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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

, 2011, and ending For calendar year 2011 or tax year beginning Name of foundation ANCORA FOUNDATION A Employer identification number FKA MAXUS FOUNDATION 34-1701961 B Telephone number (see instructions) Room/suite Number and street (or P O box number if mail is not delivered to street address) (216) 825-4000 300 2000 AUBURN DRIVE City or town, state, and ZIP code C If exemption application is pending, check here - -CLEVELAND, OH 44122 Initial return of a former public charity G Check all that apply: Initial return 1. Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at end If the foundation is in a 60-month termination of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B), check here 1,460,739. (Part I, column (d) must be on cash basis.) *16)* ▶ \$ Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in (b) Net investment for charitable expenses per ıncome purposes books column (a) (see instructions)) (cash basis only) 226,401 ATCH 1 Contributions, grifts, grants, etc., received (attach schedule)

If the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments 35,221. 35,221 ATCH 2 Dividends and interest from securities b Net rental income or (loss) 67,108 6 a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 179,203 Capital gain net income (from Part IV, line 2) . Net short-term capital gain Income modifications -10 a Gross sales less returns and allowances **b** Less: Cost of goods sold c Gross profit or (loss) (attach schedule) Other income (attach schedule) 328,730. 214,424. Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits... 16a Legal fees (attack schedie) VED b Accounting fees (attach schedule) Administ Depreciation (attach sentente) and depletion. 19 20 Occupancy and 21 Travel, conferences, and meetings 22 Printing and publications Operating Other expenses (attach schedule) ATCH, 3. 52,896. 26,543 23 24 Total operating and administrative expenses. 52,896. 26,543. Add lines 13 through 23 55,050. 55,050. Contributions, gifts, grants paid 26,543. 107,946. 55,050 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 220,784. a Excess of revenue over expenses and disbursements 187,881 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

Form 990-PF (2011)

D.	irt II	Balanco Shoote	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
τē		บอเสเเนะ วและเร	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng	463,830.	714,549.	714,549.
			cash investments			
	3 /	Accounts receivable 🛌				
			btful accounts ▶			
- 1						
			btful accounts ▶			
			officers, directors, trustees, and other	-		
			ach schedule) (see instructions)			
		•	eceivable (attach schedule)			
			btful accounts ►			
			e			
Assets			eferred charges			· · · · · · · · · · · · · · · · · · ·
SS.		•	e government obligations (attach schedule)		··· -	
٦			stock (attach schedule) ATCH 4	624,959.	595,024.	746,190.
		•	bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis Less accumulated deprecia (attach schedule)	6,		-	
-	12 13 14	Investments - mortgage Investments - other (atta Land, buildings, and	loans			
	,	Less, accumulated deprecia (attach schedule)	tion			
·	15	Other assets (describe	> /}			
-			completed by all filers - see the	4 000 500	4 222 572	4 450 500
\perp			age 1, item I)	1,088,789.	1,309,573.	1,460,739.
·	17	Accounts payable and a	ccrued expenses			į
·	18	Grants payable				i
es ·	19	Deferred revenue				
		·	rs, trustees, and other disqualified persons			
Liabilities			ites payable (attach schedule)			
- 1:	22	Other liabilities (describe	• ►)			
4			s 17 through 22)	0	0	
			low SFAS 117, check here ▶ 🔀			
_		and complete lines	24 through 26 and lines 30 and 31.	4 000 500	4 000 570	,
Ses	24	Unrestricted		1,088,789.	1,309,573.	1
Balance	25	Temporarily restricted .				
Ba	26	Permanently restricted .				
Fund		Foundations that do	not follow SFAS 117,			1
교		check here and com	plete lines 27 through 31. ▶ 🔠			i
6	27	Capital stock, trust princ	cipal, or current funds			1
ets	28	Paid-in or capital surplus, or	r land, bldg , and equipment fund			
88	29	Retained earnings, accumi	ulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund	i balances (see instructions)	1,088,789.	1,309,573.	į
ž	31	Total liabilities and	net assets/fund balances (see		4 222 572	
\perp				1,088,789.	1,309,573.	
			anges in Net Assets or Fund I			····
			alances at beginning of year - Part		-	1 000 700
			d on prior year's return)			1,088,789.
		amount from Part I,				220,784.
			ed ın line 2 (rtemıze) ▶			1 222 522
		ines 1, 2, and 3			1	1,309,573.
		eases not included in			5	1 200 522
6	Total	net assets or fund ba	alances at end of year (line 4 minus l	ine 5) - Part II, column (b),	, line 30 6	1,309,573.

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<u> </u>	1 C = T				Page 3
			(b) How	(c) Date	(d) Data = std
			acquired P-Purchase	acquired	(d) Date sold (mo , day, yr)
		00 3/13 Mico 00 /	D-Donation	(,,, , , ,	
				, , ,	
- 					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	
·	(or allowable)	plus expense of sale		(e) plus (f) mini	us (g)
			 		
assets showir			(1)	Gains (Col (h) g	ain minus
/69	(j) Adjusted basis as of 12/31/69	over col (j), if any	COI	Losses (from co	
			 		
me or (net o	apital loss)				179,203.
,	· · · · · · · · · · · · · · · · · · ·		2	·	179,203.
ın Pan I III			1 1		_
					n
	<u></u>	<u></u> J	3 ncome		0
tion Unde	r Section 4940(e) for F	Reduced Tax on Net Investment I	ncome	ome)	0
tion Unde	r Section 4940(e) for F	<u></u> J	ncome	me)	0
ation Under	r Section 4940(e) for Fate foundations subject to	Reduced Tax on Net Investment I	ncome	me)	0
ation Under	r Section 4940(e) for F	Reduced Tax on Net Investment I	ncome	me)	0
ntion Under omestic priva	r Section 4940(e) for Fate foundations subject to this part blank.	Reduced Tax on Net Investment I	ment inco	_	Yes X No
ntion Under omestic priva pplies, leave	r Section 4940(e) for Fate foundations subject to this part blank.	Reduced Tax on Net Investment I the section 4940(a) tax on net invest	ment inco	_	
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pplies, leave ble for the se does not quate amount in aming in) A amin	r Section 4940(e) for Fate foundations subject to this part blank. ection 4942 tax on the distribution 4940(a) each column for each years and the distributions 177, 528 144, 277 145, 335 133, 945 169, 514 estimate 5-year base period - diversity has been in existence if light able-use assets for 2011 ome (1% of Part I, line 27b) om Part XII, line 4	Reduced Tax on Net Investment I the section 4940(a) tax on net invest tributable amount of any year in the be e). Do not complete this part ear; see the instructions before making (c) Net value of nonchantable-use assets 1,468,133. 1,826,200. 2,000,574. 2,042,703. 2,359,471. ride the total on line 2 by 5, or by the ess than 5 years from Part X, line 5	pase perio g any entr	d? ies. (d) Distribution of (col (b) divided by	Yes X No atio (c)) 0.120921 0.079004 0.072647 0.065572 0.071844 0.409988 0.081998 096,364. 89,900. 1,879. 91,779. 55,050.
	assets showing/69	List and describe the kind(s) of property solutions story brick warehouse, or common stock, 2 SCHEDULE (f) Depreciation allowed (or allowable) assets showing gain in column (h) and ow (j) Adjusted basis as of 12/31/69 ome or (net capital loss) tal gain or (loss) as defined in sections	(f) Depreciation allowed (g) Cost or other basis plus expense of sale assets showing gain in column (h) and owned by the foundation on 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any (If gain, also enter in Part I, line 7)	List and describe the kind(s) of property sold (e.g., real estate, scorpy brick warehouse, or common stock, 200 shs MLC Co.) SCHEDULE (f) Depreciation allowed (g) Cost or other basis plus expense of sale assets showing gain in column (h) and owned by the foundation on 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any (g) Cost or other basis plus expense of sale (ii) Adjusted basis (k) Excess of col (i) over col (j), if any (g) Cost or other basis plus expense of sale (iii) Adjusted basis (k) Excess of col (i) over col (j), if any (g) Cost or other basis plus expense of sale (iii) Adjusted basis (k) Excess of col (i) over col (j), if any (g) Cost or other basis plus expense of sale (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (ii) over col (j), if any (iii) Adjusted basis (k) Excess of col (iii) over col (j), if any (iii) Adjusted basis (k) Excess of col (iii) over col (j), if any	List and describe the kind(s) of property sold (e.g., real estate, story brick warehouse, or common stock, 200 shs. MLC Co.) SCHEDULE (c) Date acquired P-Purchase D-Donation (f) Depreciation allowed (or allowable) (or allowable) (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (k.g.) plus (f) min (e) plus (f) min (h) Gain or (k.g.) plus expense of sale (ii) Adjusted basis as of 12/31/69 (ij) Adjusted basis (k.g.) Excess of col. (i) over col. (j.g.), if any (iii) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iii) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.), but not less: Losses (from col. (iii) over col. (j.g.), if any (iv) Gains (Col. (h.g.) col. (k.g.) c

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	<u>ctions</u>	<u>s) </u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3,7	758.
	here and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		3,7	758.
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		3,	758.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 2,226.			
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld		2 0	226
7	Total credits and payments Add lines 6a through 6d		2,2	226.
8	Enter any penalty for underpayment of estimated tax. Check here X If Form 2220 is attached		1 5	32.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,	772.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be. Credited to 2012 estimated tax ORefunded 11			
11 Par	Enter the amount of line 10 to be. Credited to 2012 estimated tax ▶ 0 Refunded ▶ 11 t VII-A Statements Regarding Activities			
			V	N.
ıa	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?	1a	Yes	No X
.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	Id		
ь	instructions for definition)?	1ь		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10		
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c	~	χ-
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
•	(1) On the foundation \$\ (2) On foundation managers. \$\			
A	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	Ť	X
	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
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
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			t
	conflict with the state law remain in the governing instrument?	6	X	
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	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	Он,		*	1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-		نہ ۔
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			х
	Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ATTACHMENT 5		х	
	and addresses ATTACHMENT 5	10	4.	

	rt VII-A Statements Regarding Activities (continued)		'	ugo o
	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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<u> </u>		
12	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of ► BRADLEY ZUCKER Telephone no ► 216-825	-400	00	
• •	Located at ≥2000 AUBURN DR. #300 BEACHWOOD, OH ZIP+4 ≥ 44122	- -		
15	The books are in care of ► BRADLEY ZUCKER Located at ►2000 AUBURN DR. #300 BEACHWOOD, OH Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Par	rt VII-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.		Yes	No
1 a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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 X No			
	(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)			
b	of the fany answer is "Yes" to 1a(1)-(6), did any 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		
	Organizations relying on a current notice regarding disaster assistance check here			
C	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			$\bar{\mathbf{x}}$
•	were not corrected before the first day of the tax year beginning in 2011?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and	Ì		
a	6e, Part XIII) for tax year(s) beginning before 2011?			<u>'</u>
	If "Yes," list the years			
ŀ	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			į
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			1
	all years listed, answer "No" and attach statement - see instructions)	2b	-	
c	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			İ
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
	at any time during the year?			
E	b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			1
	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)	3b		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
Ŀ	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 2011?	4b		<u> X</u>

Pai	rt VII-B Statements Regarding Activities f	<u>or Which Form 4</u>	720 May Be Requ	i ired (continued)		
5 a	During the year did the foundation pay or incur any amou	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public ele	ection (see section 4	1955), or to carry o	n,		
	directly or indirectly, any voter registration drive?	•			,	
	(3) Provide a grant to an individual for travel, study, or of			ं ि जी	l l	
	(4) Provide a grant to an organization other than a					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (•				
					"	
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children of					
b	If any answer is "Yes" to 5a(1)-(5), did any of the					l x
	Regulations section 53.4945 or in a current notice regard	•	•		<u>5b</u>	^
	Organizations relying on a current notice regarding disas					
С	If the answer is "Yes" to question 5a(4), does the					
	because it maintained expenditure responsibility for the g	rant? . ATTAU	HWENT P	. X Yes No	,	
	If "Yes," attach the statement required by Regulations sec	• •				
6 a	Did the foundation, during the year, receive any fun	ds, directly or indire	ctly, to pay premium	ns		
	on a personal benefit contract?			Yes X No	,	
b	Did the foundation, during the year, pay premiums, dire-	ctly or indirectly, on a	personal benefit contra	ct?	6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	irty to a prohibited tax	shelter transaction?	. Yes X No	, !	
ь	If "Yes," did the foundation receive any proceeds or have				7b	
Pai	t VIII Information About Officers, Directors	s, Trustees, Foun	dation Managers,	Highly Paid Emplo	oyees,	
1	and Contractors List all officers, directors, trustees, foundation i	managers and their	r compensation (see	instructions)		
•		(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributions to	(e) Expens	se account
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances
AΤ	TACHMENT 7		() q		0
- -						
		1				
2	Compensation of five highest-paid employees	(other than thos	se included on lin	e 1 - see instruction	ons). If no	one, enter
	"NONE."	,				
1-	A Name and address of each ampleuse paid man than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expens	e account,
(0) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	owances
		,		Compensation		
	NONE					
_						
				1		
		ļ				
	I number of other employees hald over \$50,000					. i

Part VIII Information About Officers, Directors, Trustees, Foundard Contractors (continued)	ndation Managers, Highly Paid Employ	/ees,
3 Five highest-paid independent contractors for professional servi	ces (see instructions). If none, enter "NONE	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ATTACHMENT 8		52,706
Total number of others receiving over \$50,000 for professional services.		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficianes served, conferences convened, research papers produce		Expenses
1 N/A		
2		
3		
7		
Part IX-B Summary of Program-Related Investments (see inst		
Describe the two largest program-related investments made by the foundation during the tax 1 NONE	year on lines 1 and 2	Amount
1 NONE		
2		
All other program-related investments See instructions		
3 NONE		
Total, Add lines 1 through 3		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions,
<u> </u>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	593,340.
b	Average of monthly cash balances	1 b	519,720.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,113,060.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	1,113,060.
1	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
		4	16,696.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,096,364.
;	Minimum investment return. Enter 5% of line 5	6	54,818.
Pa	Tt XI Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this process.	oart)	
$\overline{}$	Mınımum investment return from Part X, line 6	1	54,818.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 3,758.		
b	Income tax for 2011. (This does not include the tax from Part VI) 2b	1	
	Add lines 2a and 2b	2c	3,758.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	51,060.
1	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	51,060.
3		6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	51,060.
Pa	rt XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	55,050.
b	Program related investments - total from Part IV-B	1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
٤	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
1	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	55,050.
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	55 050
3	Adjusted qualifying distributions. Subtract line 5 from line 4	6	55,050.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating w	hether the foundation

Pa	rt XIII Undistributed Income (see instru	ictions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				51,060.
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
b	Total for pnor years 20_09 ,20_08 ,20_07				
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
Ь				1	
С	From 2008				
d	From 2009 53, 315. From 2010 104, 965.				
	110111 2010	204 654			
	Total of lines 3a through e	294,654.			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$55,050.				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				51,060.
	Applied to 2011 distributable amount	3,990.			
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2011				
3	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))				
ь	Enter the net total of each column as indicated below:				
а	0 4111 004 14 0 14 14 15 15	298,644.			
	Prior years' undistributed income Subtract				
D	line 4b from line 2b				
C	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				
7	Amounts treated as distributions out of corpus				ı
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	<u></u>	<u> </u>		
8	Excess distributions carryover from 2006 not	50,542.			
•	applied on line 5 or line 7 (see instructions)			,	
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	248,102.		ļ	1
10	Analysis of line 9				
	Excess from 2007				
	Excess from 2008				
c	Excess from 2009				
ď	Excess from 2010 104, 965.				
	Excess from 2011 3,990.				
		-		<u> </u>	Form 990-PF (2011)

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year		ļ		
ATTACHMENT 9				
		1		
		į		
		į		
		ļ		
		ļ		
				}
		<u> </u>		
			ĺ	
				55,050.
Total	 		▶ 3a	33,030.
b Approved for future payment				
		l		
		1		
		Ī		
		İ		
		1		
]		
Total			▶ 3b	

er gross amounts unless otherwise indicate	ed Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					<u> </u>
· · · · · · · · · · · · · · · · · · ·					
·				_	
1					
	1 1				
Fees and contracts from government agen-	cies	I			
Membership dues and assessments					······································
nterest on savings and temporary cash investme					
Dividends and interest from securities		-	14	35,221.	
let rental income or (loss) from real estate	1 1				
Debt-financed property					
Not debt-financed property					· · · · · · · · · · · · · · · · · · ·
let rental income or (loss) from personal propert	1 1		 		
Other investment income					
iain or (loss) from sales of assets other than inve			18	67,108.	
let income or (loss) from special events.		" " -		,	
	1				
Gross profit or (loss) from sales of inventor	• 1			-	-
Other revenue: a	I .	<u> </u>			
	1		- 	-	
					
	l l		1		
·				102 329	
Bubtotal Add columns (b), (d), and (e)				102,329.	102 320
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify rt XVI-B Relationship of Activ	e)	complishment of E	xempt Purp	oses	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify t XVI-B Relationship of Active e No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
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Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the XVI-B Relationship of Active No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	-
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the table of the table of the table of the table of the table of the table of the table of the table of the table of tab	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the table of the table of the table of the table of the table of the table of the table of the table of the table of tab	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the XVI-B Relationship of Active No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the XVI-B Relationship of Active No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify rt XVI-B Relationship of Activate No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify Relationship of Active No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the table of the table of the table of the table of the table of the table of the table of the table of the table of tab	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify rt XVI-B Relationship of Activate No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify the table of the table of the table of the table of the table of the table of the table of the table of the table of tab	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify ret XVI-B Relationship of Activate No. Explain below how each a	e)	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to t

Form 9			ANCORA I	CONDATION			34-1/0	тает	Pa	age 1
Part	Χ̈́VII	Information R Exempt Orga		ansfers To and Transac	tions a	nd Relationshi	ps With Non	chari	table	•
1 [Did th	ne organization direct	tly or indirectly	engage in any of the following	ng with a	any other organiza	tion described		Yes	No
		_	-	section 501(c)(3) organizatio	-	•				
(organ	izations?								
a ¯	Trans	fers from the reporting	ng foundation to	a noncharitable exempt orga	nization o	of:				
((1) Ca	ash	. 					1a(1)	ļ	_ <u>x</u>
								1a(2)		_X
		transactions:								
				mpt organization				1b(1)		X
				able exempt organization				1b(2)		X
((3) R	ental of facilities, equ	ipment, or other	assets		• • • • • • • • •		1b(3)		X
								1b(4)		X
								1b(5)		<u>X</u>
				nip or fundraising solicitations				1b(6)		X
				its, other assets, or paid emplors," complete the following s				1c	·	
				s, complete the following sinces given by the reporting fo						
				gement, show in column (d)						
(a) Lin		(b) Amount involved		noncharitable exempt organization		escription of transfers, tr				
(-/	·	N/A	(0)	ionalization of the organization	N/A		and one	ing and	. igoino	-
					1	-				
		- -	_							
-					1					
			T							
								_		
2a l	s the	foundation directly	or indirectly af	filiated with, or related to, or	ne or mo	ore tax-exempt org	janizations			_
(descr	bed in section 501(c)) of the Code (o	ther than section 501(c)(3)) o	r ın secti	on 527?	L	Y	es X	No
b I	f "Ye	s," complete the follo	wing schedule				·			
		(a) Name of organizatio	n	(b) Type of organization		(c) De	scription of relations	hip		
		,								
		·····					·			
										
~ ····	Und	er penalties of perjury, I declar ect, and complete Declaration o	are that I have exami fpreparer,∕opher than t	ned this return, including accompanying axpayer) is based on all information of which	schedules ar preparer ha	nd statements, and to the is any knowledge	best of my knowledg	e and b	elief, it	is true
Sign		V/	AL	1-12/1		. .	May the IRS			
Here		N PMG/	gru-	111111		<u> </u>	with the pre	eparer .	shown_	below
	Sig	gnature of officer of trustee		Date	Title		(see instructions	s)? [X	Yes	No
		Print/Type preparer's	name	Droherer's signature		Date:		TINI		
Paid		Print/Type preparer's	name	Preparer's signature	DA	Date	Check if F	TIN		

Form 990-PF (2011)

self-employed P00012337

800-229-1099

Firm's EIN ▶ 34-1912961

Phone no

44115

Paid

Preparer

Use Only

ALANE L. BOFFA

Firm's name ► COHEN & COMPANY, LTD.

WWW.COHENCPA.COM,

ОН

Firm's address ▶ OFFICES LISTED AT

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

2011

Employer identification number

Organization type (check o	
	ne):
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	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or my one contributor Complete Parts I and II.
	•
Special Rules	
Special Rules For a section 501 under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations 09(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.
For a section 501 under sections 50 the greater of (1) Complete Parts I For a section 501 during the year, t	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations 09(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.

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).

Name of organization ANCORA FOUNDATION FKA MAXUS FOUNDATION

Employer identification number 34-1701961

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	RICHARD BARONE 435 L'AMBIANCE DRIVE UNIT J-603 LONGBOAT KEY, FL 34228	\$12,535.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2 _	CAROL & ART ANTON 22075 SHAKER BLVD. SHAKER HTS., OH 44122	\$196,440.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3 _	ZUCKER FAMILY 29430 WEST WOODALL CLEVELAND, OH 44139	\$15,158.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
 :		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is

Name of organization ANCORA FOUNDATION FKA MAXUS FOUNDATION Employer identification number

34-1701961

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1000 SHS PDT		
		\$\$.	08/30/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	400 SHS GLD, 1000 SHS BMY 400 SHS HRS, 2500 SHS SIMG 550 SHS FITB, 4000 SHS PRCP 374 SHS COP, 7500 SHS AUTH	\$\$196,440.	12/29/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	250 SHS JO ANN COM		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Name of organization ANCORA FOUNDATION

FKA MAXUS FOUNDATION

Employer identification number 34-1701961

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) >\$

U	se duplicate copies of Part III if additional	space is needed.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gift				
		(e) Transier or gift				
<u>_</u>	Transferee's name, address, and ZIP	+4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, and ZIP	+4	Relationship of transferor to transferee			
(a) No						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
L	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) Na						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		· · · · · · · · · · · · · · · · · · ·				
		(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
Ī						

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34-1701961

ATTACHMENT 1

DIRECT PUBLIC SUPPORT	12,535.	196,440.	15,158.	2,268.	226,401.
DATE	08/30/2011	12/29/2011	02/22/2011	0 VARIOUS	TOTAL CONTRIBUTION AMOUNTS
NAME AND ADDRESS	RICHARD BARONE 435 L'AMBIANCE DRIVE UNIT J-603 LONGBOAT KEY, FL 34228	CAROL & ART ANTON 22075 SHAKER BLVD. SHAKER HTS., OH 44122	ZUCKER FAMILY 29430 WEST WOODALL CLEVELAND, OH 44139	VARIOUS CASH CONTIRBUTIONS < \$5,000	TOTAL CO

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	31,730. 3,491.	35,221.
REVENUE AND EXPENSES PER BOOKS	31,730. 3,491.	35,221.
		TOTAL
DESCRIPTION	DIVIDEND INCOME INTEREST INCOME	

- OTHER EXPENSES PART I FORM 990PF,

NET		INC		26,353.	26,543.
REVENUE AND	EXPENSES	PER BOOKS	190.	52,706.	52,896.
					TOTALS
		DESCRIPTION	BANK FEES	MANAGEMENT FEE	

ATTACHMENT 3

ATTACHMENT 3

ANCORA FOUNDATION

34-1701961

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

ENDING BOOK VALUE

ENDING FMV

MARKETABLE SECURITIES

595,024.

595,024.

746,190.

746,190.

TOTALS

CONTRIBUTORS	
SUBSTANTIAL	
- NEW	
0	
LINE 1	
VII-A,	
PART	
990PF,	
FORM	

NAME AND ADDRESS

DIRECT PUBLIC SUPPORT 02/22/2011 DATE

15,158.

15,158.

TOTAL CONTRIBUTION AMOUNTS

ZUCKER FAMILY 29430 WEST WOODALL CLEVELAND, OH 44139

ATTACHMENT 5

FORM 990PF, PART_VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME:

RICHARD A BARONE CHARITABLE FOUNDATION

GRANTEE'S ADDRESS: 2000 AUBURN DIRVE, SUITE 300

CITY, STATE & ZIP:

BEACHWOOD, OH 44122

GRANT DATE:

07/26/2010

GRANT AMOUNT:

650,000.

GRANT PURPOSE:

TO PROVIDE GRANTS TO ORGANIZATIONS THAT ARE ORGANIZED

AND OPERATED AS PER IRC SEC 501(C)(3)

AMOUNT EXPENDED:

ANY DIVERSION?

DATES OF REPORTS:

5/14/2011 AND 5/14/2012

VERIFICATION DATE: 05/14/2012

RESULTS OF VERIFICATION:

REPORTS VERIFIED, NO DIVERSIONS NOTED

TRUSTEES	
AND '	
DIRECTORS,	
T OF OFFICERS,	
OF.	١
LIST	
	١
VIII	l
PART	
M 990PF,	
FORM	

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0	
COMPENSATION	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT/TRUSTEE 2.00	TRUSTEE 1.00	TRUSTEE 1.00	SECRETARY 1.00	GRAND TOTALS
NAME AND ADDRESS	RICHARD BARONE 2000 AUBURN DRIVE 300 CLEVELAND, OH 44122	CHRISTOPHER BARONE 2000 AUBURN DRIVE 300 CLEVELAND, OH 44122	BRADLEY ZUCKER 2000 AUBURN DRIVE 300 CLEVELAND, OH 44122	JACKIE WISE 2000 AUBURN DRIVE 300 CLEVELAND, OH 44122	

52,706.

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

TOTAL COMPENSATION

990PF, PART VIII- COMPENSATION OF T	ATTACHMEN	
NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
ANCORA CAPITAL INC 2000 AUBURN DR, SUITE 300 CLEVELAND, OH 44122	MANAGEMENT SERVICES	52,706.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

55,050.

AMOUNT

ATTACHMENT 9

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

SEE ATTACHED SCHEDULE

CHARITABLE CONTRIBUTION

TOTAL CONTRIBUTIONS PAID

55,050.

ATTACHMENT 9

SCHEDULE D (Form 1041)

Capital Gains and Losses

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

2011

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

ANCORA FOUNDATION

Employer identification number 34-1701961

FKA MAXUS FOUNDATION

Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) (see instructions) 1a 7,584. **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, 7,584. column (3) on the back . . . Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (b) Date acquired (e) Cost or other basis (d) Sales price the entire year (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) (see instructions) Subtract (e) from (d) 6a 171,590. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 29. Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 171,619.

Schedule D (Form 1041) 2011

Scrie	dule D (FORM 1041) 2011				r age z
Par	Summary of Parts I and II Caution: Read the instructions before completing this	nart	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
13		13	(0.00)		7,584.
14	- · · · · · · · · · · · · · · · · · · ·				
		14a			171,619.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)			-	
		14c			
	Total net gain or (loss). Combine lines 13 and 14a	15			179,203.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For	n 990-T, Part I, line 4	a) If lines 14a and	15, column (2), are net
	, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co				
Par	t IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				
a Note <i>Carry</i>	The loss on line 15, column (3) or b \$3,000 :: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page over Worksheet in the instructions to figure your capital loss carryover	in	e 22 (or Form 990-T, I		() omplete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate	es		•	
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu) are gains, or an ar	nount is entered i	n Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thar	zero		
	tion: Skip this part and complete the Schedule D Tax Worksheet in the i	instruc	tions if:		
	other line 14b, col (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
	n 990-T trusts. Complete this part only if both lines 14a and 15 are	o a a in	e or qualified divid	ands are included	d in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a				
	her line 14b, col (2) or line 14c, col. (2) is more than zero.				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17		
18	Enter the smaller of line 14a or 15 in column (2)	• • •			
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) . 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 21				
22	Subtract line 21 from line 20. If zero or less, enter -0		22		
23	Subtract line 22 from line 17. If zero or less, enter -0		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24				
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box				
	No. Enter the amount from line 23				
26 27	Subtract line 25 from line 24	• • •	26		
27	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin		27	Y 56	
	1 es. Skip lines 27 tinu 30, go to line 31	1 e 22	27	 ,	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28	ė	
				· .	
29	Subtract line 28 from line 27				
30 24	Multiply line 29 by 15% (.15)				<u></u>
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rate				
	(see the Schedule G instructions in the instructions for Form 1041).			31	
22	Add lines 30 and 31			32	
32 32	Add lines 30 and 31			· · · · · · 	
33	(see the Schedule G instructions in the instructions for Form 1041)				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 l				
J4	C line 12 (or Form 900 T line 36)	iicie a	na on roin 1041,	Scriedule 34	

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust ➤ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

2011

ANCORA FOUNDATION				34-1701961	
Part I Short-Term Capital Gains a		ets Held One Yea	r or Less		
(a) Description of property (Example 100 sh 7% preferred of *Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a SHORT TERM SALES - SEE ATTACHMENT	VARIOUS	VARIOUS	245,354.	237,770.	7,584
		-			

1b Total. Combine the amounts in colum	in (f). Enter here an	d on Schedule D. III	ne 1b		7,584.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains a			an One Year	-	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
Ga LONG TERM SALES - SEE ATTACHMENT	VARIOUS	VARIOUS	539,039.	367,449.	171,590.
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6b Total. Combine the amounts in colum	un (f) Enter here and	t on Schedule D. III			171,590.

Ancora Foundation Gain/Loss Report Attachment to Schedule D 2011 Form 990-PF FEIN: 34-1701961

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SHOKI I EKM GAINS/LOSSES					
	Purchase	Purchase	Sale	Sale	
	<u>Date</u>	<u>Price</u>	<u>Date</u>	<u>Price</u>	Gain/Loss
1,000.00 GDL FUND RT	10/21/2010	•	3/24/2011	745 23 \$	745 23
119.00 GDL FUND CUM PFD SER B	10/21/2010	6,126.69	8/11/2011	6,270 11 \$	143.42
1,500.00 KIMCO REALTY - 6.90%, SERIES H	12/22/2010	36,229 75	11/28/2011	39,984.48	3,754 73
5,000.00 EATON VANCE RSK MNG DV COM	8/11/2011	50,303 25	8/15/2011	53,067 23 \$	
3,500.00 MFS INTERMEDIATE INCOME TRUST SBI	12/13/2010	22,700.19	9/22/2011	22,009 82 \$	(690.37)
1,500 00 PUBLIC STORAGE PFD 1/1000 G	12/13/2010	38,014.75	9/30/2011	37,500 00 \$	(51475)
1,500 00 MFS INTERMEDIATE INCOME	12/13/2010	9,728 65	10/31/2011	9,404 20 \$	
950.00 MADISON CLAYMORE CVRD COM	8/9/2011	7,634.15	9/23/2011	7,243 61 \$	
5,000.00 MFS INTERMEDIATE INCOME	8/11/2011	30,336.25	10/31/2011	31,347.33 \$	1,011 08
5,000 00 MFS INTERMEDIATE INCOME	10/4/2011	30,579.75	10/31/2011	31,347.33 \$	767 58
	11/25/2011	6,116 10	12/30/2011	6,435 12 \$	319.02
	TOTAL SHORT-TERM	237,769 53		245,354.46 \$	7,584 93
LONG TERM GAINS/LOSSES	Purchase	Purchase	Sale	Sale	
# of shares Security	Date	Price	Date	Price	Gam/Loss
3,731 00 HANCOCK J PATRIOT II COM SH BEN INT	10/16/2008	17,164.37	8/5/2011	46,083.86 \$	28,919 49
1,269.00 HANCOCK J PATRIOT II COM SH BEN INT	1/21/2009	8,988.50	8/5/2011	15,674 20 \$	6,685 70
1,000.00 CISCO SYS INC COM	5/18/2010	25,453 23	8/15/2011	13,807 48 \$	(11,645.75)
	8/21/2007	55,557.35	8/22/2011	44,249.30 \$	(11,308 05)
2,000.00 GABELLI DIVD & INCM TR COM	600/5000	22,184 75	8/22/2011	29,499 53 \$	7,314.78
3,000.00 RIVUS BOND FUND COM	11/20/2009	47,794 75	8/22/2011	55,874.87	8,080 12
100 00 STRATEGIC GLOBAL INCM COM	2/24/2009	804.75	8/22/2011	1,110 86 \$	306 11
3,900 00 STRATEGIC GLOBAL INCM COM	2/25/2009	30,060 76	8/22/2011	43,323 53 \$	13,262.77
482.00 HANCOCK J PATRIOT II COM SH BEN INT	1/21/2009	3,412.17	8/31/2011	5,926 19 \$	2,514 02
518 00 HANCOCK J PATRIOT II COM SH BEN INT	11/2/2009	4,790.09	8/31/2011	6,368 82 \$	1,578 73
	5/25/2010	9,800.58	9/6/2011	12,655 00 \$	2,854 42
	5/25/2010	29,401 73	12/30/2011	40,240 67	10,838 94
	10/16/2008	5,901 08	8/30/2011	12,535 00 \$	6,633 92
	2/23/2009	10,112 85	VARIOUS	22,14175 \$	12,028 90
1,000 00 BRISTOL MYERS SQUIBB CO COM	10/27/2009	22,320.35	12/29/2011	35,156 07 \$	12,835 72
374 00 CONOCOPHILLIPS COM	9/24/2001	9,908.51	12/29/2011	26,987.39 \$	17,078.88
550.00 FIFTH THIRD BANCORP COM	2/27/2009	1,183 24	12/29/2011	7,025 71 \$	5,842.47
	11/30/1999	4,046 64	12/29/2011	14,456 13 \$	10,409 49
	1/12/2001	6,599 75	12/29/2011	18,729.29 \$	12,129 54
	12/23/2009	42,787.99	12/29/2011	60,146 49	17,358 50
	11/11/2009	5,386 71	12/29/2011	11,797.02	6,410 31
250.00 JO-ANN STORES INC COM	VARIOUS	3,789.38	3/29/2011	15,250 00 \$	11,460.62
	TOTAL LONG-TERM	367,449.53		\$39,039 16	171,589 63

\$179,174.56

\$784,393.62

\$605,219.06

GRAND TOTAL

Ancora Foundation Attachment 2011 Form 990-PF Page 1, Line 25 Detail FEIN: 34-1701961

Date	Charity	Amount	Address		_
2/4/2011	San Antonio International Piano	1.500 00	PO Box 781146	San Antonio	TX 78278
2/7/2011	Reno Baroque Ensembe	2,500 00	2776 Spinnaker Dr	Reno	NV 89159-5754
2/11/2011	San Antonio Symphony	1,000 00	PO Box 658	San Antonio	TX 78293-0658
2/22/2011	Hillsdale College	500 00	33 E College St	Hillsdale	MI 49242
3/15/2011	Park Temple	2,400 00	3300 Mayfield Rd	Cleveland	OH 44118
4/6/2011	Joel F Glover Memorial Foundation	2,500 00	525 Hammill Lane	Reno	NV 89511
4/6/2011	Nevada Museum of Art	1,000 00	160 West Liberty Street	Reno	NV 89501
6/3/2011	Fairmount Temple	400 00	23737 Fairmount Blvd	Beachwood	OH 44122
6/29/2011	Christ Child Society	1.000 00	6753 State Road	Рагта	OH 44134
6/29/2011	Ed Keating Center	500 00	PO Box 770108	Lakewood	OH 44107
6/29/2011	Joseph Home	2,500 00	2412 Community College Ave	Cleveland	OH 44115
6/29/2011	North Coast Community Homes	500 00	14221 Broadway Ave	Cleveland	OH 44125-1953
6/29/2011	Sister of Charity	2,500 00	2351 East 22nd Street	Cleveland	OH 44115
6/29/2011	St Martin DePorres	2,500 00	6111 Lausche Ave	Cleveland	OH 44103
6/29/2011	West Side Catholic Center	1,000.00	3135 Lorain Ave	Cleveland	OH 44113
6/29/2011	West Side Ecumenical Center	1,000.00	5209 Detroit Ave	Cleveland	OH 44102
7/19/2011	St Albert the Great School	1,000 00	6667 Wallings Road	Cleveland	OH 44133-3027
7/25/2011	St Helena's Catholic Church	100 00	1367 W 65th Street	Cleveland	OH 44102
7/29/2011	The Agnon School	2,000 00	26500 Shaker Blvd	Beachwood	OH 44122
8/5/2011	Ensemble Theatre	2,500 00	2490 Lee Road	Cleveland	OH 44118
8/12/2011	Northern Nevada Dental Health Program	2,500 00	161 Country Estates Circle 1B	Reno	NV 89511
8/12/2011	Northern Nevada Youth Group	2,500 00	c/o Dave Warfe, 5605 Riggins Ct #206	Reno	NV 89502
9/14/2011	Whittemore Peterson Foundation	2,500 00	6600 N Wingfield Pkwy	Sparks	NV 89436
9/23/2011	Boy Scouts of America	350 00	2241 Woodland Ave	Cleveland	OH 44115-3295
12/5/2011	Christ Child Society	1,000 00	6753 State Road	Parma	OH 44134
12/5/2011	Ed Keating Center	500 00	PO Box 770108	Lakewood	OH 44107
12/5/2011	Joseph Home	2,500 00	2412 Community College Ave	Cleveland	OH 44115
12/5/2011	Movember Foundation	100 00	PO Box 2726	Venice	CA 90294-2726
12/5/2011	Reno Baroque Ensembe	2,500 00	2776 Spinnaker Dr	Reno	NV 89519-5754
12/5/2011	Shir Ha-Ma'a lot Temple	200 00	3652 Michelson Drive	Irvine	CA 92612
12/5/2011	Sister of Chanty	2,500 00	2351 East 22nd Street	Cleveland	OH 44115
12/5/2011	Saint Ignatius High School	500 00	1911 West 30th Street	Cleveland	OH 44113
12/5/2011	St Martin DePorres	2,500 00	6111 Lausche Ave	Cleveland	OH 44103
12/5/2011	St Albert the Great School	1,000 00	6667 Wallings Road	Cleveland	OH 44133-3027
12/5/2011	West Side Catholic Center	1,000 00	3135 Lorain Ave	Cleveland	OH 44113
12/5/2011	West Side Ecumenical Center	1,000 00	5209 Detroit Ave	Cleveland	OH 44102
12/12/2011	Cleveland Orchestra	1,000 00	Severance Hall, 1422 Euclid Avenue	Cleveland	OH 44115
12/15/2011	Case Western Reserve	1,000 00	10950 Euclid Ave #212	Cleveland	OH 44106-7035
12/15/2011	Lorain Community Foundation	1,000 00	1865 N Ridge Rd E Ste A	Lorain	OH 44055
	- -	55,050 00			

ANCORA FOUNDATION

FORM 990PF

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EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME:

RICHARD A BARONE CHARITABLE FOUNDATION

GRANTEE'S ADDRESS: 2000 AUBURN DIRVE, SUITE 300 CITY, STATE & ZIP: BEACHWOOD, OH 44122

GRANT DATE:

07/26/2010

GRANT AMOUNT:

650,000.

GRANT PURPOSE:

TO PROVIDE GRANTS TO ORGANIZATIONS THAT ARE ORGANIZED

AND OPERATED AS PER IRC SEC 501(C)(3)

AMOUNT EXPENDED:

ANY DIVERSION?

NO

DATES OF REPORTS:

5/14/2011 AND 5/14/2012

VERIFICATION DATE: 5/16/2011 AND 5/14/2012

RESULTS OF VERIFICATION:

REPORTS VERIFIED, NO DIVERSIONS NOTED

ANCORA FOUNDATION

FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

C/	APITAL GAI	NS AND LC	SSES FOR	<u>R TAX ON I</u>	<u>NVESTI</u>	M	ENT INCOM	<u>IE</u>
Kınd of			Desc	ription		or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPIT	AL GAIN DIS				29.	
				: ATTACHMENT	•	P	VARIOUS	VARIOUS
245,354.		237,770.	PE: SECURIT	TLES		٠	7,584.	
		LONG TERM S	ALES - SEE PE: SECURIT			D	VARIOUS	VARIOUS
539,039.		367,449.	TE. BEOKE				171,590.	
TOTAL GAIN(I	oss)						179,203.	
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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		► File a	separate ap	plication for each return.		
		Automatic 3-Month Extension, co	omplete on	ly Part I and check thi	is box	▶ X
		Additional (Not Automatic) 3-Mor				
		unlessou have already been grant				368.
a corporation 8868 to requ Return for T Instructions)	required t uest an ext ransfers A For more o	You can electronically file Form to file Form 990-T), or an addition ension of time to file any of the ssociated With Certain Personal letails on the electronic filing of the	al (not aut forms liste l Benefit (is form, vis	tomatic) 3-month exten d in Part I or Part II w Contracts, which must sit www.irs gov/efile an	nsion of time. You can electro th the exception of Form 88 t be sent to the IRS in pa d click on e-file for Charitles &	nically file Form 370, Information per format (see
Part I Aut	omatic 3-	Month Extension of Time. On	ly submit	original (no copies ne	eeded).	
A corporation	required to	file Form 990-T and requesting an	automatic	6-month extension - che	eck this box and complete	
Part I only						▶ 🛄
All other corp	orations (in	cluding 1120-C filers), partnerships	, REMICs,	and trusts must use For	rm 7004 to request an extension	n of time
to file income					Enter filer's identifying numi	oer, see instructions
T	Name of exe	empt organization or other filer, see inst	ructions.		Employer identification nur	nber (EIN) or
Type or ANCORA FOUNDATION					<u> </u>	
print File by the due date for filing your File by the due date for filing your FILE DATE OF THE PRINT OF					X 34-1701961	
			, see instruc	lions.	Social security number (SS	SN)
retum. See	City, town or	post office, state, and ZIP code. For a	foreign addi	ress, see instructions.		
instructions.	CLEVELA	ND, OH 44122				
Enter the Ret	urn code fo	the return that this application is for	or (file a se	parate application for ea	ach return)	0 4
Application			Return	Application		Return
Is For			Code	Is For		Code
Form 990			01	Form 990-T (corporation	on)	07
Form 990-BL			02	Form 1041-A		08
Form 990-EZ			01	Form 4720		09
Form 990-PF			04	Form 5227		10
		as 400(a) trust)		Form 6069		11
		or 408(a) trust)	05	Form 8870	····	
Form 990-T (irust otner ti	nan above)	06	FOITIL 0070		12
		are of BRADLEY ZUCKER 216 825-4000		FAX No. ▶		_
• If the organ	nization doe	s not have an office or place of bu	isiness In ti	ne United States, check	this box	▶ 🔲
• If this is for	a Group R	eturn, enter the organization's four	digit Group	Exemption Number (G	EN)	. If this is
for the whole	group, che	ck this box .,,,▶ 🔲 . If	it is for par	t of the group, check thi	sbox	ıd attach
		EINs of all members the extension				
1 reques	t an automa	atic 3-month (6 months for a corpor	ation requi	red to file Form 990-T) e	extension of time	
until		08/15 , 20 12 , to file the e				extension is
for the c	organization	's return for:				
▶ X (calendar ye	ar 20 <u>11</u> or				
▶	lax year beg	jinning	, 20	, and ending	, 20	
2 If the tax	x year enter	ed in line 1 is for less than 12 mont				_
	ianys III aci	contains period				
		is for Form 990-BL, 990-PF, 990 lits. See Instructions.	0-T, 4720,	or 6069, enter the	tentative tax, less any 3a \$	872.
		is for Form 990-PF, 990-T,	4720 or	6069 enter any re		
		nents made. Include any prior year		-		2,226.
		act line 3b from line 3a, Include y				2,220.
		-		on war mis join, ii jet		0
		Tax Payment System). See Instruction of the make an electronic fund was		with this Earn 9960	3c \$	
		IS TO THAKE ALL EISCHOLLIC INTIO M	ninurawal	with this Colli 0000'	see ruini 0403-EO and For	111 00/8-EO 10
payment instr		rork Reduction Act Notice, see Instruc	tions		Enom Q	868 (Pay 1-2012)