

EXTENDED TO NOVEMBER 16, 2020

Form 990-PF

Return of Private Foundation

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning

, and ending

Name of foundation MASONIC CHARITY FOUNDATION OF OKLAHOMA		A Employer identification number 73-6097262
Number and street (or P.O. box number if mail is not delivered to street address) P.O. BOX 2406	Room/suite	B Telephone number 405-348-7500
City or town, state or province, country, and ZIP or foreign postal code EDMOND, OK 73083		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 103,552,788.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	221,562.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,066.	1,066.		STATEMENT 1
	4 Dividends and interest from securities	2,878,107.	2,878,107.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,506,139.			
	b Gross sales price for all assets on line 6a	50,749,518.			
	7 Capital gain net income (from Part IV, line 2)		1,506,139.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	1,233,944.	1,233,944.		STATEMENT 3	
12 Total. Add lines 1 through 11	5,840,818.	5,619,256.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	175,541.	17,554.		157,987.
	14 Other employee salaries and wages	140,197.	0.		140,197.
	15 Pension plans, employee benefits	110,964.	0.		110,964.
	16a Legal fees STMT 4	36,218.	0.		36,218.
	b Accounting fees STMT 5	35,485.	0.		35,485.
	c Other professional fees				
	17 Interest				
	18 Taxes STMT 6	101,151.	4,549.		21,598.
	19 Depreciation and depletion	25,569.	25,569.		
	20 Occupancy				
	21 Travel, conferences, and meetings	3,013.	0.		3,013.
	22 Printing and publications	50,937.	0.		50,937.
	23 Other expenses STMT 7	476,868.	365,606.		111,262.
	24 Total operating and administrative expenses. Add lines 13 through 23	1,155,943.	413,278.		667,661.
	25 Contributions, gifts, grants paid	3,322,871.			3,322,871.
26 Total expenses and disbursements. Add lines 24 and 25	4,478,814.	413,278.		3,990,532.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,362,004.				
b Net investment income (if negative, enter -0-)		5,205,978.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	1,749,126.	3,038,504.	3,038,504.
	2 Savings and temporary cash investments	284,486.	392,613.	392,613.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations STMT 8	27,716,209.	29,144,824.	29,144,824.
	b Investments - corporate stock STMT 9	53,304,648.	63,486,875.	63,486,875.
	c Investments - corporate bonds			
	Liabilities	11 Investments - land, buildings, and equipment: basis ▶		
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 10		7,525,939.	7,176,251.	7,176,251.
14 Land, buildings, and equipment: basis ▶ 664,620.				
Less: accumulated depreciation STMT 11 ▶ 350,918.		340,739.	313,702.	313,702.
15 Other assets (describe ▶ STATEMENT 12)		19.	19.	19.
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		90,921,166.	103,552,788.	103,552,788.
17 Accounts payable and accrued expenses				
18 Grants payable				
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	75,199,697.	85,919,990.	
	25 Net assets with donor restrictions	15,721,469.	17,632,798.	
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances	90,921,166.	103,552,788.	
30 Total liabilities and net assets/fund balances	90,921,166.	103,552,788.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	90,921,166.
2 Enter amount from Part I, line 27a	2	1,362,004.
3 Other increases not included in line 2 (itemize) ▶ NET UNREALIZED GAIN/LOSS	3	11,272,833.
4 Add lines 1, 2, and 3	4	103,556,003.
5 Decreases not included in line 2 (itemize) ▶ PY ADJUSTMENTS TO GENERAL FUND	5	3,215.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	103,552,788.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES		P		
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a 50,749,518.	.	49,243,379.	1,506,139.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			1,506,139.	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	1,506,139.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	7,028,946.	104,168,904.	.067476
2017	3,977,467.	105,034,775.	.037868
2016	4,510,375.	91,597,114.	.049241
2015	4,550,558.	92,621,554.	.049131
2014	4,566,346.	92,096,884.	.049582
2 Total of line 1, column (d)			2 .253298
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			3 .050660
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4 97,831,879.
5 Multiply line 4 by line 3			5 4,956,163.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 52,060.
7 Add lines 5 and 6			7 5,008,223.
8 Enter qualifying distributions from Part XII, line 4			8 3,990,532.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	104,120.
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	0.
3 Add lines 1 and 2		3	104,120.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	104,120.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	127,670.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	127,670.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	23,550.	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax <input type="checkbox"/> 23,550. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	X
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
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	N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	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	X
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> OK		
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) of each state as required by General Instruction G? If "No," attach explanation	8b	X
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	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

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
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		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address WWW.MCFOK.ORG		
14 The books are in care of JOHN L LOGAN Telephone no. 405-348-7500		
Located at PO BOX 2406, EDMOND, OK ZIP+4 73083		
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 15	N/A	
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

Part 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
1a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any 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	N/A	
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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 2019?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions ☐ N/A

Organizations relying on a current notice regarding disaster assistance, check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d). ☐ N/A

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 13		175,541.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JULIE TOBEN PO BOX 2406, EDMOND, OK 73083	CFO 40.00	52,533.	0.	0.

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

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*
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
SELLWOOD CONSULTING - 6650 S REDWOOD LANDE STE 370, PORTLAND, OR 97224	INVESTMENT CONSULTING	88,585.
UBS TRUMBULL - 10 STATE HOUSE SQUARE 15TH FLOOR, HARTFORD, CT 06103	FINANCIAL/INVESTMENT ADVISORY	75,562.
BECKER CAPITAL MANAGEMENT 1211 SW 5TH AVE, STE 2185, PORTLAND, OR 97204	FINANCIAL/INVESTMENT ADVISORY	51,369.

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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

Part IX-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

1	N/A	
2		
3	All other program-related investments. See instructions.	

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	96,386,290.
b	Average of monthly cash balances	1b	2,215,278.
c	Fair market value of all other assets	1c	720,137.
d	Total (add lines 1a, b, and c)	1d	99,321,705.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	99,321,705.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,489,826.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	97,831,879.
6	Minimum investment return. Enter 5% of line 5	6	4,891,594.

Part 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 part.)

1	Minimum investment return from Part X, line 6	1	4,891,594.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	104,120.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	104,120.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,787,474.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,787,474.
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 XIII, line 1	7	4,787,474.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,990,532.
b	Program-related investments - total from Part IX-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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,990,532.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,990,532.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				4,787,474.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			246,493.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 3,990,532.				
a Applied to 2018, but not more than line 2a			246,493.	
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.			
d Applied to 2019 distributable amount				3,744,039.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (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:	0.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
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 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				1,043,435.
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 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4, for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities.

3 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)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed

c "Support" alternative test - enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Tax year

(a) 2019

(b) 2018

Prior 3 years

(c) 2017

(d) 2016

(e) Total

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 14

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CAVETT KIDS FOUNDATION 3801 N CLASSEN BLVD STE 300 OKLAHOMA CITY, OK 73118		PUBLIC CHARITY	SERVE CHILDREN WITH VARIOUS LIFE-THREATENING AND CHRONIC ILLNESSES	10,000.
CHILDREN'S CENTER 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008		PUBLIC CHARITY	MEDICAL EQUIPMENT FOR CHILDREN'S CENTER	25,000.
COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106		PUBLIC CHARITY	FEED THE HUNGRY OF EASTERN OKLAHOMA	7,000.
DEMOLAY PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	49,502.
GWMNM 101 CALLAHAN DRIVE ALEXANDRIA, VA 22301		PUBLIC CHARITY	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL MUSEUM	18,504.
Total	SEE CONTINUATION SHEET(S) ▶ 3a			3,322,871.
b Approved for future payment				
NONE				
Total	▶ 3b			0.

Part VII **Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
|---|--|-----|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| (1) Cash | | | X |
| (2) Other assets | | | X |
| b Other transactions: | | | |
| (1) Sales of assets to a noncharitable exempt organization | | | X |
| (2) Purchases of assets from a noncharitable exempt organization | | | X |
| (3) Rental of facilities, equipment, or other assets | | | X |
| (4) Reimbursement arrangements | | | X |
| (5) Loans or loan guarantees | | | X |
| (6) Performance of services or membership or fundraising solicitations | | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | | | X |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |


[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 601(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b. If "Yes," complete the following schedule.


(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here  **10/13/200** **EXECUTIVE DIRECTOR**

Signature of officer or trustee Date Title

Has the IRS checked this return with the preparer shown below? See instructions. ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name JOSH MULLINS	Preparer's signature 	Date 10-9-2020	Check <input type="checkbox"/> If self-employed	PTIN P01602326
	Firm's name ▶ ARLEDGE & ASSOCIATES, P.C.			Firm's EIN ▶ 73-1185089	
	Firm's address ▶ 309 N. BRYANT AVENUE EDMOND, OK 73034			Phone no. 405-348-0615	

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HEARTS FOR HEARING 11500 N PORTLAND AVE OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	CHILDREN'S AUDIOLOGY CARE	25,000.
JOBS DAUGHTERS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	10,000.
MASONIC CHARITY FDN MATCHING FUNDS PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	1,659,880.
MASONIC CHARITY FDN PUBLIC CHARITY PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	47,358.
MASONIC CHARITY FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	72 RECIPIENTS PLUS EXPENSES	233,000.
MASONIC CHARITY FND SENIOR ESSAY CONTEST PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	27 RECIPIENTS PLUS EXPENSES	25,049.
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 20910-4785		PUBLIC CHARITY	SUPPORT OF MASONIC EDUCATION TO PUBL	1,500.
MASONIC SERVICE ASSN 8125 FENTON STREET SILVER SPRING, MD 20910-4785		PUBLIC CHARITY	SUPPORT FOR DISASTER RELIEF, ETC.	5,110.
MCF'S STUDENT AND TEACHER OF TODAY PROGRAMS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	2,272.
OK ALLIANCE FOR ARTS ED PO BOX 1275 JENKS, OK 74037-1275		PUBLIC CHARITY	DOE ARTS OF EXCELLENCE CEREMONY	8,200.
Total from continuation sheets				3,212,865.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OK ASSN AREAS AGCY AGING 719 WEST MAINE ENID, OK 73701-5413		PUBLIC CHARITY	DIRECT SERVICES TO THE ELDERLY	682,866.
OKLAHOMA STATE SUPERINTENDENT'S TEACHER OF THE YEAR PROGRAM 2500 N LINCOLN BLVD OKLAHOMA CITY, OK 73105		HIGHER ED FDN	17 RECIPIENTS PLUS EXPENSES	23,700.
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	52,500.
PM GRANTS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	108,004.
REGIONAL FOOD BANK 3355 S. PURDUE OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	53,490.
VIZAVANCE 6 NE 63RD OKLAHOMA CITY, OK 73105		PUBLIC CHARITY	VISION SCREENING CHILDREN IN PUB SCH	240,000.
YMCA 7130 AIR CARGO RD OKLAHOMA CITY, OK 73159		PUBLIC CHARITY	MILITARY WELCOME CENTER	10,000.
JUNIOR ACHIEVEMENT OF OKLAHOMA 211 N ROBINSON AVE #201 OKLAHOMA CITY, OK 73102		PUBLIC CHARITY	GRANT FOR RURAL SCHOOL PROGRAM	20,000.
CHARITY FDN PUBLIC ED PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	4,936.
Total from continuation sheets				

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

MASONIC CHARITY FOUNDATION OF OKLAHOMA

Employer identification number

73-6097262

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
MASONIC CHARITY FOUNDATION OF OKLAHOMA	73-6097262

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERTRUDE MOORE TESTAMENTARY TRUST PO BOX 5555 MCALLEN, TX 78502-5555	\$ 24,410.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ROBERT G. MORELAND REVOCABLE TRUST 400 MARKET STREET CANTON, OH 44702	\$ 10,290.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	CLYDE R. EVANS ESTATE PO BOX 21708 OKLAHOMA CITY, OK 73156	\$ 62,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	THROCKMORTON CHARITABLE TRUST PO BOX 2406 EDMOND, OK 73083	\$ 5,756.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	ARTHUR JOHN EASTWOOD TRUST 3801 VIA DE LA URRACA GREEN VALLEY, AZ 85614	\$ 41,839.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	ESTATE OF WILLIAM AND MARILYN CAMMACK PO BOX 2406 EDMOND, OK 73083	\$ 33,398.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
MASONIC CHARITY FOUNDATION OF OKLAHOMA	73-6097262

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	EDWARD GILLIS JOHNSON 1993 REVOCABLE TRUST PO BOX 1569 EDMOND, OK 73083-3735	\$ 17,244.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

MASONIC CHARITY FOUNDATION OF OKLAHOMA**73-6097262****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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization	Employer identification number
MASONIC CHARITY FOUNDATION OF OKLAHOMA	73-6097262

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) ▶ \$
Use 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		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
NOW INTEREST	1,066.	1,066.	
TOTAL TO PART I, LINE 3	1,066.	1,066.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	1,777,707.	0.	1,777,707.	1,777,707.	
INVESTMENT INTEREST	1,100,400.	0.	1,100,400.	1,100,400.	
TO PART I, LINE 4	2,878,107.	0.	2,878,107.	2,878,107.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTIES	1,221,944.	1,221,944.	
FIDUCIARY FEE INCOME	259.	259.	
INSURANCE PROCEEDS	11,741.	11,741.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,233,944.	1,233,944.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL AND PROFESSIONAL EXPENSE	36,218.	0.		36,218.
TO FM 990-PF, PG 1, LN 16A	36,218.	0.		36,218.

FORM 990-PF

ACCOUNTING FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING EXPENSE	35,485.	0.		35,485.
TO FORM 990-PF, PG 1, LN 16B	35,485.	0.		35,485.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	3,247.	3,247.		0.
MINERAL TAXES	997.	997.		0.
REAL ESTATE TAXES	305.	305.		0.
PAYROLL TAXES	21,598.	0.		21,598.
EXCISE TAX	75,004.	0.		0.
TO FORM 990-PF, PG 1, LN 18	101,151.	4,549.		21,598.

FORM 990-PF

OTHER EXPENSES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSE	453.	0.		453.
BANK CHARGES	1,668.	0.		1,668.
COMPUTER EXPENSE	16,774.	0.		16,774.
INSURANCE	27,040.	0.		27,040.
MANAGEMENT FEE	365,606.	365,606.		0.
MISCELLANEOUS EXPENSES	4,388.	0.		4,388.
OFFICE SUPPLIES	13,351.	0.		13,351.
POSTAGE	6,625.	0.		6,625.
PROPERTY MAINTENANCE	19,249.	0.		19,249.
REPAIRS AND EQUIPMENT	1,793.	0.		1,793.
TELEPHONE	7,652.	0.		7,652.
TRAINING AND MEMBERSHIPS	2,931.	0.		2,931.
UTILITIES	9,338.	0.		9,338.
TO FORM 990-PF, PG 1, LN 23	476,868.	365,606.		111,262.

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS	STATEMENT 8
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DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GNMAS	X		29,131,812.	29,131,812.
US SAVINGS BOND	X		13,012.	13,012.
TOTAL U.S. GOVERNMENT OBLIGATIONS			29,144,824.	29,144,824.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			29,144,824.	29,144,824.

FORM 990-PF	CORPORATE STOCK	STATEMENT 9
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	63,486,875.	63,486,875.
TOTAL TO FORM 990-PF, PART II, LINE 10B	63,486,875.	63,486,875.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT 10
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN LIMITED PARTNERSHIP	COST	7,175,457.	7,175,457.
MINERAL RIGHTS	COST	778.	778.
REAL ESTATE	COST	16.	16.
TOTAL TO FORM 990-PF, PART II, LINE 13		7,176,251.	7,176,251.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 11

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
ACCOUNTING SOFTWARE	6,000.	6,000.	0.
COMPUTER(3)-WORKROOM, HP			
LAPTOP	3,727.	3,727.	0.
SERVER SOFTWARE	540.	540.	0.
BUILDING	359,833.	260,883.	98,950.
PARKING LOT ADDITION	20,987.	20,987.	0.
SERVER	12,024.	12,024.	0.
CARPET/LINOLEUM-NORTHCUTT	13,083.	13,083.	0.
MELODIE PC	1,008.	1,008.	0.
DELL LAPTOP	673.	673.	0.
SIDEWALK, PICNIC PAD	4,332.	1,300.	3,032.
CABLE/ELEC/LED FIXTURE INSTALL	1,793.	228.	1,565.
INTAACT ACCOUNTING SOFTWARE	8,730.	8,730.	0.
PROJECTOR	906.	634.	272.
HVAC UNIT, SOUTH SIDE	7,162.	650.	6,512.
POSTAGE MACHINE	1,826.	1,004.	822.
XEROX C8045H2 COPIER	12,414.	5,173.	7,241.
SAMSUNG REFRIGERATOR	1,228.	492.	736.
LAND	147,457.	0.	147,457.
SPRINKLER SYSTEM REPLACEMENT	2,520.	168.	2,352.
HVAC UNIT, 2 OF 3	7,162.	390.	6,772.
HVAC UNIT, 3 OF 3	8,018.	438.	7,580.
2018 FORD EXPLORER	36,443.	10,935.	25,508.
3 PCS (JOHN/JULIE/ETHEL)	3,974.	1,192.	2,782.
BECKY PC	1,030.	309.	721.
TAG, TAX, & TITLE	1,750.	350.	1,400.
TOTAL TO FM 990-PF, PART II, LN 14	664,620.	350,918.	313,702.

FORM 990-PF OTHER ASSETS STATEMENT 12

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
ENTAILED BEQUESTS	15.	15.	15.
INSURANCE POLICIES	4.	4.	4.
TO FORM 990-PF, PART II, LINE 15	19.	19.	19.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NEIL STITT 710 W. BROADWAY ARDMORE, OK 73401	1ST VICE PRESIDENT 1.00	0.	0.	0.
CHARLES CALLAHAN PO BOX 1254 BLANCHARD, OK 73010	2ND VICE PRESIDENT 1.00	0.	0.	0.
D. RIDGE SMITH PO BOX 851123 YUKON, OK 73085	DIRECTOR 1.00	0.	0.	0.
CHARLES STUCKEY 132 ROADRUNNER DRIVE PONCA CITY, OK 74604	DIRECTOR 1.00	0.	0.	0.
BEDFORD FORREST ROWLAND 1104 CANTERBURY BLVD ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
DAVID ALLEN 3107 MAGNOLIA CT SAND SPRINGS, OK 74063	DIRECTOR 1.00	0.	0.	0.
RANDALL ROGERS 13040 SHIRLEY LANE CHOCTAW, OK 73020	DIRECTOR 1.00	0.	0.	0.
MICHAEL MAXEY 4339 E 58TH PLACE TULSA, OK 74135	DIRECTOR 1.00	0.	0.	0.
JOHN CHURCH 11904 S RANGE RD PERKINS, OK 74059	DIRECTOR 1.00	0.	0.	0.
RONALD CHAMBERS 8301 E LANSING STREET BROKEN ARROW, OK 74014	DIRECTOR 1.00	0.	0.	0.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

JOHN ALLFORD PO BOX 3361 MCALESTER, OK 74502	DIRECTOR 1.00	0.	0.	0.
DAVID RAY 11921 MAPLE VALLEY DRIVE OKLAHOMA CITY, OK 73170	DIRECTOR 1.00	0.	0.	0.
R. KEITH MADDEN 12107 E 69TH ST N OWASSO, OK 74055	DIRECTOR 1.00	0.	0.	0.
JOANN SHEPPARD 4305 HIDDEN HILL ROAD NORMAN, OK 73072	DIRECTOR 1.00	0.	0.	0.
RICHARD ALLISON 2502 WILDWOOD ENID, OK 73703	DIRECTOR 1.00	0.	0.	0.
MATTHEW CARGILL PO BOX 472150 TULSA, OK 74147	DIRECTOR 1.00	0.	0.	0.
JACK PAINTER 19498 E 650 RD HENNESSEY, OK 73742	DIRECTOR 1.00	0.	0.	0.
LANNY SANDER PO BOX 141 SEILING, OK 73663	DIRECTOR 1.00	0.	0.	0.
BOBBY LAWS 309 JACQUA LANE GUTHRIE, OK 73044	DIRECTOR 1.00	0.	0.	0.
JOHN LOGAN 13913 KIRKLAND RIDGE EDMOND, OK 73013	EXECUTIVE DIRECTOR 40.00	175,541.	0.	0.
WILLIAM J. CLOUD PO BOX 651 BLANCHARD, OK 73010	PRESIDENT 1.00	0.	0.	0.
ROBERT DAVIS 411 E NOBLE GUTHRIE, OK 73044	SECRETARY 1.00	0.	0.	0.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

ELWOOD ISAACS
412 SUMMIT WAY
NORMAN, OK 73071

TREASURER
1.00

0. 0. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

175,541. 0. 0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MASONIC CHARITY FOUNDATION OF OKLAHOMA
PO BOX 2406
EDMOND, OK 73083

TELEPHONE NUMBER

405-348-7500

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION MUST BE MADE IN AN APPORVED FORMAT, AND MUST SPECIFY
PURPOSE AND NEED.

ANY SUBMISSION DEADLINES

NO SPECIFIC DEADLINES ARE APPLICABLE

RESTRICTIONS AND LIMITATIONS ON AWARDS

SUPPORT OF CHARITABLE, BENEVOLENT, EDUCATIONAL, AND PHILANTHROPIC
ORGANIZATIONS OR PURPOSES

GENERAL EXPLANATION

STATEMENT 15

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART II LINE 10B - DETAIL TO SUPPORT LINE 10B

EXPLANATION:

SECURITIES DESCRIPTION, TOTAL MARKET VALUE

BORGWARNER INC 81,554
EXTENDED STAY AMERICA INC 116,131
FORD MOTOR CO 106,020
LEGGETT & PLATT INC 80,820
MAGNA INTERNATIONAL INC-CL A 89,115
DANONE - SPONS ADR 120,119
INGREDION INC 141,749
KELLOGG CO 90,600
KROGER CO 143,066
MOLSON COORS BEVERAGE COMPANY 144,183
PROCTER & GAMBLE CO 106,165
JM SMUCKER CO/THE-NEW COMMON 132,245
SPECTRUM BRANDS HOLDINGS INC 9,322
WALMART, INC 140,825
BAKER HUGHES COMPANY 78,043
NOBLE ENERGY INC 187,542
ROYAL DUTCH SHELL PLC-ADR A 150,104
SCHLUMBERGER LTD 71,757
CHUBB LTD 119,858
ALLEGHANY CORP 99,946
ALLSTATE CORP 113,012
AMERICAN INT'L GROUP INC 139,618
BERKSHIRE HATHAWAY INC-CL B 180,068
CITIGROUP INC 199,725
CORPORATE OFFICE PROPERTIES REIT 94,310
GOLDMAN SACHS GROUP INC 142,557
HOWARD HUGHES CORP 191,468
JPMORGAN CHASE & CO 209,797
JEFFERIES FINANCIAL GROUP INC 124,267
PNC FINANCIAL SERVICES GROUP 134,887
US BANCORP 135,181
WELLS FARGO & COMPANY 178,616
WEYERHAEUSER CO REIT 90,902
ASTRAZENECA PLC-SPONS ADR 190,465
GILEAD SCIENCES INC 154,977
JOHNSON & JOHNSON 132,012
MCKESSON CORP 111,348
PFIZER INC 134,387
QUEST DIAGNOSTICS 131,352
TE CONNECTIVITY LTD 80,985
EMBRAER SA-ADR 97,158
FEDEX CORP 66,532
GENERAL DYNAMICS CORP 128,736
IMAX CORP 99,596
RAYTHEON COMPANY 98,883
SIEMENS AG-SPONS ADR 113,810

SOUTHWEST AIRLINES CO 83,669
 APPLE INC COM 149,762
 CIENA CORP 79,617
 CISCO SYSTEMS INC 168,819
 COHERENT INC 91,493
 HP INC 128,027
 INTEL CORP 154,114
 MICROSOFT CORP 197,914
 QUALCOMM INC 118,228
 INTERNATIONAL PAPER CO 109,369
 METHANEX CORP 104,108
 MOSAIC CO 109,823
 NEWMONT CORP USD 1.6 126,005
 AT&T INC 213,963
 DISCOVERY INC 142,388
 MADISON SQUARE GARDEN CO 127,973
 VIACOMCBS INC 138,081
 VODAFONE GROUP PLC 165,465
 PORTLAND GENERAL ELECTRIC CO 186,060
 SOUTHERN CO 87,588

TOTAL BECKER CAPITAL MANAGEMENT 8,366,275

SECURITIES DESCRIPTION, TOTAL MARKET VALUE

RAYONIER INC REIT 590
 DFA GLBL R/E SECURITIES-I #5416 1,591,713
 DFA GLBL R/E SECURITIES-I #5416 195,461
 DFA GLBL R/E SECURITIES-I #5416 121,529
 DODGE & COX INTL STK #1048 5,689,269
 DODGE & COX INTL STK #1048 1,133,286
 DODGE & COX INTL STK #1048 327,715
 JENSEN QUALITY GRWTH-Y #6299 6,610,988
 JENSEN QUALITY GRWTH-Y #6299 1,319,792
 JENSEN QUALITY GRWTH-Y #6299 364,339
 MFS INTL EQ-INST #0403 6,681,428
 MFS INTL EQ-INST #0403 1,318,081
 MFS INTL EQ-INST #0403 373,419
 VANGUARD INSTL INDX-INST #0094 7,412,944
 VANGUARD INSTL INDX-INST #0094 1,320,675
 VANGUARD INSTL INDX-INST #0094 411,117
 BLACKROCK MULTI-ASSET INC-K #1981 3,975,090
 BLACKROCK MULTI-ASSET INC-K #1981 738,569
 BLACKROCK MULTI-ASSET INC-K #1981 224,628
 NATIXIS GATEWAY-N #6102 3,977,564
 NATIXIS GATEWAY-N #6102 737,410
 NATIXIS GATEWAY-N #6102 235,268

TOTAL MUTUAL FUNDS 44,760,873

SECURITIES DESCRIPTION, TOTAL MARKET VALUE

JACK IN THE BOX INC 178,064
 MODINE MANUFACTURING CO 9,510
 PAPA JOHN'S INTL INC 74,896
 QUOTIENT TECHNOLOGY INC 29,541
 RED LION HOTELS CORP 17,091
 HAIN CELESTIAL GROUP INC 295,238
 TREEHOUSE FOODS INC 82,741
 ENCANA CORP 22,878

HELMERICH & PAYNE 63,011
NEXTIER OILFIELD SOLUTIONS INC 65,345
PDC ENERGY INC 89,449
PARSLE ENERGY INC SER A 33,868
WPX ENERGY INC 145,562
CHIMERA INVESTMENT CORP REIT 36,083
COLUMBIA PROPERTY TRUST INC REIT 62,186
COMMUNITY BANK SYSTEM INC 79,027
COUSINS PROPERTIES INC REIT 29,128
EMPIRE STATE REALTY TRUST INC REIT 44,923
ENTERPRISE FINANCIAL SERVICE 69,712
EQUITY COMMONWEALTH REIT 173,999
FIRST BUSEY CORP 53,570
HLTHCARE TRST AMER INC CL A NEW REIT 34,489
HURON CONSULTING GROUP INC 19,310
IBERIABANK CORP 102,592
INVESTORS BANCORP INC 45,861
LAKELAND FINANCIAL CORP 65,028
NATIONAL BANK HOLDINGS CORP 74,878
PEBBLEBROOK HOTEL TRUST 19,598
PHYSICIANS REIT 73,487
RENASANT CORP 57,168
SEACOAST BANKING CORP OF FLORIDA 52,917
UMPQUA HOLDINGS CORP 91,810
UNITED COMMUNITY BANKS INC 70,808
WESBANCO INC 73,275
ANGIODYNAMICS INC 28,610
CHEMBIO DIAGNOSTICS INC 13,853
HANGER INC 34,209
ICU MEDICAL INC 53,516
MAGELLAN HEALTH, INC. 106,811
MEDNAX INC 20,620
MYRIAD GENETICS INC 24,779
ORTHOFIX MEDICAL INC 218,939
AZZ INC 85,467
ASTEC INDUSTRIES INC 61,320
COLUMBUS MCKINNON CORP/NY 62,687
ENERSYS 78,422
GRANITE CONSTRUCTION INC 31,461
QUANEX BUILDING PRODUCTS 20,530
REGAL BELOIT 169,251
SPX CORP 83,240
STERLING CONSTRUCTION CO 37,382
BELDEN CDT INC 29,920
BOX INC CLASS A 29,449
CONDUENT INC 68,039
FARO TECHNOLOGIES INC 72,454
FIREEYE INC 150,919
NCR CORPORATION 242,815
PROGRESS SOFTWARE CORP 182,571
COEUR MINING INC 18,713
COMPASS MINERALS INTERNATIONAL 94,000
FERRO CORP 60,447
GLATFELTER 90,439
INNOPHOS HOLDINGS INC 222,677
SILGAN HOLDINGS INC 59,425
MAXAR TECHNOLOGIES INC 15,874
SIERRA WIRELESS INC 43,940
ALLETE INC 60,147
CALIFORNIA WATER SERVICE GRP 57,283

NEW JERSEY RESOURCES CORP 53,841
PNM RESOURCES INC 21,501
TOTAL SBH SMALL CAP 5,142,592
ADJUSTMENT - DUE TO BROKERS -52,505

TOTAL 5,090,087

SECURITIES DESCRIPTION TOTAL MARKET VALUE

COHEN & STEERS LP - COHEN & STEERS 5,053,373
CHEVRON STOCK 385,150

SUMMARY OF SECURITIES:

FUND:	TOTAL PER FUND	MASONIC	*THROCKMORTON
BECKER MNGMT	8,366,275	8,291,935	74,340
SBH SMALL CAP	5,090,087	5,042,439	47,648
COHEN & STEERS	5,053,373	5,006,479	46,894
CHEVRON STOCK	385,150	385,150	0
TOTAL	18,894,884	18,726,002	168,882

*FLOYD THROCKMORTON TESTIMENTARY CHARITABLE TRUST MASONIC CHARITY
FOUNDATION OF OKLAHOMA ASSETS ARE REPORTED ON FORM 990 (EIN:
73-6202955)

2019 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
4	ACCOUNTING SOFTWARE	06/21/05	SL	5.00		16	6,000.				6,000.	6,000.		0.	6,000.
9	COMPUTER(3)-WORKROOM, HP LAPTOP	07/03/05	SL	5.00		16	3,727.				3,727.	3,727.		0.	3,727.
10	SERVER SOFTWARE	01/01/13	SL	5.00		16	540.				540.	540.		0.	540.
12	BUILDING	06/13/05	SL	40.00		16	359,833.				359,833.	251,887.		8,996.	260,883.
13	PARKING LOT ADDITION	06/15/05	SL	20.00		16	20,987.				20,987.	20,987.		0.	20,987.
15	SERVER	01/01/13	SL	5.00		16	12,024.				12,024.	12,024.		0.	12,024.
16	CARPET/LINOLEUM-NORTHCUTT	01/31/13	SL	7.00		16	13,083.				13,083.	11,214.		1,869.	13,083.
18	MELODIE PC	06/30/14	SL	5.00		16	1,008.				1,008.	1,008.		0.	1,008.
20	DELL LAPTOP	12/31/14	SL	5.00		16	673.				673.	673.		0.	673.
21	SIDEWALK, PICNIC PAD	10/08/15	SL	15.00		16	4,332.				4,332.	1,011.		289.	1,300.
23	CABLE/ELEC/LED FIXTURE INSTALL	10/11/16	SL	27.50	MM	16	1,793.				1,793.	163.		65.	228.
24	INTAECT ACCOUNTING SOFTWARE	03/11/16	SL	3.00		16	8,730.				8,730.	7,275.		1,455.	8,730.
25	PROJECTOR	07/28/16	SL	5.00		16	906.				906.	453.		181.	634.
26	HVAC UNIT, SOUTH SIDE	06/21/17	SL	27.50	MM	16	7,162.				7,162.	390.		260.	650.
27	POSTAGE MACHINE	04/05/17	SL	5.00		16	1,826.				1,826.	639.		365.	1,004.
28	XEROX C8045H2 COPIER	11/30/17	SL	5.00		16	12,414.				12,414.	2,690.		2,483.	5,173.
29	SAMSUNG REFRIGERATOR	12/28/17	SL	5.00		16	1,228.				1,228.	246.		246.	492.
30	LAND	01/01/90	L				147,457.				147,457.			0.	

928111 04-01-19

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2019 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
31	SPRINKLER SYSTEM REPLACEMENT	12/31/18	SL	15.00		16	2,520.				2,520.			168.	168.
32	HVAC UNIT, 2 OF 3	12/31/18	SL	27.50	MM	16	7,162.				7,162.	130.		260.	390.
33	HVAC UNIT, 3 OF 3	12/31/18	SL	27.50	MM	16	8,018.				8,018.	146.		292.	438.
34	2018 FORD EXPLORER	12/03/18	SL	5.00		21	36,443.				36,443.	3,646.		7,289.	10,935.
35	3 PCS (JOHN/JULIE/ETHEL)	03/20/18	SL	5.00		16	3,974.				3,974.	397.		795.	1,192.
38	BECKY PC	12/31/18	SL	5.00		16	1,030.				1,030.	103.		206.	309.
39	TAG, TAX, & TITLE	01/01/19	SL	5.00		16	1,750.				1,750.			350.	350.
	* TOTAL 990-PF PG 1 DEPR						664,620.				664,620.	325,349.		25,569.	350,918.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						662,870.			0.	662,870.	325,349.			350,568.
	ACQUISITIONS						1,750.			0.	1,750.	0.			350.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						664,620.			0.	664,620.	325,349.			350,918.
	ENDING ACCUM DEPR											350,918.			
	ENDING BOOK VALUE											313,702.			

928111 04-01-19

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **4562**Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return**Depreciation and Amortization**
(Including Information on Listed Property) **990-PF**

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019
Attachment
Sequence No. 179**MASONIC CHARITY FOUNDATION OF OKLAHOMA****FORM 990-PF PAGE 1****73-6097262****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,550,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	18,280.

Part III MACRS Depreciation (Don't include listed property. See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

(a) Class life	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a 12-year			12 yrs.		S/L	
b 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	7,289.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	25,569.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? ☒ Yes ☐ No 24b If "Yes," is the evidence written? ☒ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use

25

26 Property used more than 50% in a qualified business use:

2018 FORD		%						
EXPLORER	120318	100.00	%	36,443.	36,443.	5.00	SL -HY	7,289.
			%					

27 Property used 50% or less in a qualified business use:

		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

28

7,289.

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle 1	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (don't include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	------------------------------	------------------------	---	--------------------------------------

42 Amortization of costs that begins during your 2019 tax year:

43 Amortization of costs that began before your 2019 tax year

43

44 Total. Add amounts in column (f). See the instructions for where to report

44

**Application for Automatic Extension of Time To File an
Exempt Organization Return**

► **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 a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

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 print	Name of exempt organization or other filer, see instructions. MASONIC CHARITY FOUNDATION OF OKLAHOMA	Taxpayer identification number (TIN) 73-6097262
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2406	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. EDMOND, OK 73083	

Enter the Return Code for the return that this application is for (file a separate application for each return)				0	4
Application Is For	Return Code	Application Is For	Return Code		
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07		
Form 990-BL	02	Form 1041-A	08		
Form 4720 (individual)	03	Form 4720 (other than individual)	09		
Form 990-PF	04	Form 5227	10		
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11		
Form 990-T (trust other than above)	06	Form 8870	12		

JOHN L LOGAN

- The books are in the care of ► **PO BOX 2406 - EDMOND, OK 73083**

Telephone No. ► **405-348-7500**

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 box ☐ . 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.

- 1 I request an automatic 6-month extension of time until **NOVEMBER 16, 2020** , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2019** or
► ☐ tax year beginning , and ending .

- 2 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-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	127,670.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	127,670.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Oklahoma Return of Organization Exempt from Income Tax

Form 512E
2019



Section 501(c) of the Internal Revenue Code

PART 1	For the year January 1 - December 31, 2019, or other taxable year beginning:	ending:	Place an 'X' if:	
	JAN 2019	DEC 2019	(1) <input type="checkbox"/> Initial return	(2) <input type="checkbox"/> Final return
			(3) <input type="checkbox"/> Amended return (See Schedule 512E-X on page 2)	

Name of Organization MASONIC CHARITY FOUNDATION OF OKLAHOMA	Federal Employer Identification Number 73-6097262
Address (number and street) PO BOX 2406	Date Qualified for Tax Exempt Status 1979
City, State or Province, Country and ZIP or Foreign Postal Code EDMOND, OK 73083	OFFICE USE ONLY

PART 2: STATEMENT OF UNRELATED BUSINESS TAXABLE INCOME (Please read instructions on pages 2-3)

	Total Federal	Allocable Oklahoma
A Total unrelated trade or business income - applicable Federal Form(s) 990	0	0
B Total unrelated trade or business deductions - applicable Fed. Form(s) 990	0	0
C Unrelated business taxable income - Enter here and on line 1 below	0	0

INCOME SUBJECT TO TAX	
1	Unrelated business taxable income - from statement above (allocable to Oklahoma) 1
2	Other net income - enclose schedule..... 2
3	Oklahoma Capital Gain deduction (provide Form 561-C) 3
4	Oklahoma taxable income (total of lines 1, 2 and 3)..... 4

TAX COMPUTATION	
5	Tax at 6% of line 4. If Trust - See Rate Schedule on page 2 and place an '1' in the box. If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a '2' in the box. If making an Okla. installment payment pursuant to IRC Sec. 965(h) and 68 O.S. Sec. 2368(K), add the installment payment here and enter a "3" in the box..... 5
6	Less: Other Credits Form (total from Form 511CR) 6
7	Balance of tax due (line 5 minus line 6, but not less than zero)..... 7
8	2019 Oklahoma estimated tax and extension payments and prior year carryforward..... 8
9	Oklahoma withholding (enclose Form 1099, Form 500A, Form 500B or other withholding statement)..... 9
10	Amount paid with original return and amount paid after it was filed (amended return only)..... 10
11	Any refunds or overpayment applied (amended return only)..... 11
12	Total of lines 8 through 11..... 12
13	Overpayment (if line 12 is larger than line 7 enter amount overpaid) 13
14	Amount of line 13 to be credited to 2020 estimated tax (original return only) 14

Line 15 provides you the opportunity to make a financial gift from your refund to a variety of Oklahoma organizations. Place the line number of the organization from page 3 of this form in the box below and enter the amount you are donating. If giving to more than one organization, put a "99" in the box and attach a schedule showing how you would like your donation split.	
15	Donations from your refund..... \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$ 15
16	Add lines 14 and 15 and enter amount..... 16
17	Amount to be refunded to you (line 13 minus line 16)..... Refund .. 17

Direct Deposit Note: All refunds must be by direct deposit. See Direct Deposit Information on page 4 for details.	Is this refund going to or through an account that is located outside of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Deposit my refund in my: <input type="checkbox"/> checking account <input type="checkbox"/> savings account Routing Number: <input type="text"/> Account Number: <input type="text"/>
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18	Tax Due (If line 7 is larger than line 12 enter tax due) Tax Due .. 18	0.00
19	(a) Donation: Support the Oklahoma General Revenue Fund (For information regarding this fund, see page 3, #3) 19a	0.00
	(b) Donation: Public School Classroom Support Fund (For information regarding this fund, see page 3, #8)..... 19b	0.00
20	For delinquent payment, add penalty of 5% plus interest at 1.25% per month 20	0.00
21	Underpayment of estimated tax interest Annualized <input type="checkbox"/> .. 21	0.00
22	Total tax, penalty and interest due - Add lines 18-21; pay in full with return..... Balance Due .. 22	0.00

Under penalty of perjury, I declare the information contained in this document, attachments and schedules are true and correct to the best of my knowledge and belief.			
Signature of Officer or Trustee 	Date 10/13/2020	Signature of Preparer 	Date 10-9-2020
Print Name JOHN LOGAN	Phone Number 405-348-7500	Printed Name of Preparer JOSH MULLINS	Preparer's PTIN: P01602326
Title TRUSTEE	<input checked="" type="checkbox"/>	Phone Number: 405-348-0615	

The Oklahoma Tax Commission is not required to give actual notice to taxpayers of changes in any state tax law.