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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

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

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

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)
PO BOX 2406

Room/suite

B Telephone number (see instructions)
(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

G Check all that apply

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

H Check type of organization

Section 501(c)(3) exempt private foundation

Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 91,068,623

J Accounting method

Cash

Accrual

Other (specify)

(Part I, column (d) must be on cash basis)

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

(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 (attach schedule)

2 Check If the foundation is not required to attach Sch B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

7 Capital gain net income (from Part IV, line 2)

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) (attach schedule)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule)

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions)

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

24 Total operating and administrative expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing	2,737,477	1,749,126	1,749,126		
	2	Savings and temporary cash investments	284,485	284,486	284,486		
	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 (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶ _____ 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 (attach schedule)	28,293,444	27,716,209	27,716,209		
	b	Investments—corporate stock (attach schedule)	60,728,327	53,304,648	53,304,648		
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	8,441,023	7,525,939	7,525,939		
	14	Land, buildings, and equipment basis ▶ 662,869 Less accumulated depreciation (attach schedule) ▶ 322,130	301,673	340,739	488,196		
15	Other assets (describe ▶ _____)	19	19	19			
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	100,786,448	90,921,166	91,068,623			
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 (attach schedule)					
	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	12,831,322	4,823,678			
	25	Temporarily restricted					
	26	Permanently restricted	87,955,126	86,097,488			
	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 (see instructions)	100,786,448	90,921,166			
31	Total liabilities and net assets/fund balances (see instructions) .	100,786,448	90,921,166				

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	100,786,448
2	Enter amount from Part I, line 27a	2	3,000,391
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	103,786,839
5	Decreases not included in line 2 (itemize) ▶ _____	5	12,865,673
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	90,921,166

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , 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)
1 a 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 102,473,141		95,970,211	6,502,930
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			6,502,930
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	6,502,930
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) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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 does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see 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))
2017	3,977,467	105,034,775	0 037868
2016	4,510,375	91,597,114	0 049241
2015	4,550,558	92,621,554	0 049131
2014	4,566,346	92,096,884	0 049582
2013	4,459,005	88,047,194	0 050643

2 Total of line 1, column (d)	2	0 236465
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	0 047293
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	104,168,904
5 Multiply line 4 by line 3	5	4,926,460
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	99,684
7 Add lines 5 and 6	7	5,026,144
8 Enter qualifying distributions from Part XII, line 4	8	7,128,630

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 checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	99,684
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	99,684
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	99,684
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	152,354
b	Exempt foreign organizations—tax withheld at source	6b	
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	152,354
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	52,670
11	Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> 52,670 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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for 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	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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	No
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	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
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	Yes
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	Yes
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	Yes
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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

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.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW MCFOK ORG	13	Yes	
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	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2018, 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?	16	Yes	No
	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.	1b	
	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 2018?	1c	No
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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
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).	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
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 2018 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 2018).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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 2018?	4b	No

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		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
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? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	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			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
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 during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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	CFO	80,000	4,285	0
PO BOX 2406	40 00			
EDMOND, OK 73083				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SELLWOOD CONSULTING 6650 S REDWOOD LANDE STE 370 PORTLAND, OR 97224	INVESTMENT CONSULTING	79,293
UBS TRUMBULL 10 STATE HOUSE SQUARE 15TH FLOOR HARTFORD, CT 06103	FINANCIAL/INVESTMENT ADVISORY	60,607
BECKER CAPITAL MANAGEMENT 1211 SW 5TH AVE STE 2185 PORTLAND, OR 97204	FINANCIAL/INVESTMENT ADVISORY	51,447

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	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

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	94,775,315
b	Average of monthly cash balances.	1b	2,816,758
c	Fair market value of all other assets (see instructions).	1c	8,163,159
d	Total (add lines 1a, b, and c).	1d	105,755,232
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	105,755,232
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,586,328
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	104,168,904
6	Minimum investment return. Enter 5% of line 5.	6	5,208,445

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	5,208,445
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	99,684
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	99,684
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	5,108,761
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	5,108,761
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	5,108,761

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	7,128,630
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	7,128,630
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	99,684
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	7,028,946

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				5,108,761
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			2,266,362	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 7,128,630				
a Applied to 2017, but not more than line 2a			2,266,362	
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 2018 distributable amount.				4,862,268
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018 (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 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				246,493
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 2013 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

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

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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))

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

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. See instructions.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

MASONIC CHARITY FOUNDATION OF OKLAH
PO BOX 2406
EDMOND, OK 73083
(405) 348-7500

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

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

c Any submission deadlines

NO SPECIFIC DEADLINES ARE APPLICABLE

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

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

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 <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
Enter gross amounts unless otherwise indicated				
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	3,884	
4 Dividends and interest from securities.		14	2,730,031	
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	1,217,060	
8 Gain or (loss) from sales of assets other than inventory		18	6,502,930	-659
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue				
a FIDUCIARY FEE INCOME				210
b _____				
c _____				
d _____				
e _____				
12 Subtotal Add columns (b), (d), and (e).	0		10,453,905	-449
13 Total. Add line 12, columns (b), (d), and (e).				10,453,456

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

[illegible]

Part XVII

- | | | | |
|---|----|--|----|
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | | No |
|---|----|--|----|

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
-------------	---------------------	---	--

- 2d Is the foundation an entity or individual, animated (with) or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 5373? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

Sign	_____		May the IRS discuss this information with other tax authorities?
-------------	-------	--	---

(see instr)? ☒ Yes ☐ No

Print/Type preparer's name	Preparer's Signature	Date	PTIN
----------------------------	----------------------	------	------

P01602326

Firm's EIN ► 73-1185089

Phone no (405) 348-0615

Form 990FPF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
WILLIAM J CLOUD	PRESIDENT 1 00	0	0	0
PO BOX 651 BLANCHARD, OK 73010				
NEIL STITT	1ST VICE PRESIDENT 1 00	0	0	0
710 W BROADWAY ARDMORE, OK 73401				
CHARLES CALLAHAN	2ND VICE PRESIDENT 1 00	0	0	0
PO BOX 1254 BLANCHARD, OK 73010				
ELWOOD ISAACS	TREASURER 1 00	0	0	0
412 SUMMIT WAY NORMAN, OK 73071				
ROBERT DAVIS	SECRETARY 1 00	0	0	0
411 E NOBLE GUTHRIE, OK 73044				
JOHN LOGAN	EXECUTIVE DIRECTOR 40 00	173,144	0	0
13913 KIRKLAND RIDGE EDMOND, OK 73013				
GARY DAVIS	DIRECTOR 1 00	0	0	0
620 W CHERRY STREET DRUMRIGHT, OK 74030				
CHARLES STUCKEY	DIRECTOR 1 00	0	0	0
132 ROADRUNNER DRIVE PONCA CITY, OK 74604				
BEDFORD FORREST ROWLAND	DIRECTOR 1 00	0	0	0
1104 CANTERBURY BLVD ALTUS, OK 73521				
RONALD COPPEDGE	DIRECTOR 1 00	0	0	0
309 E 18TH STREET TISHOMINGO, OK 73460				
DAVID ALLEN	DIRECTOR 1 00	0	0	0
3107 MAGNOLIA CT SAND SPRINGS, OK 74063				
RANDALL ROGERS	DIRECTOR 1 00	0	0	0
13040 SHIRLEY LANE CHOCTAW, OK 73020				
D RIDGE SMITH	DIRECTOR 1 00	0	0	0
PO BOX 851123 YUKON, OK 73085				
BOBBY LAWS	DIRECTOR 1 00	0	0	0
1202 N HUDSON ALTUS, OK 73521				
RONALD CHAMBERS	DIRECTOR 1 00	0	0	0
8301 E LANSING STREET BROKEN ARROW, OK 74014				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LANNY SANDER	DIRECTOR 1 00	0	0	0
PO BOX 141 SEILING, OK 73663				
JOHN ALLFORD	DIRECTOR 1 00	0	0	0
PO BOX 3361 MSALESTER, OK 74502				
DAVID RAY	DIRECTOR 1 00	0	0	0
11921 MAPLE VALLEY DRIVE OKLAHOMA CITY, OK 73170				
R KEITH MADDEN	DIRECTOR 1 00	0	0	0
12107 E 69TH ST N OWASSO, OK 74055				
JOANN SHEPPARD	DIRECTOR 1 00	0	0	0
4305 HIDDEN HILL ROAD NORMAN, OK 73072				
RICHARD ALLISON	DIRECTOR 1 00	0	0	0
2502 WILDWOOD ENID, OK 73703				
MATTHEW CARGILL	DIRECTOR 1 00	0	0	0
16482 S HARVARD AVE BIXBY, OK 74008				
JACK PAINTER	DIRECTOR 1 00	0	0	0
19498 E 650 RD HENNESSEY, OK 73742				

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 209104785		PUBLIC CHARITY	SUPPORT OF MASONIC EDUCATION TO PUBL	1,500
GRACE CHILD DEVELOPMENT CENTER PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	1 RECIPIENTS PLUS EXPENSES FOR CHARITABLE CARE	5,000
MCF'S STUDENT AND TEACHER OF TODAY PROGRAMS PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	5,139
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MASONIC SERVICE ASSN 8125 FENTON STREET SILVER SPRING, MD 209104785		PUBLIC CHARITY	SUPPORT FOR DISASTER RELIEF, ETC	5,176
LAWTON VETERANS CENTER 501 SE FLOWER MOUND ROAD LAWTON, OK 73501		PUBLIC CHARITY	PROVIDE SUPPORT TO HANDICAPPED RESIDENTS	7,014
JOBS DAUGHTERSPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	7,500
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
DEMOLAYPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	7,500
GRAND ASSEMBLY CHARITABLE & EDUCATION PO BOX 1459 GUTHRIE, OK 730441459		PUBLIC CHARITY	OK MASONIC YOUTH ORG ANNUAL DONATION	7,500
OK ALLIANCE FOR ARTS ED PO BOX 1275 JENKS, OK 740371275		PUBLIC CHARITY	DOE ARTS OF EXCELLENCE CEREMONY	8,200
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
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
OU STUDENT AFFAIRS DEVELOPMENT FUND 900 ASP AVENUE SUITE 265 NORMAN, OK 73019		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	15,000
GWMNM101 CALLAHAN DRIVE ALEXANDRIA, VA 22301		PUBLIC CHARITY	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL MUSEUM	18,758
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
HEARTS FOR HEARING 11500 N PORTLAND AVE OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	CHILDREN'S AUDIOLOGY CARE	25,000
OKLAHOMA STATE SUPERINTENDENT'S TEACHER OF THE YEAR PROGRAM 2500 N LINCOLN BLVD OKLAHOMA CITY, OK 73105		HIGHER ED FD	18 RECIPIENTS PLUS EXPENSES	25,057
MASONIC CHARITY FND SENIOR ESSAY CONTEST PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	27 RECIPIENTS PLUS EXPENSES	25,434
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
RIGHT PATH RIDING ACADEMY 16620 OLD SHAMROCK HWY DRUMRIGHT, OK 74030		PUBLIC CHARITY	SERVE PERSONS LIVING WITH MULTIPLE SCLEROSIS	50,000
REGIONAL FOOD BANK OF OKLAHOMA 3355 S PURDUE OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	50,000
TURNING POINT RANCHPO BOX 672 STILLWATER, OK 74076		PRIVATE FDN	THERAPUTIC RIDING	50,000
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
SEMINOLE STATE COLLEGE EDUCATIONAL FOUNDATION PO BOX 351 SEMINOLE, OK 74818		HIGHER ED FD	ESTABLISH ENDOWMENT FUND	50,000
WESTERN OKLAHOMA STATE COLLEGE FOUNDATION 2801 N MAIN ALTUS, OK 73521		HIGHER ED FD	ESTABLISH ENDOWMENT FUND	50,000
SEED FOUNDATIONPO BOX 7866 EDMOND, OK 730837866		HIGHER ED FD	PROMOTE AND CULTIVATE ETHICAL THINKING AND PRACTICAL DECISION MAKING	50,462
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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				
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	67,500
PM GRANTSPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	99,058
D-DENT 3000 UNITED FOUNDERS BLVD SUITE 122 OKLAHOMA CITY, OK 73112		PUBLIC CHARITY	CHARITABLE DENTAL CARE	100,000
Total ► 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
NEWVIEW OKLAHOMA'S HOME FOR HOPE CAMPAIGN 501 N DOUGLAS AVE OKLAHOMA CITY, OK 73016		PUBLIC CHARITY	EMPOWER PEOPLE WHO ARE BLIND OR VISION IMPAIRED TO ACHIEVE MAXIMUM INDEPENDENCE	100,000
MASONIC CHARITY FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	78 RECIPIENTS PLUS EXPENSES	122,500
CHILDREN'S CENTER 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008		PUBLIC CHARITY	MEDICAL EQUIPMENT FOR CHILDREN'S CENTER	125,000
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MASONIC CHARITY FDN PUBLIC CHARITY PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	135,438
VIZAVANCE6 NE 63RD OKLAHOMA CITY, OK 73105		PUBLIC CHARITY	VISON SCREENING CHILDREN IN PUB SCH	200,000
GUTHRIE SCOTTISH RITE EDUCATIONAL FOUNDATION PO BOX 70 GUTHRIE, OK 73044		PUBLIC CHARITY	PROVIDE SCHOLARSHIPS TO HIGH SCHOOL STUDENTS	200,000
Total ► 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
MCALISTER LODGE OF PERFECTION TEMPLE IMPROVEMENT FUND PO BOX 70 GUTHRIE, OK 73044		PUBLIC CHARITY	RESTORATION OF MASONIC TEMPLE	200,000
OU STUDENT AFFAIRS DEVELOPMENT FUND 900 ASP AVENUE SUITE 265 NORMAN, OK 73019		HIGHER ED FD	ESTABLISH ENDOWMENT FUND	250,000
OKLAHOMA SCHOOL FOR THE DEAF SENIOR HEARING PROGRAM 1100 EAST OKLAHOMA AVE SULPHUR, OK 73086		PUBLIC CHARITY	PROVIDE THE SAME OPPORTUNITIES FOR DEAF STUDENTS	518,000
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
OK ASSN AREAS AGCY AGING 719 WEST MAINE ENID, OK 737015413		PUBLIC CHARITY	DIRECT SERVICES TO THE ELDERLY	783,260
DIRECT GRANT TO OKLAHOMA FFA FOUNDATION 1500 W SEVENTH AVE STILLWATER, OK 74074		HIGHER ED FD	STREGTHEN AGRICULTURAL EDUCATION	917,377
MASONIC CHARITY FDN MATCHING FUNDS PROGRAM PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	1,608,873
Total ▶ 3a				5,936,246

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106		PUBLIC CHARITY	FEED THE HUNGRY OF EASTERN OKLAHOMA	35,000
Total ► 3a				5,936,246

TY 2018 Accounting Fees Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING EXPENSE	20,777	0	0	20,777

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Depreciation Schedule

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

EIN: 73-6097262

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ACCOUNTING SOFTWARE	2005-06-21	6,000	6,000	SL	5 000000000000	0	0	0	
COMPUTER(3)-WORKROOM, HP LAPTOP	2005-07-03	3,727	3,727	SL	5 000000000000	0	0	0	
SERVER SOFTWARE	2013-01-01	540	540	SL	5 000000000000	0	0	0	
BUILDING	2005-06-13	359,833	242,891	SL	40 000000000000	8,996	8,996	0	
PARKING LOT ADDITION	2005-06-15	20,987	20,987	SL	20 000000000000	0	0	0	
SERVER	2013-01-01	12,024	12,024	SL	5 000000000000	0	0	0	
CARPET/LINOLEUM-NORTHCUTT	2013-01-31	13,083	9,345	SL	7 000000000000	1,869	1,869	0	
2013 FORD EXPLORER	2013-02-12	38,781	38,781	SL	5 000000000000	0	0	0	
MELODIE PC	2014-06-30	1,008	807	SL	5 000000000000	201	201	0	
3 PCS (JOHN/JULIE/ETHEL)	2014-12-31	4,387	3,509	SL	5 000000000000	219	219	0	
DELL LAPTOP	2014-12-31	673	539	SL	5 000000000000	134	134	0	
SIDEWALK, PICNIC PAD	2015-10-08	4,332	722	SL	15 000000000000	289	289	0	
CABLE/ELEC/LED FIXTURE INSTALL	2016-10-11	1,793	98	SL	27 500000000000	65	65	0	
INTAACT ACCOUNTING SOFTWARE	2016-03-11	8,730	4,365	SL	3 000000000000	2,910	2,910	0	
PROJECTOR	2016-07-28	906	272	SL	5 000000000000	181	181	0	
HVAC UNIT, SOUTH SIDE	2017-06-21	7,162	130	SL	27 500000000000	260	260	0	
POSTAGE MACHINE	2017-04-05	1,826	274	SL	5 000000000000	365	365	0	
XEROX C8045H2 COPIER	2017-11-30	12,414	207	SL	5 000000000000	2,483	2,483	0	
SAMSUNG REFRIGERATOR	2017-12-28	1,228		SL	5 000000000000	246	246	0	
LAND	1990-01-01	147,457		L		0	0	0	

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SPRINKLER SYSTEM REPLACEMENT	2018-12-31	2,520		SL	15 0000000000000	0	0	0	
HVAC UNIT, 2 OF 3	2018-12-31	7,162		SL	27 5000000000000	0	0	0	
HVAC UNIT, 3 OF 3	2018-12-31	8,018		SL	27 5000000000000	0	0	0	
2018 FORD EXPLORER	2018-12-03	36,443		SL	5 0000000000000	607	607	0	
3 PCS (JOHN/JULIE/ETHEL)	2018-03-20	3,974		SL	5 0000000000000	596	596	0	
BECKY PC	2018-12-31	1,030		SL	5 0000000000000	0	0	0	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Gain/Loss from Sale of Other Assets Schedule

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

EIN: 73-6097262

Gain Loss Sale Other Assets Schedule

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
DISPOSITION OF ASSETS	2014-12	PURCHASED	2018-03			4,387		0	-659	3,728

TY 2018 Investments Corporate Stock Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	53,304,648	53,304,648

TY 2018 Investments Government Obligations Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**US Government Securities - End
of Year Book Value:**

27,716,209

**US Government Securities - End
of Year Fair Market Value:**

27,716,209

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2018 Investments - Other Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN LIMITED PARTNERSHIP	AT COST	7,525,207	7,525,207
MINERAL RIGHTS	AT COST	716	716
REAL ESTATE	AT COST	16	16

TY 2018 Land, Etc.
Schedule

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA
EIN: 73-6097262

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market 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	251,887	107,946	
PARKING LOT ADDITION	20,987	20,987	0	
SERVER	12,024	12,024	0	
CARPET/LINOLEUM-NORTHCUTT	13,083	11,214	1,869	
MELODIE PC	1,008	1,008	0	
DELL LAPTOP	673	673	0	
SIDEWALK, PICNIC PAD	4,332	1,011	3,321	
CABLE/ELEC/LED FIXTURE INSTALL	1,793	163	1,630	
INTAACT ACCOUNTING SOFTWARE	8,730	7,275	1,455	
PROJECTOR	906	453	453	
HVAC UNIT, SOUTH SIDE	7,162	390	6,772	
POSTAGE MACHINE	1,826	639	1,187	
XEROX C8045H2 COPIER	12,414	2,690	9,724	
SAMSUNG REFRIGERATOR	1,228	246	982	
LAND	147,457	0	147,457	
SPRINKLER SYSTEM REPLACEMENT	2,520	0	2,520	
HVAC UNIT, 2 OF 3	7,162	0	7,162	
HVAC UNIT, 3 OF 3	8,018	0	8,018	
2018 FORD EXPLORER	36,443	607	35,836	
3 PCS (JOHN/JULIE/ETHEL)	3,974	596	3,378	
BECKY PC	1,030	0	1,030	

TY 2018 Legal Fees Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL AND PROFESSIONAL EXPENSE	16,783	0	0	16,783

TY 2018 Other Assets Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ENTAILED BEQUESTS	15	15	15
INSURANCE POLICIES	4	4	4

TY 2018 Other Decreases Schedule

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

EIN: 73-6097262

Description	Amount
NET UNREALIZED GAIN/LOSS	12,865,673

TY 2018 Other Expenses Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSE	199	0	0	199
BANK CHARGES	1,765	0	0	1,765
COMPUTER EXPENSE	10,421	0	0	10,421
INSURANCE	21,742	0	0	21,742
MANAGEMENT FEE	266,651	266,651	0	0
MISCELLANEOUS EXPENSES	1,548	0	0	1,548
OFFICE SUPPLIES	13,992	0	0	13,992
POSTAGE	5,183	0	0	5,183
PROPERTY MAINTENANCE	12,617	0	0	12,617
REPAIRS AND EQUIPMENT	650	0	0	650

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE	7,538	0	0	7,538
TRAINING AND MEMBERSHIPS	3,492	0	0	3,492
UTILITIES	15,562	0	0	15,562

TY 2018 Other Income Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ROYALTIES	1,217,060	1,217,060	
FIDUCIARY FEE INCOME	210		210

TY 2018 Taxes Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	3,764	3,764	0	0
MINERAL TAXES	1,389	1,389	0	0
FEDERAL EXCISE TAX	177,000	177,000	0	0

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2018
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	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check 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 other 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 33¹/₃% 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 990PF, 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 MASONIC CHARITY FOUNDATION OF OKLAHOMA	Employer identification number 73-6097262
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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	\$ 20,170	Person <input checked="" type="checkbox"/>
	PO BOX 5555		Payroll <input type="checkbox"/>
	MCALLEN, TX 785025555		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT G MORELAND REVOCABLE TRUST	\$ 10,214	Person <input checked="" type="checkbox"/>
	400 MARKET STREET		Payroll <input type="checkbox"/>
	CANTON, OH 44702		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CLYDE R EVANS ESTATE	\$ 62,500	Person <input checked="" type="checkbox"/>
	PO BOX 21708		Payroll <input type="checkbox"/>
	OKLAHOMA CITY, OK 73156		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	THROCKMORTON CHARITABLE TRUST	\$ 5,514	Person <input checked="" type="checkbox"/>
	PO BOX 2406		Payroll <input type="checkbox"/>
	EDMOND, OK 73083		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	GUS JACKSON ESTATE	\$ 36,225	Person <input checked="" type="checkbox"/>
	PO BOX 2406		Payroll <input type="checkbox"/>
	EDMOND, OK 73083		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

73-6097262

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization MASONIC CHARITY FOUNDATION OF OKLAHOMA	Employer identification number 73-6097262
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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 information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
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