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### Form **990-PF**

#### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

Internal Revenue Service Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011 or tax year beginning 10/01/11, and ending 09/30/12

Na	me of for					A Emplo	yer identification number	
	N	Turner of Warndahian				45.	-3238140	
		Ironwood Foundation  d street (or P O box number if mail is not delivered to street address)	- <del></del>	Room/suit			none number (see instructions	e)
		East Equestrian Trail		ROOMISON	.0	в тыері	one number (see manuchon	•)
		n, state, and ZIP code	L					
_ <u>F</u>	hoe	nix AZ 85044				C If exer	nption application is pending,	cneck nere
G	heck a	all that apply Initial return Initial retur	rn of a former public	charity		D 1. Fo	reign organizations, check he	ere 🕨 📘
		Final return Amended	return			2 Fo	reign organizations meeting t	he
		Address change Name cha	inge			85	% test, check here and attach	computation
н	heck t	type of organization X Section 501(c)(3) exempt private	foundation			E If priva	ite foundation status was tem	ninated under
	Section		le private foundation			section	507(b)(1)(A), check here	▶ _
I F	air mar	ket value of all assets at J Accounting method	X Cash /	ccrual		F If the f	oundation is in a 60-month te	rmination
е	nd of ye	ear (from Part II, col (c), Other (specify)				under	section 507(b)(1)(B), check h	ere 🕨 📗
<u>lu</u>	ne 16) l	▶ \$ 197,514 (Part I, column (d) must b	oe on cash basis)				<del></del>	
Ρ	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(1	) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books		Incon		Income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	211,8	94				(00011 00310 OTH)
_	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B					<del></del>	
2012	3	Interest on savings and temporary cash investments						-
7	4	Dividends and interest from securities		20		20	20	,
_	5a	Gross rents						
ф 7	ь	Net rental income or (loss)						•
밁	6a	Net.gain.or (loss) from sale of assets not on line 10						
× ×	b			,				
Œ	7	Capital gain net income (from Part IV) line 2)				0		
Z	8	Net short-term capital gain					0	
SCANNER  SCA	9	income modifications 2017	<del></del>			,		<u>```</u> ,
Š	10a	Gross sales less returns & allowances						· · · · · · · · · · · · · · · · · · ·
(U)	b	Less Cost of goods; sold a less					<u></u> _	·
	C	Gross profit or (loss) (attach schedule)				<del></del>		
	11	Other income (attach schedule)	211,9	4		20	20	<del> </del>
	12	Total. Add lines 1 through 11  Compensation of officers, directors, trustees, etc	211,9.	0		- 20		<del></del>
es	14	Other employee salaries and wages	<u> </u>	<del>* </del>				<u></u>
Z.	15	Pension plans, employee benefits						
xpenses	16a	Legal fees (attach schedule) See Stmt 1	2,54	10				2,540
Ш	b	Accounting fees (attach schedule)						•
ĕ	c	Other professional fees (attach schedule)						
rat	17	Interest						
ist	18	Taxes (attach schedule) (see instructions) Stmt 2	8 (	50				860
nin	19	Depreciation (attach schedule) and depletion						<u> </u>
þ	20	Occupancy						
/ p	21	Travel, conferences, and meetings						
an	22	Printing and publications	, at set	<del>.  </del>				40 40-
Operating and Administrative	23	Other expenses (att sch) Stmt 3	11,00	10	-			11,000
ati	24	Total operating and administrative expenses.	14,40	\n			٦	14 400
ber	25	Add lines 13 through 23	14,40	0	<del>-,</del> -		0	14,400
ō	25	Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25	14,40	<del></del>	-, -,	0	0	14,400
—	26	Subtract line 26 from line 12	74,40		<del>.</del>	<del>-                                    </del>	·	14,400
	a a	Excess of revenue over expenses and disbursements	197,51	4		-		
	b	Net investment income (if negative, enter -0-)		-		20	<del>.</del>	······································
	c	Adjusted net income (If negative, enter -0-)					20	1

Part II	Balance Sheets Attached schedules and amounts in the description column	Beginnin	g of year	End	d of year
-	should be for end-of-year amounts only (See instructions )	(a) Boo	k Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing			<del></del>	
2	Savings and temporary cash investments			197,51	4 197,514
3	Accounts receivable ▶				-
ľ	Less allowance for doubtful accounts ▶				<del> </del>
4	Pledges receivable ▶				
	Less allowance for doubtful accounts ▶				
5	Grants receivable				<del></del>
6	Receivables due from officers, directors, trustees, and other				
1	disqualified persons (attach schedule) (see	ľ	ĺ		ľ
	instructions)				·
7	Other notes and loans receivable (att. schedule)				
	Less allowance for doubtful accounts ▶	)		· · · ·	
න <u>8</u>	Inventories for sale or use				
Assets 9 10a	Prepaid expenses and deferred charges				
<b>४</b> 10a	Investments—U S and state government obligations (attach schedule)				
b	Investments—corporate stock (attach schedule)				
С	Investments—corporate bonds (attach schedule)				
11	Investments—land, buildings, and equipment basis	1 ~			
ŀ	Less accumulated depreciation (attach sch.)				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.) ▶				
15	Other assets (describe ▶	)			
16	Total assets (to be completed by all filers—see the				
	instructions Also, see page 1, item l)		0	197,51	4 197,514
17	Accounts payable and accrued expenses				
	Grants payable		1		
<u>8</u> 19	Deferred revenue				
19 20 21 22 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons				
<u>g</u> 21	Mortgages and other notes payable (attach schedule)				
<b>-</b>   22	Other liabilities (describe ▶	)			
23	Total liabilities (add lines 17 through 22)		0		O , ,
	Foundations that follow SFAS 117, check here	<b>C</b>			7
g 	and complete lines 24 through 26 and lines 30 and 31.	_			
န္ဓ ၁၂ 24	Unrestricted			197,51	4
<u>ख</u> 25	Temporarily restricted				
26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here				
<u> </u>	and complete lines 27 through 31.				,
Ö 27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg, and equipment fund		]		
S 29	Retained earnings, accumulated income, endowment, or other funds				•
<b>~</b> .	Total net assets or fund balances (see instructions)		0	197,51	4
ž 31	Total liabilities and net assets/fund balances (see				
	instructions)	-	o	197,51	4
Part III					
	net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with			
	f-year figure reported on prior year's return)	•		1	C
	amount from Part I, line 27a			2	197,514
	increases not included in line 2 (itemize) ▶			3	
	nes 1, 2, and 3			4	197,514
5 Decrea	ases not included in line 2 (itemize) ▶			5	
	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b	), line 30		6	197,514

Part IV Capital Gains ar	nd Losses for Tax on Investmen	nt Income	·			<u> </u>
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr )
1a N/A						
b						
С						<u> </u>
d	· · · · · · · · · · · · · · · · · · ·					
е			<u> </u>	ļ		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g)
a				Ļ		
b		 		ļ		<del></del> _
<u>c</u>						
						<del></del>
<u>e</u>	(1)		<del></del>			
Complete only for assets snowing	gain in column (h) and owned by the four		<del></del>			(h) gain minus
(i) F M V as of 12/31/69	(J) Adjusted basis as of 12/31/69		s of col (i) (j), if any	COI		eless than -0-) or rom col (h))
<u>a</u>				<u> </u>		
<u>b</u>			<del></del>			
<u>c</u>						
<u>d</u>			<del> </del>			
<u>e</u>	<u> </u>	2-41 1 7	<del> </del>			
2 Capital gain net income or (net cap	oital loss)  If gain, also enter in F  If (loss), enter -0- in F			2		·
	s) as defined in sections 1222(5) and (6)	_				
	column (c) (see instructions) If (loss), ent	er -0- ın				
Part I, line 8			<del></del>	3		
	der Section 4940(e) for Reduce			<u>e</u>		
(For optional use by domestic private f	oundations subject to the section 4940(a)	tax on net investme	nt income )			
If section 4940(d)(2) applies, leave this	part blank					N/A
Was the foundation liable for the section	on 4942 tax on the distributable amount of	fany year in the base	e period?			Yes No
	y under section 4940(e) Do not complete	• •	, , , , , , , , , , , , , , , , , , , ,			
	ach column for each year, see the instruct		any entries			
(a)	(b)	liona belore making t	(c)			(d)
Base period years Calendar year (or tax year beginning in	Advisted evalence distributions	Net value	of noncharitable-use asse	ts		ribution ratio divided by col. (c))
2010	<u>,                                      </u>				(00) (15)	divided by cor (c)/
2009						
2008			<del></del>			<del></del>
2007					=	
2006						
2 Total of line 1, column (d)				2		
3 Average distribution ratio for the 5-	year base period—divide the total on line	2 by 5, or by the				
number of years the foundation ha	s been in existence if less than 5 years			3		
4 Enter the net value of noncharitable	e-use assets for 2011 from Part X, line 5			4		
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment income	e (1% of Part I, line 27b)			6		
7 Add lines 5 and 6	•					
				7	<u> </u>	
8 Enter qualifying distributions from fill line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b, ai	nd complete that part	using a 1% tax rate	See the		
Part VI instructions	. ,	•	-			

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at any time during the year?

If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2011) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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X

3b

4a

N/A

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

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Total. Add lines 1 through 3

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

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundation	s,
	see instructions )	Imagain!	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	57.78	
а	Average monthly fair market value of securities	1a	
þ	Average of monthly cash balances	1b	204,704
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	204,704
е	Reduction claimed for blockage or other factors reported on lines 1a and	2	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	204,704
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	_ 3,071
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	201,633
6	Minimum investment return. Enter 5% of line 5	6	10,082
P	Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating		
•	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	10,082
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,082
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,082
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	10,082
		- <del></del>	
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<b>李</b>	
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	14,400
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		. 1.07
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	14,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del>    -   -                              </del>	
_	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,400
•	Note: The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation		

Pa	irt XIII Undistributed Income (see instruction	ns)	<del></del>	<del></del>	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				10,082
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
b	From 2007				
С	From 2008				
d	From 2009				
е	From 2010				
f	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$ 14,400				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2011 distributable amount				10,082
	Remaining amount distributed out of corpus	4,318			
5	Excess distributions carryover applied to 2011				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,318			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2012				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section			,	
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	4,318			
0	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008			1	
С	Excess from 2009				
d	Excess from 2010				
е	Excess from 2011 4,	318			

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year N/A Total ▶ 3a **b** Approved for future payment Hospice of the Valley 1510 E. Flower St. Bldg. Phoenix AZ 85014 Charity 2,500

▶ 3b

Total

1	Part XVI-A	Analysis of Income-Producing Activ	ities			-	
		unts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(0)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue					(See instructions)
	a		-		<del> </del>	-	
			ļ		ļ		
					<del>                                     </del>		
	<u></u>						
	7 Eeec on	d contracts from government agencies					
2	-	dues and assessments					<del></del>
		avings and temporary cash investments					
		nd interest from securities				<del></del>	20
		come or (loss) from real estate					
		anced property					
		t-financed property					
6	Net rental in	come or (loss) from personal property					
7	Other invest	ment income					
8	Gain or (loss	s) from sales of assets other than inventory			ļ		-u
		or (loss) from special events					
		or (loss) from sales of inventory					
11		ue a		<del></del>	<u> </u>		
				~ <del></del>			
	e					-	
12		d columns (b), (d), and (e)		0		0	20
		ne 12, columns (b), (d), and (e)			•	13	20
		n line 13 instructions to verify calculations )			_		
	Part XVI-B	Relationship of Activities to the Acc	omplishme	nt of Exempt Pur	poses		
	Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose					)
	N/A			<del>/                                    </del>			<del>/</del>
			···				
							-
	····						
_							
					-		<del></del>
			<del></del>			· · · · · · · · · · · · · · · · · · ·	
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_				<del></del>			
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Pa <u>rt</u> )	ĶŅII'	Information Rega Exempt Organiza	_	insfers To an	d Transaction	s and Relations	ships With	Nonchari	itable		
1 Dic	the org	anization directly or indir		e in any of the foll	owing with any oth	er organization desc	cribed			Yes	No
ın s	section 5	001(c) of the Code (other		•	_						
_	janizatio			b4-bl					5		
		rom the reporting founda	ition to a nor	ncharitable exemp	ot organization of				<u>* :                                   </u>	5-371	X
	Cash								1a(1)	<u></u>	-
	Other a								1a(2)		X
	ner trans										
(1)	Sales	of assets to a noncharita	ble exempt o	organization					1b(1)	L	X
(2)	Purcha	ises of assets from a no	ncharitable e	exempt organization	on				1b(2)	L	X
(3)	Rental	of facilities, equipment,	or other asse	ets					1b(3)		X
(4)	Reimbi	ursement arrangements							1b(4)		X
(5)	Loans	or loan guarantees							1b(5)		X
(6)	Perforr	nance of services or me	mbership or	fundraising solicit	ations				1b(6)		X
c Sh	aring of	facilities, equipment, ma	ılıng lısts, oth	ner assets, or paid	d employees				1c		X
d Iftl	ne answ	er to any of the above is	"Yes," comp	lete the following	schedule Column	(b) should always s	show the fair r	narket			
		goods, other assets, or		-							
		y transaction or sharing									
(a) Lı		(b) Amount involved		ne of noncharitable ex					sharing arrangem	ents	
N/A		<del> </del>			<del></del>			<del></del>			
,					<del></del>						
	_	<del> </del>									
		<del></del>	<u> </u>								
							<del></del> -		<del></del>		
		<del></del>	<del></del>			<u> </u>					
			<u> </u>				<del></del> -				
						<u> </u>					
										_	
	_										
	_									_	
											-
2a ls t	he found	dation directly or indirect	v affiliated w	uth or related to	one or more tax-ex	empt organizations					
		n section 501(c) of the C	-						Ye	x X	No
		mplete the following sch		1411 00011011 00 1(0	,,(0,, 0, 000	· <b>-</b> /					
<u> </u>		(a) Name of organization	<u>saule</u>	(b) Type o	f organization		(c) Descri	otion of relationsl	hin		
N/2		(a) Haine of Organization		(b) 19000	. Organization		(0) 203011	Albert of Toldstorion	<u>.</u>		
	<u>.</u>										
		<del></del>		<del></del>	<del></del> -	<u> </u>					
		<del>-</del>		<del></del>							
				L					···-		
		enaities of penury, I declare that and complete Declaration of pr						y knowledge an	d belief, it is true,		
			(-m			, <b>, , ,</b>	<b>-</b>		e IRS discuss this re		
									s preparer shown be structions)?		٦.,.
Sign				•				(see in	structions)?	Yes	No
Here	<b>N</b> (	Dans Amoi	ea Sta	entra	1z	-12-12	Pres	ident/	Secreta	rv	
nere	Sigr	nature of officer or trustee	<u></u>	www.	Date		Title		_		
	Drint/T	ype preparer's name			Preparer's signatur	е			Date		
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	J	torron Dhiio			R. Steven	Phys		j	12/02/12	self-emp	poyed
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Use Only		0550		Control		: to 600		PTIN	P00210	/03	
	Firm's				Avenue Su	TEE POO	ļ	Firm's EIN	600 00	4 0	
	1	Phoen	1x. A7	85012				Phone no	602-26	4 – O!	o 78

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

**Employer identification number** 

2011

45-3238140 The Ironwood Foundation Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule 🛣 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on

Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

of Part I

Name of organization

\_\_of\_\_**1 Employer identification number** 

45-3238140 The Ironwood Foundation Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Parti (d) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. James Cairns III and Denise Stanton 1 Person 3749 E. Equestrian Trail Payroll 211,894 Noncash AZ 85044 Phoenix (Complete Part II if there is a noncash contribution) (d) (c) (b) (a) Type of contribution **Total contributions** Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (d) (b) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution ) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II if there is a noncash contribution) (c) (d) (b) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No.

\$

(b)

Name, address, and ZIP + 4

(c)

**Total contributions** 

(Complete Part II if there is a noncash contribution)

Person **Payroll** 

Noncash

Person **Payroll** Noncash

(Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(a)

No.

	•	Charitable Purpose \$ 2,540		Charitable Purpose \$ 860		Charitable Purpose	\$ 11,000
	gal Fees	Adjusted Net	axes	Adjusted Net	Expenses	Adjusted Net	v v
Federal Statements	F, Part I, Line 16a - Lec	Net Investment	- Form 990-PF, Part I, Line 18 - Taxes	Investment	rm 990-PF, Part I, Line 23 - Other Expenses	Net Investment	w w
Federal	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	<b>Total</b> \$ 2,540	Statement 2 - Form 990	<b>Total</b>	Statement 3 - Form 990-PF,	Total	\$ 11,000
45-3238140	Stat	Description Indirect Legal Fees Total		Description Indirect Taxes/Licenses Total	State	Description	Expenses Charitable Contributions Total

. . . .

# Form **8868**(Rev January 2012)

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue S		▶ File	a separate	application for each return.			
		tomatic 3-Month Extension, comple	te only Par	t I and check this box			<b>▶</b>  X
				emplete only Part II (on page 2 of this	form)		_
Do not comp	lete Part II un	ess you have already been granted ar	n automatic 3	-month extension on a previously filed F	Form 8868		
Electronic fil	i <b>ng (e-file)</b> . Yo	u can electronically file Form 8868 if yo	ou need a 3-n	nonth automatic extension of time to file	(6 months	for	
-	•			th extension of time. You can electronic		m	
				t II with the exception of Form 8870, Info			
				must be sent to the IRS in paper format			
				ov/efile and click on e-file for Charities &	Nonprofits	· <del>-</del>	<del></del>
Partition		c 3-Month Extension of Time. Form 990-T and requesting an automa					
Part I only	equired to file i	-orm 990-1 and requesting an automa-	iic 6-month e	xtension-check this box and complete			▶ □
•	rations (includi	ng 1120-C filers) nartnershins REMIC	s and trusts	must use Form 7004 to request an exte	ension of tir	ne	
to file income t	•	ig 1120 0 meroj, paraterompo, 1121me	o, and tracto	mast add t dim t do t to to quodi air dine	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	an 101a0			Enter file	r's identif	ying numbe	er, see instruction
Type or	Name of exe	mpt organization or other filer, see inst	ructions				on number (EIN) or
print		· -				•	, ,
File by the	The Ir	onwood Foundation			X 45	<u>-32381</u>	.40
due date for		et, and room or suite no. If a P.O. box,		ons	Social	security numb	er (SSN)
filing your return See	3749 E	<u>ast Equestrian Tra:</u>	<u>il</u>				
instructions	City, town or <b>Phoeni</b>	post office, state, and ZIP code For a	foreign addre				
Enter the Retu		return that this application is for (file a					04
					-		· · · · · · · · · · · · · · · · · · ·
Application	l		Return	Application			Return
Is For			Code	Is For			Code
Form 990-BI	<del></del>		01	Form 990-T (corporation) Form 1041-A			07
Form 990-E			01	Form 4720		08	
Form 990-PI			04	Form 5227			10
	(sec 401(a) or	408(a) trust)	05	Form 6069	_		11
	(trust other tha	· · · · · · · · · · · · · · · · · · ·	06	Form 8870		-	12
		James R. Cairns III	<u>.                                      </u>				
		3749 E. Equestrian T	rail				
The books a	re in the care of	▶ Phoenix				AZ	85044
Telephone	No ▶ 48	0-247-2950	FAX No	▶			
If the organ	nization does n	ot have an office or place of business i	n the United	States, check this box			▶ 🗌
If this is for	a Group Retu	n, enter the organization's four digit Gr	oup Exempti	on Number (GEN) If	this is		
for the whole g	roup, check thi	s box    If it is for part of	the group, cl	heck this box	ach		
		of all members the extension is for					
•		3-month (6 months for a corporation re- to file the exempt organization return.	•	Form 990-T) extension of time inization named above The extension is	s		
	rganization's re	· •	·				
	calendar year						
<b>⊾</b> [⊽]	lav vaas keesiis	$_{ m ling}$ $10/01/11$ , and ending	00/30/	1.2			
	•	-					
	year entered i nange in accou	n line 1 is for less than 12 months, chec nting period	ck reason	Initial return Final return			
3a If this ap	plication is for I	orm 990-BL, 990-PF, 990-T, 4720, or	6069, enter t	he tentative tax, less any			
		See instructions			3a	\$	0
		Form 990-PF, 990-T, 4720, or 6069, er					_
		made Include any prior year overpay			3b_	\$	0
		line 3b from line 3a Include your paym		form, if required, by using			
EFTPS (		eral Tax Payment System) See instruc		268 see Form 8453 FO and Form 8870	3c	_\$	0