

EXTENDED TO NOVEMBER 15, 2018

## 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.  
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OMB No. 1545-0052

2017

Open to Public Inspection

Form 990-PF

Department of the Treasury  
Internal Revenue Service

For calendar year 2017 or tax year beginning

, and ending

Name of foundation <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>		A Employer identification number <b>73-6097262</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>P.O. BOX 2406</b>	Room/suite	B Telephone number <b>405-348-7500</b>
City or town, state or province, country, and ZIP or foreign postal code <b>EDMOND, OK 73083</b>		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 checked="" type="checkbox"/> Initial return of a former public charity <input checked="" 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) \$ <b>100933905.</b>	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)
1 Contributions, gifts, grants, etc., received		495761.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		826.	826.		STATEMENT 1
4 Dividends and interest from securities		2754062.	2754062.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		2732987.			
b Gross sales price for all assets on line 6a <b>56285746.</b>					
7 Capital gain net income (from Part IV, line 2)			2732987.		
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		975765.	975765.	0.	STATEMENT 3
12 Total. Add lines 1 through 11		6959401.	6463640.	0.	
13 Compensation of officers, directors, trustees, etc.		169583.	13567.	0.	156016.
14 Other employee salaries and wages		168966.	0.	0.	168966.
15 Pension plans, employee benefits		239527.	4019.	0.	235508.
16a Legal fees		2009.	0.	0.	2009.
b Accounting fees		27025.	0.	0.	27024.
c Other professional fees					
17 Interest					
18 Taxes		124301.	124301.	0.	0.
19 Depreciation and depletion		26403.	26403.	0.	
20 Occupancy					
21 Travel, conferences, and meetings		2767.	0.	0.	2767.
22 Printing and publications		49041.	0.	0.	49041.
23 Other expenses		488664.	374239.	0.	114425.
24 Total operating and administrative expenses. Add lines 13 through 23		1298286.	542529.	0.	755756.
25 Contributions, gifts, grants paid		3221711.			3221711.
26 Total expenses and disbursements. Add lines 24 and 25		4519997.	542529.	0.	3977467.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		2439404.			
b Net investment income (if negative, enter -0-)			5921111.		
c Adjusted net income (if negative enter -0-)				0.	

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		2851773.	2737477.	2737477.
	2	Savings and temporary cash investments		284486.	284485.	284485.
	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		30786993.	28293444.	28293444.
	b	Investments - corporate stock STMT 9		54272449.	60728327.	60728327.
	c	Investments - corporate bonds		7302.	0.	0.
	11	Investments - land, buildings, and equipment basis ▶				
	Less accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other STMT 10		4358791.	8441023.	8441023.	
14	Land, buildings, and equipment: basis ▶ 646891.					
	Less accumulated depreciation STMT 11 ▶ 345218.		305447.	301673.	449130.	
15	Other assets (describe ▶ STATEMENT 12)		13644.	19.	19.	
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		92880885.	100786448.	100933905.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	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 SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.					
	24	Unrestricted		5422703.	12831322.	
	25	Temporarily restricted				
	26	Permanently restricted		87458182.	87955126.	
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances		92880885.	100786448.	
	31	Total liabilities and net assets/fund balances		92880885.	100786448.	

## 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 30 (must agree with end-of-year figure reported on prior year's return)	1	92880885.
2	Enter amount from Part I, line 27a	2	2439404.
3	Other increases not included in line 2 (itemize) ▶ NET UNREALIZED GAIN/LOSS	3	5466159.
4	Add lines 1, 2, and 3	4	100786448.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	100786448.

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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.)
<b>1a PUBLICLY TRADED SECURITIES</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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))
<b>a</b> 56285746.		53552759.	2732987.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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))
(j) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			2732987.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> 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 }	<b>2</b>	2732987.
<b>3</b> 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	{ }	<b>3</b>	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))
2016	4510375.	91597114.	.049241
2015	4550558.	92621554.	.049131
2014	4566346.	92096884.	.049582
2013	4459005.	88047194.	.050643
2012	3830864.	88545765.	.043264

<b>2</b> Total of line 1, column (d)	<b>2</b>	.241861
<b>3</b> 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	<b>3</b>	.048372
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	105034775.
<b>5</b> Multiply line 4 by line 3	<b>5</b>	5080742.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	59211.
<b>7</b> Add lines 5 and 6	<b>7</b>	5139953.
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	3977467.

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	118422.
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	118422.
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	118422.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	94520.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	30000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	124520.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	744.	
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	5354.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input type="checkbox"/> 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.		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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		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?	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	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	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 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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**Part VII-A Statements Regarding Activities** (continued)

- 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions
- 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
- 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?

	Yes	No
11		X
12		X
13	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 2017, 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?

	Yes	No
16		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.

- 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?
- (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
- (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
- (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
- (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)?
- (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)

☐ Yes ☒ No☐ Yes ☒ No☐ Yes ☒ No☐ Yes ☒ No☐ Yes ☒ No☐ Yes ☒ 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. Organizations relying on a current notice regarding disaster assistance, check here

N/A

☐

- c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?

	Yes	No
1b		
1c		X

- 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):

- a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?

☐ Yes ☒ 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.

2b		
----	--	--

- 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

☐ Yes ☒ No

- b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)

N/A

- 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3b		
4a		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 2017?

4b		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?

N/A

☐ Yes ☐ No

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

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?

If "Yes" to 6b, file Form 8870

6b

X

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?

N/A

7b

**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		169583.	26879.	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	75135.	6029.	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
NAFA CAPITAL MARKETS 3700 W ROBINSON ST, STE 204, NORMAN, OK 73072	FINANCIAL/INVESTMENT ADVISORY	81754.
SELLWOOD CONSULTING - 6650 S REDWOOD LANDE STE 370, PORTLAND, OR 97224	INVESTMENT CONSULTING	79227.
BECKER CAPITAL MANAGEMENT 1211 SW 5TH AVE, STE 2185, PORTLAND, OR 97204	FINANCIAL/INVESTMENT ADVISORY	51672.
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	
All other program-related investments. See instructions.	
3	
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	95350160.
b	Average of monthly cash balances	1b	2243916.
c	Fair market value of all other assets	1c	9040213.
d	<b>Total</b> (add lines 1a, b, and c)	1d	106634289.
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	106634289.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1599514.
5	<b>Net value of noncharitable-use assets</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	105034775.
6	<b>Minimum investment return</b> Enter 5% of line 5	6	5251739.

**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	5251739.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	118422.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	118422.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5133317.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5133317.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5133317.

**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	3977467.
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	<b>Qualifying distributions</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3977467.
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	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	3977467.

**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.

Form 990-PF (2017)



**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				5133317.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			1110512.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$ 3977467.				
a Applied to 2016, but not more than line 2a			1110512.	
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 2017 distributable amount				2866955.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017 (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 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 2016 Subtract line 4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				2266362.
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 2012 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

**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 2017, 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.

Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter.

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

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

c "Support" alternative test - enter.

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

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

(3) Largest amount of support from an exempt organization

(4) Gross investment income

**Part XV Supplementary Information (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 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
<b>a Paid during the year</b>				
MASONIC CHARITY FDN MATCHING FUNDS PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	1684949.
JOBS DAUGHTERS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	7500.
DEMOLAY PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	7500.
GRAND ASSEMBLY CHARITABLE & EDUCATION PO BOX 1459 GUTHRIE, OK 73044-1459		PUBLIC CHARITY	OK MASONIC YOUTH ORG ANNUAL DONATION	7500.
PM GRANTS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	90837.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>3a</b> 3221711.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				<b>3b</b> 0.

**Part XVI-A Analysis of Income-Producing Activities**

• Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue:					
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			14	826.	
4	Dividends and interest from securities			14	2754062.	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			15	958359.	
8	Gain or (loss) from sales of assets other than inventory			18	2732987.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a	TAX REFUND			01	17160.	
b	FIDUCIARY FEE INCOME			01	221.	
c	MISCELLANEOUS INCOME			01	25.	
d						
e						
12	Subtotal. Add columns (b), (d), and (e)		0.		6463640.	0.
13	Total. Add line 12, columns (b), (d), and (e)					6463640.

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]

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

- |          |  | Yes | No |
|----------|--|-----|----|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |     |    |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of:   |     |    |
|          | (1) Cash   |     | X  |
|          | (2) Other assets   |     | X  |
| <b>b</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  |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   |     | X  |
| <b>d</b> | 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 501(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		

**Sign  
Here**

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.

Signature of officer or trustee

Date \_\_\_\_\_

of which preparer has any kn

**EXECUTIVE  
DIRECTOR**

Title

May the IRS discuss this return with the preparer shown below? See instr

<input checked="checked" type="checkbox"/> X	Yes	<input type="checkbox"/>	No
--	-----	--------------------------	----

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

JAMES S. DENTON

Preparer's signature

Date

2-11-19

Check ☐ if  
self-employed

PTIN

P00971378

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
OK ALLIANCE FOR ARTS ED PO BOX 1275 JENKS, OK 74037-1275		PUBLIC CHARITY	DOE ARTS OF EXCELLENCE CEREMONY	7900.
MASONIC CHARITY FDN PUBLIC EDUCATION PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	5046.
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	42500.
EASTERN OKLAHOMA DEVELOPMENT FOUNDATION 1301 WEST MAIN WILBURTON, OK 74578		HIGHER ED FD	ESTABLISH ENDOWMENT FUND	50000.
ROSE STATE COLLEGE FOUNDATION 6420 SE 15TH ST MIDWEST CITY, OK 73110		HIGHER ED FD	ESTABLISH ENDOWMENT FUND	50000.
MASONIC CHARITY FND SENIOR ESSAY CONTEST PO BOX 2406 / EDMOND, OK 73083-2406		PRIVATE FDN	27 RECIPIENTS PLUS EXPENSES	24843.
MASONIC CHARITY FND TEACHER OF THE YEAR PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	18 RECIPIENTS PLUS EXPENSES	23965.
MASONIC CHARITY FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	67 RECIPIENTS PLUS EXPENSES	111000.
OU STUDENT AFFAIRS DEVELOPMENT FUND 900 ASP AVENUE, SUITE 265 NORMAN, OK 73019		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	15000.
REGIONAL FOOD BANK OF OKLAHOMA 3355 S. PURDUE OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	50000.
Total from continuation sheets				1423425.

**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
MASONIC CHARITY FDN PUBLIC WELLNESS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	74797.
PREVENT BLINDNESS OK 6 NE 63RD OKLAHOMA CITY, OK 73105		PUBLIC CHARITY	VISION SCREENING CHILDREN IN PUB SCH	180000.
OK ASSN AREAS AGCY AGING 719 WEST MAINE ENID, OK 73701-5413		PUBLIC CHART	DIRECT SERVICES TO THE ELDERLY	736671.
MASONIC GRAND MASTER PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	3 RECIPIENTS PLUS EXPENSES	2000.
GWMNM 101 CALLAHAN DRIVE ALEXANDRIA, VA 22301		PUBLIC CHARITY	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL MUSEUM	19521.
MASONIC CHARITY FDN PUBLIC CHARITY PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	23358.
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 20910-4785		PUBLIC CHARITY	SUPPORT OF MASONIC EDUCATION TO PUBL	1500.
MASONIC SERVICE ASSN 8125 FENTON STREET SILVER SPRING, MD 20910-4785		PUBLIC CHARITY	SUPPORT FOR DISASTER RELIEF, ETC.	5324.
<b>Total from continuation sheets</b>				

**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](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2017**

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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)



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	\$ 47436.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	RUSSELL BROWN ESTATE PO BOX 1365 EL RENO, OK 73036	\$ 288460.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	ROBERT G. MORELAND REVOCABLE TRUST 400 MARKET STREET CANTON, OH 44702	\$ 19802.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	ARTHUR JOHN EASTWOOD TRUST PO BOX 1119 WHEATLAND, WY 82201	\$ 16179.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	ESTATE FO WILLIAM AND MARILYN CAMMACK 1300 MERRILL LYNCH DR PENNINGTON, NJ 08534	\$ 19731.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	CLYDE R. EVANS ESTATE PO BOX 21708 OKLAHOMA CITY, OK 73156	\$ 58750.	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	GRACE NEWBERRY ESTATE 2300 N LINCOLN BLVD STE 217 OKLAHOMA CITY, OK 73105	\$ 33641.	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)

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	826.	826.	826.
TOTAL TO PART I, LINE 3	826.	826.	826.

## 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	1283792.	0.	1283792.	1283792.	1283792.
INVESTMENT					
INTEREST	1324879.	0.	1324879.	1324879.	1324879.
PARTNERSHIP INCOME	145391.	0.	145391.	145391.	145391.
TO PART I, LINE 4	2754062.	0.	2754062.	2754062.	2754062.

## FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTIES	958359.	958359.	0.
TAX REFUND	17160.	17160.	0.
FIDUCIARY FEE INCOME	221.	221.	0.
MISCELLANEOUS INCOME	25.	25.	0.
TOTAL TO FORM 990-PF, PART I, LINE 11	975765.	975765.	0.

## 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	2009.	0.	0.	2009.
TO FM 990-PF, PG 1, LN 16A	2009.	0.	0.	2009.

## 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	27025.	0.	0.	27024.
TO FORM 990-PF, PG 1, LN 16B	27025.	0.	0.	27024.

## 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	3953.	3953.	0.	0.
REAL ESTATE TAXES	70.	70.	0.	0.
MINERAL TAXES	1278.	1278.	0.	0.
FEDERAL EXCISE TAX	119000.	119000.	0.	0.
TO FORM 990-PF, PG 1, LN 18	124301.	124301.	0.	0.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	928.	0.	0.	928.
COMPUTER EXPENSE	8202.	0.	0.	8202.
CONTRACT LABOR	7500.	0.	0.	7500.
REPAIRS AND EQUIPMENT	4048.	0.	0.	4048.
MANAGEMENT FEE	374239.	374239.	0.	0.
OFFICE SUPPLIES	15442.	0.	0.	15442.
POSTAGE	13053.	0.	0.	13053.
PROPERTY MAINTENANCE	13814.	0.	0.	13814.
TELEPHONE	7531.	0.	0.	7531.
TRAINING AND MEMBERSHIPS	2785.	0.	0.	2785.
UTILITIES	17285.	0.	0.	17285.
MISCELLANEOUS EXPENSES	1799.	0.	0.	1799.
INSURANCE	22038.	0.	0.	22038.
TO FORM 990-PF, PG 1, LN 23	488664.	374239.	0.	114425.

## FORM 990-PF

## U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS

## STATEMENT 8

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GNMAS	X		28280432.	28280432.
US SAVINGS BOND	X		13012.	13012.
TOTAL U.S. GOVERNMENT OBLIGATIONS			28293444.	28293444.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			28293444.	28293444.

## FORM 990-PF

## CORPORATE STOCK

## STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	60728327.	60728327.
TOTAL TO FORM 990-PF, PART II, LINE 10B	60728327.	60728327.

## FORM 990-PF

## OTHER INVESTMENTS

## STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN LIMITED PARTNERSHIP	COST	8440289.	8440289.
MINERAL RIGHTS	COST	716.	716.
REAL ESTATE	COST	18.	18.
TOTAL TO FORM 990-PF, PART II, LINE 13		8441023.	8441023.

## FORM 990-PF

## DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT

## STATEMENT 11

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
ACCOUNTING SOFTWARE	6000.	6000.	0.
COMPUTER(3)-WORKROOM, HP			
LAPTOP	3727.	3727.	0.
SERVER SOFTWARE	540.	540.	0.
BUILDING	359833.	242891.	116942.
PARKING LOT ADDITION	20987.	20987.	0.
SERVER	12024.	12024.	0.
CARPET/LINOLEUM-NORTHCUTT	13083.	9345.	3738.
2013 FORD EXPLORER	38781.	38781.	0.
MELODIE PC	1008.	807.	201.
3 PCS (JOHN/JULIE/ETHEL)	4387.	3509.	878.
DELL LAPTOP	673.	539.	134.
SIDEWALK, PICNIC PAD	4332.	722.	3610.
CABLE/ELEC/LED FIXTURE INSTALL	1793.	98.	1695.
INTAACT ACCOUNTING SOFTWARE	8730.	4365.	4365.
PROJECTOR	906.	272.	634.
HVAC UNIT, SOUTH SIDE	7162.	130.	7032.
POSTAGE MACHINE	1826.	274.	1552.
XEROX C8045H2 COPIER	12414.	207.	12207.
SAMSUNG REFRIGERATOR	1228.	0.	1228.
LAND	147457.	0.	147457.
TOTAL TO FM 990-PF, PART II, LN 14		345218.	301673.



FORM 990-PF

OTHER ASSETS

STATEMENT 12

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
OTHER ASSETS	13644.	0.	0.
ENTAILED BEQUESTS	0.	15.	15.
INSURANCE POLICIES	0.	4.	4.
TO FORM 990-PF, PART II, LINE 15	13644.	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
ELWOOD ISAACS 412 SUMMIT WAY NORMAN, OK 73071	PRESIDENT 1.00	0.	0.	0.
NEIL STITT 710 W. BROADWAY ARDMORE, OK 73401	2ND VICE PRESIDENT 1.00	0.	0.	0.
GARY DAVIS 620 W. CHERRY STREET DRUMRIGHT, OK 74030	TREASURER 1.00	0.	0.	0.
ROBERT DAVIS 411 E NOBLE GUTHRIE, OK 73044	SECRETARY 1.00	0.	0.	0.
JOHN LOGAN 13913 KIRKLAND RIDGE EDMOND, OK 73013	ASSISTANT SECRETARY 40.00	169583.	26879.	0.
CHARLES STUCKEY 132 ROADDRUNNER DRIVE PONCA CITY, OK 74604	DIRECTOR 1.00	0.	0.	0.
CHARLES BELKNAP 2515 EDGEWOOD DRIVE ENID, OK 73703	DIRECTOR 1.00	0.	0.	0.
BEDFORD FORREST ROWLAND 1104 CANTERBURY BLVD ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
E KEITH LILES 7100 S LINN OKLAHOMA CITY, OK 73159	DIRECTOR 1.00	0.	0.	0.
GLENN ALMY PO BOX 321 MANNFORD, OK 74044	DIRECTOR 1.00	0.	0.	0.

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RONALD COPPEDGE 309 E. 18TH STREET TISHOMINGO, OK 73460	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.
CHARLES CALLAHAN PO BOX 1254 BLANCHARD, OK 73010	DIRECTOR 1.00	0.	0.	0.
D RIDGE SMITH PO BOX 851123 YUKON, OK 73085	DIRECTOR 1.00	0.	0.	0.
BOBBY LAWS 1202 N HUDSON ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
RONALD CHAMBERS 8301 E LANSING STREET BROKEN ARROW, OK 74014	DIRECTOR 1.00	0.	0.	0.
LANNY SANDER PO BOX 141 SEILING, OK 73663	DIRECTOR 1.00	0.	0.	0.
JOHN ALLFORD PO BOX 3361 MSALESTER, 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.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

WILLIAM J. CLOUD  
PO BOX 651  
BLANCHARD, OK 73010

VICE PRESIDENT  
1.00

0.

0.

0.

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

169583.

26879.

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

990-PF PAGE 1 LINES 14 AND 15 - AMENDED RETURN

EXPLANATION:

EXPENSES FROM PAGE ONE COLUMN (A) "REVENUE AND EXPENSES PER BOOKS" WERE EXCLUDED FROM COLUMNS (B) AND (D) FROM THE ORIGINALLY FILED 990-PF. THE AMENDED RETURN INCLUDES THE ALLOCATION BETWEEN NET INVESTMENT INCOME AND DISBURSEMENTS FOR CHARITABLE PURPOSES. ALSO, THE EMPLOYER PORTION OF PAYROLL TAXES HAS BEEN MOVED FROM LINE 18 TO LINE 15 PER THE INSTRUCTIONS. LINE 19 ALSO HAD DEPRECIATION DUPLICATED IN COLUMN C WHICH HAS BEEN CORRECTED. THE CHANGES ARE AS FOLLOWS.

PAGE 1: LINE 14 DISBURSEMENTS FOR CHARITABLE PURPOSES INCREASED BY \$168,966  
 PAGE 1: LINE 15 REV & EXP PER BOOKS INCREASE BY \$23,369  
 PAGE 1: LINE 15 NET INVESTMENT INC INCREASE OF \$4,019  
 PAGE 1: LINE 15 DISBURSEMENTS FOR CHARITABLE PURPOSES INCREASED BY \$235,508  
 PAGE 1: LINE 18 REV & EXP PER BOOKS DECREASED BY \$23,369  
 PAGE 1: LINE 18 NET INVESTMENT INC DECREASED BY \$23,369  
 PAGE 1: LINE 19 ADJUSTED NET INCOME DECREASED BY \$26,403

2017 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	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	6000.				6000.	6000.		0.	6000.
8	(D)KONICA MINOLTA BIZHUB COPIER	07/01/05	SL	5.00	16	12565.				12565.	12565.		0.	12565.
9	COMPUTER(3)-WORKROOM, HP LAPTOP	07/03/05	SL	5.00	16	3727.				3727.	3727.		0.	3727.
10	SERVER SOFTWARE	01/01/13	SL	5.00	16	540.				540.	433.		107.	- 540.
12	BUILDING	06/13/05	SL	40.00	16	359833.				359833.	233895.		8996.	242891.
13	PARKING LOT ADDITION	06/15/05	SL	20.00	16	20987.				20987.	20987.		0.	20987.
15	SERVER	01/01/13	SL	5.00	16	12024.				12024.	9619.		2405.	12024.
16	CARPET/LINOLEUM-NORTHCUTT	01/31/13	SL	7.00	16	13083.				13083.	7476.		1869.	9345.
17	2013 FORD EXPLORER	02/12/13	SL	5.00	16	38781.				38781.	31025.		7756.	38781.
18	MELODIE PC	06/30/14	SL	5.00	16	1008.				1008.	605.		202.	807.
19	3 PCS (JOHN/JULIE/ETHEL)	12/31/14	SL	5.00	16	4387.				4387.	2632.		877.	3509.
20	DELL LAPTOP	12/31/14	SL	5.00	16	673.				673.	404.		135.	539.
21	SIDEWALK, PICNIC PAD	10/08/15	SL	15.00	16	4332.				4332.	433.		289.	722.
23	CABLE/ELEC/LED FIXTURE INSTALL	10/11/16	SL	27.50	MM16	1793.				1793.	33.		65.	98.
24	INTAACT ACCOUNTING SOFTWARE	03/11/16	SL	3.00	16	8730.				8730.	1455.		2910.	4365.
25	PROJECTOR	07/28/16	SL	5.00	16	906.				906.	91.		181.	272.
26	HVAC UNIT, SOUTH SIDE	06/21/17	SL	27.50	16	7162.				7162.			130.	130.
27	POSTAGE MACHINE	04/05/17	SL	5.00	16	1826.				1826.			274.	274.

728111 04-01-17

(D) - Asset disposed

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

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[illegible]

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