

July 25, 2022

Masonic Charity Foundation of Oklahoma P.O. Box 2406 Edmond, OK 73083

Dear Masonic Charity Foundation of Oklahoma:

Enclosed are the original and one copy of the 2021 Exempt Organization returns, as follows...

2021 Form 990-PF

2021 Oklahoma Form 512-E

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend you retain all pertinent records for at least seven years.

Please inform us promptly of any significant changes in your financial affairs or of any correspondence received from taxing authorities so we may advise you in a timely and prompt manner.

If you have any questions, or if we can be of assistance in any way, please call.

Thank you for your business.

Sincerely,

Josh Mullins

Arledge & Associates. P.C.

h Mulli

### TAX RETURN FILING INSTRUCTIONS

**FORM 990-PF** 

#### FOR THE YEAR ENDING

December 31, 2021

#### **Prepared For:**

Masonic Charity Foundation of Oklahoma P.O. Box 2406 Edmond, OK 73083

#### Prepared By:

ARLEDGE & ASSOCIATES, P.C. 309 N. Bryant Avenue Edmond, OK 73034

#### **Amount Due or Refund:**

An overpayment of \$110,447. The entire overpayment has been applied to the estimated tax payments.

#### Make Check Payable To:

No amount is due.

### Mail Tax Return and Check (if applicable) To:

Not applicable

#### **Return Must be Mailed On or Before:**

Not applicable

#### **Special Instructions:**

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2022.

Please note that there is \$722,248 of undistributed income for 2021 on Form 990-PF. The organization must distribute this amount by the end of its 2022 tax year to avoid the excise tax on undistributed income.

	IKS e	-tile Signature A	utnorization	<u></u>	OMB No. 1545-0047
Form 8879-TE		or a Tax Exemp			
	For calendar year 2021, or flecal year	r beginning, 2	021, and ending	,20	2024
Department of the Treasury		not send to the IRS. Keep			2021
Internal Revenue Service	➤ Go to w	ww.irs.gov/Form8879TE for	the latest information.	<u></u>	
Name of filer				EIN of 68N	
MASONI	C CHARITY FOUND		OMA	<u>  73-609</u>	97262
Name and title of officer or pe		LOGAN			
		JTIVE DIRECTOR			
	Return and Return Info				
Form 5330 filers may enter or 10a below, and the amo	r dollars and cents. For all others ount on that line for the return	er forms, enter whole dollars being filed with this form wa	e applicable amount, if any, fro only. If you check the box on a blank, then leave line 1b, 20 then enter -0- on the applicable	line 1a, 2a, 3 b. 3b. 4b. 5b. 6	a, 4a, 5a, 6a, 7a, 8a, 9a, 3b, 7b, 8b, 9b, or 10b,
1a Form 990 check h			Part VIII, column (A), line 12)		lb
2a Form 990-EZ che	ckhere▶ <mark>□</mark> b: Tota	I revenue, if any (Form 990-E	Z, line 9)	1	Zb
3a Form 1120-POL 0			3)		139,467.
4a Form 990-PF che	ckhere 🕨 💹 b Taxi	based on investment incom	e (Form 990-PF, Part V, line 5	)	tb 139,467.
5a Form 8868 check			*****************************		5b
6a Form 990-T check	khereb Tota	l tax (Form 990-T, Part III, lin	e 4)	(	3b
7a Form 4720 check			• 1)		7Ь
8a Form 5227 check	here ▶ 🔲 b FMV	of assets at end of tax year	r (Form 5227, Item D)	1	3b
9a Form 5330 check	here 🕨 🔲 b Tax	due (Form 5330, Part II, line	19)	1	9b
10a Form 8038-CP ch	eck here 🕨 🔲 b Amo	unt of credit payment requ	ested (Form 8038-CP, Part III,	, line 22) ·	10b
Part II Declarat	ion and Signature Aut	horization of Officer o	r Person Subject to Ta	x	
Under penalties of perjury,	I declare that X I am an o	officer of the above entity or	i am a person subject to	tax with respe	ct to (name
of entity)		, (E	iN) an st of my knowledge and belief	d that I have e	xamined a copy of the
narment of tayor to receiv	a confidential information ne	e seitimmi tewane of vresser	payment of the local tables to be a controlled institutions involved and resolve Issues related to the applicable, the consent to electric to the controlled in the consent to electric table.	e navment I h:	ave selected a
PIN: check one box only					00000
X I authorize AR	LEDGE & ASSOCIA			to enter my Pil	
		ERO firm name			Enter five numbers, but do not enter all zeros
with a state age on the return's d  As an officer or preturn. If I have i	ncy(les) regulating charities as isclosure consent screen. person subject to tax with res	s part of the IRS Fed/State pr pect to the entity, I will enter at a copy of the return is bein	dicated within this return that a ogram, I also authorize the afa my PIN as my signature on th g filed with a state agency(ies) ent screen.	orementioned l	ERO to enter my PIN  1 electronically filed
<del></del>	tion and Authentication			Date	> 0 ( (   2027
	ur six-digit electronic filing id		7222406200	5	
number (EFIN) followed by	your five-digit self-selected P	IN.	7332496300		
I certify that the above nur submitting this return in at Business Returns.	neric entry is my PIN, which is condance with the requirement	s my signature on the 2021 ents of Pub. 4163, Modernize	lectronically filed return indica ad e-File (MeF) Information for	ited above. I co	e-file Providers for
		st Retain This Form -	See Instructions liess Requested To Do	So	
111A M Part 1	·		man industry in po		Form 8879-TE (2021)
LITA FOR PTIVACY ACT AND	Paperwork Reduction Act	Morkes, bas instructions.			(2021)

#### Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the

OMB No. 1545-0047

forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Taxpayer identification number (TIN) Type or Name of exempt organization or other filer, see instructions. print 73-6097262 MASONIC CHARITY FOUNDATION OF OKLAHOMA File by the Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2406 filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. EDMOND, OK 73083 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 12 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (corporation) JOHN L LOGAN The books are in the care of ▶ PO BOX 2406 - EDMOND, OK 73083 Telephone No. ► 405-348-7500 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2022 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2021 or \_\_\_ tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 249,914. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 174,914. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 75,000. using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions For Privacy Act and Paperwork Reduction Act Notice, see instructions.

123841 01-12-22

LHA

Form 8868 (Rev. 1-2022)

## EXTENDED TO NOVEMBER 15, 2022 Return of Private Foundation

Form **990-PF** 

Department of the Treasury Internal Revenue Service

For calendar year 2021 or tax year beginning

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

, and ending

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.

Nar	ne of	foundation				A Employer identification	n number
м	7 C/	ONTO CHARTMY FOIDINGATON	OF OF AHOMA			73-6097262	•
		ONIC CHARITY FOUNDATION  nd street (or P.O. box number if mail is not delivered to street a			Room/suite	B Telephone number	<u>i</u>
	P.O. BOX 2406					405-348-75	0.0
		own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is p	
		OND, OK 73083					3,
<b>G</b> C	heck	all that apply: Initial return	Initial return of a fo	ormer public (	charity	<b>D</b> 1. Foreign organization	s, check here
		Final return	Amended return				
		Address change	Name change			Foreign organizations me check here and attach co	omputation Lest,
H C	_	type of organization: $X$ Section 501(c)(3) ex				E If private foundation sta	
		· · · · · · · · · · · · · · · · · · ·	Other taxable private founda			under section 507(b)(1	)(A), check here
		arket value of all assets at end of year J Account	-	Accr	ual	F If the foundation is in a	
(fr		Part II, col. (c), line 16)	ther (specify)	ie \		under section 507(b)(1	)(B), check here …►∟
	ր rt I	Analysis of Revenue and Expenses				( ) A diviste diseat	(d) Disbursements
1 0		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	1,227,435.			N/A	(cach paole chij)
	2	Check if the foundation is not required to attach Sch. B	, , , , , , , , , , , , , , , , , , , ,				
	3	Interest on savings and temporary cash investments	6,401.		6,401.		STATEMENT 1
	4	Dividends and interest from securities	2,808,927.	2,80	8,927.		STATEMENT 2
	5a	Gross rents					
		Net rental income or (loss)					
d)	6a	Net gain or (loss) from sale of assets not on line 10	6,479,944.				
ž	b	Gross sales price for all assets on line 6a 132,821,137.					
Revenue	7	Capital gain net income (from Part IV, line 2)		6,47	9,944.		
-	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns					
		and allowances					
		Less: Cost of goods sold					
	11	Gross profit or (loss) Other income	1,112,184.	1 11	2,184.		STATEMENT 3
	12	Total. Add lines 1 through 11	11,634,891.				DIMILIMIT 5
_	13	Compensation of officers, directors, trustees, etc.	189,593.		8,959.		170,634.
	14	Other employee salaries and wages	125,056.		0.		125,056.
		Pension plans, employee benefits	44,668.		0.		44,668.
es	16a	Legal fees STMT 4	6,302.		0.		6,302.
ens	b	Accounting fees STMT 5	63,700.		0.		63,700.
dxΞ	C	Other professional fees					
ve	17	Interest Taxes STMT 6					
rati	18	Taxes STMT 6	197,824.		1,334.		21,490.
Administrative Expe		Depreciation and depletion	25,972.	2	5,972.		
<u>a</u>	20	Occupancy	2 100				2 100
d A		Travel, conferences, and meetings	2,198. 34,623.		0.		2,198.
and		Printing and publications	420,590.	3.3	7,629.		34,623. 92,961.
ting	23 24	Other expenses STMT 7  Total operating and administrative	420,390.	34	7,049.		92,901.
Operating	4	expenses. Add lines 13 through 23	1,110,526.	37	3,894.		561,632.
Ö	25	Contributions, gifts, grants paid	5,328,401.		-,		5,328,401.
		Total expenses and disbursements.	2,220,2020				0,020,2020
		Add lines 24 and 25	6,438,927.	37	3,894.		5,890,033.
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements	5,195,964.				
	b	Net investment income (if negative, enter -0-)		10,03	3,562.		
	C	Adjusted net income (if negative, enter -0-)				N/A	

123501 12-10-21 LHA For Paperwork Reduction Act Notice, see instructions.

Page 2

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
Ė	ui t	column should be for end-of-year amounts only.	(a) Book Value	( <b>b</b> ) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	4,654,509.	3,883,482.	3,883,482.
	2	Savings and temporary cash investments	764,935.	823,453.	823,453.
		Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
	-	Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	′	Less: allowance for doubtful accounts			
	۰				
Assets	8	Inventories for sale or use			
Ass		Prepaid expenses and deferred charges Investments - U.S. and state government obligations STMT 8	22,161,871.	6,245,586.	6,245,586.
_			71,131,467.	95,476,495.	95,476,495.
		Investments - corporate stock STMT 9	/1,131,40/•	95,476,495.	95,476,495.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans Investments - other STMT 10	6 770 407	- 10F 000	
	13	Investments - other STMT 10	6,753,427.	7,107,090.	7,107,090.
	14	Land, buildings, and equipment: basis $\blacktriangleright$ 757,302. Less: accumulated depreciation STMT 11 $\blacktriangleright$ 401,394.			
		Less: accumulated depreciation STMT 11  401,394.	381,880.	355,908.	355,908.
	15	Other assets (describe ► STATEMENT 12)	19.	19.	19.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	105,848,108.	113,892,033.	113,892,033.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
abil		Mortgages and other notes payable			
Ë		Other liabilities (describe  )			
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
ø		and complete lines 24, 25, 29, and 30.			
o.	24	Net assets without donor restrictions	86,529,590.	95,120,295.	
lan		Net assets with donor restrictions	19,318,518.	18,771,738.	
or Fund Balanc		Foundations that do not follow FASB ASC 958, check here ▶	, ,	, ,	
S I		and complete lines 26 through 30.			
Ē	26	Capital stock, trust principal, or current funds			
Si O	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
sset	28	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	29	Total net assets or fund balances	105,848,108.	113,892,033.	
Ne		Total list assets of faile salations			
	30	Total liabilities and net assets/fund balances	105,848,108.	113.892.033	
Р	art	Analysis of Changes in Net Assets or Fund Ba	liances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
				1	105,848,108.
	•	amount from Part I, line 27a			5,195,964.
3	Othe	r increases not included in line 2 (itemize)  NET UNREALIX	ZED GAIN/LOSS	3	2,847,961.
		ines 1, 2, and 3			113,892,033.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29		113,892,033.
_		· · · · · · · · · · · · · · · · · · ·			Form <b>990-PF</b> (2021)

	and Losses for Tax on Inv				HOMA		/ 3	-609	/ 404	Page 3
•					(h) Hour or	auirad		Т		
	the kind(s) of property sold (for exan arehouse; or common stock, 200 shs.				<b>b)</b> How ac P - Purc D - Dona	hase ation	(c) Date a (mo., da	cquired y, yr.)	( <b>d)</b> Dat (mo., da	
1a PUBLICLY TRADE	D SECURITIES					P				
b										
С										
d										
e										
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	(g) Cost plus exp				<b>,</b>		in or (loss) (f) minus (		
a 132,821,137.		126	34	1,193					6,479	944.
b		120	, 5 1.	<del>- , - , -</del>				<u> </u>	0 / 1 / 5	,,,,,,,
C										
d					-					
Commission only for accepts above	an animin and one of house	h	- 10/01	/00						
Complete only for assets snowir	ng gain in column (h) and owned by t				_	(I)	Gains (Co	ol. (h) gain ot less than	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ess of cool. (j), if			COI.		from col. (I	1)) <sup>′</sup>	
a									6,479	<u>,944.</u>
b										
C										
d										
е										
	( If gain, also enter	in Part I line 7			7					
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter -0-} \end{cases} $	in Part I, line 7			) 2				6,479	,944.
,	ss) as defined in sections 1222(5) and									
1 0 1	column (c). See instructions. If (loss	· /			)					
Daniel line O	. ,	•			) <sub>3</sub>			N/A		
Part V   Excise Tax Bas	sed on Investment Incom	e (Section	4940	(a), 494	0(b), oı	· 4948 - s	see ins	truction	าร)	
	described in section 4940(d)(2), chec								-	
	letter: (att						1		139	,467.
	enter 1.39% (0.0139) of line 27b. Exc				000 111011 4	) iiiii	) <del>                                    </del>			, = 0 , 0
	2, col. (b)									
	tic section 4947(a)(1) trusts and taxal						2			0.
							3		139	,467.
	stip postion 4047(s)/1) trusts and tays						<del></del>		133	0.
	stic section 4947(a)(1) trusts and taxa			illers, ellie	#I -U-)		5		130	,467.
	<b>me.</b> Subtract line 4 from line 3. If zer	o or less, enter	-0				5		139	,40/.
6 Credits/Payments:					1 7	4 014				
	and 2020 overpayment credited to 202		6a		т/	<u>4,914.</u>	4			
	tax withheld at source		6b			0.	4			
c Tax paid with application for ex	tension of time to file (Form 8868) $_{\dots}$		6c		7	5,000.	<u>-</u>			
<b>d</b> Backup withholding erroneousl	ly withheld		6d			0.	·			
7 Total credits and payments. Ad	d lines 6a through 6d	<u></u>					7		249	<u>,914.</u>
8 Enter any <b>penalty</b> for underpay	ment of estimated tax. Check here	if Form 22	20 is at	tached			8			0.
9 Tax due. If the total of lines 5 a	and 8 is more than 7, enter <b>amount o</b>	wed				<b>&gt;</b>	9			
10 Overpayment. If line 7 is more	than the total of lines 5 and 8, enter	the <b>amount ove</b>	rpaid				10		110	,447.
11 Enter the amount of line 10 to b	be: Credited to 2022 estimated tax	<u> </u>		<u>110,</u> 4	47. F	efunded ►	11			0.

Г	II L VI-M	Statements negarating Activities			
1a	During the	tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any politica	ıl campaign?	1a		X
b	Did it spen	d more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
		er 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.			
C	Did the fou	ndation file Form 1120-POL for this year?	1c		X
d	Enter the a	mount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the	foundation. > \$ (2) On foundation managers. > \$			
е	Enter the re	eimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers.	▶\$0.			
2	Has the for	ındation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," att	ach a detailed description of the activities.			
3	Has the for	indation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or	other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
		ndation have unrelated business gross income of \$1,000 or more during the year?	4a		X
		s it filed a tax return on <b>Form 990-T</b> for this year? N/A	4b		<u> </u>
5		a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," att	ach the statement required by General Instruction T.			
6	Are the req	uirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	, ,	age in the governing instrument, or			
	-	legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in t	he governing instrument?	6	X	<u> </u>
7	Did the fou	ndation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
8a		tates to which the foundation reports or with which it is registered. See instructions.			
	OK				
b		er is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		7.7	
_		te as required by General Instruction G? If "No," attach explanation	8b	X	
9		dation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	_		37
		or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
10		rsons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
11		e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	l		.,
		2(b)(13)? If "Yes," attach schedule. See instructions	11		X
12		ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	4.0		- V
40	,	ach statement. See instructions	12	Х	<u> </u>
13		ndation comply with the public inspection requirements for its annual returns and exemption application?	13	Λ	<u> </u>
	Website ad	dress WWW.MCFOK.ORG	0 7	<u> </u>	
14	The books	are in care of $\blacktriangleright$ JOHN L LOGAN  PO BOX 2406, EDMOND, OK  Telephone no. $\blacktriangleright$ 405-34  ZIP+4 $\blacktriangleright$ 73		300	
4-			003		$\overline{}$
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	NT	► /A	• 📖
10		he amount of tax-exempt interest received or accrued during the year		Yes	No
16		e during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,	16	1 53	X
		or other financial account in a foreign country? tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		41
	foreign cou				
	ioreigii cot		m <b>99</b> 0	)-PF	(2021)
		I UI			(

123531 12-10-21

	otatemente riegaram griedrines ier vinien i eini ir ze may ze riegariea			
	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?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	$\Box$	X
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1a(5)		X
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	1a(6)	$\Box$	X
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions $N/A$	. 1b		<u> </u>
C	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2021?	1d		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years <b>&gt;</b> , , , , ,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>▶</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		_X_
b	If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2021.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2021?	. 4b		X
		Form <b>99</b> 0	)-PF	(2021)

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Form 990-PF (2021) MASONIC CHARITY FOUNDATION Part VI-B Statements Regarding Activities for Which F			73-6097	262	ſ	Page 6
<b>5a</b> During the year, did the foundation pay or incur any amount to:		(00			Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?			5a(1)		Х
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,				
any voter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes	?			5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? See instructions				5a(4)		X
(5) Provide for any purpose other than religious, charitable, scientific, literary,						
the prevention of cruelty to children or animals?				5a(5)		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	· ·	-	a. / a			
section 53.4945 or in a current notice regarding disaster assistance? See instru				5b		
c Organizations relying on a current notice regarding disaster assistance, check h			▶□			
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			3T / 3			
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p						37
a personal benefit contract?				6a		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.				١.,.		v
7a At any time during the tax year, was the foundation a party to a prohibited tax s				7a		X
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/.A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	•			8		Х
excess parachute payment(s) during the year?  Part VII Information About Officers, Directors, Truste	es Foundation Ma	nagers Highly		0		Λ
Paid Employees, and Contractors	.co, i ouridation mai	lagers, riigiliy				
1 List all officers, directors, trustees, and foundation managers and the						
( - ) Norma and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions employee benefit pla and deferred	to ans	(e) Exp	ense
(a) Name and address	to position	enter -0-)	and deterred compensation	"	allowar	
SEE STATEMENT 13		189,593.	26,472			0.
				_		
2 Compensation of five highest-paid employees (other than those incl	udad an lina 1\ If nana	onter "NONE "				
2 Compensation of the highest-paid employees (other than those incl	(b) Title, and average	HILE NONE.	(d) Contributions	to	<b>(e)</b> Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit pla and deferred	<sup>ans</sup> a	ccount, allowar	other
NONE	devoted to position		compensation	_	allowal	1003
NONE						
				+		
Tabel number of other ampleyees said over \$50,000				$T^{L}$		0
Total number of other employees paid over \$50,000			<u></u>	1		U

Part VII Information About Officers, Dir Paid Employees, and Contract	ectors, Trustees, Founda ors <sub>(continued)</sub>	ition Managers, Highly	
3 Five highest-paid independent contractors for prof	essional services. If none, ente	r "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	INVESTMENT	
STE 370, PORTLAND, OR 97224		CONSULTING	91,396.
Total number of others receiving over \$50,000 for professional	services		▶ 0
Part VIII-A Summary of Direct Charitable			
List the foundation's four largest direct charitable activities duri			Expenses
number of organizations and other beneficiaries served, conference	ences convened, research papers prod	duced, etc.	
1N/A			
2			
3			
<b>*</b>			
-			
Part VIII-B Summary of Program-Related	Investments		
Describe the two largest program-related investments made by		lines 1 and 2.	Amount
1 N/A			
·			
2			
All other program-related investments. See instructions.			
3			
Total, Add lines 1 through 3		▶	0.

Pa	art IX Minimum Investment Return (All domestic fou	ndations must con	nplete thi	s part. Foreigi	n foundations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying of	out charitable, etc., pu	urposes:			_
	Average monthly fair market value of securities				1a	103,889,876.
	Average of monthly cash balances				1 1	6,591,134.
	Fair market value of all other assets (see instructions)					357,178.
	Total (add lines 1a, b, and c)					110,838,188.
е	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.
	Subtract line 2 from line 1d					110,838,188.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (fo	or greater amount, se	e instructi	ons)	4	1,662,573.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3					109,175,615.
	Minimum investment return. Enter 5% (0.05) of line 5					5,458,781.
Pa	art X Distributable Amount (see instructions) (Section 4					
	foreign organizations, check here 🕨 🔲 and do not comple	ete this part.)				
1	Minimum investment return from Part IX, line 6				1	5,458,781.
2a	Tax on investment income for 2021 from Part V, line 5					
b	Income tax for 2021. (This does not include the tax from Part V.)	2b				
	Add lines 2a and 2b				2c	139,467.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	5,319,314.
4	Recoveries of amounts treated as qualifying distributions					0.
5	Add lines 3 and 4					5,319,314.
3	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here					5,319,314.
Pa	art XI Qualifying Distributions (see instructions)				•	
1	Amounts paid (including administrative expenses) to accomplish charitab	le, etc., purposes:				
а	Expenses, contributions, gifts, etc total from Part I, column (d), line $26$				1a	5,890,033.
	Program-related investments - total from Part VIII-B					0.
	Amounts paid to acquire assets used (or held for use) directly in carrying					
3	Amounts set aside for specific charitable projects that satisfy the:					
а	Suitability test (prior IRS approval required)				За	
	Cash distribution test (attach the required schedule)					
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part				4	5,890,033.

Part XII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2020	( <b>c</b> ) 2020	( <b>d)</b> 2021
Distributable amount for 2021 from Part X, line 7				5,319,314.
2 Undistributed income, if any, as of the end of 2021:				3,313,314.
<b>a</b> Enter amount for 2020 only			1,292,967.	
<b>b</b> Total for prior years:		0	,	
3 Excess distributions carryover, if any, to 2021:		0.		
<b>a</b> From 2016				
<b>b</b> From 2017				
<b>c</b> From 2018				
<b>d</b> From 2019				
e From 2020				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2021 from Part XI, line 4: ►\$ 5,890,033.				
<b>a</b> Applied to 2020, but not more than line 2a			1,292,967.	
<b>b</b> Applied to undistributed income of prior			, , , , , , ,	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2021 distributable amount				4,597,066.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as				
indicated below:	0.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  b Prior years' undistributed income. Subtract	0.			
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.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2022				722,248.
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 2016	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022.	^			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2017				
b Excess from 2018				
c Excess from 2019				
d Excess from 2020				
e Excess from 2021				

MASONIC CHARITY FOUNDATION OF OKLAHOMA 73-6097262 Page 11 Form 990-PF (2021) Supplementary Information (continued) Part XIV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year VETERANS AFFAIRS MEDICAL CENTER GOV VETERAN TRANSPORTATION 921 NE 13TH ST FOR MEDICAL CARE OKLAHOMA CITY, OK 73104-5028 12,134. EASTERN OKLAHOMA VA HEALTH CARE GOV VETERAN TRANSPORTATION SYSTEM FOR MEDICAL CARE 1011 HONOR HEIGHTS DR MUSKOGEE, OK 74401 12,000. ASSISTANCE FOR MCF'S STUDENT AND TEACHER OF TODAY PROGRAMS EDUCATION & COMMUNITY PO BOX 2406 EDMOND, OK 73083-2406 2,355. MASONIC CHARITY FND SENIOR ESSAY 36 RECIPIENTS PLUS CONTEST EXPENSES PO BOX 2406 EDMOND, OK 73083-2406 26,762. MASONIC CHARITY FDN MATCHING FUNDS ASSISTANCE FOR EDUCATION & COMMUNITY PROGRAM PO BOX 2406 EDMOND, OK 73083-2406 1,356,447. SEE CONTINUATION SHEET(S) **▶** 3a 5,328,401. Total **b** Approved for future payment NONE

Form **990-PF** (2021)

Total

### Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)
-	(a) Business	<b>(b)</b> Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7.11104111	code	Amount	Tunionon moonio
a			+		
b			+ +		
c			+		
d			+		
e			+		
† <u> </u>					
g Fees and contracts from government agencies	+		+		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	6,401.	
4 Dividends and interest from securities			14	2,808,927.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			15	1,112,171.	
8 Gain or (loss) from sales of assets other than inventory			18	6,479,944.	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a FIDUCIARY FEE INCOME					13.
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	10,407,443.	13.
<b>13 Total.</b> Add line 12, columns (b), (d), and (e)				13	10,407,456.
(See worksheet in line 13 instructions to verify calculations.)					•
- · · · · · · · · · · · · · · · · · · ·					

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of
	the foundation's exempt purposes (other than by providing funds for such purposes).
11A	ROACH TRUST MANAGEMENT FEE

Sig	nature of officer or trustee	Date	Title	
Paid	Print/Type preparer's name  JOSH MULLINS	Proparer signature Null	- 7/27 /2	Check if PTIN self- employed P01602326
Preparer Use Only	Firm's name ARLEDGE	& ASSOCIATES, P.C.	1 7	Firm's EIN ► 73-1185089
	Firm's address > 309 N.	BRYANT AVENUE		Phone pp. 405-348-0615

Form 990-PF (2021)

Sign Here

## Form 990-PF MASONIC CHARITY Part XIV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year	<b>.</b>			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	55.00.054.00.0	
PM GRANTS		T	ASSISTANCE FOR EDUCATION & COMMUNITY	
PO BOX 2406		<u> </u>	ASSISTANCE FOR EDUCATION & COMMONITY	
EDMOND, OK 73083-2406				23,056.
OKLAHOMA STATE SUPERINTENDENT'S TEACHER OF THE YEAR PROGRAM		I	1 RECIPIENTS PLUS EXPENSES	·
2500 N LINCOLN BLVD OKLAHOMA CITY, OK 73105				17,406.
OKIMIONA CITT, OK 75105				17,400.
NEWVIEW OKLAHOMA 501 N DOUGLAS AVE		PC	SUPPORT NEWVIEW'S MISSION TO ENABLE TO BLIND TO REACH INDEPENDENCE	
OKLAHOMA CITY, OK 73106				91,000.
NEXTGEN UNDER 30 FOUNDATION 3240 W BRITTON RD STE 101		₽C	TO RECOGNIZE MILLENNIAL LEADERS IN OKLAHOMA	
OKLAHOMA CITY, OK 73120				2,500.
NORTHEASTERN STATE UNIVERSITY FOUNDATION 600 NORTH GRAND AVE		PC	COLLEGE OF OPTOMETRY	
TAHLEQUAH, OK 74464				250,000.
OK ALLIANCE FOR ARTS ED		PC	DOE ARTS OF EXCELLENCE CEREMONY	
PO BOX 1275				
JENKS, OK 74037-1275				8,200.
OK ASSN AREAS AGCY AGING		PC	DIRECT SERVICES TO THE ELDERLY	
719 WEST MAINE				F.10. 6:5
ENID, OK 73701-5413				748,643.
Total from continuation sheets				3,918,703.

3a Grants and Contributions Paid During the Year				
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
OKLAHOMA 4-H 205 4-H YOUTH DEVELOPMENT BUILDING STILLWATER, OK 74078		₽C	SUPPORT YOUTH DEVELOPMENT IN OKLAHOMA	925,065.
OKLAHOMA FFA FOUNDATION 1500 W 7TH ST STILLWATER, OK 74074		₽C	SUPPORT LEADERSHIP, PERSONAL GROWTH, AND CAREER SUCCESS PROGRAMMING	5,000.
OKLAHOMA STATE UNIVERSITY FOUNDATION 400 SOUTH MONROE STILLWATER, OK 74074		₽C	KOSU CIVIC INFORMATION PROJECT	156,000.
OSD SENIOR CITIZEN'S HEARING AID PROGRAM 1100 E OKLAHOMA AVE SULPHUR, OK 73086		₽C	PROVIDE HEARING AIDS AND TESTING TO LOW INCOME INDIVIDUALS	125,000.
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PC	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	190,000.
PONTOTOC TECH CENTER 2610 SAM NOBLE PARKWAY ARDMORE, OK 73401		PC	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	6,000.
REGIONAL FOOD BANK 3355 S. PURDUE OKLAHOMA CITY, OK 73137		₽C	ASSISTANCE FOR EDUCATION & COMMUNITY	91,426.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	_	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
SMART START CENTRAL OKLAHOMA, INC		PC	SCHOOL READINESS PROGRAMMING	
PO BOX 21505				100 000
OKLAHOMA CITY, OK 73156				100,000.
SOUTHERN TECH CENTER		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
2610 SAM NOBLE PARKWAY		PC	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
ARDMORE, OK 73401				2,000.
TULSA TECH		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
PO BOX 477200				
TULSA, OK 74147				34,000.
UNIVERSITY OF SCIENCE & ARTS OF OKLAHOMA		PC	SUPPORT GENERAL SCHOLARSHIP AWARDS AND PROGRAM COSTS	
FOUNDATION				
1727 W ALABAMA				
CHICKASHA, OK 73018				5,000.
MOORE-NORMAN TECHNOLOGY CENTER PO BOX 4701		PC	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
NORMAN , OK 73070-4701				12,000.
METRO TECHNOLOGY CENTERS		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
1900 SPRINGLAKE DR				
OKLAHOMA CITY, OK 73111				50,000.
AUTISM CENTER FOUNDATION		₽C	TO HELP CHILDREN WITH AUTISM THROUGH INTERNSHIPS,	
3901 NW 63RD ST			COACHING, MENTORING PROGRAMS	
OKLAHOMA CITY, OK 73116				25,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	_			
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
VIZAVANCE 6 NE 63RD OKLAHOMA CITY, OK 73105		PC	VISON SCREENING CHILDREN IN PUB SCH	200,000.
AUTRY TECHNOLOGY CENTER 1201 W WILLOW RD ENID, OK 73703		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	6,000.
CANADIAN VALLEY TECH CENTER 1701 S CZECH HALL RD YUKON, OK 73099		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	56,000.
CAVETT KIDS FOUNDATION 3801 N CLASSEN BLVD STE 300 OKLAHOMA CITY, OK 73118		₽C	SERVE CHILDREN WITH VARIOUS LIFE-THREATENING AND CHRONIC ILLNESSES	20,032.
CHARITY FDN PUBLIC ED PO BOX 2406 EDMOND, OK 73083-2406		PC	ASSISTANCE FOR COMMUNITY	19,715.
COALITION OF OKLAHOMA BREASTFEEDING ADVOCATES 720 W WILSHIRE, SUITE 101-H OKLAHOMA CITY, OK 73116		PC	PUBLIC EDUCATION SUPPORT	40,000.
COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106		PC	FEED THE HUNGRY OF EASTERN OKLAHOMA	14,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year		_		
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	Purpose of grant or contribution	Amount
- Name and address (nome of business)	or substantial contributor	recipient		
DALE K. GRAHAM VETERANS FOUNDATION		PC	TO ASSIST VETERANS WITH ADMINISTRATION CLAIMS PROCESS	
1268 N INTERSTATE DR NORMAN , OK 73072				25,000.
DEAN MCGEE EYE INSTITUTE FOUNDATION 608 STANTON L. YOUNG BLVD		PC	EDUCATIONAL SPEAKER SERIES	
OKLAHOMA CITY, OK 73104				260,032.
PERMIT AV			OW MAGONIG MOURIN ORGANISMAN PONNITANI	
DEMOLAY PO BOX 2406		PC	OK MASONIC YOUTH ORG ANNUAL DONATION	
EDMOND, OK 73083-2406				17,805.
MERIDIAN TECHNOLOGY CENTER		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
1312 S SANGRE RD STILLWATER, OK 74074				12,000.
GEORGE WASHINGTON MASONIC NATIONAL		PC	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL	
MEMORIAL 101 CALLAHAN DRIVE			MUSEUM	
ALEXANDRIA, VA 22301				18,210.
GREENWOOD CULTURAL CENTER INC 322 N GREENWOOD AVE		PC	TO PROMOTE, PRESERVE, AND CELEBRATE AFRICAN AMERICAN CULTURE AND HERITAGE.	
TULSA, OK 74120				17,552.
HEARTS FOR HEARING		PC	CHILDREN'S AUDIOLOGY CARE	
11500 N PORTLAND AVE				
OKLAHOMA CITY, OK 73120				50,000.
Total from continuation sheets				

3a Grants and Contributions Paid During the Year	_			
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
JOBS DAUGHTERS PO BOX 2406 EDMOND, OK 73083-2406		₽C	OK MASONIC YOUTH ORG ANNUAL DONATION	2,930.
JUNIOR ACHIEVEMENT OF OKLAHOMA 211 N ROBINSON AVE #201 OKLAHOMA CITY, OK 73102		₽C	GRANT FOR RURAL SCHOOL PROGRAM	70,000.
KIAMICHI TECH CENTER PO BOX 699 HUGO, OK 74743		₽C	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	8,000.
MASONIC CHARITY FDN PUBLIC CHARITY PO BOX 2406 EDMOND, OK 73083-2406		₽C	ASSISTANCE FOR COMMUNITY	56,551.
MASONIC CHARITY FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		₽C	71 RECIPIENTS PLUS EXPENSES	126,000.
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 20910-4785		₽C	SUPPORT OF MASONIC EDUCATION TO PUBLIC	1,500.
MASONIC SERVICE ASSN 8125 FENTON STREET SILVER SPRING, MD 20910-4785		PC	SUPPORT FOR DISASTER RELIEF, ETC.	4,000.
8125 FENTON STREET		₽C	SUPPORT FOR DISASTER RELIEF, ETC.	4,

Supplementary Information (cont	nued)			
3a Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
GREEN COUNTRY TECH CENTER		PC	SCHOLARSHIPS FOR OKLAHOMA HEALTH CARE WORKERS	
1100 OK-56 LOOP				
OKMULGEE, OK 74447				14,000
YMCA		PC	MILITARY WELCOME CENTER	
7130 AIR CARGO RD			HIBITAKI WENCOME CENTER	
OKLAHOMA CITY, OK 73159				12,080
STATE OF THE PROPERTY OF THE P				12,000
	i	1	I	i

Total from continuation sheets

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

73-6097262

2021

Name of the organization Employer identification number

## Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2021)

Page 2

Name of organization Emp

Employer identification number

### MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERTRUDE MOORE TESTAMENTARY TRUST  PO BOX 5555  MCALLEN, TX 78502-5555	\$18,006.	Person X Payroll  Noncash  (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  400 MARKET STREET  CANTON, OH 44702	\$10,209.	Person X Payroll  Noncash  (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  PO BOX 21708  OKLAHOMA CITY, OK 73156	\$62,500.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ARTHUR JOHN EASTWOOD TRUST  3801 VIA DE LA URRACA  GREEN VALLEY, AZ 85614	\$15,770.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	OSCAR FRANKLIN SHAW TESTAMENTARY TRUST JP MORGAN, TRUSTEE 2200 ROSS AVE, FLOOR 05  DALLAS, TX 75201	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ESTATE OF LEO V LEGG  1437 S BOULDER AVE, STE 1200  TULSA, OK 74119-3636	\$	Person X Payroll

Schedule B (Form 990) (2021) Page **2** 

Name of organization Employer identification number

### MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ESTATE OF MELVA G PRESLEY  196 E BLUE HERON LN  MERIDIAN, ID 83646-5544	\$117,142.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization Employer identification number

### MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		     \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b></b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		     \$	

Name of organization Employer identification number

	C CHARITY FOUNDATION O		73-6097262
Part III	from any one contributor. Complete columns (	a) through (e) and the following line ent	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yetry. For organizations
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	charitable, etc., contributions of \$1,000 or I space is needed.	less for the year. (Enter this info. once.)  \$
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		.,	
		(e) Transfer of gift	it
	Tuanafanasla nama addusas		Deletionaliza of two of own to two of own
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(S) Larpoot of girt	(0) 000 01 giit	(a) Becompact of now girl to ficial
		(e) Transfer of gift	<del>_</del> <del>t</del>
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from	(1) D	(2) 11-2-26-219	(I) Paradation of house 17 is hold
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
H		(e) Transfer of gift	
		(e) Transier of gin	•
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from		4 > 2 - 2 - 2	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	4
		(e) Transier of gin	·
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee

FORM 990-PF INTERI	EST ON SAVI	NGS AND	TEMPOR	ARY C	CASH I	INVESTMENTS	STATEMENT 1
SOURCE			(A) REVENUE ER BOOK		-	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
NOW INTEREST			6,4	101.		6,401.	
TOTAL TO PART I, L	INE 3		6,4	101.		6,401.	
FORM 990-PF	DIVIDEND	S AND IN	ITEREST	FROM	I SECU	JRITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPI GAI DIVII	INS	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO	
DIVIDENDS INVESTMENT	1,904,352		0.			1,904,35	
INTEREST TO PART I, LINE 4	904,575		0.		)4,575  )8,927	904,57 	<del></del>
						<del></del>	<del></del>
FORM 990-PF		ОТНЕ	R INCO	ME			STATEMENT 3
DESCRIPTION				(A) VENUE BOOK		(B) NET INVEST- MENT INCOME	
ROYALTIES FIDUCIARY FEE INCOM	ME		1	.,112,	171.	1,112,171	
TOTAL TO FORM 990-1	PF, PART I,	LINE 11	. 1	,112,	184.	1,112,184	
FORM 990-PF		т.т	GAL FE				STATEMENT 4
							OTHIDIDINI 4
DESCRIPTION		(A) EXPENSE PER BOO		(B) T INV NT IN	EST-	(C) ADJUSTED NET INCOM	
LEGAL AND PROFESSION EXPENSE	ONAL	6,3	302.		0 .		6,302.
TO FM 990-PF, PG 1	, LN 16A	6,3	302.		0	•	6,302.
	=						<del></del>

8,806.

3,269.

4,421.

7,953.

1,042.

10,436.

92,961.

18,278.

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING EXPENSE	63,700.	0.		63,700.	
TO FORM 990-PF, PG 1, LN 16B	63,700.	0.		63,700.	
FORM 990-PF	TAX	ES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX MINERAL TAXES REAL ESTATE TAXES PAYROLL TAXES EXCISE TAX	83. 1,052. 199. 21,490. 175,000.	1,052. 199. 0.		0. 0. 0. 21,490.	
TO FORM 990-PF, PG 1, LN 18	197,824.	1,334.		21,490.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATIVE EXPENSE BANK CHARGES COMPUTER EXPENSE INSURANCE MANAGEMENT FEE	6,056. 1,936. 15,689. 15,075. 327,629.	0. 0. 0.		6,056. 1,936. 15,689. 15,075.	

0.

0.

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327,629.

8,806.

3,269.

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7,953.

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10,436.

420,590.

18,278.

OFFICE SUPPLIES

PROPERTY MAINTENANCE REPAIRS AND EQUIPMENT

TRAINING AND MEMBERSHIPS

TO FORM 990-PF, PG 1, LN 23

POSTAGE

TELEPHONE

UTILITIES

FORM 990-PF U.S. AND STATE/C	ITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERMENT OBLIGATIONS	X		6,245,586.	6,245,586
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	6,245,586.	6,245,586
TOTAL STATE AND MUNICIPAL GOVERNMENT	T OBLIG	ATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	10A	=	6,245,586.	6,245,586.
FORM 990-PF CORE	PORATE	STOCK	<del></del>	STATEMENT 9
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		-	95,476,495.	95,476,495.
TOTAL TO FORM 990-PF, PART II, LINE	10в	=	95,476,495.	95,476,495.
FORM 990-PF OTHER	R INVES	TMENTS		STATEMENT 10
DESCRIPTION		ATION HOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN LIMITED PARTNERSHIP MINERAL RIGHTS PRIVATE EQUITY REAL ESTATE	CO CO	ST ST ST ST	7,068,839. 1,235. 37,000. 16.	7,068,839 1,235 37,000 16
TOTAL TO FORM 990-PF, PART II, LINE	<u>-</u>	7,107,090.	7,107,090.	
		=		

ACCOUNTING SOFTWARE  COMPUTER(3) - WORKROOM, HP  LAPTOP  SERVER SOFTWARE  BUILDING  SERVER SOFTWARE  540.  5	990-PF DEPRECIATION OF ASSET	S NOT HELD FOR	INVESTMENT	STATEMENT 11
DESCRIPTION  ACCOUNTING SOFTWARE COMPUTER(3) - WORKROOM, HP  LAPTOP 3,727. 3,727. 540.  ENERGY SOFTWARE 540. 540. 540. 540. 540. 540. 540. 540.		COST OR	ACCUMULATED	
COMPUTER(3)-WORKROOM, HP LAPTOP 3,727. 3,727.  BATTOP 3,727. 3,727.  SERVER SOFTWARE 540. 540.  BUILDING 359,833. 278,875.  PARKING LOT ADDITION 20,987. 20,987.  SERVER 12,024. 12,024.  CARPET/LINOLEUM-NORTHCUTT 13,083. 13,083.  MELODIE PC 1,008. 1,008.  DELL LAPTOP 673. 673.  SIDEWALK, PICNIC PAD 4,332. 1,878.  CABLE/ELEC/LED FIXTURE INSTALL 1,793. 358.  INTAACT ACCOUNTING SOFTWARE 8,730. 8,730.  PROJECTOR 906. 906.  HVAC UNIT, SOUTH SIDE 7,162. 1,170.  POSTAGE MACHINE 1,826. 1,734.  XEROX C8045H2 COPIER 12,414. 10,139.  SAMSUNG REFRIGERATOR 1,228. 984.  LAND 147,457. 0.  SPRINKLER SYSTEM REPLACEMENT 12,520. 504.  HVAC UNIT, 3 OF 3 7,162. 910.  HVAC UNIT, 3 OF 3 8,018. 1,022.  2018 FORD EXPLORER 36,443. 25,513.  3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782.  BECKY PC 1,030. 721.  TAG, TAX, & TITLE 1,750. 1,050.  ROOF REPLACEMENT 84,946. 4,906.  OFFICE CHAIRS 1,169. 702.  DELL LATITUDE LAPTOP 1,566. 470.  FORM 990-PF OTHER ASSETS STATE  BEGINNING OF END OF YEAR FAIR  DESCRIPTION BEGINNING OF END OF YEAR FAIR  DESCRIPTION PROOF VALUE BOOK VALUE PAIR  BEGINNING OF END OF YEAR FAIR  PROOF VALUE BOOK VALUE PAIR  PAIR  STATE  BEGINNING OF END OF YEAR FAIR  PROOF VALUE PAIR  PAIR  PROOF VALUE PAIR  PAIR  PROOF VALUE PAIR  PAIR  PAIR  PROOF VALUE PAIR  P	IPTION			BOOK VALUE
LAPPOOP 3,727. 3,727. 540. 540. 540. 540. 540. 540. 540. 540	TING SOFTWARE	6,000.	6,000.	0
SERVER SOFTWARE BUILDING 359, 833. 278, 875. PARKING LOT ADDITION 20,987. 20,987. SERVER 12,024. 12,024. CARPET/LINOLEUM-NORTHCUTT 13,083. 13,083. MELODIE PC 1,008. 1,008. DELL LAPTOP 673. 673. SIDEWALK, PICNIC PAD 4,332. 1,878. CABLE/ELEC/LED FIXTURE INSTALL 1,793. 358. INTAACT ACCOUNTING SOFTWARE 8,730. 8,730. PROJECTOR 906. 906. HVAC UNIT, SOUTH SIDE 7,162. 1,170. POSTAGE MACHINE 1,826. 1,734. XEROX C8045H2 COPIER 12,414. 10,139. SAMSUNG REFRIGERATOR 1,228. 984. LAND 147,457. 0. SPRINKLER SYSTEM REPLACEMENT 2,520. 504. HVAC UNIT, 2 OF 3 7,162. 910. HVAC UNIT, 3 OF 3 8,018. 1,022. 2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. 1,050. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. 702. DELL LATITUDE LAPTOP 1,566. 470.  BEGINNING OF END OF YEAR FAIR DESCRIPTION BEGINNING OF END OF YEAR FAIR DESCRIPTION PRO OTHER ASSETS STATE	TER(3)-WORKROOM, HP			
BUILDING 359,833. 278,875. PARRING LOT ADDITION 20,987. 20,987. 20,987. SERVER 12,024. 12,024. CARPET/LINOLEUM-NORTHCUTT 13,083. 13,083. MELODIE PC 1,008. 1,008. DELL LAPTOP 673. 673. SIDEWALK, PICNIC PAD 4,332. 1,878. CABLE/ELEC/LED FIXTURE INSTALL 1,793. 358. INTAACT ACCOUNTING SOFTWARE 8,730. 8,730. PROJECTOR 906. 906. HVAC UNIT, SOUTH SIDE 7,162. 1,170. POSTAGE MACHINE 1,826. 1,734. XEROX C8045H2 COPIER 12,414. 10,139. SAMSUNG REFRIGERATOR 1,228. 984. LAND 147,457. 0. SPRINKLER SYSTEM REPLACEMENT 2,520. 504. HVAC UNIT, 2 OF 3 7,162. 910. HVAC UNIT, 2 OF 3 8,018. 1,022. 2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. 1,050. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. 702. DELL LATITUDE LAPTOP 1,566. 470. TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.	P	3,727.	3,727.	0
PARKING LOT ADDITION 20,987. 20,987. SERVER 12,024. 12,028. 12,008. 12	R SOFTWARE	540.	540.	0
SERVER CARPET/LINOLEUM-NORTHCUTT 13,083. 13,083. DELL LAPTOP 673. 673. SIDEWALK, PICNIC PAD CABLE/ELEC/LED FIXTURE INSTALL INTAACT ACCOUNTING SOFTWARE RVAC UNIT, SOUTH SIDE ALAND SAMSUNG REFRIGERATOR LAND SAMSUNG REFRIGERATOR LAND SAMSUNG REFRIGERATOR HVAC UNIT, 2 OF 3 RVAC UNIT, 3 OF 3 RVAC UNIT, 2 OF 3 RVAC UNIT, 3 OF 3 RVAC UNIT, 2 OF 3 RVAC UNIT, 3 OF 3 RVAC UNIT, 4 OF 3 RVAC UNIT, 5 OF 5 RVAC UNIT, 6 OF 5 RVAC UNIT, 7 OF 7 RVAC UNIT, 7 OF 7 RVAC UNIT, 8 OF 7 RVAC UNIT, 8 OF 7 RVAC UNIT, 9 OF 8 RVAC UNIT, 9	ING	359,833.	278,875.	80,958
CARPET/LINOLEUM-NORTHCUTT 13,083. 13,083.  MELODIE PC 1,008. 1,008. 1,008.  DELL LAPTOP 673. 673. 673. SIDEWALK, PICNIC PAD 4,332. 1,878. CABLE/ELEC/LED FIXTURE INSTALL 1,793. 358. INTAACT ACCOUNTING SOFTWARE 8,730. 8,730. PROJECTOR 906. 906. 906. HVAC UNIT, SOUTH SIDE 7,162. 1,170. POSTAGE MACHINE 1,826. 1,734. XEROX C8045H2 COPIER 12,414. 10,139. SAMSUNG REFRIGERATOR 1,2414. 10,139. SAMSUNG REFRIGERATOR 1,228. 984. LAND 147,457. 0. SPRINKLER SYSTEM REPLACEMENT 2,520. 504. HVAC UNIT, 3 OF 3 7,162. 910. HVAC UNIT, 3 OF 3 8,018. 1,022. 2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. 1,050. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. 702. DELL LATITUDE LAPTOP 1,566. 470. TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.	NG LOT ADDITION	20,987.	20,987.	0
MELODIE PC DELL LAPTOP DELL LAPTOP DELL LAPTOP  SIDEWALK, PICNIC PAD  A 332.  A 873.  CABLE/ELEC/LED FIXTURE INSTALL  I 793.  S58.  INTAACT ACCOUNTING SOFTWARE  PROJECTOR PROJECTOR PO6. PO6. PO6. PO6. PO7. POSTAGE MACHINE POSTAGE POSTAGE MACHINE POSTAGE	R	12,024.	12,024.	0
DELL LAPTOP 673. 673. 878. 878. 878. 878. 878. 878. 878. 8	T/LINOLEUM-NORTHCUTT	13,083.	13,083.	0
SIDEWALK, PICNIC PAD  CABLE/ELEC/LED FIXTURE INSTALL  INTAACT ACCOUNTING SOFTWARE  ROJECTOR  HVAC UNIT, SOUTH SIDE  POSTAGE MACHINE  SAMSUNG REFRIGERATOR  LAND  SPRINKLER SYSTEM REPLACEMENT  HVAC UNIT, 2 OF 3  HVAC UNIT, 3 OF 3  PROJECTOR  ROJECTOR  10,414  10,139  SPRINKLER SYSTEM REPLACEMENT  HVAC UNIT, 2 OF 3  POSTAGE MACHINE  147,457  0.  SPRINKLER SYSTEM REPLACEMENT  HVAC UNIT, 2 OF 3  ROJECTOR  RO	IE PC	1,008.	1,008.	0
CABLE/ELEC/LED FIXTURE INSTALL INTAACT ACCOUNTING SOFTWARE PROJECTOR PROJECTOR POSTAGE MACHINE POSTAGE MACHINE SIDE 1,7162. 1,170. POSTAGE MACHINE 1,826. 1,734. XEROX C8045H2 COPIER 12,414. 10,139. SAMSUNG REFRIGERATOR 1,228. SP4. LAND 147,457. 0. SPRINKLER SYSTEM REPLACEMENT PVAC UNIT, 2 OF 3 7,162. HVAC UNIT, 3 OF 3 8,018. 1,022. 2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) BECKY PC 1,030. TAG, TAX, & TITLE 1,750. ROOF REPLACEMENT 84,946. FORM 990-PF, PART II, LN 14 POSTAGE  BEGINNING OF BEGINNING OF BOOK VALUE  BEGINNING OF BEGINNING OF BOOK VALUE  BEGINNING OF BEGINNING OF BOOK VALUE  BOOK VALUE  BOOK VALUE  PAGE  FAIR  DESCRIPTION  BEGINNING OF BOOK VALUE  BOOK VALUE  PAGE  PAGE  PAGE  PAGE PAGE PAGE PAGE	LAPTOP			0
CABLE/ELEC/LED FIXTURE INSTALL 1,793. 358. INTACAT ACCOUNTING SOFTWARE 8,730. 8,730. PROJECTOR 906. 906. HVAC UNIT, SOUTH SIDE 7,162. 1,170. POSTAGE MACHINE 1,826. 1,734. XEROX C8045H2 COPIER 12,414. 10,139. SAMSUNG REFRIGERATOR 1,228. 984. LAND 147,457. 0. SPRINKLER SYSTEM REPLACEMENT 2,520. 504. HVAC UNIT, 2 OF 3 7,162. 910. HVAC UNIT, 3 OF 3 8,018. 1,022. 2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. 1,050. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. 702. DELL LATITUDE LAPTOP 1,566. 470.  FORM 990-PF OTHER ASSETS STATE  BEGINNING OF END OF YEAR BOOK VALUE BOOK VALUE VALUE VALUE AND VALUE VALUE VALUE VALUE AND VALUE	ALK, PICNIC PAD	4,332.	1,878.	2,454
Intaact accounting software		_		1,435
HVAC UNIT, SOUTH SIDE 7,162. 1,170.  POSTAGE MACHINE 1,826. 1,734.  XEROX C8045H2 COPIER 12,414. 10,139.  SAMSUNG REFRIGERATOR 1,228. 984.  LAND 147,457. 0.  SPRINKLER SYSTEM REPLACEMENT 2,520. 504.  HVAC UNIT, 2 OF 3 7,162. 910.  HVAC UNIT, 3 OF 3 8,018. 1,022.  2018 FORD EXPLORER 36,443. 25,513.  3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782.  BECKY PC 1,030. 721.  TAG, TAX, & TITLE 1,750. 1,050.  ROOF REPLACEMENT 84,946. 4,906.  OFFICE CHAIRS 1,169. 702.  DELL LATITUDE LAPTOP 1,566. 470.  TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.  BEGINNING OF END OF YEAR FAIR  DESCRIPTION PR BOOK VALUE BOOK VALUE VI	CT ACCOUNTING SOFTWARE	8,730.	8,730.	0
POSTAGE MACHINE  XEROX C8045H2 COPIER  12,414.  10,139.  SAMSUNG REFRIGERATOR  1,228.  984.  LAND  147,457.  0.  SPRINKLER SYSTEM REPLACEMENT  HVAC UNIT, 2 OF 3  HVAC UNIT, 3 OF 3  2018 FORD EXPLORER  36,443.  3PCS (JOHN/JULIE/ETHEL)  BEGINNING OF  TOTAL TO FM 990-PF, PART II, LN 14  DESCRIPTION  BEGINNING OF  YR BOOK VALUE  BOOK VALUE  1,734.  10,139.  544.  10,139.  504.  1,62.  910.  504.  1,022.  910.  504.  1,022.  910.  504.  1,022.  910.  1,022.  2018 FORD EXPLORER  36,443.  25,513.  3,974.  2,782.  1,030.  721.  1,050.  1,050.  401,396.  FORM 990-PF  OTHER ASSETS  STATE  DESCRIPTION  BEGINNING OF  YR BOOK VALUE  BOOK VALUE  VI	CTOR	_		0
POSTAGE MACHINE  XEROX C8045H2 COPIER  12,414. 10,139.  SAMSUNG REFRIGERATOR  1,228. 984.  LAND  147,457. 0.  SPRINKLER SYSTEM REPLACEMENT  HVAC UNIT, 2 OF 3  T,162. 910.  HVAC UNIT, 3 OF 3  ROBERT STATE  BEGINNING OF  FORM 990-PF  OTHER ASSETS  1,734.  1,0139.  1,028.  1,022.  1,030. 721.  1,050.  1,	UNIT, SOUTH SIDE	7,162.	1,170.	5,992
XEROX C8045H2 COPIER       12,414.       10,139.         SAMSUNG REFRIGERATOR       1,228.       984.         LAND       147,457.       0.         SPRINKLER SYSTEM REPLACEMENT       2,520.       504.         HVAC UNIT, 2 OF 3       7,162.       910.         HVAC UNIT, 3 OF 3       8,018.       1,022.         2018 FORD EXPLORER       36,443.       25,513.         3 PCS (JOHN/JULIE/ETHEL)       3,974.       2,782.         BECKY PC       1,030.       721.         TAG, TAX, & TITLE       1,750.       1,050.         ROOF REPLACEMENT       84,946.       4,906.         OFFICE CHAIRS       1,169.       702.         DELL LATITUDE LAPTOP       1,566.       470.         TOTAL TO FM 990-PF, PART II, LN 14       752,301.       401,396.         FORM 990-PF       OTHER ASSETS       STATE         DESCRIPTION       BEGINNING OF PARK PAIR       FAIR         DESCRIPTION       YR BOOK VALUE       BOOK VALUE       VZ		_		92
SAMSUNG REFRIGERATOR       1,228.       984.         LAND       147,457.       0.         SPRINKLER SYSTEM REPLACEMENT       2,520.       504.         HVAC UNIT, 2 OF 3       7,162.       910.         HVAC UNIT, 3 OF 3       8,018.       1,022.         2018 FORD EXPLORER       36,443.       25,513.         3 PCS (JOHN/JULIE/ETHEL)       3,974.       2,782.         BECKY PC       1,030.       721.         TAG, TAX, & TITLE       1,750.       1,050.         ROOF REPLACEMENT       84,946.       4,906.         OFFICE CHAIRS       1,169.       702.         DELL LATITUDE LAPTOP       1,566.       470.         TOTAL TO FM 990-PF, PART II, LN 14       752,301.       401,396.         FORM 990-PF       OTHER ASSETS       STATE         DESCRIPTION       BEGINNING OF END OF YEAR FAIR         DESCRIPTION       YR BOOK VALUE BOOK VALUE BOOK VALUE       VALUE	C8045H2 COPIER			2,275
147,457.   0.	NG REFRIGERATOR			244
SPRINKLER SYSTEM REPLACEMENT       2,520.       504.         HVAC UNIT, 2 OF 3       7,162.       910.         HVAC UNIT, 3 OF 3       8,018.       1,022.         2018 FORD EXPLORER       36,443.       25,513.         3 PCS (JOHN/JULIE/ETHEL)       3,974.       2,782.         BECKY PC       1,030.       721.         TAG, TAX, & TITLE       1,750.       1,050.         ROOF REPLACEMENT       84,946.       4,906.         OFFICE CHAIRS       1,169.       702.         DELL LATITUDE LAPTOP       1,566.       470.         TOTAL TO FM 990-PF, PART II, LN 14       752,301.       401,396.         FORM 990-PF       OTHER ASSETS       STATE         DESCRIPTION       BEGINNING OF END OF YEAR BOOK VALUE       FAIR         DESCRIPTION       YR BOOK VALUE       BOOK VALUE       VALUE				147,457
HVAC UNIT, 2 OF 3 HVAC UNIT, 3 OF 3 HVAC UNIT, 3 OF 3 BORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. TOTAL TO FM 990-PF, PART II, LN 14 T52,301.  BEGINNING OF END OF YEAR FAIR DESCRIPTION  BEGINNING OF END OF YEAR FAIR VR BOOK VALUE BOOK VALUE  VI	KLER SYSTEM REPLACEMENT	_	504.	2,016
HVAC UNIT, 3 OF 3			910.	6,252
2018 FORD EXPLORER 36,443. 25,513. 3 PCS (JOHN/JULIE/ETHEL) 3,974. 2,782. BECKY PC 1,030. 721. TAG, TAX, & TITLE 1,750. 1,050. ROOF REPLACEMENT 84,946. 4,906. OFFICE CHAIRS 1,169. 702. DELL LATITUDE LAPTOP 1,566. 470.  TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.  FORM 990-PF OTHER ASSETS STATE  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE BOOK VALUE VALUE BOOK VALUE VALUE STATE  BEGINNING OF BOOK VALUE BOOK VALUE STATE  BEGINNING OF BOOK VALUE BOOK VALUE VALUE STATE  BEGINNING OF BOOK VALUE STATE  BEGINNING STATE  B			1,022.	6,996
3 PCS (JOHN/JULIE/ETHEL)  BECKY PC  1,030. 721. TAG, TAX, & TITLE  1,750. 1,050. ROOF REPLACEMENT  84,946. 4,906. OFFICE CHAIRS  1,169. 702. DELL LATITUDE LAPTOP  1,566.  TOTAL TO FM 990-PF, PART II, LN 14  752,301.  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE  BOOK VALUE  V				10,930
### BECKY PC		_		1,192
TAG, TAX, & TITLE 1,750. 1,050.  ROOF REPLACEMENT 84,946. 4,906.  OFFICE CHAIRS 1,169. 702.  DELL LATITUDE LAPTOP 1,566. 470.  TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.  FORM 990-PF OTHER ASSETS STATE  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE BOOK VALUE VA		_		309
ROOF REPLACEMENT OFFICE CHAIRS 1,169. DELL LATITUDE LAPTOP 1,566.  TOTAL TO FM 990-PF, PART II, LN 14  FORM 990-PF OTHER ASSETS  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE BOOK VALUE  VA				700
OFFICE CHAIRS DELL LATITUDE LAPTOP 1,566.  TOTAL TO FM 990-PF, PART II, LN 14  FORM 990-PF  OTHER ASSETS  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE  BOOK VALUE  VA		_		80,040
DELL LATITUDE LAPTOP 1,566. 470.  TOTAL TO FM 990-PF, PART II, LN 14 752,301. 401,396.  FORM 990-PF OTHER ASSETS STATE  DESCRIPTION BEGINNING OF END OF YEAR FAIR YR BOOK VALUE BOOK VALUE VA				467
FORM 990-PF OTHER ASSETS STATE  BEGINNING OF END OF YEAR FAIR YR BOOK VALUE BOOK VALUE VA				1,096
BEGINNING OF END OF YEAR FAIR DESCRIPTION YR BOOK VALUE BOOK VALUE VA	TO FM 990-PF, PART II, LN 14	752,301.	401,396.	350,905
BEGINNING OF END OF YEAR FAIR DESCRIPTION YR BOOK VALUE BOOK VALUE VA	990-PF C	THER ASSETS		STATEMENT 12
DESCRIPTION YR BOOK VALUE BOOK VALUE VA				
	IPTION Y			FAIR MARKET VALUE
ENTAILED BEQUESTS 15. 15.	LED BEQUESTS	15.	15.	15
INSURANCE POLICIES 4. 4.	ANCE POLICIES	4.	4.	4
TO FORM 990-PF, PART II, LINE 15 19. 19.	RM 990-PF, PART II, LINE 15	19.	19.	19

	OF OFFICERS, DI FOUNDATION MANA		STAT	EMENT 13
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
BEDFORD ROWLAND JR. 1104 CANTERBURY BLVD ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
BOBBY LAWS 1202 N. HUDSON ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
CHARLES CALLAHAN PO BOX 1254 BLANCHARD, OK 73010	2ND VICE PRESI 1.00	IDENT 0.	0.	0.
CHARLES STUCKEY 132 ROADRUNNER DRIVE PONCA CITY, OK 74604	DIRECTOR 1.00	0.	0.	0.
D. RIDGE SMITH PO BOX 851123 YUKON, OK 73085	DIRECTOR 1.00	0.	0.	0.
DAVID RAY 11921 MAPLE VALLEY DRIVE OKLAHOMA CITY, OK 73170	DIRECTOR 1.00	0.	0.	0.
DON STANTON 6729 S 223RD EAST AVE BROKEN ARROW, OK 74014	DIRECTOR 1.00	0.	0.	0.
GENE MCKELVEY 6704 NW 61ST ST. WARR ACRES, OK 73122	DIRECTOR 1.00	0.	0.	0.
JACK PAINTER 19498 E 650 RD HENNESSEY, OK 73742	DIRECTOR 1.00	0.	0.	0.
JOHN ALLFORD PO BOX 3361 MCALESTER, OK 74502	DIRECTOR 1.00	0.	0.	0.

MASONIC CHARITY FOUNDATION OF	F OKLAHOMA		73-	-6097262
JOHN CHURCH 11904 S RANGE RD PERKINS, OK 74059	DIRECTOR 1.00	0.	0.	0.
JOHN LOGAN 13913 KIRKLAND RIDGE EDMOND, OK 73013	EXECUTIVE DIRECTO 40.00	DR 189,593.	26,472.	0.
LANNY SANDER PO BOX 141 SEILING, OK 73663	DIRECTOR 1.00	0.	0.	0.
MATTHEW CARGILL PO BOX 472150 TULSA, OK 74147	DIRECTOR 1.00	0.	0.	0.
MICHAEL MAXEY 4339 E 58TH PLACE TULSA, OK 74135	DIRECTOR 1.00	0.	0.	0.
NEIL STITT 710 W. BROADWAY ARDMORE, OK 73401	1ST VICE PRESIDEN 1.00	0.	0.	0.
RICHARD ALLISON 2502 WILDWOOD ENID, OK 73703	DIRECTOR 1.00	0.	0.	0.
ROBERT DAVIS 411 E NOBLE GUTHRIE, OK 73044	SECRETARY 1.00	0.	0.	0.
RONALD CHAMBERS 8301 E LANSING STREET BROKEN ARROW, OK 74014	TREASURER 1.00	0.	0.	0.
THEDA WISE 10230 BENTHAM WAY YUKON, OK 73099	DIRECTOR 1.00	0.	0.	0.
TIMOTHY ISRAEL PO BOX 1596 ELK CITY, OK 73648	DIRECTOR 1.00	0.	0.	0.
WILLIAM CLOUD PO BOX 651 BLANCHARD, OK 73010	PRESIDENT 1.00	0.	0.	0.

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

189,593. 26,472. 0

FORM 990-PF

## GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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

TELEPHONE NUMBER

405-348-7500

#### FORM AND CONTENT OF APPLICATIONS

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

#### ANY SUBMISSION DEADLINES

NO SPECIFIC DEADLINES ARE APPLICABLE

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

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

### GENERAL EXPLANATION

STATEMENT 15

#### FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

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

#### **EXPLANATION:**

```
SECURITY DESCRIPTON, TOTAL MARKET VALUE
RAYONIER INC REIT 726.48
KOPERNIK GLBL A/C-INST #8201 3,718,683.82
KOPERNIK GLBL A/C-INST #8201 601,858.49
KOPERNIK GLBL A/C-INST #8201 221,504.87
KOPERNIK GLBL A/C-INST #8201 42,019.30
CHAMPLAIN M/C-INST #1355 3,284,387.21
CHAMPLAIN M/C-INST #1355 609,957.64
CHAMPLAIN M/C-INST #1355 215,831.17
CHAMPLAIN M/C-INST #1355 46,919.81
JENSEN QUALITY GRWTH-Y #6299 9,463,671.20
JENSEN QUALITY GRWTH-Y #6299 1,675,263.68
JENSEN QUALITY GRWTH-Y #6299 580,976.12
JENSEN QUALITY GRWTH-Y #6299 128,012.61
VANGUARD EQ INC-ADM #0565 9,132,954.95
VANGUARD EQ INC-ADM #0565 1,618,700.22
VANGUARD EQ INC-ADM #0565 586,857.19
VANGUARD EQ INC-ADM #0565 123,541.88
VANGUARD INSTL INDX-INST #0094 9,385,984.79
VANGUARD INSTL INDX-INST #0094 1,692,091.95
VANGUARD INSTL INDX-INST #0094 588,182.46
VANGUARD INSTL INDX-INST #0094 140,283.63
DFA GLBL R/E SECURITIES-I #5416 3,553,609.18
DFA GLBL R/E SECURITIES-I #5416 580,061.06
DFA GLBL R/E SECURITIES-I #5416 214,339.07
DFA GLBL R/E SECURITIES-I #5416 125,181.56
DODGE & COX INTL STK #1048 5,751,161.24
DODGE & COX INTL STK #1048 1,043,442.45
DODGE & COX INTL STK #1048 381,422.37
DODGE & COX INTL STK #1048 94,128.66
MFS INTL EQ-INST #0403 5,851,873.99
MFS INTL EQ-INST #0403 1,049,873.91
MFS INTL EQ-INST #0403 381,861.86
MFS INTL EQ-INST #0403 87,290.99
VANGUARD TOTAL INTL STK-INST #1869 5,956,717.00
VANGUARD TOTAL INTL STK-INST #1869 1,055,734.19
VANGUARD TOTAL INTL STK-INST #1869 361,965.91
VANGUARD TOTAL INTL STK-INST #1869 80,437.04
BLACKROCK MULTI-ASSET INC-K #1981 4,082,788.53
BLACKROCK MULTI-ASSET INC-K #1981 674,604.23
BLACKROCK MULTI-ASSET INC-K #1981 246,083.91
BLACKROCK MULTI-ASSET INC-K #1981 40,446.37
VANGUARD TOT BD MKT INDX-INST #0222 4,320,677.37
VANGUARD TOT BD MKT INDX-INST #0222 791,526.34
VANGUARD TOT BD MKT INDX-INST #0222 356,141.82
VANGUARD TOT BD MKT INDX-INST #0222 75,615.10
VANGUARD INFL PROT SECS-ADM #5119 2,732,315.49
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VANGUARD INFL PROT SECS-ADM #5119 460,595.95 VANGUARD INFL PROT SECS-ADM #5119 162,006.41 VANGUARD INFL PROT SECS-ADM #5119 35,429.50 VANGUARD L/T TREAS INDX-ADM #1944 2,726,595.93 VANGUARD L/T TREAS INDX-ADM #1944 471,147.40 VANGUARD L/T TREAS INDX-ADM #1944 164,281.67 VANGUARD L/T TREAS INDX-ADM #1944 34,920.08

TOTAL MUTUAL FUNDS 87,802,686.05

SECURITY DESCRIPTON, TOTAL MARKET VALUE ALAMOS GOLD INC. 13,403.67 COEUR MINING INC 3,704.40 COMPASS MINERALS INTERNATION 109,617.68 ELEMENT SOLUTIONS INC 44,723.76 GLATFELTER CORP 68,129.20 PRETIUM RESOURCE 16,809.37 SCHNITZER STEEL INDS INC-A 11,733.92 SILGAN HOLDINGS INC 42,068.88 AAR CORP 35,595.36 AZZ INC 57,612.18 APOGEE ENTERPRISES INC 54,216.90 ASTEC INDUSTRIES INC 39,414.63 BEACON ROOFING SUPPLY INC 30,682.25 CIRCOR INTERNATIONAL INC 42,536.70 COLUMBUS MCKINNON CORP/NY 25,628.04 ENERSYS 46,329.16 KBR INC 49,524.80 QUANEX BUILDING PRODUCTS 36,897.42 REGAL BELOIT 154,693.62 SPX CORP 78,777.60 STERLING CONSTRUCTION CO 38,108.70 SUMMIT MATERIALS INC 34,399.98 SIERRA WIRELESS INC 21,831.18 GILDAN ACTIVEWEAR INC 37,515.15 HARLEY-DAVIDSON INC 43,946.54 MODINE MANUFACTURING CO 20,038.74 PAPA JOHN'S INTL INC 13,347.00 QUOTIENT TECHNOLOGY INC 31,868.90 REV GROUP INC 56,104.75 CORP 48,679.50 SP PLUS SIX FLAGS ENTERTAINMENT 41,302.60 UNDER ARMOUR INC-CLASS A 19,812.65 COTY INC CL A 206,199.00 HAIN CELESTIAL GROUP INC 143,638.31 INTER PARFUMS INC 9,300.30 TREEHOUSE FOODS INC 17,144.19 DRIL-QUIP INC 23,989.92 HELMERICH & PAYNE 19,268.10 PDC ENERGY INC 30,536.28 RANGE RESOURCES CORP 11,429.03 COMMUNITY BANK SYSTEM INC 34,707.68 COUSINS PROPERTIES INC REIT 24,006.88 EHEALTH INC 32,665.50 EMPIRE STATE REALTY TRUST INC 16,064.50 ENTERPRISE FINANCIAL SERVICE 28,159.82 EQUITY COMMONWEALTH REIT 133,100.10 FIRST BUSEY CORP 23,784.24 GLACIER BANCORP INC 37,932.30 HURON CONSULTING GROUP INC 17,265.40

LAKELAND FINANCIAL CORP 30,773.76 NATIONAL BANK HOLDINGS CORP 57,473.52 PACIFIC PREMIER BANCORP INC 33,585.17 PHYSICIANS REIT 27,265.84 RENASANT CORP 22,428.45 SEACOAST BANKING CORP OF FLORIDA 49,546.00 UMPQUA HOLDINGS CORP 55,353.48 UNITED COMMUNITY BANKS INC 57,575.88 WESBANCO INC 30,056.41 ALKERMES PLC 14,514.24 ANGIODYNAMICS INC 18,644.08 ARENA PHARMACEUTICALS INC 55,299.30 ICU MEDICAL INC 58,148.30 MEDNAX INC 28,652.13 ORTHOFIX MEDICAL INC 99,923.26 SURMODICS INC 11,989.35 BELDEN CDT INC 65,992.92 CSG SYSTEMS INTL INC 39,469.70 CONDUENT INC 25,674.72 EVOLENT HEALTH INC 12,728.20 FARO TECHNOLOGIES INC 78,632.46 NCR CORPORATION 131,333.40 PROGRESS SOFTWARE CORP 109,283.28 ALLETE INC 39,279.20 NEW JERSEY RESOURCES CORP 38,144.74 OGE ENERGY CORP 28,823.38 PNM RESOURCES INC 41,733.15 DUE TO BROKERS -8,247.48

TOTAL SBH 3,432,323.62

COHEN & STEERS LP - COHEN & STEERS 5,008,755.96 CHEVRON STOCK 371,407.00

#### SUMMARY OF SECURITIES:

FUND	TOTAL PER FUND	MASONIC	*THROCKMORTON
MUTAL FUNDS SBH SMALL CAP COHEN & STEERS CHEVRON STOCK	87,802,686 3,432,324 5,008,756 371,407	3,392,658	1,054,227 39,665 44,785
TOTAL	96,615,173	95,476,495	1,138,677

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

#### 2021 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1 990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Unadjust Cost Or Ba	ed Bus sis % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
4	ACCOUNTING SOFTWARE COMPUTER(3)-WORKROOM, HP	06/21/05	SL	5.00	1	6,00	0.			6,000.	6,000.		0.	6,000.
9	LAPTOP	07/03/05	SL	5.00	1	3,72	7.			3,727.	3,727.		0.	3,727.
10	SERVER SOFTWARE	01/01/13	SL	5.00	1	5 54	0.			540.	540.		0.	540.
12	BUILDING	06/13/05	SL	40.00	1	359,83	3.			359,833.	269,879.		8,996.	278,875.
13	PARKING LOT ADDITION	06/15/05	SL	20.00	1	20,98	7.			20,987.	20,987.		0.	20,987.
15	SERVER	01/01/13	SL	5.00	1	12,02	4.			12,024.	12,024.		0.	12,024.
16	CARPET/LINOLEUM-NORTHCUTT	01/31/13	SL	7.00	1	13,08	3.			13,083.	13,083.		0.	13,083.
18	MELODIE PC	06/30/14	SL	5.00	1	1,00	8.			1,008.	1,008.		0.	1,008.
20	DELL LAPTOP	12/31/14	SL	5.00	1	67	3.			673.	673.		0.	673.
21	SIDEWALK, PICNIC PAD	10/08/15	SL	15.00	1	4,33	2.			4,332.	1,589.		289.	1,878.
23	CABLE/ELEC/LED FIXTURE INSTALL	10/11/16	SL	27.50	MM1	1,79	3.			1,793.	293.		65.	358.
24	INTAACT ACCOUNTING SOFTWARE	03/11/16	SL	3.00	1	8,73	0.			8,730.	8,730.		0.	8,730.
25	PROJECTOR	07/28/16	SL	5.00	1	5 90	5.			906.	815.		91.	906.
26	HVAC UNIT, SOUTH SIDE	06/21/17	SL	27.50	MM1	7,16	2.			7,162.	910.		260.	1,170.
27	POSTAGE MACHINE	04/05/17	SL	5.00	1	1,82	6.			1,826.	1,369.		365.	1,734.
28	XEROX C8045H2 COPIER	11/30/17	SL	5.00	1	12,41	4.			12,414.	7,656.		2,483.	10,139.
29	SAMSUNG REFRIGERATOR	12/28/17	SL	5.00	1	1,22	в.			1,228.	738.		246.	984.
30	LAND	01/01/90	L			147,45	7.			147,457.			0.	

128111 04-01-21

<sup>(</sup>D) - Asset disposed

<sup>\*</sup> ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

#### 2021 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
31	SPRINKLER SYSTEM REPLACEMENT	12/31/18	SL	15.00	1	16	2,520.				2,520.	336.		168.	504.
32	HVAC UNIT, 2 OF 3	12/31/18	SL	27.50	MM1	16	7,162.				7,162.	650.		260.	910.
33	HVAC UNIT, 3 OF 3	12/31/18	SL	27.50	MM 1	16	8,018.				8,018.	730.		292.	1,022.
34	2018 FORD EXPLORER	12/03/18	SL	5.00	2	21	36,443.				36,443.	18,224.		7,289.	25,513.
35	3 PCS (JOHN/JULIE/ETHEL)	03/20/18	SL	5.00	1	16	3,974.				3,974.	1,987.		795.	2,782.
38	BECKY PC	12/31/18	SL	5.00	1	16	1,030.				1,030.	515.		206.	721.
39	TAG, TAX, & TITLE	01/01/19	SL	5.00	1	16	1,750.				1,750.	700.		350.	1,050.
40	ROOF REPLACEMENT	08/04/20	SL	27.50	MM 1	16	84,946.				84,946.	1,635.		3,271.	4,906.
41	OFFICE CHAIRS	03/18/20	SL	5.00	1	16	1,169.				1,169.	468.		234.	702.
42	DELL LATITUDE LAPTOP	04/03/20	SL	5.00	1	16	1,566.				1,566.	157.		313.	470.
	* TOTAL 990-PF PG 1 DEPR						752,301.				752,301.	375,423.		25,973.	401,396.

128111 04-01-21

<sup>(</sup>D) - Asset disposed

<sup>\*</sup> ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return.

Sequence No. 179

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Business or activity to which this form relates

990-PF

Identifying number

	SONIC CHARITY FOUND					F PAGE		73-6097262
Par	t I Election To Expense Certain Prope	rty Under Section 1	79 Note: If you ha	ave any listed	property, o	complete Part	V before	<del>`, ` `                                </del>
<b>1</b> N	flaximum amount (see instructions)							1,050,000.
<b>2</b> T	otal cost of section 179 property plac	ed in service (see	instructions)					
<b>3</b> T	hreshold cost of section 179 property	before reduction	in limitation					2,620,000.
4 R	Reduction in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-					
<b>5</b> D	ollar limitation for tax year. Subtract line 4 from line	e 1. If zero or less, enter -	0 If married filing sep	arately, see instru	ictions		5	
6	(a) Description of p	roperty	(k	) Cost (business	use only)	(c) Elected o	ost	
<b>7</b> L	isted property. Enter the amount from	n line 29			. 7			
8 T	otal elected cost of section 179 prope	erty. Add amounts	in column (c), lin	es 6 and 7			8	
9 T	entative deduction. Enter the smaller	r of line 5 or line 8					. 9	
	Carryover of disallowed deduction from							
	Business income limitation. Enter the s							
<b>12</b> S	Section 179 expense deduction. Add I	ines 9 and 10, but	don't enter more	than line 11			12	
	Carryover of disallowed deduction to 2				▶ 13			
Note	Don't use Part II or Part III below for	listed property. In	stead, use Part \	<i>'</i> .	•			
Par	t II Special Depreciation Allowa	ance and Other D	epreciation (Do	n't include lis	sted proper	ty. <b>)</b>		
<b>14</b> S	special depreciation allowance for qua	alified property (oth	ner than listed pro	perty) place	d in service	durina		
	ne tax year		•			·	14	
	Property subject to section 168(f)(1) ele						·	
	Other depreciation (including ACRS)						. 16	10 604
	t III MACRS Depreciation (Don't						10	
	·	·	Section					
17 N	MACRS deductions for assets placed	in service in tax ve	ars beginning be	fore 2021			17	
	you are electing to group any assets placed in serv	•	0 0	· ·	check here	▶ □	ï 🛗	
	Section B - Assets					eral Depreciat	ion Svst	tem
		(b) Month and	(c) Basis for dep	reciation	(d) Recovery	_ ·		
	(a) Classification of property		(business/investronly - see instru	ment use	(4)			
		year placed in service	only occilion		period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-vear property		O'ny See moun		period	(e) Convention	(f) Method	(g) Depreciation deduction
19a h	3-year property 5-year property		Only Securious		period	(e) Convention	(f) Method	(g) Depreciation deduction
b	5-year property		only decined.		period	(e) convention	(f) Method	(g) Depreciation deduction
b c	5-year property 7-year property		Only See How		period	(e) Convention	(f) Method	(g) Depreciation deduction
b c d	5-year property 7-year property 10-year property		ony decired.		period	(e) Convention	(r) Method	(g) Depreciation deduction
b c d	5-year property 7-year property 10-year property 15-year property		ony decine.		period	(e) Convention	(t) Method	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property		ony decired.			(e) Convention		(g) Depreciation deduction
b c d	5-year property 7-year property 10-year property 15-year property		Only decired.		25 yrs.		S/L	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property				25 yrs. 27.5 yrs.	MM	S/L S/L	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property				25 yrs. 27.5 yrs. 27.5 yrs.	MM	S/L S/L S/L	(g) Depreciation deduction
b c d e f	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property				25 yrs. 27.5 yrs.	MM MM MM	S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM	S/L S/L S/L S/L S/L	
b c d e f g h	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM	S/L S/L S/L S/L S/L	
b c d e f g h	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM	S/L S/L S/L S/L S/L S/L S/L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I Class life 12-year	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 3 the Altern	MM MM MM MM ative Depreci	S/L S/L S/L S/L S/L S/L S/L S/L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I Class life 12-year 30-year	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 12 yrs. 30 yrs.	MM	S/L S/L S/L S/L S/L ation Sy S/L S/L S/L	
b c d e f g h i	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I Class life 12-year 30-year 40-year	/ / / /		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 3 the Altern	MM MM MM MM ative Depreci	S/L S/L S/L S/L S/L S/L S/L S/L	
b c d e f g h i 20a b c d Par	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property  Section C - Assets I Class life 12-year 30-year 40-year  TIV Summary (See instructions.)	/ // // Placed in Service		uctions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 12 yrs. 30 yrs.	MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L	stem
b	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property  Section C - Assets I Class life 12-year 30-year 40-year  **T IV Summary (See instructions.) isted property. Enter amount from line	/ // // Placed in Service / / / / e 28	During 2021 Ta	x Year Using	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 3 the Altern 12 yrs. 30 yrs. 40 yrs.	MM	S/L S/L S/L S/L S/L ation Sy S/L S/L S/L	stem
b c d 20a b c d Par 21 L 22 T	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property  Section C - Assets I Class life 12-year 30-year 40-year  t IV Summary (See instructions.) isted property. Enter amount from line of tal. Add amounts from line 12, lines	/ // // Placed in Service / / / 2 28	During 2021 Ta	x Year Using	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 12 yrs. 30 yrs. 40 yrs.	MM MM MM ative Depreci	S/L   S/L	7,289.
b c d e f g h c d Par 21 L 22 T E	5-year property 7-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property  Section C - Assets I Class life 12-year 30-year 40-year  **T IV Summary (See instructions.) isted property. Enter amount from line	/ // // // Placed in Service / / / / 2 14 through 17, lines of your return. Page 11 through 12 through 13 through 14 through 15 through 16 through 17 through 17 through 17 through 17 through 17 through 18 thro	During 2021 Ta	x Year Using	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. 12 yrs. 30 yrs. 40 yrs.	MM MM MM ative Depreci	S/L S/L S/L S/L S/L S/L S/L S/L S/L	7,289.

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

					leage rate or dedu d Section C if appli		e expense,	comp	lete <b>only</b> 24a	,	
		, ,	<i></i>		n: See the instruc		mits for pa	ssenge	er automobiles	i. )	_
 24a	Do you have evidence to s	upport the bu	siness/investment	use claimed? X	Yes No	<b>24b</b> If "Y	es," is the	evider	nce written?	X Yes N	lo
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	<b>(d)</b> Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	( <b>g</b> ) Metho Conver	od/	<b>(h)</b> Depreciation deduction	(i) Elected section 179 cost	
	Special depreciation alloused more than 50% in a	•	•		ū	x year and	d 	25			
26	Property used more than	า 50% in a q	ualified business	use:							_
20	18 FORD	: :	%								
EX	PLORER	120318	100.00 %	36,443.	36,443.	5.00	SL	-HY	7,289	•	
		: :	%								
27	Property used 50% or le	ss in a qualit	ied business use	<b>:</b> :							
		: :	%				S/L -				
		: :	%				S/L -				
		: :	%				S/L -				
28	Add amounts in column	(h), lines 25	through 27. Ente	er here and on line	21, page 1			28	7,289	•	
29	Add amounts in column	(i), line 26. E	nter here and on	line 7, page 1					29		
			Sec	tion B - Informat	ion on Use of Ver	nicles					
Con	plete this section for ve	hicles used l	oy a sole propriet	tor, partner, or oth	er "more than 5%	owner," or	r related pe	erson.	If you provided	d vehicles	
to y	our employees, first ansv	wer the ques	tions in Section	C to see if you me	et an exception to	completin	ng this sect	tion for	those vehicle	S.	

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

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

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

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.		
D	ort VI		

(a) Description of costs	(b) Date amortization begins	<b>(c)</b> Amortizable amount	(d) Code section	(e) Amortizati period or perco		<b>(f)</b> Amortization for this year
42 Amortization of costs that begins during your	2021 tax year	r:				
	: :					
	: :					
43 Amortization of costs that began before your 2021 tax year					43	
14 Total. Add amounts in column (f). See the ins	ructions for v	vhere to report			44	

Form **4562** (2021) 116252 12-21-21

### TAX RETURN FILING INSTRUCTIONS

OKLAHOMA FORM 512E

#### FOR THE YEAR ENDING

December 31, 2021

Pre	pared	For:

Masonic Charity Foundation of Oklahoma P.O. Box 2406 Edmond, OK 73083

Prepared By:

ARLEDGE & ASSOCIATES, P.C. 309 N. Bryant Avenue Edmond, OK 73034

To be Signed and Dated By:

The authorized individual(s).

#### Amount of Tax:

Total Tax	\$	0.00
Less: payments and credits	\$	0.00
Plus: other amount	***************************************	0.00
Plus: nterest and penalties	\$	0.00
No payment required	\$	

#### Overpayment:

Credited to your estimated tax	\$ 0.00
Other amount	\$ 0.00
Refunded to you	\$ 0.00

#### Make Check Payable To:

Not applicable

## Mail Tax Return and Check (if applicable) To:

Oklahoma Tax Commission P.O. Box 26800 Oklahoma City, OK 73126-0800

#### **Return Must be Mailed On or Before:**

November 15, 2022

### **Special Instructions:**

## Form 512-E 2021





## Oklahoma Return of **Organization Exempt from Income Tax** Section 501(c) of the Internal Revenue Code

or the year Jenuary 1 - December 31, 2021, or other tecable year Place an 'X' if: beginning: endina: Amended return (See Schedule 2021 Initial return (2) Final return (3) 512E-X on page 2) Name of Organization Federal Employer Identification Number Date qualified for tax exempt status MASONIC CHARITY FOUNDATION OF OKLAH 73-6097262 01/01/1979 Address (number and street) P.O. BOX 2406 State or Province Country ZIP or Foreign Postal Code EDMOND 73083 **OKLAHOMA** PART 2: STATEMENT OF UNRELATED BUSINESS TAXABLE INCOME (Please read instructions on pages 2-3) Allocable Oklahoma Total Federal Total unrelated trade or business income - applicable Federal Form(s) 990 Total unrelated trade or business deductions - applicable Fed. Form(s) 990 Unrelated business taxable income - enter here and on line 1 below INCOME SUBJECT TO TAX Unrelated business taxable income - from statement above (allocable to Oklahoma) .00 Other net income · provide schedule .00 Oklahoma Capital Gain deduction (provide Form 561-C) .00 Oklahoma taxable income (total of lines 1, 2 and 3) TAX COMPUTATION Tax at 6% of line 4. If trust - see rate schedule on page 2 and place an '1' in the box. If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a '2' in the box. If making an Okla. installment payment pursuant to IRC Sec. 965(h) and .00 ß .00 Less: Other Credits Form (total from Form 511CR) Balance of tax due (line 5 minus line 6, but not less than zero) 00. 2021 Oklahoma estimated tax and extension payments and prior year carryforward .00 Oklahoma withholding (provide Form 1099, Form 500A, Form 500B or other withholding statement) 9 .00 Amount paid with original return and amount paid after it was filed (amended return only) 10 .00 Any refunds or overpayment applied (amended return only) 11 ).00 12 Total of lines 8 through 11 12 .00 Overpayment (if line 12 is larger than line 7 enter amount overpaid) 13 .00 Amount of line 13 to be credited to 2022 estimated tax (original return only) .00 15 provides you the opportunity to make a financial gift from your refund to a variety of Oklahome organizations. Fisce the line number of the organization from page 3 of this form in the box below and enter the amount you are donating. If giving to more than one organization, put a "99" in the box and attach a schedule showing how you would like your donation split. Donations from your refund .00 Add lines 14 and 15 and enter amount .00 17 Amount to be refunded to you (line 13 minus line 16) .00 is this refund going to or through an account that is located outside of the United States? Direct Deposit Note: Deposit my refund in my: checking account savings account All refunds must be by direct deposit. See Direct Deposit Information on Routing Account page 4 for details. Number: Number: .00 19 .00 For delinguent payment, add penalty of 5% plus interest at 1,25% per month 20 .00 Underpayment of estimated tax interest \_\_\_\_\_\_ Annualized | .00 21 Total tax, penalty and interest due - Add lines 18-21; pay in full with return Balance Due 22 .00 Check this box if the Oklahoma Tex Commission
Titley discuss this return with your text preparer. Name JOHN LOGAN JOSH MULLINS of Prepa Preparer's PTIN: Phone Mumber Phone Number: 405-348-0615 P01602326 EXECUTIVE DIRECTO 405-348-7500

2021 Form 512-E - Page 2 - Return of Organization Exempt from Income Tax

Schedule 512-E-X: Amended Return Schedule				
A Did you file an amended Federal income tax return?  Yes  X  No				
Provide a copy of the amended Federal return and a copy of "Statement of Adjustment", IRS refund check or deposit slip.				
B If this return is being filed due to a Federal audit, <b>provide</b> a complete copy of the RAR.				
C Explanation or reason for amended return (Provide all necessary schedules):				