1. Name and Address of Reporting Person *
Lepage Kenneth Robert
815 CHESTNUT STREET
NORTH ANDOVER, MA 01845

2. Issuer Name and Ticker or Trading Symbol
WATTS WATER TECHNOLOGIES INC [ WTS ]

3. Date of Earliest Transaction (MM/DD/YYYY)
2/6/2020

4. If Amendment, Date Original Filed

5. Relationship of Reporting Person(s) to Issuer
(Check all applicable)
_____ Director
_____ 10% Owner
_X_ Officer (give title below)
_____ Other (specify below)
General Counsel

6. Individual or Joint/Group Filing (Check Applicable Line)
_X_ Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

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**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Trans. Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A Common Stock</td>
<td>2/6/2020</td>
<td>A</td>
<td>V</td>
<td>A</td>
<td>5911.0000</td>
<td>$0.0000</td>
</tr>
<tr>
<td>Class A Common Stock</td>
<td>2/6/2020</td>
<td>F</td>
<td>1781.0000</td>
<td>D</td>
<td>$103,110.00</td>
<td>41468.0000</td>
</tr>
</tbody>
</table>

**Table II - Derivative Securities Beneficially Owned (e.g. puts, calls, warrants, options, convertible securities)**

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Explaination of Responses:

1. Represents shares issued to the Reporting Person as a result of the vesting of performance stock units granted to the Reporting Person on March 21, 2017.
2. Represents shares disposed to cover taxes upon the vesting of performance stock units granted to the Reporting Person on March 21, 2017. The disposition of shares to cover tax withholding obligations is required by the terms of the Reporting Person’s grant agreement and does not represent a discretionary transaction by the Reporting Person.

**Reporting Owners**

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lepage Kenneth Robert</td>
<td>Director</td>
</tr>
<tr>
<td>815 CHESTNUT STREET</td>
<td>Officer</td>
</tr>
<tr>
<td>NORTH ANDOVER, MA 01845</td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td>General Counsel</td>
</tr>
</tbody>
</table>

**Signatures**

/s/ Seth M. Kipp, Attorney-in-Fact
Date: 2/7/2020

Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
** File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.