# IRS E-file Signature Authorization for a Tax Exempt Entity For calendar year 2024, or fiscal year beginning \_\_\_\_\_\_\_\_\_, 2024, and ending \_\_\_\_\_\_\_\_ Do not send to the IRS. Keep for your records.

OMB No. 1545-0047

	ent of the Treasury Revenue Service		G		TE for the latest information.		
Name o				o to minimoly of moone	2 to the latest mentalism	EIN or SSN	
	Hollie	& Anna	0ak	ley Foundation,	Inc.	23-700	8034
Name a	and title of officer or per			Julie Heck			
1141110	and this of omost of pol	oon odojoot to		Secretary			
Part	Type of F	Return and		rn Information			
Check	the box for the retur	n for which v	ou are u	using this Form 8879-TE and e	nter the applicable amount, if any, fro	om the return. F	orm 8038-CP and
Form 5 or <b>10a</b> which	5330 filers may enter below, and the amo	dollars and count on that lir	ents. For th	or all other forms, enter whole be return being filed with this fo	dollars only. If you check the box on orm was blank, then leave line <b>1b, 2</b> return, then enter -0- on the applicab	line 1a, 2a, 3a b, 3b, 4b, 5b, 6l	, 4a, 5a, 6a, 7a, 8a, 9a b, 7b, 8b, 9b, or 10b,
1a	Form 990 check h	ere			n 990, Part VIII, column (A), line 12)		b
2a	Form 990-EZ che	ck here			n 990-EZ, line 9)		b
3a	Form 1120-POL o				line 22)	3	10,048.
4a	Form 990-PF ched	ck here			income (Form 990-PF, Part V, line 5	5) 4	b10,048.
5a	Form 8868 check	here		b Balance due (Form 8868, I	line 3c)	5	b
6a	Form 990-T check	here		b Total tax (Form 990-T, Par	t III, line 4)	6	b
7a	Form 4720 check	here		b Total tax (Form 4720, Part	III, line 1)	7	b
8a	Form 5227 check	here			ax year (Form 5227, Item D)		b
9a	Form 5330 check	here		b Tax due (Form 5330, Part I	II, line 19)	9	b
	Form 8038-CP ch				t requested (Form 8038-CP, Part III		0b
Part	William Co.				cer or Person Subject to Ta		
Under					ity or 🔲 I am a person subject to		
of entir	ty)				, (EIN) ar the best of my knowledge and belief	nd that I have ex	amined a copy of the
of any entry to financi later the payme	refund. If applicable of the financial institution to debit all institution to debit and 2 business days and of taxes to receive the control of taxes th	I authorize the stion account the entry to the prior to the page confidential	ne U.S. indicate this accayment information	Treasury and its designated Fi d in the tax preparation softw. ount. To revoke a payment, I r (settlement) date. I also autho tion necessary to answer inqu	re reason for any delay in processing nancial Agent to initiate an electronic are for payment of the federal taxes nust contact the U.S. Treasury Finarize the financial institutions involved iries and resolve issues related to thand, if applicable, the consent to elect YOUR FILE	c funds withdray owed on this ref ncial Agent at 1-4 I in the processi le payment. I har ctronic funds wit	wal (direct debit) turn, and the 888-353-4537 no ng of the electronic ve selected a
	heck one box only	~					11/1 04004
	X Lauthorize SA	CKRIDER	& C	OMPANY INC	SACKRIDER & CO	loventer my PIN	VC. 24004
				ERO firm name	TERRE HAUTE,	IN 47807	do not enter all zeros
_		ncy(ies) regula	ting cha	arities as part of the IRS Fed/S	ave indicated within this return that tate program, I also authorize the afe		
L	return. If I have in	ndicated withi	n this re	The state of the s	I enter my PIN as my signature on the is being filed with a state agency(ies e consent screen.	) regulating cha	
Part	e of officer or person subject	tion and A	uthen	tication		Date	
	EFIN/PIN. Enter your (EFIN) followed by				3518643518 Do not enter all zeros		
submit					2024 electronically filed return indica dernized e-File (MeF) Information for	Authorized IRS	e-file Providers for
ERO's s	signature _Jane	е А. На	dley	, CPA	Date	6/26/2	ひ
			E	RO Must Retain This Fo	orm - See Instructions		

Do Not Submit This Form to the IRS Unless Requested To Do So

23-7008034

(Worksheet)

# Hollie & Anna Oakley Foundation, Inc. 23-70 Estimated Tax on Unrelated Business Taxable **Income for Tax-Exempt Organizations**

(and on Investment Income for Private Foundations) Form 990-PF ► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax y	ear				1	
2	Tax on the amount on line 1					2	
3	Alternative minimum tax for trusts					3	
4	Total. Add lines 2 and 3					4	
5	Estimated tax credits					5	
6	Subtract line 5 from line 4					6	
7	Other taxes					7	
8	Total. Add lines 6 and 7	8					
9	Credit for federal tax paid on fuels		9				
10a	Subtract line 9 from line 8. Note: If less than \$500, the	-		1 1			
	estimated tax payments  Enter the tax shown on the 2024 return. Caution: If			10a			
D	zero or the tax year was for less than 12 months, skip th	nis line					
				10b	10,048.	1	
C	2025 Estimated Tax. Enter the smaller of line 10a or lin				the amount		
	from line 10a on line 10c			Adjust	ed To	10c	10,080.
			(a)	(b)	(c)		(d)
11	Installment due dates	11	05/15/25	06/16/25	09/15/2	5	12/15/25
12	Installments. Enter 25% of line 10c in						
	columns (a) through (d)	12	2,520.	2,520.	2,5	20.	2,520.
13	2024 Overpayment	13	2,520.	2,520.		32.	
14	Payment due (Subtract line 13 from line 12)	14			2,4	88.	2,520.
							Form <b>990-W</b>

10,080. Estimated Tax Overpayment Applied 5,072. Amount Due 5,008.

#### Form **990-PF**

## Extended to November 17, 2025 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 wave its gov/Form9000E for instructions and the latest information.

OMB No. 1545-0047
2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2024 or tax year beginning and ending Name of foundation A Employer identification number Hollie & Anna Oakley Foundation, Inc. 23-7008034 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 120 S Fruitridge Ave 812-232-4437 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Terre Haute, IN 47803-1644 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: 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 I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 14,827,487. (Part I, column (d), must be on cash basis.) \$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) (d) Disbursements for charitable purposes (a) Revenue and expenses per books (b) Net investment (c) Adjusted net income income (cash basis only) N/A Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 285,290. 285,290. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 485.219. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 3,312,648. 485,219 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 770,509. 770,509. 12 Total. Add lines 1 through 11 160.331 99,039. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 67. 0, 16a Legal fees Stmt 1 b Accounting fees Stmt 2 6,820. 0. 0. c Other professional fees Stmt 3 57,878. 47,510. 17 Interest 6,370. Taxes Stmt 4 19,147. 140. 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 105,409. 682,150. 244,243. 47,650. expenses. Add lines 13 through 23 682,150. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 47,650 926,393. 787,559. Add lines 24 and 25 27 Subtract line 26 from line 12: -155,884 a Excess of revenue over expenses and disbursements 722,859. b Net investment income (if negative, enter -0-)

N/A

F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
	Na sanita il	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	110,565.	95,515.	95,515.
	1	Savings and temporary cash investments	171,678.	115,972.	
	1	Accounts receivable		and related to the first the same of the process of	
	"		Progressia de la company de	respectively of the first series proceedings of	
	١.	Less: allowance for doubtful accounts			
		Pledges receivable			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	l	Less: allowance for doubtful accounts			
R	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
Ą		Investments - U.S. and state government obligations Stmt 5	178,720.	82,677.	75,740.
		Investments - corporate stock Stmt 6	5,357,181.		
		Investments - corporate bonds Stmt 7	91,411.	346,759.	421,792.
		Investments - land, buildings, and equipment: basis			
	''		#45571 46-41 <del>4:143337#4503</del> #41456 1911914	::::::::::::::::::::::::::::::::::::::	partemanan da manangan da m
	140	Less accumulated depreciation			
		Investments - mortgage loans	1 272 057	1,440,867.	1 0/0 000
		Investments - other Stmt 8	1,273,957.	Control of the state of the sta	
		Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	I	Other assets (describe)			
	1	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	7,183,512.	7,027,730.	14,827,487.
	17	Accounts payable and accrued expenses			etablish yezhoù a distrib
	18	Grants payable			
Ø	19	Deferred revenue			
III	20	Loans from officers, directors, trustees, and other disqualified persons			TELEVILLE CONTROL OF THE PERSON OF THE PERSO
Liabilities	21	Mortgages and other notes payable			
	22	Other liabilities (describe Statement 9_)	329.	431.	
	23	Total liabilities (add lines 17 through 22)	329.	431.	
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			Of the control of the
ည	24	Net assets without donor restrictions			
alar		Net assets with donor restrictions			
or Fund Balance		Foundations that do not follow FASB ASC 958, check here			
Š		and complete lines 26 through 30.			
F		Capital stock, trust principal, or current funds	13,218,649.	13,703,769.	
		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SSe		Retained earnings, accumulated income, endowment, or other funds	-6,035,466.	-6,676,470.	
Net Assets		Total net assets or fund balances	7,183,183.	7,027,299.	
ž					
	30	Total liabilities and net assets/fund balances	7,183,512.	7,027,730.	
P	art I	Analysis of Changes in Net Assets or Fund Ba	alances		
				<del></del>	
		net assets or fund balances at beginning of year - Part II, column (a), line			7 100 100
	•				7,183,183.
		amount from Part I, line 27a			-155,884.
		increases not included in line 2 (itemize)			0.
4	Add li	ines 1, 2, and 3			7,027,299.
		asses not included in line 2 (itemize)			0.
6_	<u> Fotal</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	7,027,299.
					Form <b>990-PF</b> (2024)

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 2025 estimated tax

10

11

5,072.

5,072

L. Acc	THE TARE OLD THE THE TOTAL THE TARE THE			
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	4.44		A
	distributed by the foundation in connection with the activities.	885	des e	Cana
	Did the foundation file Form 1120-POL for this year?	1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ O . (2) On foundation managers. \$ O .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$O.	15474		(5)
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.	10.5	Alvaso Z	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		i	400
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	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?	4b		
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.	الباقية		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		2 il. 3	
	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	23.795		
	remain in the governing instrument?	6	X	İ
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 XIV	7	X	
		1.541		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		4	140 Oct.
	IN			a.c
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	ellor.	y (+0)	
	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 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of Julie Heck  Telephone no. (812)		<u>443'</u>	<u>7</u>
	Located at 120 South Fruitridge Avenue, Terre Haute, IN ZIP+4 4	<u> 7803</u>		
15	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	N	/A	
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country		SLACTE	i Mili
	F	QQf	1_06	100041

Pε	art VI-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.	10000	Yes	No
18	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?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(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)?	1a(5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		BET Y	
	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.)	1a(6)		X
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	43.4		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	. 1b		
C	Organizations relying on a current notice regarding disaster assistance, check here		4	
d	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 2024?	1d		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			t from 1
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2024?	2a		X
	If "Yes," list the years,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		2	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	75.78		
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	7517116		134.4
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	100 Z		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	121	er Eur	
	Schedule C, to determine if the foundation had excess business holdings in 2024.)  N/A	. 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a	nan si na ma	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	3.36		PHONE TOUGHER
	had not been removed from jeopardy before the first day of the tax year beginning in 2024?	4b		X

Pair	ιVI	- <b>B</b>	Statements Regarding Activities for Which F	orm 4720 May Be R	equired (continu	ued)			
5a [	urin	g the y	year, did the foundation pay or incur any amount to:					Yes	
(	1) (	Carry o	n propaganda, or otherwise attempt to influence legislation (section	4945(e))?			5a(1)		X
(	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
	a	ny vot	er registration drive?				5a(2)		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?									X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section							- 10		
4945(d)(4)(A)? See instructions									X
(	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for								10.50
		•					5a(5)	E65715375-7	X
	_		er is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	· · · · · · · · · · · · · · · · · · ·	_		が御	Ыф.;	
			1945 or in a current notice regarding disaster assistance? See instru				5b	50 of 120	X
			ns relying on a current notice regarding disaster assistance, check h						
			er is "Yes" to question 5a(4), does the foundation claim exemption from			/ -	- 1.525	deligika;	Call St
			responsibility for the grant?			N/A	5d_	dest negation	Transfertació
		-	ch the statement required by Regulations section 53.4945-5(d).						
			dation, during the year, receive any funds, directly or indirectly, to p	• •			44.312		32
a	pers	sonal b	enefit contract?				6a	┝	X
			dation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?			6b	5403741.7	X
			p, file Form 8870.				- 110 m	Sib.	a Table
	-		during the tax year, was the foundation a party to a prohibited tax sl	********			7a		X
			the foundation receive any proceeds or have any net income attribut			₩/.₩	7b	est e	14.41.38
			ation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or			(1935)		X
Pari			chute payment(s) during the year? Information About Officers, Directors, Truste	as Foundation Mar	sagere Highly		8	L	Λ
	diada	Sec. 1	Paid Employees, and Contractors	es, roundation Mai	iagers, riiginy				
1 Lis	t all	offic	ers, directors, trustees, and foundation managers and th	eir compensation.					
				(b) Title, and average	(c) Compensation	(d) Contributions t employee benefit pla and deferred	0	(e) Exp	ense
			(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	"s a	ccount, allowai	other
	-			to position	Cinci 0 /	Compensation	+-		
		-							
See	2 2	Stat	tement 10		160,331.	0			0.
		-							
									_
2 Co	mp	ensat	ion of five highest-paid employees (other than those incl	uded on line 1). If none, (	enter "NONE."				
	1-	A Mam	e and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions t employee benefit pla and deferred	ns	(e) Exp ccount,	ense other
	(a	ı, ıvallı	e and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation		allowa	nces
		NO	NE						
							$\bot$		
Γotal	пит	ber of	other employees paid over \$50,000						0

Form 990-PF (2024) Hollie & Anna Oakley Foundation,		3-7008034 Page 7
Part VII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	_	
T. A. Laurenhauer de Abras anni de Co. 000 fearanda aireann aireann ann an Aireann an Aireann ann an Aireann an Airean		0
Total number of others receiving over \$50,000 for professional services  Part VIII-A Summary of Direct Charitable Activities		<u>U</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	tical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod	uced, etc.	Expenses
1 N/A		
2		
<del></del>		···
3		<u> </u>
<u> </u>		
		<del>-</del>
	<del></del>	_
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1N/A	-	
2		
All ables are unlabed in real-monte. One instructions		
All other program-related investments. See instructions.		
3		$\dashv$
<del></del>		$\dashv$
	<del></del>	7
Total. Add lines 1 through 3		0.

Form **990-PF** (2024)

P	art IX Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	34.6	
а	Average monthly fair market value of securities	1a	14,129,176.
	Average of monthly cash balances	1b	310,968.
	Fair market value of all other assets (see instructions)	1c	
d		1d	14,440,144.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) <u>1e 0.</u>		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	14,440,144.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	216,602.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	14,223,542.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	711,177.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations, check here and do not complete this part.)	and certain	
1	Minimum investment return from Part IX, line 6	1	711,177.
2a	Tax on investment income for 2024 from Part V, line 5	#\$	<u>-                                    </u>
b		-10	
C	A 4 4 11	2c	10,048.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	701,129.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	701,129.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	701,129.
P	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	787,559.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	787,559.

## Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	( <b>d)</b> 2024
Distributable amount for 2024 from Part X, line 7				701,129.
2 Undistributed income, if any, as of the end of 2024:				<b>建筑全线的</b> 医基础
a Enter amount for 2023 only			160,640.	**方量传数**基件数
<b>b</b> Total for prior years:		0.		
Excess distributions carryover, if any, to 2024:				
a From 2019				
<b>b</b> From 2020				
<b>c</b> From 2021				
<b>d</b> From 2022				
e From 2023				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2024 from				
Part XI, line 4: \$ 787,559.				
a Applied to 2023, but not more than line 2a			160,640.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			505 010
<b>d</b> Applied to 2024 distributable amount				626,919.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2023. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2024. Subtract				
lines 4d and 5 from line 1. This amount must				Printed also also Mills and
be distributed in 2025			2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	74,210.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2019	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2025.	0.			
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9: a Excess from 2020				
b Excess from 2021				
c Excess from 2022				
d Excess from 2023				
e Excess from 2024				

Form 990-PF (2024) Hollie	& Anna Oakl	ey Foundation	on, Inc.	23-70	08034 Page 10
Part XIII Private Operating F	oundations (see ins	structions and Part VI-	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2024, enter the date of t	he ruling			
<b>b</b> Check box to indicate whether the found				4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2024	(b) 2023	(c) 2022	(d) 2021	(e) Total
investment return from Part IX for					
each year listed					
<b>b</b> 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,		<del></del>			
line 4, for each year listed					
d Amounts included in line 2c not					<del></del>
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 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)		<del></del>			
b "Endowment" alternative test - enter 2/3 of minimum investment return				1	
shown in Part IX, 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 XIV Supplementary Info	rmation (Complet	te this part only if	the foundation	on had \$5,000 or mor	e in assets
at any time during t	he year-see instru	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh	o have contributed more t	han 2% of the total contri	butions received by	the foundation before the close	of any tax
year (but only if they have contributed n			•		•
None					
b List any managers of the foundation wh			or an equally large po	ortion of the ownership of a par	tnership or
other entity) of which the foundation has	s a 10% or greater interes	i.			
None					
2 Information Regarding Contributi		• • • •	•		
				does not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num!	per or email address of the	e person to whom applica	itions should be addi	ressed:	
a a					
See Statement 11		<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
<b>b</b> The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
c Any submission deadlines:					
A Annual desiration of Barbara and Barbara	auch on his na	Jarona aberitable field i	kindo of impalaces	or other factors	
d Any restrictions or limitations on award	s, such as by geographica	ii ai eas, chantable fields, l	KINUS OI INSULUTIONS,	UI ULIEI IACIOIS.	

Total

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	/ (e)	
•	(a) Business	(b)	(c)	(d)	Related or exempt	
1 Program service revenue:	code	Amount	sion code	Amount	function income	
a						
b						
C			_			
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	285,290.		
5 Net rental income or (loss) from real estate:	<b>"我说,我说</b>	Haraman da karana da	<b>中内国的</b> 企员			
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory					485,219	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)			0.	285,290.	485,219	
13 Total. Add line 12, columns (b), (d), and (e)				13	770,509	
(See worksheet in line 13 instructions to verify calculations.)						
Part XV-B Relationship of Activities to	the Accomp	olishment of I	Exempt Pu	rposes		
Line No. Explain below how each activity for which incom				importantly to the accomp	lishment of	
the foundation's exempt purposes (other than b						

	. I all the state of the state										
	the foundation's exempt purposes (other than by providing funds for such purposes).										
4	All items of income further the Foundation's ability to provide gr										grants
4					ng organ						
8	A11	items	of	income	further	the	Foundation's	ability	to	provide	grants
8	to	variou	s qu	ıalifyiı	ng organ	izat:	ions.				
											-
											·

Part X		egarding Transfer	kley Foundation, s to and Transactions and	Inc. 23-700 I Relationships With Nonchar		Pa	age 13
(othe	r than section 501(c)(3) orga	nizations) or in section 52	e following with any other organization 7, relating to political organizations?	described in section 501(c)		Yes	No
	sfers from the reporting found		• •		4-/4)		х
							X
	transactions:	••••••••••••••••		, , , , , , , , , , , , , , , , , , , ,	14(2)	. Y	
(1)	Sales of assets to a noncharita	able exempt organization			1b(1)		Х
(2)	Purchases of assets from a no	oncharitable exempt organi	zation		1b(2)		X
							X
							X
(5) l	oans or loan guarantees				1b(5)		X
	Performance of services or me						X
				ays show the fair market value of the goods			X
	nn (d) the value of the goods, (b) Amount involved	other assets, or services r		in any transaction or sharing arrangement,  (d) Description of transfers, transactions, an		angemer	nts
<del></del>		<del></del>	N/A	,,,		<del></del>	
						_	
					<del></del> :		
2a Is the	foundation directly or indirec	tly affiliated with, or relate	d to, one or more tax-exempt organiza	tions described			
	ction 501(c) (other than sections," complete the following sch	edule.			Yes	<u>X</u>	☐ No
	(a) Name of or	ganization	(b) Type of organization	(c) Description of relation	nship		
	N/A						
	I Index panalties of perium. I declar	a that I have examined this retur	n. including accompanying schedules and sta	tomonto, and to the best of my knowledge			

Sign Here	and t	pelief, it is true, correct, and complete. Declaration of pr	eparer (other than taxpayer) is based on all inform	Secretal		May the IRS discuss this return with the preparer shown below? See instr.  X Yes No
- 1	Sign	nature of officer or trustee	Date	Title		
		Preparer's name	Preparer's signature	Date	Check if	PTIN
Paid		Jane A. Hadley, CPA	Jane A. Hadley, C	6/26/26		P00421086
Prepa Use C		Firm's name SACKRIDER & C	OMPANY INC		Firm's EIN 35	-1327464
		Firm's address 1925 Wabash Terre Haute,			Phone no. 81	2-232-9492
						200 DE

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
deals on Wheels	None		Unrestriced	
630 Ohio Street				
Terre Haute, IN 47807				30,000
Optimist International Foundation	None		Cloth-A-Child	
4494 Lindell Blvd				
Saint Louis, MO 63108				25,000
Providence Food Pantry	None		Unrestricted	
707 National Ave				
West Terre Haute, IN 47885				5,000
Purdue Extension Parke County	None		Life Lessons 101	
1472 N US Hwy 41				
Rockville, IN 47872		·		8,650
Streator Township High School	None		Scholarship	
600 N Jefferson Street				
Streator, IL 61634				10,000
Swope Art Museum	None		Renovations	
25 South 7th Street				
Ferre Haute, IN 47807				100,000
Terre Haute Police Department	None		Ballistic Vests	
222 S 7th Street Cerre Haute, IN 47807				26,000
erre nauce, in 47007	_			20,000
Perre Haute Symphony Orchestra	None		Unrestricted	
25 N 6th St Cerre Haute, IN 47807				15,000
10110 11000				15,000
Phrive West Central	None		Replacement Vehicles	
2800 Poplar Street Ferre Haute, IN 47803			Fund	50,000
				20,000
Jnion Hospital Foundation 1606 N. 7th Street	None		Unrestricted	
Perre Haute, IN 47807				2,500
Total from continuation sheets				387,150

Hollie & Anna Oakley Foundation, Inc. 23-7008034

3 Grants and Contributions Paid During the			<u>.</u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Allouit
University of Central Florida	None		Endowed Scholarship	
12424 Research Pkwy Drlando, FL 32826			-	25,00
Wabash River Development &	None		Master Riverfront Dev	
Beautification, Inc. 200 S 8th Street			Plan	
Terre Haute, IN 47807				25,00
14th and Chestnut Community Center	None		Bathroom Renovation	
1403 Chestnut Street	None		Bachtoom Konovacion	
Terre Haute, IN 47807				15,00
Happiness Bag Inc	None		Expansion & Renovation	
3833 Union Road Terre Haute, IN 47802				50,00
				<del></del>
				<del></del>
<del></del>		-		

Form 990-PF	Legal	Fees	S	tatement 1
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal	67.	0.		0.
To Fm 990-PF, Pg 1, ln 16a	67.	0.		0.
Form 990-PF	Accounti	ng Fees	S	tatement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fees	6,820.	0.		0.
To Form 990-PF, Pg 1, ln 16b	6,820.	0.		0.
Form 990-PF (	Other Profes	sional Fees	S	tatement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Investment Management Fees Service Charges Subscriptions Information Services Insurance	46,564. 946. 8,510. 325. 1,533.	46,564. 946. 0. 0.		0. 0. 0. 0.
To Form 990-PF, Pg 1, ln 16c	57,878.	47,510.		0.

Form 990-PF	Taxes		Statement 4		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Medicare Tax FICA Tax	1,490. 6,370.	0.		0. 6,370.	
Foreign Tax on Investments Federal Excise Tax	140. 3,027.	140.		0.	
Estimated Tax	8,120.	0.		0.	
To Form 990-PF, Pg 1, ln 18	19,147.	140.		6,370.	

Form 990-PF U.S. and State/C:	ity Gov	ernment	Obligations	Statement 5
Description	U.S. Gov't	Other Gov't	Book Value	Fair Market Value
U.S and state government obligations - detail available upon request	<u>x</u>		82,677.	75,740.
Total U.S. Government Obligations			82,677.	75,740.
Total State and Municipal Government	t Oblig	ations		
Total to Form 990-PF, Part II, line	10a	=	82,677.	75,740.
Form 990-PF Corp	porate	Stock		Statement 6
Description			Book Value	Fair Market Value
Corporate stock – detail available u	upon re	quest	4,945,940.	12,269,579.
Total to Form 990-PF, Part II, line	10b	-	4,945,940.	12,269,579.

Form 990-PF Corporate Bonds		Statement 7
Description	Book Value	Fair Market Value
Corporate bonds - detail available upon request	346,759.	421,792.
Total to Form 990-PF, Part II, line 10c	346,759.	421,792.

Form 990-PF C	ther Investments		Statement 8
Description	Valuation Method	Book Value	Fair Market Value
Other investments - detail available upon request	COST	1,440,867.	1,848,889.
Total to Form 990-PF, Part II, 1	ine 13	1,440,867.	1,848,889.

Form 990-PF Other Liabilities			Statement 9
Description		BOY Amount	EOY Amount
State Withholding Payable County Withholding	-	238. 91.	301. 130.
Total to Form 990-PF, Part II,	line 22	329.	431.

	st of Officers, Dir nd Foundation Manag		Statement 1		
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib		
Jennifer Perry 120 S. Fruitridge Terre Haute, IN 47803	Director 1.00	11,914.	0.	0.	
Alice Ann Perry 120 S. Fruitridge Terre Haute, IN 47803	President 10.00	42,775.	0.	0.	
Eston L. Perry 120 S. Fruitridge Terre Haute, IN 47803	V.Pres/Treas. 20.00	37,395.	0.	0.	
Julie Heck 120 S. Fruitridge Terre Haute, IN 47803	Secretary 20.00	30,458.	0.	0.	
Jeffrey J. Perry 120 S. Fruitridge Terre Haute, IN 47803	Asst V-Presiden 20.00	22,939.	0.	0.	
Travis Norris 120 S. Fruitridge Terre Haute, IN 47803	Director 1.00	4,950.	0.	0.	
Jennifer Norris 120 S. Fruitridge Terre Haute, IN 47803	Director 1.00	4,950.	0.	0.	
Wesley Heck 120 S. Fruitridge Terre Haute, IN 47803	Director 1.00	4,950.	0.	0.	
Totals included on 990-PF, Page	6, Part VII =	160,331.	0.	0.	

Form 990-PF

Grant Application Submission Information Part XIV, Lines 2a through 2d

Statement 11

#### Name and Address of Person to Whom Applications Should be Submitted

Hollie and Anna Oakley Foundation, Inc. 120 S Fruitridge Ave Terre Haute, IN 47803

#### Telephone Number

812-232-4437

#### Form and Content of Applications

Letter requesting grant setting forth reasons for need and purpose for which it will be used.

#### Any Submission Deadlines

Quarterly - April 10, July 10, October 10 & December 10.

#### Restrictions and Limitations on Awards

All grants are given to tax exempt entities as defined in section 501 (c) 3 of the Internal Revenue code.

#### Form **8868**

(Rev. January 2025)

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions. All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) **Print** Hollie & Anna Oakley Foundation, Inc. 23-7008034 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 120 S Fruitridge Ave return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 47803-1644 Terre Haute, IN Enter the Return Code for the return that this application is for (file a separate application for each return) 04 **Application Is For** Return Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) Form 8870 12 05 Form 5330 (individual) Form 990-T (trust other than above) 06 13 Form 990-T (corporation) 07 Form 5330 (other than individual) 14 Form 1041-A 80 Form 990-T (governmental entities) 15 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of Julie Heck 120 South Fruitridge Avenue - Terre Haute, IN 47803 Telephone No. (812)232-4437 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box ... and attach a list with the names and TINs of all members the extension is for. box I request an automatic 6-month extension of time until November 15, 20, 25, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 24 or \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_ tax year beginning \_\_\_\_ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 10,048. any nonrefundable credits. See instructions. За b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 8,120. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 1,928. using EFTPS (Electronic Federal Tax Payment System). See instructions.