may receive deductible on transaction an express statement that such contributions or gifts were not tax deductible?  7 Organization stat may receive deductible contributions under section 170(c).  8 It is file organization receive a payment in excess of \$75 made party as a contribution of and party for goods and services provided to the payor?  9 If Yes, 'indicate the number of Forms 8282 filed during the year or line Form 8282?  10 If Yes, 'indicate the number of Forms 8282 filed during the year  11 In 2 Was, 'indicate the number of Forms 8282 filed during the year or line Form 8282 filed during the year or line or line Form 8282 filed during the year or line Form 8282 filed during the year or line Form 8282 filed during the year or line or line Form 8282 filed during the year or line Form 8282 filed forms 8282 filed fo		financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		Х
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b   X    c   if "Yes" to line 5a or 5b, did the organization file Form 8886 ??  6a   Does the organization have annual gross receipts that are normally greater than \$10,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a   X    b   if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7   Organizations that may receive deductible contributions under section 170(c).  a Did the organization that may receive deductible contributions under section 170(c).  b   if "Yes," if did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8828?  d   if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization received an contribution of qualified intellectual property, did the organization file Form 8898 as required?  f   Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098.C?  7   X    g   if the organization received a contribution of qualified intellectual property, did the organization file Form 1098.C?  8   Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4968?  9   Sponsoring organization make any taxable distributions under section 4968?  10   Section 501(c)(2) qualified norprofit health insurance issuers.  11a   Section 501(c)(29) qualified norprofit health plans in more than one state?  Note: See the instructions or additional information the organization must report on Schedule	b	If "Yes," enter the name of the foreign country ▶				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 If "Yes" to line 5a or 5b, did the organization file Form 8886 T?  6 Does the organization that are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive apprent in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 The State of the organization notify the donor of the value of the goods or services provided?  7 Did the organization receive apprent in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  8 Did the organization receive apprentiance or services or the services provided?  9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the life form 8282?  10 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  11 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  12 Did the organization feelwed a contribution of qualified intellectual property, did the organization flore means of the payor organization flore and contribution of cars, boats, airplanes, or other vehicles, did the organization flore form 1098-C?  13 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a distribution to a donor advised fund maintained by the sponsoring organization make a distribution to a donor organization flore the payor organization flore the payor organization		See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced Financial Financial Advanced Financial Financ	ccounts (FBAR).			
til "Yes" to line 5a or 5b, did the organization file Form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$25 made partly as a contribution and partly for goods and services provided to the payor?  7 Organization shat may receive deductible contributions under section 170(c).  b If "Yes," idd the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization received a contribution of qualified intellectual property, did the organization file Form 8898 as required?  f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Sponsoring organization make any taxable distributions under section 4966?  9 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross received from them.)  12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  15 Gross received an organization received or accurated during the year  2 Section 501(c)(29) qualified nonprofit health insurance issuers.  1 Section 501(c)(29) qualified nonprofit health plans in more than one state?  Note: See the instructions or additional infor	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
6a Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b if "Yes," include the number of Forms 8282 filed during the year  c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 E X  d If "Yes," include the number of Forms 8282 filed during the year  e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 If X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8998 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 8998 as required?  7 Sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization have excess business holdings at any time during the year?  9 Sponsoring organization make any taxable distributions under section 49667  9 Did the sponsoring organization make any taxable distributions under section 49667  9 Did the sponsoring organization make any taxable distributions under section 49667  9 Did the sponsoring organization scluded on Form 990, Part VIII, line 12  Gross income from other sources (Do not net amounts due or paid to other sources agains	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
any contributions that were not tax deductible as charitable contributions?  b   f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a   Did the organization are great to the contribution and partly for goods and services provided to the payor?  7   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 2822?  d   f "Yes," did the organization notify the donor of the value of the goods or services provided?  7   Tax    d   f "Yes," indicate the number of Forms 8282 filed during the year  e   Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f   Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  Not section organization and any taxable distributions under section 4966?  Section 501(c)(f) organization make any taxable distributions under section 4966?  D   Did the sponsoring organization make any taxable distributions under section 4966?  Section 501(c)(f) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  D Gross receipts, included on Form 990, Part VIII, line 12  Section 501(c)(f) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  B Gross income from members or shareholders  Gross income from members or shareholders  B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  11b   12a   Section 501(c)(f) organizations. Enter:  a Is the organization incensed to issue qualified health plans in more than one state?  b If "Yes," enter the amount o	С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  5 If "Yes," did the organization netify the donor of the value of the goods or services provided?  5 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$282?  6 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 D	6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization neceive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor?  7 Ta		any contributions that were not tax deductible as charitable contributions?		6a		X
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to file Form 8282?  At If "Yes," enter the amount of reserves on hand  17	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		X
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d if "Yes," indicate the number of Forms 8282 filed during the year  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7	С		•			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7t X  g If the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organization make any taxable distributions under section 4966?  b Did the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  113 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b If "Yes," enter the amount of the exempt interest received or accrued during the year  12a If the struction of the section 4960 tax on payments of maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O  b Enter the amou				7c		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 1889 as required?  h If the organization received a contribution of qualified intellectual property, did the organization file Form 1889 As required?  No Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds.  Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  Gross income from members or shareholders  B If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Itab  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified healt	d	·				
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8  9 Sponsoring organization make any taxable distributions under section 4966?  9a bid the sponsoring organization make any taxable distributions under section 4966?  9b bid the sponsoring organization make any taxable distributions under section 4966?  9c bid the sponsoring organization make any taxable distributions under section 4966?  9c bid the sponsoring organization make any taxable distributions under section 4966?  9c bid the sponsoring organization make any taxable distributions under section 4966?  9c bid the sponsoring organization make any taxable distributions under section 4966?  9c bid the sponsoring organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  bid oross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b limitation fees and capital contributions included on Part VIII, line 12  bid oross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11b limitation fees and capital contributions included on Part VIII, line 12  bid oross income from embers or shareholders  11a limitation fees and capital contributions included on Part VIII, line 12  bid oross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11b limitation fees and capital contributions of shareholders  11b limitation fees and capital contributions of shareholders  11b limitation fees and capital contributions under shareholders  11c limitation fees and capital contributions of a capital contributions and file fees and capital contribut	е					
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	16		t income?	16		Х

Form **990** (2020)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Creck it Scriedule O contains a response or note to any line in this Part VI			77
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Divided (This decitor B requests information about politics not required by the internal revenue code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	114		
12a		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
		120		
·	in Schedule O how this was done	12c	Х	
13		13		X
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a	Х	
h	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.55		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
·va	taxable entity during the year?	16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ioa		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	exempt status with respect to such arrangements? tion C. Disclosure	IUU		
17	List the states with which a copy of this Form 990 is required to be filed ►MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.	S Silly	,	
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
IJ	statements available to the public during the tax year.	u midi	ioidi	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	THE ORGANIZATION - 617-926-1500			
	PO BOX 334, WATERTOWN, MA 02471			
	<u> </u>			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

oxdet Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

See instructions for the order in which to list the persons above.

<b>(A)</b> Name and title	(B) Average hours per	box	not c , unle	Pos heck ss pe	more rson i	than is bot	h an	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer of points		Highest compensated Lary Amployee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JAN SINGER	20.00			l				F 0 4 3 0	•	
EXECUTIVE DIRECTOR	1000			Х				50,430.	0.	0.
(2) DAVID SIEGEL	10.00	ļ		l					•	
CO-PRESIDENT	1000	Х		Х				0.	0.	0.
(3) DARSHNA VARIA	10.00	ļ		l					•	
CO-PRESIDENT	1000	Х		Х				0.	0.	0.
(4) WILLIAM B. FORD, CPA	10.00	ļ		l					•	
TREASURER	1000	Х		Х				0.	0.	0.
(5) EMILY BARCLAY	10.00	ļ		l					•	
CO-VICE PRESIDENT		Х		Х				0.	0.	0.
(6) KATHRYN WHITE	10.00	ļ								
CO-VICE PRESIDENT		Х		Х				0.	0.	0.
(7) ROBERT AIRASIAN	5.00	ļ								
DIRECTOR		Х						0.	0.	0.
(8) ALBRIK AVANESSIAN	5.00	ļ								
DIRECTOR		Х						0.	0.	0.
(9) ELEANOR DONATO	5.00	ļ								
DIRECTOR		Х						0.	0.	0.
(10) ASHLEY MORRIS	5.00							_	_	_
DIRECTOR (FORMER)		Х						0.	0.	0.
(11) MARIA PANAGGIO-PHILLIPS	5.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(12) ANTHONY PAOLILLO	5.00								_	
DIRECTOR		Х						0.	0.	0.
(13) LORA SABIN	5.00								_	_
DIRECTOR		Х						0.	0.	0.
(14) ROBERT SHAY	5.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(15) ELAINA THEMISTOS	5.00	1_						_	_	_
DIRECTOR		Х						0.	0.	0.
(16) LAUREN UNSWORTH	10.00	1_		l_				_	_	_
CO-VICE PRESIDENT		Х		Х	<u> </u>			0.	0.	0.
(17) JENNIFER DAVIS	10.00	1.		_				_	_	_
CO-VICE PRESIDENT		Х		Х				0.	0.	0 <b>.</b> Form <b>990</b> (2020)

032007 12-23-20 Form **990** (2020)

Form 990 (2020) WATERTOWN									30-0	449	<u> 398</u>	P	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	1	ploy	ees			ghe	st C		es (continued)				
<b>(A)</b> Name and title	(B) Average hours per week	box	not c	Posi theck ress per ss per	ition more rson i	than is bot	h an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensatio from related	n		(F) stimate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr org an	pensa rom th anizat d relat anizati	e ion ed
(18) ANTONIA O'HARA	5.00	.,						0		•			
DIRECTOR (19) CHRISTINE PARKER	5.00	Х						0.		0.			0.
DIRECTOR	3.00	X						0.		0.			0.
(20) CURTIS TEIXEIRA	5.00	<del> </del>								-			
DIRECTOR		х						0.		0.			0.
1b Subtotal							<b>&gt;</b>	50,430.		0.			0.
c Total from continuation sheets to Part V								50,430.		0.			0.
d Total (add lines 1b and 1c)  Total number of individuals (including but r							no re	<u> </u>	0.000 of reportab	_			<u> </u>
compensation from the organization									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Yes	0 <b>N</b> o
3 Did the organization list any <b>former</b> officer,	director, trust	ee. I	cev e	empl	love	e. or	hio	nhest compensated emr	olovee on			res	NO
line 1a? If "Yes," complete Schedule J for s	,	,	,	•	,	,	·		•		3		Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or a											-		
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch į	pers	son .					5		X
Section B. Independent Contractors  1 Complete this table for your five highest co	mponeated in	don	ando	nt c	ontr	racto	orc t	that received more than	\$100,000 of com	none	ation	from	
the organization. Report compensation for										iperis	ation	110111	
(A) Name and business	-		ONI					(B) Description of s		С	(Compe	C) nsatio	n
Total number of independent contractors (     \$100,000 of compensation from the organi		ot li	mite	d to		se lis	stec	d above) who received n	nore than				

Form **990** (2020)

Pa	I L V	Ш			a in this Dort VIII			
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
Sis	1	_	Federated campaigns 1a					
ran			Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events 1c	4,750.				
ar A			Related organizations 1d	,				
s, G			Government grants (contributions) 1e					
ion Si			All other contributions, gifts, grants, and					
but			similar amounts not included above 1f	331,131.				
d dif		g	Noncash contributions included in lines 1a-1f					
a S		h	Total. Add lines 1a-1f		335,881.			
				Business Code				
မွ	2	а						
Program Service Revenue		b						
Senu		С						
ran }eve		d						
Pog F		е						
<u> </u>		f	All other program service revenue					
		g	Total. Add lines 2a-2f	<b>&gt;</b>				
	3		Investment income (including dividends, inter		40 440			42 440
			other similar amounts)		43,112.			43,112.
	4		Income from investment of tax-exempt bond	· · ·				
	5		Royalties					
	_		(i) Real	(ii) Personal				
			Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)  Gross amount from sales of (i) Securities	(ii) Other				
	′	а	assets other than inventory <b>7a</b>	(ii) Othor				
		h	Less: cost or other basis					
ē			and sales expenses 7b					
Revenue		c	Gain or (loss) 7c					
Re		d	Net gain or (loss)	<b></b>				
ē			Gross income from fundraising events (not					
ᅙ			including \$ 4,750. of					
			contributions reported on line 1c). See					
			Part IV, line 18					
		b	Less: direct expenses 8b	545.				
		С	Net income or (loss) from fundraising events		-545.			-545.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a	+				
			Less: direct expenses 9b	)				
			Net income or (loss) from gaming activities	<b></b>				
	10	а	Gross sales of inventory, less returns					
			and allowances 10a	+				
			Less: cost of goods sold 101	·				
		С	Net income or (loss) from sales of inventory	Business Code				
sno	44	_	MISCELLANEOUS	900099	10,000.	10,000.		
nec	11		TIT DOUBLE MECOD	700099	±0,000•	10,000.		
ella »ver		b c						
Miscellaneous Revenue			All other revenue					
≥			Total. Add lines 11a-11d		10,000.			
	12	_	Total revenue. See instructions		388,448.	10,000.	0.	42,567.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a respon	se or note to any line in	this Part IX	, ,	
Do	not include amounts reported on lines 6b,	(A)	(B) I	(C) I	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		схренаез	general expenses	схрензез
•	and domestic governments. See Part IV, line 21	219,899.	219,899.		
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22	15,000.	15,000.		
2		13,000.	13,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	E0 010	16 671	16 671	16 670
	trustees, and key employees	50,012.	16,671.	16,671.	16,670.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,223.	1,408.	1,408.	1,407.
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	1,500.		1,500.	
	Lobbying	<u>,                                      </u>		,	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a q	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	9,966.		9,966.	
40	Advertising and promotion	77.		77.	
12		8,178.		8,178.	
13	Office expenses	0,1700		0,170	
14	Information technology				
15	Royalties				
16	Occupancy	135.	135.		
17	Travel	133.	133.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	159.	159.		
19	Conferences, conventions, and meetings	159.	123.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	FUNDRAISING EXPENSE	2,464.			2,464.
b	DUES, BANK FEES, MISCEL	285.		285.	
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	311,898.	253,272.	38,085.	20,541.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
03201	0 12-23-20				Form <b>990</b> (2020)

#### Part X | Balance Sheet

Par	τx	Balance Sheet					
		Check if Schedule O contains a response or	note to	any line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				1	162,190
	2	Savings and temporary cash investments			92,493.	2	31,457
	3	Pledges and grants receivable, net	0.	3	15,000		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any currer					
		trustee, key employee, creator or founder, su	ubstant	ial contributor, or 35%			
		controlled entity or family member of any of	these p	ersons		5	
	6	Loans and other receivables from other disq	qualified	persons (as defined			
		under section 4958(f)(1)), and persons descr	ribed in	section 4958(c)(3)(B)		6	
ţ2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10	)a			
	b	Less: accumulated depreciation	10	)b		10c	
	11	Investments - publicly traded securities			2,132,500.	11	2,342,083
	12	Investments - other securities. See Part IV, li	ine 11 <sub>.</sub>			12	
	13	Investments - program-related. See Part IV, I	line 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must e	equal lii	ne 33)	2,224,993.	16	2,550,730
	17	Accounts payable and accrued expenses				17	
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	ete Parl	IV of Schedule D		21	
es	22	Loans and other payables to any current or t	former	officer, director,			
Liabilities		trustee, key employee, creator or founder, su	ubstant	ial contributor, or 35%			
ia B		controlled entity or family member of any of	these p	ersons		22	
-	23	Secured mortgages and notes payable to ur				23	
	24	Unsecured notes and loans payable to unrel				24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	lines 17	24). Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0
န္တ		Organizations that follow FASB ASC 958,	check	nere 🕨 🔼			
Net Assets or Fund Balances		and complete lines 27, 28, 32, and 33.			215 906		105 602
ala 	27	Net assets without donor restrictions			345,896. 1,879,097.	27	485,683
<u> </u>	28	Net assets with donor restrictions			1,019,091.	28	2,003,047
ב ב		Organizations that do not follow FASB AS	SC 958,	cneck nere			
5	00	and complete lines 29 through 33.				00	
ets	29	Capital stock or trust principal, or current fur				29	
488	30	Paid-in or capital surplus, or land, building, o				30	
et/	31	Retained earnings, endowment, accumulate			2,224,993.	31	2,550,730
Z	32	Total liabilities and not assets /fund balances			2,224,993.	32 33	2,550,730
	33	Total liabilities and net assets/fund balances	•		<u> </u>	აა	Form <b>990</b> (2020

Form **990** (2020)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1				48.
2	Total expenses (must equal Part IX, column (A), line 25)	2				98.
3	Revenue less expenses. Subtract line 2 from line 1	3				50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				93.
5	Net unrealized gains (losses) on investments	5		<u> 250</u>	, 2	07.
6	Donated services and use of facilities	6				
7	Investment expenses	7		-1	.,0	20.
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	2,!	550	7,7	30.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>L</u> :	2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		<u>L</u> :	2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L:	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit	ſ			
	Act and OMB Circular A-133?		[ ;	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		] ;	3b		

032012 12-23-20

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization WATERTOWN COMMUNITY FOUNDATION, 30-0229398 TNC Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

Total

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	65,983.	102,415.	233,603.	169,551.	335,881.	907,433.
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	65,983.	102,415.	233,603.	169,551.	335,881.	907,433.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						40,641.
	Public support. Subtract line 5 from line 4.						866,792.
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018 233,603.	(d) 2019 169,551.	(e) 2020	(f) Total
	Amounts from line 4	65,983.	102,415.	233,603.	169,551.	335,881.	907,433.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	05 404		40 405		40 440	100 151
	and income from similar sources	35,121.	35,759.	40,435.	44,724.	43,112.	199,151.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				6 076	10 000	16 006
	assets (Explain in Part VI.)				6,076.	10,000.	
11	<b>Total support.</b> Add lines 7 through 10						1122660.
12	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the		rst, second, third,	fourth, or fifth tax	year as a section t	501(c)(3)	
800	organization, check this box and storection C. Computation of Publ						<b>P</b>
	Public support percentage for 2020 (			actume (f)		14	77.21 %
14	Public support percentage from 2019					15	77.21 %
15	33 1/3% support test - 2020. If the o						
102	stop here. The organization qualifies	•		•		•	
h	33 1/3% support test - 2019. If the o						
~	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances to		·	-	•	vi new and organiz	
b	10% -facts-and-circumstances tes	_	· · · · · · · · · · · · · · · · · · ·		-		
	more, and if the organization meets the	_					
	organization meets the facts-and-circ		·				
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

Schedule A (Form 990 or 990-EZ) 2020

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	, 1	,				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	. ,				, ,	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third.	fourth, or fifth tax	vear as a section	501(c)(3) organizat	ion.
		· ·		•			
Se	ction C. Computation of Publ						
	Public support percentage for 2020 (			column (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inve					1	,,
	Investment income percentage for 20					17	%
	Investment income percentage from					18	<del>//</del>
	a 33 1/3% support tests - 2020. If the						
.50	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2019. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
20		
3c		
4a		
į		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
10b		

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)	,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	,		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
Seci	ion C. Type it Supporting Organizations		\	
			Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
	tion D. All Type III Supporting Organizations	<u> </u>		<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction)	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instructio	ns).	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2h		
	these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.	2b		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	За		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	34		
-	j, j,,,			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	ng trust o	n Nov. 20, 1970 (explain in <b>I</b>	Part VI). See instructions.	
	All other Type III non-functionally integrated supporting organizations mus	t comple	te Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount	·	(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in <b>Part VI</b> ):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	lly integra	ated Type III supporting orga	anization (see	

Schedule A (Form 990 or 990-EZ) 2020

instructions).

Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	i ago i
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exemple	pt purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	s <b>3</b>	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	)	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2020 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
O 1	E. Biskilladian Allesadian (assistantian)	(i)	(ii) Underdistributions	(iii) Distributable

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
_1_	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reason-			
	able cause required - explain in Part VI). See instructions.			
_3_	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
c	From 2017			
d	From 2018			
e	From 2019			
f	Total of lines 3a through 3e			
<u>g</u>	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i_	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2016			
b	Excess from 2017			
с	Excess from 2018			
d	Excess from 2019			
<u>e</u>	Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

WATERTOWN COMMUNITY FOUNDATION, INC.

**Employer identification number** 30-0229398

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other	Similar Funds	or Accounts	Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.			
		(a) Donor advise	ed funds	(b) Funds ar	nd other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	-			
	are the organization's property, subject to the organization's $% \left( 1\right) =\left( 1\right) \left( 1$				L Yes  No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for a	ny other purpose o	conferring	
Day	impermissible private benefit?				Yes No
Pai		-		art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	` ' <u></u>	7		
	Preservation of land for public use (for example, recrea	ation or education)	☐ Preservation of a	• •	
	Protection of natural habitat		☐ Preservation of a	a certified historic	structure
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contri	oution in the form o		
	day of the tax year.				at the End of the Tax Year
a	Total number of conservation easements				
b	Total acreage restricted by conservation easements				
	Number of conservation easements on a certified historic str				
d	Number of conservation easements included in (c) acquired				
_	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or	terminated by the	organization dur	ng the tax
	year >				
4	Number of states where property subject to conservation ea	_			
5	Does the organization have a written policy regarding the per				□ Vaa □ Na
	violations, and enforcement of the conservation easements i				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, a	and enforcing cons	ervation easemei	its during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and o	nforcing concentrat	ion occomente d	ring the year
7	S	uling of violations, and e	inorcing conservat	ion easements u	uring trie year
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requireme	nts of section 170(	h)(//)(R)(i)	
Ü	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservati				165 140
5	balance sheet, and include, if applicable, the text of the footi		· ·		es the
	organization's accounting for conservation easements.	note to the organization	3 ililariolai staterrie	ins that describe	3 110
Pai	t III Organizations Maintaining Collections o	f Art. Historical Tr	easures, or Ot	her Similar A	ssets.
	Complete if the organization answered "Yes" on Form	-	,		
	If the organization elected, as permitted under FASB ASC 95		venue statement a	nd balance sheet	works
	of art, historical treasures, or other similar assets held for pul	•			
	service, provide in Part XIII the text of the footnote to its final	•	•	•	
b	If the organization elected, as permitted under FASB ASC 95				rks of
	art, historical treasures, or other similar assets held for public				
	provide the following amounts relating to these items:	, ,		•	,
	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$	
					_
2	If the organization received or held works of art, historical tre				
	the following amounts required to be reported under FASB A			J /1	
а	Revenue included on Form 990, Part VIII, line 1	~		▶ \$	
	Assets included in Form 990, Part X				

032051 12-01-20

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2020

Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simil	ar Asse	<b>ts</b> (continu	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that make	significant	use of its		
	collection items (check all that apply):							
а	Public exhibition	d	Loan or excl	hange program				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	n how they further th	he organization's exe	empt purp	ose in Part	XIII.	
5	During the year, did the organization solicit or	receive donations of	of art, historical trea	sures, or other simila	ar assets			
	to be sold to raise funds rather than to be ma	intained as part of t	he organization's co	ollection?			Yes	☐ No
Pai	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizatio	n answered "Yes" o	n Form 990	0, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets no	t included			
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII							
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fo						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part XI	II			
Pai	T V Endowment Funds. Complete if	the organization an	swered "Yes" on Fo	orm 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	years back	(e) Four y	ears back
1a	Beginning of year balance	1,225,291.	1,166,944.	1,221,895.	1,1	63,710.		
b	Contributions							
	Net investment earnings, gains, and losses	61,265.	58,347.	-54,951.		58,185.		
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
	End of year balance	1,286,556.	1,225,291.	1,166,944.	1,2	221,895.		
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%	_					
С	Term endowment ▶ 100 g	<del></del>						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organi	zation		
	by:						Y	es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza							
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.					
Pai	t VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, Part X	(, line 10.			
	Description of property	(a) Cost or of basis (investm		, , ,	Accumulate epreciation		(d) Book	value
1a	Land							
	Buildings							
	Leasehold improvements							
	Equipment							
	Other							
	. Add lines 1a through 1e. (Column (d) must ed		X, column (B), line 1	0c.)		<b>•</b>		0.

Schedule D (Form 990) 2020

	OMMUNITY FOUR	NDATION, INC.	30-0229398 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, lir	ne 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c Soo Form 900 Part V lir	20.13
(a) Description of investment	(b) Book value		Cost or end-of-year market value
	(5, 500), 74140	(5)strist of valuation.	or your marrier value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
	E 000 B 1 N / I'	44 LO E 000 D LV "	4-
Complete if the organization answered "Yes"	Description	e 11d. See Form 990, Part X, III	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities.	e 15.)		<b>)</b>
Complete if the organization answered "Yes"	on Form 990. Part IV line	e 11e or 11f. See Form 990. Pa	art X. line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			, ,
(2)			<del>-</del>
(3) (4)			
(5)			+
(6) (7)			+
(7)			
(8)			

Schedule D (Form 990) 2020

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

	dule D (Form s			COMMUNITY		-		0-0229	<u> 398 р</u>	age 4
Par	t XI Reco	onciliation o	f Revenue per	Audited Financi	ial Statements	With Reve	nue per Re	turn.		
				es" on Form 990, Pa						
1	Total revenue	e, gains, and oth	ner support per aud	ited financial stateme	ents			1		
			but not on Form 990							
						2a				
						2b				
						2c				
					2	2d				
	Add lines 2a	•					·····	2e		
3	Subtract line	2e from line 1						3		
			990, Part VIII, line 12		ı	1				
				, Part VIII, line 7b						
					4	lb				
	Add lines 4a							4c		
				ual Form 990, Part I,				5		
Par			-	Audited Financ		s with Expe	enses per F	keturn.		
				es" on Form 990, Pa						
				statements				1		
			but not on Form 990		1	1				
						2a				
						2b				
	Other losses					2c				
						2d	_	_		
								2e		
								3		
			990, Part IX, line 25,		1.	. 1				
				, Part VIII, line 7b		la .				
						lb	_	_		
	c Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form</i> 990, <i>Part I, line 18.</i> )							4c		
		ses. Add lines 3 plemental In		equal Form 990, Part	<i>I, line 18.)</i>			5		
				and 9; Part III, lines	1a and 4; Part IV, li	nes 1b and 2b	; Part V, line 4;	Part X, line 2	; Part XI,	
ines 2	2d and 4b; an	nd Part XII, lines	2d and 4b. Also cor	mplete this part to pr	ovide any additiona	al information.				

Schedule D (Form 990) 2020

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number
		TY FOUNDATIO	ON, INC.				30-0229398
Part I General Information on Grants a							
<b>1</b> Does the organization maintain records							
criteria used to award the grants or assi							X Yes No
2 Describe in Part IV the organization's pr						· "	
Part II Grants and Other Assistance to recipient that received more than					anization answered "`	res" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
or government	(D) LIN	(if applicable)	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	noncash assistance	or assistance
WATERTOWN BOYS AND GIRLS CLUB							
25 WHITES AVENUE							EDUCATION AND PROGRAM
WATERTOWN, MA 02472	04-6134699	501C(3)	18,000.	0.			SUPPORT
METRO WEST COLLABORATIVE							
DEVELOPMENT - 79-B CHAPEL ST -							EMERGENCY RENTAL
NEWTON, MA 02458	22-3073668	501C(3)	80,500.	0.			ASSISTANCE
MOSESIAN CENTER FOR THE ARTS							
321 ARSENAL STREET							EDUCATION AND PROGRAM
WATERTOWN, MA 02472	04-3430963	501C(3)	13,500.	0.			SUPPORT
			,				
NEW REPERTORY THEATRE							
80 ELM STREET							EDUCATION AND PROGRAM
WATERTOWN, MA 02472	22-2831171	501C(3)	13,500.	0.			SUPPORT
SPRINGWELL							
307 WAVERLY OAKS ROAD, SUITE #205				_			EDUCATION AND PROGRAM
WALTHAM, MA 02452	04-2616064	501C(3)	7,500.	0.			SUPPORT
FRIENDS OF PROJECT LITERACY							
123 MAIN STREET							
WATERTOWN, MA 02472	04-3275208	501C(3)	6,833.	0.			ADULT ELL EDUCATION
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in th	ne line 1 table				<b>1</b> 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2020

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ATERTOWN FOOD PANTRY							
1 MARSHALL ST							
ATERTOWN, MA 02472	39-1516698	501C(3)	18,272.	0.			FOOD SECURITY
,							FOOD SECURITY, RENTAL
AYSIDE YOUTH AND FAMILY SUPPORT							ASSISTANCE, UTILITY
ETWORK - 1 FREDERICK ABBOTT WAY -							ASSISTANCE, COVID KITS
RAMINGHAM, MA 01701	04-2630450	501C(3)	37,285.	0.			MUTUAL AID COORDINATOR
			,				
ATERTOWN PUBLIC SCHOOLS							
0 COMMON STREET							FOOD SECURITY WEEKEND
ATERTOWN, MA 02472	15-6000419	501C(3)	6,110.	0.			BACKPACK PROGRAM
,			,				
ELEN ROBINSON WRIGHT CHARITABLE							
IRST PARISH CHURCH, 35 CHURCH STR	3						FUND FOR THE MOST
ATERTOWN, MA 02472	04-2105920	501C(3)	6,000.	0.			VULNERABLE
·							

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INTERNSHIP GRANTS	9	9,000.	0.		
		,			
Part IV Supplemental Information. Provide the information	required in Part I, lin	ie 2; Part III, column	n (b); and any other a	dditional information.	
PART I, LINE 2:					
THE FOUNDATION REQUIRES ALL GRANT	r RECIPIEN	TS TO SUBM	IIT PERFORM	ANCE STATUS	
REPORTS AT PRE DETERMINED SPECIF	IED DATES,	UNLESS OT	HERWISE NO	TED.	

## SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ

Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

WATERTOWN COMMUNITY FOUNDATION, INC. **Employer identification number** 30-0229398

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: MUTUAL SUPPORT AMONG WATERTOWN'S DIVERSE RESIDENTS. THE FOUNDATION PROVIDES PHILANTRHOPIC SUPPORT FOR THE CURRENT AND FUTURE NEEDS OF THE COMMUNITY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FOUNDATION'S FORM 990 IS PREPARED BY THE TREASURER OF THE ORGANIZATION. THE FOUNDATION EXECUTIVE COMMITTEE REVIEWS A DRAFT OF THE FORM 990. ONCE APPROVED BY THE EXECUTIVE COMMITTEE THE DRAFT OF THE FORM 990 IS PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL TO BE FILED WITH THE INTERNAL REVENUE SERVICE. A COPY OF THE FILED DOCUMENT IS PROVIDED TO EACH MEMBER OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUAL WRITTEN AFFIRMATIONS ARE REQUIRED BY ALL BOARD MEMBERS AND THE EXECUTIVE COMMITTEE. THE EXECUTIVE DIRECTOR IS RESPONSIBLE FOR ENSURING COMPLIANCE

FORM 990, PART VI, SECTION B, LINE 15A:

AS PART OF THE ANNUAL BUDGET PROCESS, THE EXECUTIVE COMMITTEE ACTS AS THE COMPENSATION COMMITTEE FOR THE EXECUTIVE DIRECTOR

FORM 990, PART VI, SECTION C, LINE 18:

THE FINANCIAL STATEMENTS AND TAX RETURNS ARE AVAILABLE ON THE COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF THE ATTORNEY GENERAL'S WEBSITE AND UPON

REQUEST

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

Schedule O (Form 990 or 990-EZ) 2020