

Form **990-PF** 

Department of the Treasury Internal Revenice Service

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

➤ Do not enter social security numbers on this form as it may be made public.

➤ Go to www.urs gov/Form990PF for instructions and the latest information

Open to Rub

OMB No 1545-0052

2017

Open to Public Inspection

TITUE TO THE STAR A TO THE STA		For	cale	nda	r year 2017 or ta	x year beginnin	g	, 2017	, and ending		,	
1801 California St #4400 Denver, Co 80202  G Check all that apply   Initial return   Initial return of a former public chartly   Amended return   Amended retur								*			47-4354544	
G Check all that apply   Initial return   Initial return		180	01	Ca]	Lifornia St					В		
Final return   Name change						<del></del>				С	If exemption application is	s pending, check here 🕒 🗌
Check type of organization   Section 501 (c)(3) evempt private foundation   February		G	Chec	k al	I that apply			-	mer public charity	D	1 Foreign organizations, che	ck here
Section 4947(a)(1) nonexempt charatable trust   Other taxable private fourlay   E		<del>H</del> (	Chec	k tv	pe of organization			<u> </u>	foundation (C)			
Clean Part II. Column (c). (inc. 16)			_	Sec	ction 4947(a)(1)	nonexempt char	itable f	trust Other taxable	private foundation	Ε		
Expenses (The total of amounts in columns (b), c), and (d) may not necessarily equal the amounts in column (a) (destination) and the same of the same		•		Part .		5)		Other (specify)		F	If the foundation is in a 60 under section 507(b)(1)(B	O-month termination ), check here
2   Clack		Pa	તાં	co sa	<b>(penses</b> (The toll) lumns (b), (c), a rily equal the arr	total of amounts ind (d) may not in nounts in column	neces-			nt		for charitable purposes
Note				1 2					ENGLARISTA			
Sa Cross rents	1	L		3	Interest on savings and ter	mporary cash investments			50	7.	1 Dec 2007 H. Charles St. Sector College Sec. Shee	
Comparison   Com	1	T			Gross rents	n seruniez	•		•			
Comparation of officers directors trustees, etc.		R		_ `	or (loss)	e of assets not on line 10						
No.		E		_	assets on line 6a				SECOND	)縱		279.003.003.353.00.0
Second   S		E N			-		2)			39		
Second   Company   Compa		U E		•	Gross sales less	i	,		10/2-0-2018			
Cores and tor (tos) (attach schedule) 11 Other income (attach schedule) 12 Total Add lines 1 through 11 13 Compensation of officers directors trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) b Accounting fees (attach schedule) c Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travet conferences, and meetings 22 Pinting and publications 23 Other expenses (attach schedule) See Statement 2 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, grits, graits pad Part XV 26 Total expenses and disbursements. Add lines 24 and 25 5 O, 166. 833. 0. 49, 333.  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-)			,	b	allowances						Ĕ	
11   Other income (attach schedule)				c	- (	ch schedule)						
The state of the s				11	Other income (attach	schedule)		,		1	' ' 4 '	
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach sch) C Other professional fees (attach sch) 17 Interest 18 Taxes (attach schedule)(see insirs) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 25 See Statement 2 26 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 50, 166. 833.  14 Other employee salaries and wages 15 Pension plans, employee benefits 1 1, 366. 1, 683. 1 1, 366. 1, 683. 1 1, 366. 1, 683. 1 1, 366. 1			_				s atc		• 50	7.	0.	147278163142568827750
TITUE TO THE STAR A TO THE STA	8			14	Other employee sala	ries and wages	.5, 0.0					
TITUE TO THE STAR A TO THE STA			. 1.			•		<u> </u>		4	, , , , , , , , , , , , , , , , , , , ,	
TITUE TO THE STAR A TO THE STA			6				St 1		:,68	3.		683.
The state of the s	5	0		`		ttach sch)					-	
schedule) and depletion  Occupancy Travel conferences, and meetings  Printing and publications Cither expenses (altach schedule)  See Statement 2  A Total operating and administrative expenses Add lines 13 through 23  Contributions, grits, grants paid  Part XV  Contributions, grits, grants paid  Total expenses and disbursements. Add lines 24 and 25  Total expenses and disbursements. Add lines 24 and 25  Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  No N		P E R	S T	18	Taxes (attach schedule)(se	e instrs)					<u>-</u>	<u></u>
Note the second process and meetings  20 Occupancy 21 Travel conferences, and meetings 22 Printing and publications 23 Other expenses (altach schedule) 23 Other expenses (altach schedule) 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)		Ä	A	19		on						
A E N X X 23 Other expenses (altach schedule)  See Statement 2 300. 150. 150.  24 Total operating and administrative expenses Add lines 13 through 23 1, 666. 833. 833.  25 Contributions, gifts, grants paid Part XV 48,500.  26 Total expenses and disbursements. Add lines 24 and 25 50, 166. 833. 0. 49, 333.  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)			• 1		-	and meetings			,			
See Statement 2   300.   150.   150.	2	A N		22	Printing and publicati	ons						
Expenses Add lines 13 through 23   1,666.   833.   833.     25   Contributions, gifts, grants paid   Part XV   48,500.   48,500.     26   Total expenses and disbursements.   Add lines 24 and 25   50,166.   833.   0.   49,333.     27   Subtract line 26 from line 12   a Excess of revenue over expenses and disbursements   -49,659.   b Net investment income (if negative, enter -0-)   0.	Ô	D	P /	23	. ,	•	nt 2		15	0.		150
25 Contributions, grifts, grants paid PATC XV 48,500.  26 Total expenses and disbursements. Add lines 24 and 25 50,166. 833. 0. 49,333.  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)			SE	24	Total operating and	administrative						
Add lines 24 and 25 50, 166. 833. 0. 49, 333.  27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)			*   :	25	•		XV					
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  Description:					Add lines 24 and 25			50,166.	83	3.	0.	
<b>b</b> Net investment income (if negative, enter -0-)					Excess of revenue or		-		a de se			
							· ·				DESCRIPTION OF THE PROPERTY OF	

Par	î ly	Balance Sheets	Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year		of year
	111.5		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest	3			
	2	Savings and tempora	ary cash investments	905,231.	855,572.	855,572.
	3	Accounts receivable	<b>•</b>			POPE SERVICE
		Less: allowance for	doubtful accounts ►			
	4	Pledges receivable	<b></b>			
		Less allowance for	doubtful accounts >			
	5	Grants receivable				
	6	Receivables due from offic	ers, directors, trustees, and other		-	
			ch schedule) (see instructions)			
_	7	Other notes and loans reco	eivable (attach sch)			1376 156 12 EVENT
Ą		Less allowance for	doubtful accounts >			
š	8	Inventories for sale of	or use			
A S E T	9	Prepaid expenses ar	nd deferred charges			
Ś	10 a	a Investments – U S obligations (attach s	and state government chedule)			
		b Investments — corporate :	stock (attach schedule)			
		c Investments — corporate l	bonds (attach schedule)			
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprect (attach schedule)	ation			
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis►		(4.50m)	
	:	Less accumulated deprect (attach schedule)	ation •			
	15					
		see the instructions	completed by all filers — Also, see page 1, item I)	905,231.	855,572.	855,572.
Ļ	17	Accounts payable an	d accrued expenses			
À	18	Grants payable				100
B	19	Deferred revenue				
Ļ,	20		ors, trustees, & other disqualified persons			
÷	21	Mortgages and other notes				
į	22	Other liabilities (desc	cribe )			
E S	23	Total liabilities (add		0.	0.	
		and complete lines 2	low SFAS 117, check here 24 through 26, and lines 30 and 31.			
N'F		Unrestricted				
Ë U	25	Temporarily restricte				
<sub>A</sub> D	26	Permanently restricted				
A S S A E T A		Foundations that do and complete lines 2	not follow SFAS 117, check here X 7 through 31.			
TA	27	Capital stock, trust p	rincipal, or current funds			
SN	28	Paid-in or capital surplus,	or land, bldg, and equipment fund			
O E	29	Retained earnings, accumu	lated income, endowment, or other funds	905,231.	855,572.	
ŔŜ	30	Total net assets or fo	und balances (see instructions)	905,231.	855,572.	
	31		net assets/fund balances			
D 54	2060	(see instructions)	nos in Not Assets or Fund Dalana	905,231.	855,572.	
			ges in Net Assets or Fund Balanc		<del></del>	
			ılances at beginning of year – Part II, colเ l on prior year's return)	ımn (a), line 30 (must a		005 001
		r amount from Part I,			1 2	905,231.
		increases not included in lin			3	<del>-49,659</del> .
		lines 1, 2, and 3				000 070
		ases not included in line 2 (i	temize) >		5	855,572.
			lances at end of year (line 4 minus line 5)	- Part II column (b)		055 570
544	Julia	assets or fully ba	numbers at one or year (inte 4 minus line 5)	, area, column (b),	Ju 10	855,572.

<u>Pa</u>		Losses for Tax on Investmenthe kind(s) of property sold (for examp		(b) How acquire	ed (C) Date acquired	(d) Date sold
	2-story brick wareh	ouse, or common stock, 200 shares	s MLC Company)	P — Purchase D — Donation		(mo day yr)
1	a N/A			5 55 1515		
	b					
	<u>c</u>					
	d e					
—		(f) Depreciation allowed	(q) Cost or other ba	cic	(h) Gain or	(loss)
	(e) Gross sales price	(or allowable)	plus expense of sa		((e) plus (f) m	
	a					
	<u>b</u>				<del></del>	
	<u>c</u> d			··-·		
	e					
	Complete only for assets show	ving gain in column (h) and owned t	by the foundation on 12/31/	69	(1) Gains (Col	(h)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (k), t than -0-) or Losses (fi	out not less
	a					
	b					
	<u> </u>		<del>,</del>		··	
	d				-	
	P	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	enter in Part I, line 7	<del></del>	<del>-</del>	<del></del>
_	Capital gain net income or (ne	If (loss), en	ter -0- in Part I, line 7	2		
3		(loss) as defined in sections 1222(5				
	in Part I, line 8	e 8, column (c) See instructions If	<u>`</u>	3		
		r Section 4940(e) for Reduce oundations subject to the section 4940			e	<del></del>
(FOI	optional use by domestic private it	oundations subject to the section 4940	n(a) tax on het investment inc	come )		
If se	ction 4940(d)(2) applies, leave t	his part blank				
Was	the foundation liable for the sec	ction 4942 tax on the distributable a	amount of any year in the b	ase period?	Yes	X No
	· · · · · · · · · · · · · · · · · · ·	fy under section 4940(e) Do not co	<u> </u>			
		each column for each year, see the in		entries		
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	(d) Distribution (col (b) divided	
	2016	50,499.	934	4,854.		0.054018
	2015	42,500.	964	4,028.		0.044086
	2014					
	2013 2012	-		——————————————————————————————————————		
	2012	<u> </u>			T	
2	Total of line 1, column (d)			2		0.098104
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total on has been in existence if less than	on line 2 by 5 0, or by the 5 years	3		0.049052
4	Enter the net value of nonchar	itable-use assets for 2017 from Par	t X, line 5	4		883,342.
5	Multiply line 4 by line 3			_ 5		43,330.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7	-	43,330.
8	Enter qualifying distributions fr			8		49,333.
	If line 8 is equal to or greater that Part VI instructions.	n line 7, check the box in Part VI, line	Ib, and complete that part u	ısıng a 1% tax	rate See the	

. .

Par	tiVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e instru	uctions)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here			1,22
	Date of ruling or determination letter (attach copy of letter if necessary — see instructions)			OCCUPATION PROFILES
Ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1 1		0.
	check here. ► X and enter 1% of Part I, line 27b	1244		STANDARD .
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		<u> </u>	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-).	2		0.
3	Add lines 1 and 2	3		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4		0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		0.
6	Credits/Payments	2000	75% T. (M. D. 2012)	2078657
a	a 2017 estimated tax pmts and 2016 overpayment credited to 2017	283		
	Exempt foreign organizations — tax withheld at source 6b			
	: Tax paid with application for extension of time to file (Form 8868).			
	Backup withholding erroneously withheld  6d	-332		
	Total credits and payments Add lines 6a through 6d	7		@##Z_25651
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	8		0.
_				
9 1 <u>0</u>	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		<u> </u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Date	Enter the amount of line 10 to be Credited to 2018 estimated tax	11		
ŗặr	tiVII-A Statements Regarding Activities		Inseressal	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	es No X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1 b	X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
c	: Did the foundation file Form 1120-POL for this year?		1 c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		60 to 100	
	(1) On the foundation >\$ 0. (2) On foundation managers >\$		0.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.   S  O			
2	<u>U.</u>		Will in	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 32×24 327	X W No. Labarres
	If 'Yes,' attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV			X
	Enter the states to which the foundation reports or with which it is registered. See instructions.		357526 426	X
Ja	· · · · · · · · · · · · · · · · · · ·			
	CO		-	
	off the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation		25.50	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or for calendar year 2017 or the tax year beginning in $2017^{\circ}$ See the instructions for Part XIV. If 'Yes,' complete	r 4942( Part )	(j)(5) XIV <b>9</b>	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10	x
RΔΔ			Form 990-DI	F (2017)

Pai	Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions			11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pers advisory privileges? If 'Yes,' attach statement See instructions	on had		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address  N/A	n applica	ation?	13	Χ	
14	The books are in care of Simmons Family Office LLC  Telephone	no ►	970-5	 56-5	821 -	
	Located at ► 201 Main Street Suite 305 Carbondale CO ZIP + 4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — check here	<u>816</u>		 -n/ā		· -
	and enter the amount of tax-exempt interest received or accrued during the year	►	15			N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country					
Par	ttVII:B@ Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			7.2	Yes	No
1 a	During the year, did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			3
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	XNo			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	χNο			
t	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions			1 b	N	1333 / A
	Organizations relying on a current notice regarding disaster assistance, check here	•				
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )					
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	Yes	X No			
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20	_	_			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942( <b>all</b> years listed, answer 'No' and attach statement — see instructions)	(a)(2) a)(2) to		2 b	N	/A
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years to 20, 20, 20, 20, 20, 20, 20, 20, 20, 20,	nere				
٦.	20, 20, 20, 20					
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	_	X No			
b	o If 'Yes,' did it have excess business holdings in 2017 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 approve 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 2017)	d		3 b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х
b	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 2017?		;	4 b		X
BAA			Fo	m <b>990</b>	PF (	2017)

Form 990-PF (2017) Iron Rose Foundati	ion	4900 H	47-4	354544	Page <b>6</b>
Rart VII B Statements Regarding Activiti		14/20 May Be Req	uirea (continuea	)	
5 a During the year, did the foundation pay or incur a	•		, , ,	_ [	Yes No
(1) Carry on propaganda, or otherwise attemp	· ·		Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?	-		X No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes /	∐ Yes	X No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	ization described	Yes	X No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a See instructions	the transactions fail to current notice regarding o	qualify under the exce disaster assistance?	ptions		5b N/A
Organizations relying on a current notice rega	rding disaster assistant	ce, check here	•		28 201 324
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim ex sibility for the grant?	emption from the	N/A   Yes		
If 'Yes,' attach the statement required by Regu	ulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes	X No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal bene	fit contract?		6 b X
If 'Yes' to 6b, file Form 8870				_	
7a At any time during the tax year, was the found				X No	
b If 'Yes,' did the foundation receive any procee				N/A	7 b
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Paid	Employ	/ees,
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructions.		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefi plans and deferre compensation	t   (e) EXI	pense account, ier allowances
Thomas Bailey	President	0.	0		0.
Baker Hostetler 1801 California Denver, CO 80202	2.00				
Robert Ford	Secretary	0.	0		0.
Baker Hostetler 1801 California Denver, CO 80202	2.00				<b>.</b>
				-	
				<del></del>	
2. Componentian of five highest poid appleases (at	hau than thana inaludad		> 14	15:	
2 Compensation of five highest-paid employees (of		on line i – see instructio		VE.	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation		pense account, er allowances
None			· · · · · · · · · · · · · · · · · · ·		
			<del></del>		
				+	<del></del>
Total number of other employees paid over \$50,000				•	0
DAA	TCC 40305: 00	VO4/17		F	000 PF (0017)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	<u>.</u>
Tatal number of others recovering over \$50,000 for professional converse	
Total number of others receiving over \$50,000 for professional services	0
Part X-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Make grants to organizations operating charitable, educational and scientific programs. 11 organizations received grants ranging from \$1,000 to \$25,000.	
2	
3	
4	
Part X B Summary of Program-Related Investments (see instructions)	A
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<sup>1</sup> N/A	
2	
<b>*</b>	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.
ВАА	Form <b>990-PF</b> (2017)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	(100 miles)	
i	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	49,333.
ł	b Program-related investments — total from Part IX-B.	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
ı	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	 49,333.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,333.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form 990-PF (2017)

## Rant XIII Undistributed Income (see instructions)

	•		(a) Corpus	(b) Years prior to 2016	( <b>c)</b> 2016	( <b>d)</b> 2017
1 0	Distributable amount fo	r 2017 from Part XI.				
ı	ine 7		The state of the s			44,167.
	Indistributed income, if any,					
	Enter amount for 2016	•			0.	
	Total for prior years 20		The second secon	0.		
	Excess distributions carryover From 2012	, it any, to 2017				
	From 2013					
	From 2014					
_	From 2015	17 146	CONTRACTOR OF STREET			
	From 2016	17,145. 3,758.				
	Fotal of lines 3a through		20,903.			
	Qualifying distributions		20,303.			
	KII, line 4 ► \$	49,333.				
	Applied to 2016, but no				0.	
				THE WARRACT OF STREET BY TAILO		######################################
	Applied to undistributed Election required — se			0.		
` • T	reated as distributions	out of cornus	7 W. A. White Case of the Charles		27.04.07.00.25.00.00	
	Election required – se		0.			
d A	Applied to 2017 distribu	ıtable amount				44,167.
e F	Remaining amount disti	ributed out of corpus	5,166.	NO CONTRACTOR	18 (18 No. 18 No. 1	
	xcess distributions carryover		0.			0.
	If an amount appears is same amount must be s					
_	amount must be	onomin in column (a) )				
6 E	Enter the net total of ea	ach column as				
i	ndicated below:					
<b>a</b> 0	Corpus Add lines 3f, 4c, and	4e Subtract line 5	26,069.			
	Prior years' undistribute	ed income. Subtract				
	ine 4b from line 2b			0.		
	Enter the amount of princome for which a noti		Section 1			
	peen issued, or on which ax has been previously			0		
				0.		
	Subtract line 6c from lir amount – see instruction			0.		
	Indistributed income for 2016 ine 2a Taxable amount — sei				0.	
						APRIOR - AST TO A WIND THE BUILDING . JUSTING
	Jndistributed income folds and 5 from line 1. The					
	distributed in 2018	nis amount must be				0.
	Amounts treated as dist					
	corpus to satisfy requirem section 170(b)(1)(F) or 49					
n	nay be required - see	instructions)	0.			
8 E	xcess distributions car	rryover from 2012 not				
а	applied on line 5 or line	7 (see instructions)	0.			
9 E	Excess distributions ca	arryover to 2018.				
S	Subtract lines 7 and 8 f	rom line 6a	26,069.			
	Analysis of line 9					
	Excess from 2013					
	Excess from 2014					
	Excess from 2015	17,145.				
	Excess from 2016	3,758.				
e E	Excess from 2017	5,166.	DEPOSITOR DESCRIPTION		Parks American School Constitution (Co.	

Form 990-PF (2017) Iron Rose Foundat				47-435454	
Part XIV Private Operating Foundat	<u> </u>				N/A
1 a If the foundation has received a ruling or dete is effective for 2017, enter the date of the	ruling		-	` •	
<b>b</b> Check box to indicate whether the foundat		erating foundation d		4942(J)(3) or	49 <sup>4</sup> 2(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2017	<b>(b)</b> 2016	Prior 3 years (c) 2015	(d) 2014	(e) Total
<b>b</b> 85% of line 2a			<del></del>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities.					· · · · · · · · · · · · · · · · · · ·
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part:XV Supplementary Information assets at any time during the	(Complete this e year – see in	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Managera List any managers of the foundation who have close of any tax year (but only if they have Thomas Bailey		nan 2% of the total co than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation befo	ore the
inomas barrey					
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the None	10% or more of the foundation has a 1	stock of a corporatio 0% or greater intere	on (or an equally large est	portion of the owner	ship of
2 Information Regarding Contribution, Grant, C Check here  X if the foundation only ma requests for funds If the foundation makes 2a, b, c, and d See instructions	kes contributions to	preselected charitabl			
a The name, address, and telephone number or	email address of th	e person to whom ap	plications should be	addressed	
	•				
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	als they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors

Page 11

3	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Pavmer	nt .	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	, and and
a	Paid during the year				
See	Statement 3				
	•		!		
	Total			<b>▶</b> 2.0	40 500
	Approved for future payment			► 3a	48,500.
	, ,				
	:				
	Total			► 3b	

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Evoludo	d by section 512, 513, or 514	
•	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program service revenue			code	<del></del>	(Coo mondonomo)
a	-				
b	<del></del>				
<u> </u>			ļ		
d	-		<del> </del>		
f			-		
g Fees and contracts from government agencies	<del></del>		1		
2 Membership dues and assessments			<del> </del>		
3 Interest on savings and temporary cash investments			14	507.	<del></del>
4 Dividends and interest from securities			14	307.	
5 Net rental income or (loss) from real estate			\$ 200		
a Debt-financed property	Star Code 4/2 1 // Tree	C. R. Call St. Decomposition of the Control of Control	140,000,000	27.245-0-7-7-4-1-0-3-X-R-20-400-3-X-R	19 Indiana 11 14 15 15 15 15 15 15 15 15 15 15 15 15 15
<b>b</b> Not debt-financed property				· · · · · · · · · · · · · · · · · · ·	
6 Net rental income or (loss) from personal property	· · ·			***************************************	
7 Other investment income		<u></u>			
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory				*	
11 Other revenue			Z) A		The source of the
a					
b					
С					
d	_				
е					
12 Subtotal Add columns (b), (d), and (e)	<b>MAKEN</b>		海滨湖	507.	
13 Total. Add line 12, columns (b), (d), and (e)				13	507.
See worksheet in line 13 instructions to verify calculat					507.
See worksheet in line 13 instructions to verify calculat	e Accompl	<u>-</u>		oses	
See worksheet in line 13 instructions to verify calculat	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
See worksheet in line 13 instructions to verify calculat	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
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Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
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Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	
Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exemptions.	e Accompl	<u>-</u>		oses	

## Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

des	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?						27,		162	. 61
	ansfers from the report		a noncharitabl	e exempt organiz	ation of			3		1
(1) Cash								1 a (1)		X
(2)	Other assets				1 a (2)		X			
<b>b</b> Otl	her transactions			9 3		n 22 3				
(1) Sales of assets to a noncharitable exempt organization.								1 b (1)		X
(2)	Purchases of assets			1 b (2)		X				
(3)	Rental of facilities, ed	guipment, or other				1 b (3)		X		
٠,	Reimbursement arrar	•				1 b (4)		X		
(5)	Loans or loan guaran	tees.				1 b (5)		X		
(6)	Performance of service	ces or membershi				1 b (6)		X		
<b>c</b> Sh	aring of facilities, equip	oment, mailing lis	ts, other asset	s, or paid employ	ees			1 c		X
the any	he answer to any of the goods, other assets, or y transaction or sharing	services given by t	the reporting foi	undation. If the fou	ndation receiv	ved less than f	air market value ir	1	ue of	
(a) Line r	10 <b>(b)</b> Amount involved	(c) Name o	f noncharitable exi	empt organization	<b>(d)</b> Des	cription of transf	ers, transactions, and	sharing arrai	ngemen	ts
N/A										
							v-1			
					`					
	<del> </del>									
des	the foundation directly or scribed in section 501(i Yes,' complete the follo (a) Name of organiz	c) of the Code (ot owing schedule	her than section	d to, one or more to on 501(c)(3)) or in	section 527	<i>ī</i> ?	Description of rel	Yes	X	No
NI / 7	(a) Name of organiz	.ation	( <b>b)</b> (y)	De of organization		(c)	Description of rea	ationship		
N/A	<del></del>									
				<del></del>						
						· · · ·				
Sign Here	Under penalties of perjuand decorrect, and complete Declara	clare that I have examilion of preparer (other t	ned this return, inclinan taxpayer) is ba	uding accompanying so ised on all information	of which prepare	r has any knowled	ne best of my knowledg dge	May the this return preparer	RS disc	uss
	Signature of officer or trustee	1		Date	Pre	sident		_   See instr	uctions,	- I
	Print/Type preparer's		Preparer	Date siggature	Da	te		I XI	Yes	No
		•		A /han	1	/ /	Check X if			
Paid	Scot Simmo		1-0			11/13/18	self-employed	P01387	883	
Preparer Firm's name ► Simmons Family Office LLC				Firm's EIN ► 8			901029			
Use Or	1ly Firm's address	te 305								
	<u> </u>	Carbondale, CO 81623					Phone no 970-	<u>556-58</u> 2		
BAA								Form <b>99</b>	0-PF (	2017)

2017	Fec Ire c/o	Page 1			
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees					
Tax Preparation	Total	(a) Expenses per Books \$ 1,366. \$ 1,366.	\$	ment Adjusted	\$ 683.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses					
Bank Fees	Total	(a) Expenses per Books \$ 300. \$ 300.	\$	nent Adjusted	\$ 150.
Statement 3 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address		onee tionship	Found- ation Status	Purpose of Grant	Amount
Adaptive Sports Center of Crested Butte PO Box 1639 Crested Butte CO 81224	None			General Operations	\$ 2,500
Advocate Safehouse Project Inc. PO Box 2036 Glenwood Springs CO 81602	None			General Operations	1,500
Andy Zanca Youth Empowerment Program PO Box 1945 Carbondale CO 81623	None			General Operations	2,000
Bridging Bionics Foundation PO Box 3766 Basalt CO 81621	None			General Operations	2,000
Henry's Fork Foundation PO Box 550 Ashton ID 83420	None			General Operations	1,000

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2017	Federal Statements	Page 2	
·	Iron Rose Foundation c/o Baker Hostetler LLP	47-4354544	

Statement 3 (continued)
Form 990-PF, Part XV, Line 3a
<b>Recipient Paid During the Year</b>

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose <u>Grant</u>	of 	Amount
Carbondale Community Access Radio PO Box 1388 Carbondale CO 81623	None		General Operations	\$	1,500.
Rett Syndrome Research Trust 67 Under Cliff Road Trumbull CT 06611	None		General Operations		3,000.
Steadman Phillipon Research 181 W Meadow Drive Suite 1000 Vail CO 81657	None		General Operations		25,000.
Colorado Animal Rescue, Inc. 2801 County Road 114 Glenwood Springs CO 81601	None		General Operations		8,000.
Oasis Foundation 630JE Woody Road Springtown TX 76082	None		General Operations		1,000.
Ace Scholarships 1201 E Colfax Avenue Suite 302 Denver CO 80218	None		General Operations		1,000.
				Total <u>\$</u>	48,500.