












For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

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 <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 103,552,788	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		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) (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)	221,562			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,066	1,066		
	4 Dividends and interest from securities . . .	2,878,107	2,878,107		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	1,506,139			
	b Gross sales price for all assets on line 6a _____ 50,749,518				
	7 Capital gain net income (from Part IV, line 2) . . .		1,506,139		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	1,233,944	1,233,944		
	12 Total. Add lines 1 through 11	5,840,818	5,619,256		
	13 Compensation of officers, directors, trustees, etc.	175,541	17,554		157,987
	14 Other employee salaries and wages	140,197	0		140,197
	15 Pension plans, employee benefits	110,964	0		110,964
	16a Legal fees (attach schedule)	36,218	0		36,218
	b Accounting fees (attach schedule)	35,485	0		35,485
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	101,151	4,549		21,598
	19 Depreciation (attach schedule) and depletion . . .	25,569	25,569		
	20 Occupancy				
	21 Travel, conferences, and meetings	3,013	0		3,013
	22 Printing and publications	50,937	0		50,937
	23 Other expenses (attach schedule)	476,868	365,606		111,262
	24 Total operating and administrative expenses. Add lines 13 through 23	1,155,943	413,278		667,661
	25 Contributions, gifts, grants paid	3,322,871			3,322,871
	26 Total expenses and disbursements. Add lines 24 and 25	4,478,814	413,278		3,990,532
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	1,362,004			
	b Net investment income (if negative, enter -0-)		5,205,978		
c Adjusted net income (if negative, enter -0-) . . .					

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	1,749,126	3,038,504	3,038,504
	2 Savings and temporary cash investments	284,486	392,613	392,613
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (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)	27,716,209 	29,144,824	29,144,824
	b Investments—corporate stock (attach schedule)	53,304,648 	63,486,875	63,486,875
	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)	7,525,939 	7,176,251	7,176,251
	14 Land, buildings, and equipment: basis ▶ _____ 664,620 Less: accumulated depreciation (attach schedule) ▶ 350,918	340,739 	313,702	313,702
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)	90,921,166	103,552,788	103,552,788	
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 FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	75,199,697	85,919,990	
	25 Net assets with donor restrictions	15,721,469	17,632,798	
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	90,921,166	103,552,788	
30 Total liabilities and net assets/fund balances (see instructions) .	90,921,166	103,552,788		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	90,921,166
2 Enter amount from Part I, line 27a	2	1,362,004
3 Other increases not included in line 2 (itemize) ▶ _____ 	3	11,272,833
4 Add lines 1, 2, and 3	4	103,556,003
5 Decreases not included in line 2 (itemize) ▶ _____ 	5	3,215
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	103,552,788

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			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 50,749,518		49,243,379	1,506,139
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
a			1,506,139
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) <div style="float: right; border-left: 1px solid black; padding-left: 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	1,506,139
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (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))
2018	7,028,946	104,168,904	0.067476
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

2 Total of line 1, column (d)	2	0.253298
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.050660
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	97,831,879
5 Multiply line 4 by line 3	5	4,956,163
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	52,060
7 Add lines 5 and 6	7	5,008,223
8 Enter qualifying distributions from Part XII, line 4	8	3,990,532

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	104,120
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	104,120
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	104,120
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	127,670
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	127,670
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	23,550
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 23,550 Refunded ▶	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). <i>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.</i>	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. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T.</i>	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? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ 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? <i>If "No," attach explanation .</i>	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 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	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 ► <u>WWW.MCFOK.ORG</u>	13	Yes	
14	The books are in care of ► <u>JOHN L LOGAN</u> Telephone no. ► <u>(405) 348-7500</u>			

Located at ► PO BOX 2406 EDMOND OKZIP+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 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	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 2019?	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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <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 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	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 2019?	4b	No

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

		Yes	No
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))?	<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	
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 No
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	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
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 PO BOX 2406 EDMOND, OK 73083	CFO 40.00	52,533	0	0

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	88,585
UBS TRUMBULL 10 STATE HOUSE SQUARE 15TH FLOOR HARTFORD, CT 06103	FINANCIAL/INVESTMENT ADVISORY	75,562
BECKER CAPITAL MANAGEMENT 1211 SW 5TH AVE STE 2185 PORTLAND, OR 97204	FINANCIAL/INVESTMENT ADVISORY	51,369
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 _____ _____	
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	96,386,290
b	Average of monthly cash balances.	1b	2,215,278
c	Fair market value of all other assets (see instructions).	1c	720,137
d	Total (add lines 1a, b, and c).	1d	99,321,705
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	99,321,705
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,489,826
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	97,831,879
6	Minimum investment return. Enter 5% of line 5.	6	4,891,594

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

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

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	3,990,532
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,990,532
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	3,990,532

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				4,787,474
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			246,493	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>3,990,532</u>				
a Applied to 2018, but not more than line 2a			246,493	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				3,744,039
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				1,043,435
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

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

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a 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).)

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 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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	3,322,871
b <i>Approved for future payment</i>				
Total			▶ 3b	0

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	
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	1,066	
4 Dividends and interest from securities. . . .				
		14	2,878,107	
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	1,221,944	
8 Gain or (loss) from sales of assets other than inventory				
		18	1,506,139	
9 Net income or (loss) from special events:				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a FIDUCIARY FEE INCOME				259
b INSURANCE PROCEEDS				11,741
c _____				
d _____				
e _____				
12 Subtotal. Add columns (b), (d), and (e). .				
	0		5,607,256	12,000
13 Total. Add line 12, columns (b), (d), and (e).				
				5,619,256

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

[illegible]

Part XVII

- | | | | |
|--|--|-----|----|
| | | Yes | No |
|--|--|-----|----|

--	--	--

- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
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value
ue

[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

*****	2020-10-05	*****	
Signature of officer or trustee	Date	Title	

(see instr.) ☒ Yes ☐ No

Print/Type preparer's name JOSH MULLINS	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01602326
Firm's name ▶ ARLEDGE & ASSOCIATES PC				Firm's EIN ▶ 73-1185089
Firm's address ▶ 309 N BRYANT AVENUE EDMOND, OK 73034				Phone no. (405) 348-0615

Form 990FP 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
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				
D RIDGE SMITH	DIRECTOR 1.00	0	0	0
PO BOX 851123 YUKON, OK 73085				
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				
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				
MICHAEL MAXEY	DIRECTOR 1.00	0	0	0
4339 E 58TH PLACE TULSA, OK 74135				
JOHN CHURCH	DIRECTOR 1.00	0	0	0
11904 S RANGE RD PERKINS, OK 74059				
RONALD CHAMBERS	DIRECTOR 1.00	0	0	0
8301 E LANSING STREET BROKEN ARROW, OK 74014				
JOHN ALLFORD	DIRECTOR 1.00	0	0	0
PO BOX 3361 MCALESTER, 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				

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
MATTHEW CARGILL	DIRECTOR 1.00	0	0	0
PO BOX 472150 TULSA, OK 74147				
JACK PAINTER	DIRECTOR 1.00	0	0	0
19498 E 650 RD HENNESSEY, OK 73742				
LANNY SANDER	DIRECTOR 1.00	0	0	0
PO BOX 141 SEILING, OK 73663				
BOBBY LAWS	DIRECTOR 1.00	0	0	0
309 JACQUA LANE GUTHRIE, OK 73044				
JOHN LOGAN	EXECUTIVE DIRECTOR 40.00	175,541	0	0
13913 KIRKLAND RIDGE EDMOND, OK 73013				
WILLIAM J CLOUD	PRESIDENT 1.00	0	0	0
PO BOX 651 BLANCHARD, OK 73010				
ROBERT DAVIS	SECRETARY 1.00	0	0	0
411 E NOBLE GUTHRIE, OK 73044				
ELWOOD ISAACS	TREASURER 1.00	0	0	0
412 SUMMIT WAY NORMAN, OK 73071				

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
CHILDREN'S CENTER 6800 NW 39TH EXPRESSWAY BETHANY, OK 73008		PUBLIC CHARITY	MEDICAL EQUIPMENT FOR CHILDREN'S CENTER	25,000
COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106		PUBLIC CHARITY	FEED THE HUNGRY OF EASTERN OKLAHOMA	7,000
Total ► 3a				3,322,871

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	49,502
GWMNM101 CALLAHAN DRIVE ALEXANDRIA, VA 22301		PUBLIC CHARITY	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL MUSEUM	18,504
HEARTS FOR HEARING 11500 N PORTLAND AVE OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	CHILDREN'S AUDIOLOGY CARE	25,000
Total ▶ 3a				3,322,871

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>				
JOBS DAUGHTERSPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	OK MASONIC YOUTH ORG ANNUAL DONATION	10,000
MASONIC CHARITY FDN MATCHING FUNDS PROGRAM PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	1,659,880
MASONIC CHARITY FDN PUBLIC CHARITY PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	47,358
Total ▶ 3a				3,322,871

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 FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	72 RECIPIENTS PLUS EXPENSES	233,000
MASONIC CHARITY FND SENIOR ESSAY CONTEST PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	27 RECIPIENTS PLUS EXPENSES	25,049
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 209104785		PUBLIC CHARITY	SUPPORT OF MASONIC EDUCATION TO PUBL	1,500
Total ▶ 3a				3,322,871

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.	5,110
MCF'S STUDENT AND TEACHER OF TODAY PROGRAMS PO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	2,272
OK ALLIANCE FOR ARTS ED PO BOX 1275 JENKS, OK 740371275		PUBLIC CHARITY	DOE ARTS OF EXCELLENCE CEREMONY	8,200
Total ► 3a				3,322,871

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	682,866
OKLAHOMA STATE SUPERINTENDENT'S TEACHER OF THE YEAR PROGRAM 2500 N LINCOLN BLVD OKLAHOMA CITY, OK 73105		HIGHER ED FD	17 RECIPIENTS PLUS EXPENSES	23,700
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	52,500
Total ▶ 3a				3,322,871

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>				
PM GRANTSPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	108,004
REGIONAL FOOD BANK3355 S PURDUE OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	53,490
VIZAVANCE6 NE 63RD OKLAHOMA CITY, OK 73105		PUBLIC CHARITY	VISON SCREENING CHILDREN IN PUB SCH	240,000
Total ► 3a				3,322,871

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>				
YMCA7130 AIR CARGO RD OKLAHOMA CITY, OK 73159		PUBLIC CHARITY	MILITARY WELCOME CENTER	10,000
JUNIOR ACHIEVEMENT OF OKLAHOMA 211 N ROBINSON AVE 201 OKLAHOMA CITY, OK 73102		PUBLIC CHARITY	GRANT FOR RURAL SCHOOL PROGRAM	20,000
CHARITY FDN PUBLIC EDPO BOX 2406 EDMOND, OK 730832406		PRIVATE FDN	ASSISTANCE FOR COMMUNITY	4,936
Total ▶ 3a				3,322,871

TY 2019 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	35,485	0		35,485

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

TY 2019 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	5.00000000000000	0	0		
COMPUTER(3)-WORKROOM, HP LAPTOP	2005-07-03	3,727	3,727	SL	5.00000000000000	0	0		
SERVER SOFTWARE	2013-01-01	540	540	SL	5.00000000000000	0	0		
BUILDING	2005-06-13	359,833	251,887	SL	40.00000000000000	8,996	8,996		
PARKING LOT ADDITION	2005-06-15	20,987	20,987	SL	20.00000000000000	0	0		
SERVER	2013-01-01	12,024	12,024	SL	5.00000000000000	0	0		
CARPET/LINOLEUM-NORTHCUTT	2013-01-31	13,083	11,214	SL	7.00000000000000	1,869	1,869		
MELODIE PC	2014-06-30	1,008	1,008	SL	5.00000000000000	0	0		
DELL LAPTOP	2014-12-31	673	673	SL	5.00000000000000	0	0		
SIDEWALK, PICNIC PAD	2015-10-08	4,332	1,011	SL	15.00000000000000	289	289		
CABLE/ELEC/LED FIXTURE INSTALL	2016-10-11	1,793	163	SL	27.50000000000000	65	65		
INTAACT ACCOUNTING SOFTWARE	2016-03-11	8,730	7,275	SL	3.00000000000000	1,455	1,455		
PROJECTOR	2016-07-28	906	453	SL	5.00000000000000	181	181		
HVAC UNIT, SOUTH SIDE	2017-06-21	7,162	390	SL	27.50000000000000	260	260		
POSTAGE MACHINE	2017-04-05	1,826	639	SL	5.00000000000000	365	365		
XEROX C8045H2 COPIER	2017-11-30	12,414	2,690	SL	5.00000000000000	2,483	2,483		
SAMSUNG REFRIGERATOR	2017-12-28	1,228	246	SL	5.00000000000000	246	246		
LAND	1990-01-01	147,457		L		0	0		
SPRINKLER SYSTEM REPLACEMENT	2018-12-31	2,520		SL	15.00000000000000	168	168		
HVAC UNIT, 2 OF 3	2018-12-31	7,162	130	SL	27.50000000000000	260	260		

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
HVAC UNIT, 3 OF 3	2018-12-31	8,018	146	SL	27.5000000000000	292	292		
2018 FORD EXPLORER	2018-12-03	36,443	3,646	SL	5.0000000000000	7,289	7,289		
3 PCS (JOHN/JULIE/ETHEL)	2018-03-20	3,974	397	SL	5.0000000000000	795	795		
BECKY PC	2018-12-31	1,030	103	SL	5.0000000000000	206	206		
TAG, TAX, & TITLE	2019-01-01	1,750		SL	5.0000000000000	350	350		

TY 2019 General Explanation Attachment

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

EIN: 73-6097262

Identifier	Return Reference	Explanation
DETAIL TO SUPPORT LINE 10B	PART II LINE 10B	<p>SECURITIES DESCRIPTION, TOTAL MARKET VALUE BORGWARNER INC 81,554 EXTENDED STAY AMERICA INC 116,131 FORD MOTOR CO 106,020 LEGGETT & PLATT INC 80,820 MAGNA INTERNATIONAL INC-CL A 89, 115 DANONE - SPONS ADR 120,119 INGREDION INC 141,749 KELLOGG CO 90,600 KROGER CO 143,066 M OLSON COORS BEVERAGE COMPANY 144,183 PROCTER & GAMBLE CO 106,165 JM SMUCKER CO/THE-NEW COM MON 132,245 SPECTRUM BRANDS HOLDINGS INC 9,322 WALMART, INC 140,825 BAKER HUGHES COMPANY 7 8,043 NOBLE ENERGY INC 187,542 ROYAL DUTCH SHELL PLC-ADR A 150,104 SCHLUMBERGER LTD 71,757 CHUBB LTD 119,858 ALLEGHANY CORP 99,946 ALLSTATE CORP 113,012 AMERICAN INT'L GROUP INC 13 9,618 BERKSHIRE HATHAWAY INC-CL B 180,068 CITIGROUP INC 199,725 CORPORATE OFFICE PROPERTIES REIT 94,310 GOLDMAN SACHS GROUP INC 142,557 HOWARD HUGHES CORP 191,468 JPMORGAN CHASE & CO 209,797 JEFFERIES FINANCIAL GROUP INC 124,267 PNC FINANCIAL SERVICES GROUP 134,887 US BANCORP 135,181 WELLS FARGO & COMPANY 178,616 WEYERHAEUSER CO REIT 90,902 ASTRAZENeca PLC-S PONS ADR 190,465 GILEAD SCIENCES INC 154,977 JOHNSON & JOHNSON 132,012 MCKESSON CORP 111,3 48 PFIZER INC 134,387 QUEST DIAGNOSTICS 131,352 TE CONNECTIVITY LTD 80,985 EMBRAER SA-ADR 97,158 FEDEX CORP 66,532 GENERAL DYNAMICS CORP 128,736 IMAX CORP 99,596 RAYTHEON COMPANY 9 8,883 SIEMENS AG-SPONS ADR 113,810 SOUTHWEST AIRLINES CO 83,669 APPLE INC COM 149,762 CIENA CORP 79,617 CISCO SYSTEMS INC 168,819 COHERENT INC 91,493 HP INC 128,027 INTEL CORP 154, 114 MICROSOFT CORP 197,914 QUALCOMM INC 118,228 INTERNATIONAL PAPER CO 109,369 METHANEX CORP 104,108 MOSAIC CO 109,823 NEWMONT CORP USD 1.6 126,005 AT&T INC 213,963 DISCOVERY INC 1 42,388 MADISON SQUARE GARDEN CO 127,973 VIACOMCBS INC 138,081 VODAFONE GROUP PLC 165,465 PORTLAND GENERAL ELECTRIC CO 186,060 SOUTHERN CO 87,588 TOTAL BECKER CAPITAL MANAGEMENT 8,3 66,275 SECURITIES DESCRIPTION, TOTAL MARKET VALUERA YONIER INC REIT 590 DFA GLBL R/E SECURITIES-I #5416 1,591,713 DFA GLBL R/E SECURITIES-I #5416 195,461 DFA GLBL R/E SECURITIES-I # 5416 121,529 DODGE & COX INTL STK #1048 5,689,269 DODGE & COX INTL STK #1048 1,133,286 DODGE & COX INTL STK #1048 327,715 JENSEN QUALITY GRWTH-Y #6299 6,610,988 JENSEN QUALITY GRWTH-Y #6299 1,319,792 JENSEN QUALITY GRWTH-Y #6299 364,339 MFS INTL EQ-INST #0403 6,681,428 MFS INTL EQ-INST #0403 1,318,081 MFS INTL EQ-INST #0403 373,419 VANGUARD INSTL INDX-INST # 0094 7,412,944 VANGUARD INSTL INDX-INST #0094 1,320,675 VANGUARD INSTL INDX-INST #0094 411 ,117 BLACKROCK MULTI-ASSET INC-K #1981 3,975,090 BLACKROCK MULTI-ASSET INC-K #1981 738,569 BLACKROCK MULTI-ASSET INC-K #1981 224,628 NATIXIS GATEWAY-N #6102 3,977,564 NATIXIS GATEWAY-N #6102 737,410 NATIXIS GATEWAY-N #6102 235,268 TOTAL MUTUAL FUNDS 44,760,873 SECURITIES DESCRIPTION, TOTAL MARKET VALUE JACK IN THE BOX INC 178,064 MODINE MANUFACTURING CO 9,510 PAPA JOHN'S INTL INC 74,896 QUOTIENT TECHNOLOGY INC 29,541 RED LION HOTELS CORP 17,091 HAIN CELESTIAL GROUP INC 295,238 TREEHOUSE FOODS INC 82,741 ENCANIA CORP 22,878 HELMERICH & PAYNE 63,011 NEXTIER OILFIELD SOLUTIONS INC 65,345 PDC ENERGY INC 89,449 PARSLE ENERGY INC SER A 33,868 WPX ENERGY INC 145,562 CHIMERA INVESTMENT CORP REIT 36,083 COLUMBIA PROPERTY TRUST INC REIT 62,186 COMMUNITY BANK SYSTEM INC 79,027 COUSINS PROPERTIES INC REIT 29,128 EMPIRE STATE REALTY TRUST INC REIT 44,923 ENTERPRISE FINANCIAL SERVICE 69,712 EQUITY COMMONWEALTH REIT 173,999 FIRST BUSEY CORP 53,570 HLTHCARE TRST AMER INC CL A NEW REIT 34,489 HURON CONSULTING GROUP INC 19,310 IBERIABANK CORP 102,592 INVESTORS BANCORP INC 45,861 LAKE LAND FINANCIAL CORP 65,028 NATIONAL BANK HOLDINGS CORP 74,878 PEBBLEBROOK HOTEL TRUST 19,5 98 PHYSICIANS REIT 73,487 RENASANT CORP 57,168 SEACOAST BANKING CORP OF FLORIDA 52,917 UMPQUA HOLDINGS CORP 91,810 UNITED COMMUNITY BANKS INC 70,808 WESBANCO INC 73,275 ANGIODYNAMICS INC 28,610 CHEMBIO DIAGNOSTICS INC 13,853 HANGER INC 34,209 ICU MEDICAL INC 53,516 MAGELLAN HEALTH, INC. 106,811 MEDNAX INC 20,620 MYRIAD GENETICS INC 24,779 ORTHOFIX MEDICAL INC 218,939 AZZ INC 85,467 ASTEC INDUSTRIES INC 61,320 COLUMBUS MCKINNON CORP/NY 62,687 ENERSYS 78,422 GRANITE CONSTRUCTION INC 31,461 QUANEX BUILDING PRODUCTS 20,530 REGAL BELoit 16 9,251 SPX CORP 83,240 STERLING CONSTRUCTION CO 37,382 BELDEN CDT INC 29,920 BOX INC CLASS A 29,449 CONDUENT INC 68,039 FARO TECHNOLOGIES INC 72,454 FIREYE INC 150,919 NCR CORPORATION 242,815 PROGRESS SOFTWARE CORP 182,571 COEUR MINING INC 18,713 COMPASS MINERALS INTERNATIONAL 94,000 FERRO CORP 60,447 GLATFELTER 90,439 INNOVOPHOS HOLDINGS INC 222,677 SILGAN HOLDINGS INC 59,425 MAXAR TECHNOLOGIES INC 15,874 SIERRA WIRELESS INC 43,940 ALLETE INC 60,147 CALIFORNIA WATER SERVICE GRP 57,283 NEW JERSEY RESOURCES CORP 53,841 PNM RESOURCES INC 21 ,501 TOTAL SBH SMALL CAP 5,142,592 ADJUSTMENT - DUE TO BROKERS -52,505 TOTAL 5,090,087 SECURITIES DESCRIPTION TOTAL MARKET VALUE COHEN & STEERS LP - COHEN & STEERS 5,053,373 CHEVRON STOCK 385,150 SUMMARY OF SECURITIES: FUND. TOTAL PER FUND MASONIC *THROCKMORTON BECKER MGMT 8,366,275 8,291,935 74,340SBH SMALL CAP 5,090</p>

Identifier	Return Reference	Explanation
DETAIL TO SUPPORT LINE 10B	PART II LINE 10B	,087 5,042,439 47,648COHEN & STEERS 5,053,373 5,006,479 46,894CHEVRON STOCK 385,150 385,15 0 0TOTAL 18,894,884 18,726,002 168,882 *FLOYD THROCKMORTON TESTIMENTARY CHARITABLE TRUST M ASONIC CHARITY FOUNDATION OF OKLAHOMA ASSETS ARE REPORTED ON FORM 990 (EIN: 73-6202955)

TY 2019 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	63,486,875	63,486,875

TY 2019 Investments Government Obligations Schedule**Name:** MASONIC CHARITY FOUNDATION OF OKLAHOMA**EIN:** 73-6097262**US Government Securities - End
of Year Book Value:**

29,144,824

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

29,144,824

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

0

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

0

TY 2019 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	7,175,457	7,175,457
MINERAL RIGHTS	AT COST	778	778
REAL ESTATE	AT COST	16	16

TY 2019 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	260,883	98,950	
PARKING LOT ADDITION	20,987	20,987	0	
SERVER	12,024	12,024	0	
CARPET/LINOLEUM-NORTHCUTT	13,083	13,083	0	
MELODIE PC	1,008	1,008	0	
DELL LAPTOP	673	673	0	
SIDEWALK, PICNIC PAD	4,332	1,300	3,032	
CABLE/ELEC/LED FIXTURE INSTALL	1,793	228	1,565	
INTAACT ACCOUNTING SOFTWARE	8,730	8,730	0	
PROJECTOR	906	634	272	
HVAC UNIT, SOUTH SIDE	7,162	650	6,512	
POSTAGE MACHINE	1,826	1,004	822	
XEROX C8045H2 COPIER	12,414	5,173	7,241	
SAMSUNG REFRIGERATOR	1,228	492	736	
LAND	147,457	0	147,457	
SPRINKLER SYSTEM REPLACEMENT	2,520	168	2,352	
HVAC UNIT, 2 OF 3	7,162	390	6,772	
HVAC UNIT, 3 OF 3	8,018	438	7,580	
2018 FORD EXPLORER	36,443	10,935	25,508	
3 PCS (JOHN/JULIE/ETHEL)	3,974	1,192	2,782	
BECKY PC	1,030	309	721	
TAG, TAX, & TITLE	1,750	350	1,400	

TY 2019 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	36,218	0		36,218

TY 2019 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 2019 Other Decreases Schedule

Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

EIN: 73-6097262

Description	Amount
PY ADJUSTMENTS TO GENERAL FUND	3,215

TY 2019 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	453	0		453
BANK CHARGES	1,668	0		1,668
COMPUTER EXPENSE	16,774	0		16,774
INSURANCE	27,040	0		27,040
MANAGEMENT FEE	365,606	365,606		0
MISCELLANEOUS EXPENSES	4,388	0		4,388
OFFICE SUPPLIES	13,351	0		13,351
POSTAGE	6,625	0		6,625
PROPERTY MAINTENANCE	19,249	0		19,249
REPAIRS AND EQUIPMENT	1,793	0		1,793

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE	7,652	0		7,652
TRAINING AND MEMBERSHIPS	2,931	0		2,931
UTILITIES	9,338	0		9,338

TY 2019 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	1,221,944	1,221,944	1,221,944
FIDUCIARY FEE INCOME	259	259	259
INSURANCE PROCEEDS	11,741	11,741	11,741

TY 2019 Other Increases Schedule

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

Description	Amount
NET UNREALIZED GAIN/LOSS	11,272,833

TY 2019 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	3,247	3,247		0
MINERAL TAXES	997	997		0
REAL ESTATE TAXES	305	305		0
PAYROLL TAXES	21,598	0		21,598
EXCISE TAX	75,004	0		0

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 www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2019
Name of the organization MASONIC CHARITY FOUNDATION OF OKLAHOMA		Employer identification number 73-6097262

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<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

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
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)

73-6097262

Part II	Noncash Property
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[illegible]

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.

(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>	<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> <div></div> <div></div>	
(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>	<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> <div></div> <div></div>	
(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>	<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> <div></div> <div></div>	
(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>	<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> <div></div> <div></div>	

Additional Data

Software ID:
Software Version:
EIN: 73-6097262
Name: MASONIC CHARITY FOUNDATION OF OKLAHOMA

Form 990 Schedule B, 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
<u>1</u>	GERTRUDE MOORE TESTAMENTARY TRUST	\$ 24,410	Person <input checked="" type="checkbox"/>
	PO BOX 5555		Payroll <input type="checkbox"/>
	MCALLEN, TX 785025555		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
<u>2</u>	ROBERT G MORELAND REVOCABLE TRUST	\$ 10,290	Person <input checked="" type="checkbox"/>
	400 MARKET STREET		Payroll <input type="checkbox"/>
	CANTON, OH 44702		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
<u>3</u>	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 contribution.)
<u>4</u>	THROCKMORTON CHARITABLE TRUST	\$ 5,756	Person <input checked="" type="checkbox"/>
	PO BOX 2406		Payroll <input type="checkbox"/>
	EDMOND, OK 73083		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
<u>5</u>	ARTHUR JOHN EASTWOOD TRUST	\$ 41,839	Person <input checked="" type="checkbox"/>
	3801 VIA DE LA URRACA		Payroll <input type="checkbox"/>
	GREEN VALLEY, AZ 85614		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)
<u>6</u>	ESTATE OF WILLIAM AND MARILYN CAMMACK	\$ 33,398	Person <input checked="" type="checkbox"/>
	PO BOX 2406		Payroll <input type="checkbox"/>
	EDMOND, OK 73083		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution.)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	EDWARD GILLIS JOHNSON 1993 REVOCABLE TRUST	<div></div> <div>\$ 17,244</div> <div></div>	<div> Person <input checked="" type="checkbox"/> </div> <div> Payroll <input type="checkbox"/> </div> <div> Noncash <input type="checkbox"/> </div> <div> (Complete Part II for noncash contribution.) </div>
	PO BOX 1569		
	EDMOND, OK 730833735		