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CLIENT'S COPY



July 10, 2023

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 2022 Exempt Organization returns, as follows...

2022 Form 990-PF  
2023 Federal Estimated Tax Worksheet - Form 990-PF

2022 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,

A handwritten signature in black ink that reads "Josh Mullins".

Josh Mullins  
Arledge & Associates. P.C.

# TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

**FOR THE YEAR ENDING**

December 31, 2022

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**Prepared For:**

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

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**Prepared By:**

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

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**Amount Due or Refund:**

An overpayment of \$55,943. The entire overpayment has been applied to the estimated tax payments.

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**Make Check Payable To:**

No amount is due.

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

Not applicable

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

Not applicable

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**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, 2023.

Please note that there is \$128,748 of undistributed income for 2022 on Form 990-PF. The organization must distribute this amount by the end of its 2023 tax year to avoid the excise tax on undistributed income.

IRS e-file Signature Authorization for a Tax Exempt Entity

Form 8879-TE

For calendar year 2022, or fiscal year beginning \_\_\_\_\_, 2022, and ending \_\_\_\_\_, 20\_\_

2022

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer MASONIC CHARITY FOUNDATION OF OKLAHOMA EIN or SSN 73-6097262

Name and title of officer or person subject to tax JOHN LOGAN EXECUTIVE DIRECTOR

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 2 columns: Line number and description, and Amount. Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, Form 8868, Form 990-T, Form 4720, Form 5227, Form 5330, and Form 8038-CP.

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that [X] I am an officer of the above entity or [ ] I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete.

PIN: check one box only

[X] I authorize ARLEDGE & ASSOCIATES, P.C. to enter my PIN 97262. Enter five numbers, but do not enter all zeros

as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax \*\*\*\*\* THIS IS NOT A FILEABLE COPY \*\*\*\*\* Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

73324963003

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature [Signature] Date 07/10/23

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form 8879-TE (2022)

Form **990-W**  
(Worksheet)

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

**2023**

(and on Investment Income for Private Foundations) FORM 990-PF

► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1 .....	2	
3	Alternative minimum tax for trusts .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization does not need to make estimated tax payments .....	10a	54,504.
b	Enter the tax shown on the 2022 return. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	54,504.
c	<b>2023 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	54,504.

		(a)	(b)	(c)	(d)
11	Installment due dates .....	11		09/15/23	12/15/23
12	Installments. Enter 25% of line 10c in columns (a) through (d) .....	12		40,890.	13,630.
13	2022 Overpayment .....	13			
14	Payment due (Subtract line 13 from line 12) .....	14			

Form **990-W**

ESTIMATED TAX	54,504.
OVERPAYMENT APPLIED	55,943.
AMOUNT DUE	0.

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

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**  
▶ **Go to [www.irs.gov/Form8868](http://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 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](http://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.

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

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

**JOHN L LOGAN**

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

Telephone No. ▶ **405-348-7500** Fax No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
▶  calendar year **2022** or  
▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

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

**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.

**Return of Private Foundation**

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

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

**2022**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>		<b>A Employer identification number</b> 73-6097262
Number and street (or P.O. box number if mail is not delivered to street address) <b>P.O. BOX 2406</b>	Room/suite	<b>B Telephone number</b> 405-348-7500
City or town, state or province, country, and ZIP or foreign postal code <b>EDMOND, OK 73083</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>96,645,223.</b>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....	1,016,556.		N/A	
	<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....	3,106.	3,106.		STATEMENT 1
	<b>4</b> Dividends and interest from securities .....	2,717,929.	2,717,929.		STATEMENT 2
	<b>5a</b> Gross rents .....				
	<b>b</b> Net rental income or (loss) .....				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....	-558,146.			
	<b>b</b> Gross sales price for all assets on line 6a .....	18,453,574.			
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		0.		
	<b>8</b> Net short-term capital gain .....				
	<b>9</b> Income modifications .....				
	<b>10a</b> Gross sales less returns and allowances .....				
<b>b</b> Less: Cost of goods sold .....					
<b>c</b> Gross profit or (loss) .....					
<b>11</b> Other income .....	1,584,028.	1,584,028.		STATEMENT 3	
<b>12 Total.</b> Add lines 1 through 11 .....	4,763,473.	4,305,063.			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	220,435.	22,043.		198,392.
	<b>14</b> Other employee salaries and wages .....	104,440.	0.		104,440.
	<b>15</b> Pension plans, employee benefits .....	37,385.	0.		37,385.
	<b>16a</b> Legal fees ..... <b>STMT 4</b>	675.	0.		675.
	<b>b</b> Accounting fees ..... <b>STMT 5</b>	65,365.	0.		65,365.
	<b>c</b> Other professional fees .....				
	<b>17</b> Interest .....				
	<b>18</b> Taxes ..... <b>STMT 6</b>	101,526.	5,789.		20,737.
	<b>19</b> Depreciation and depletion .....	27,567.	27,567.		
	<b>20</b> Occupancy .....				
	<b>21</b> Travel, conferences, and meetings .....	4,898.	0.		4,898.
	<b>22</b> Printing and publications .....	38,639.	0.		38,639.
	<b>23</b> Other expenses ..... <b>STMT 7</b>	427,101.	328,504.		98,597.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	1,028,031.	383,903.		569,128.
	<b>25</b> Contributions, gifts, grants paid .....	4,954,329.			4,954,329.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	5,982,360.	383,903.		5,523,457.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements ...	-1,218,887.				
<b>b Net investment income</b> (if negative, enter -0-) .....		3,921,160.			
<b>c Adjusted net income</b> (if negative, enter -0-) .....			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash - non-interest-bearing		3,883,482.	3,887,402.	3,887,402.	
	2	Savings and temporary cash investments		823,453.	535,023.	535,023.	
	3	Accounts receivable					
		Less: allowance for doubtful accounts					
	4	Pledges receivable					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments - U.S. and state government obligations	STMT 8		6,245,586.	3,638,754.	3,638,754.
	b	Investments - corporate stock	STMT 9		95,476,495.	79,821,270.	79,821,270.
	c	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment: basis					
	Less: accumulated depreciation						
12	Investments - mortgage loans						
13	Investments - other	STMT 10		7,107,090.	8,423,582.	8,423,582.	
14	Land, buildings, and equipment: basis	768,134.					
	Less: accumulated depreciation	STMT 11	428,961.	355,908.	339,173.	339,173.	
15	Other assets (describe STATEMENT 12)			19.	19.	19.	
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)			113,892,033.	96,645,223.	96,645,223.	
Liabilities	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable					
	22	Other liabilities (describe )					
23	<b>Total liabilities</b> (add lines 17 through 22)			0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.						
	24	Net assets without donor restrictions		95,120,295.	83,298,684.		
	25	Net assets with donor restrictions		18,771,738.	13,346,539.		
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.						
	26	Capital stock, trust principal, or current funds					
	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
	28	Retained earnings, accumulated income, endowment, or other funds					
	29	<b>Total net assets or fund balances</b>			113,892,033.	96,645,223.	
30	<b>Total liabilities and net assets/fund balances</b>			113,892,033.	96,645,223.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	113,892,033.
2	Enter amount from Part I, line 27a	2	-1,218,887.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	112,673,146.
5	Decreases not included in line 2 (itemize) <b>NET UNREALIZED GAIN/LOSS</b>	5	16,027,923.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	96,645,223.



**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICLY TRADED SECURITIES</b>		P		
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a 18,453,574.		19,011,720.	-558,146.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69
			(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a				-558,146.
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ..... }		2 -558,146.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 .....		{ ..... }		3 N/A

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	54,504.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....		2	0.
3 Add lines 1 and 2 .....		3	54,504.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....		5	54,504.
6 Credits/Payments:			
a 2022 estimated tax payments and 2021 overpayment credited to 2022 .....	6a 110,447.		
b Exempt foreign organizations - tax withheld at source .....	6b 0.		
c Tax paid with application for extension of time to file (Form 8868) .....	6c 0.		
d Backup withholding erroneously withheld .....	6d 0.		
7 Total credits and payments. Add lines 6a through 6d .....		7	110,447.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached .....		8	0.
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed .....		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....		10	55,943.
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax 55,943. Refunded		11	0.

**Part VI-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year? .....		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
b If "Yes," has it filed a tax return on Form 990-T for this year? .....		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. _____ <u>OK</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .....	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address <u>WWW.MCFOK.ORG</u>		
14 The books are in care of <u>JOHN L LOGAN</u> Telephone no. <u>405-348-7500</u> Located at <u>PO BOX 2406, EDMOND, OK</u> ZIP+4 <u>73083</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ..... <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year .....   15   N/A		
16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with 3 columns: Question, Yes, No. Rows include 1a(1) through 1a(6), 1b, 1d, 2a, 2b, 3a, 3b, 4a, 4b. Includes 'N/A' and 'X' marks.

Form 990-PF (2022)

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

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 13		220,435.	0.	28,349.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BECKY GOAD 8200 N HARRAH RD, HARRAH, OK 73045	OFFICE MANAGER 40.00	59,352.	1,781.	0.

Total number of other employees paid over \$50,000 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1: SELWOOD CONSULTING - 6650 S REDWOOD LANDE STE 370, PORTLAND, OR 97224; INVESTMENT CONSULTING; 98,697.

Total number of others receiving over \$50,000 for professional services 0

Part VIII-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Row 1: 1 N/A

Part VIII-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Row 1: 1 N/A

Total. Add lines 1 through 3 0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	96,819,379.
b	Average of monthly cash balances .....	1b	4,047,498.
c	Fair market value of all other assets (see instructions) .....	1c	340,443.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	101,207,320.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	101,207,320.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	1,518,110.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	99,689,210.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	4,984,461.

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

1	Minimum investment return from Part IX, line 6 .....	1	4,984,461.
2a	Tax on investment income for 2022 from Part V, line 5 .....	2a	54,504.
b	Income tax for 2022. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	54,504.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	4,929,957.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	4,929,957.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	4,929,957.

**Part XI Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	5,523,457.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	5,523,457.

Form 990-PF (2022)

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

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
<b>1</b> Distributable amount for 2022 from Part X, line 7 .....				4,929,957.
<b>2</b> Undistributed income, if any, as of the end of 2022:				
<b>a</b> Enter amount for 2021 only .....			722,248.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2022:				
<b>a</b> From 2017 .....				
<b>b</b> From 2018 .....				
<b>c</b> From 2019 .....				
<b>d</b> From 2020 .....				
<b>e</b> From 2021 .....				
<b>f</b> Total of lines 3a through e .....	0.			
<b>4</b> Qualifying distributions for 2022 from Part XI, line 4: \$ 5,523,457.				
<b>a</b> Applied to 2021, but not more than line 2a ...			722,248.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) .....	0.			
<b>d</b> Applied to 2022 distributable amount .....				4,801,209.
<b>e</b> Remaining amount distributed out of corpus .....	0.			
<b>5</b> Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).) .....	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .....	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b .....		0.		
<b>c</b> 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.		
<b>e</b> Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
<b>f</b> Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023 .....				128,748.
<b>7</b> 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.			
<b>8</b> Excess distributions carryover from 2017 not applied on line 5 or line 7 .....	0.			
<b>9</b> Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a .....	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2018 ...				
<b>b</b> Excess from 2019 ...				
<b>c</b> Excess from 2020 ...				
<b>d</b> Excess from 2021 ...				
<b>e</b> Excess from 2022 ...				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling

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

Table with 5 columns: (a) 2022, (b) 2021, (c) 2020, (d) 2019, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

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

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 14

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

c Any submission deadlines:

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



**Part XIV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CAVETT KIDS FOUNDATION 3801 N CLASSEN BLVD STE 300 OKLAHOMA CITY, OK 73118		PUBLIC CHARITY	SERVE CHILDREN WITH VARIOUS LIFE-THREATENING AND CHRONIC ILLNESSES	20,000.
COMMUNITY FOOD BANK OF EASTERN OKLAHOMA 1304 N KENOSHA AVE TULSA, OK 74106		PUBLIC CHARITY	FEED THE HUNGRY OF EASTERN OKLAHOMA	14,000.
DALE K. GRAHAM VETERANS FOUNDATION 1268 N INTERSTATE DR NORMAN, OK 73072		PUBLIC CHARITY	TO ASSIST VETERANS WITH ADMINISTRATION CLAIMS PROCESS	35,000.
DEAN MCGEE EYE INSTITUTE FOUNDATION 608 STANTON L. YOUNG BLVD OKLAHOMA CITY, OK 73104		PUBLIC CHARITY	EDUCATIONAL SPEAKER SERIES	250,000.
DEMOLAY PO BOX 2406 EDMOND, OK 73083-2406		PUBLIC CHARITY	OK MASONIC YOUTH ORG ANNUAL DONATION	10,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			<b>3a</b> 4,954,329.
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b>				
				<b>3b</b> 0.





**Part XIV** Supplementary Information (continued)

**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
EASTERN OKLAHOMA VA HEALTH CARE SYSTEM 1011 HONOR HEIGHTS DR MUSKOGEE, OK 74401		GOVERNMENT AGENCY	VETERAN TRANSPORTATION FOR MEDICAL CARE	12,000.
FOOD FOR KIDS MATCH CAMPAIGN PO BOX 270968 OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	REGIONAL AND COMMUNITY FOOD BANK SUPPORT	65,301.
FRIENDS OF OETA 7403 N KELLEY AVE OKLAHOMA CITY, OK 73111		PUBLIC CHARITY	PUBLIC TELEVISION UNDERWRITING	16,001.
GEORGE WASHINGTON MASONIC NATIONAL MEMORIAL 101 CALLAHAN DRIVE ALEXANDRIA, VA 22301		PUBLIC CHARITY	SUPPORT OF THE GEORGE WASHINGTON MASONIC NATIONAL MUSEUM	17,572.
HEARTS FOR HEARING 11500 N PORTLAND AVE OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	CHILDREN'S AUDIOLOGY CARE	225,000.
INTERNATIONAL ORDER OF RAINBOW GIRLS SUPREME ASSEMBLY 315 E CARL ALBERT PKWY MCALESTER, OK 74501		PUBLIC CHARITY	CENTURY CAMPAIGN	200,000.
JIM THORPE ASSOCIATION FOR OKLAHOMA SPORTS HALL OF FAME RED RIBBON CAMPAIGN 20 S MICKEY MANTLE DR OKLAHOMA CITY, OK 73104		PUBLIC CHARITY	PUBLIC CHARITY SUPPORT	30,000.
<b>Total from continuation sheets</b>				<b>4,625,329.</b>

**Part XIV** Supplementary Information (continued)

**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		PUBLIC CHARITY	OK MASONIC YOUTH ORG ANNUAL DONATION	10,000.
JUNIOR ACHIEVEMENT OF OKLAHOMA 211 N ROBINSON AVE #201 OKLAHOMA CITY, OK 73102		PUBLIC CHARITY	GRANT FOR RURAL SCHOOL PROGRAM	50,000.
MASONIC CHARITY FDN MATCHING FUNDS PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	ASSISTANCE FOR EDUCATION & COMMUNITY	1,502,252.
MASONIC CHARITY FND INDIVIDUAL SCHOLARSHIP YOUTH PROGRAM PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	88 RECIPIENTS PLUS EXPENSES	109,500.
MASONIC CHARITY FND SENIOR ESSAY CONTEST PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	25 RECIPIENTS PLUS EXPENSES	26,221.
MASONIC INFORMATION CENTER 8120 FENTON STREET SILVER SPRING, MO 20910-4785		PUBLIC CHARITY	SUPPORT OF MASONIC EDUCATION TO PUBLIC	1,500.
MASONIC SERVICE ASSN 8125 FENTON STREET SILVER SPRING, MD 20910-4785		PUBLIC CHARITY	SUPPORT FOR DISASTER RELIEF, ETC.	4,000.
<b>Total from continuation sheets</b>				

**Part XIV** Supplementary Information (continued)

**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
MERCY HEALTH FOUNDATION 13321 N MERIDIAN, STE 206 OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	PUBLIC CHARITY SUPPORT	500,000.
NEWVIEW OKLAHOMA 501 N DOUGLAS AVE OKLAHOMA CITY, OK 73106		PUBLIC CHARITY	SUPPORT NEWVIEW'S MISSION TO ENABLE TO BLIND TO REACH INDEPENDENCE	100,000.
NEXTGEN UNDER 30 FOUNDATION 3240 W BRITTON RD STE 101 OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	TO RECOGNIZE MILLENNIAL LEADERS IN OKLAHOMA	10,000.
OK ALLIANCE FOR ARTS ED PO BOX 1275 JENKS, OK 74037-1275		PUBLIC CHARITY	DOE ARTS OF EXCELLENCE CEREMONY	8,200.
OK ASSN AREAS AGCY AGING 719 WEST MAINE ENID, OK 73701-5413		PUBLIC CHARITY	DIRECT SERVICES TO THE ELDERLY	798,146.
OKLAHOMA 4-H 205 4-H YOUTH DEVELOPMENT BUILDING STILLWATER, OK 74078		PUBLIC CHARITY	SUPPORT YOUTH DEVELOPMENT IN OKLAHOMA	25,000.
AUTISM FOUNDATION OF OKLAHOMA PO BOX 42133 OKLAHOMA CITY, OK 73123		PUBLIC CHARITY	PUBLIC CHARITY SUPPORT	100,000.
<b>Total from continuation sheets</b>				

**Part XIV** Supplementary Information (continued)

**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 GRAND ASSEMBLY RAINBOW 315 E CARL ALBERT PKWY MCALESTER, OK 74501		PUBLIC CHARITY	PUBLIC CHARITY SUPPORT	10,000.
OKLAHOMA FFA FOUNDATION 1500 W 7TH ST STILLWATER, OK 74074		PUBLIC CHARITY	SUPPORT LEADERSHIP, PERSONAL GROWTH, AND CAREER SUCCESS PROGRAMMING	5,000.
OKLAHOMA SENIOR CITIZEN HEARING AID PROGRAM @ OKLAHOMA SCHOOL FOR THE DEAF 1100 E OKLAHOMA AVE SULPHUR, OK 73086		PUBLIC CHARITY	PROVIDE HEARING DEVICES TO LOW INCOME OKLAHOMANS	125,000.
OKLAHOMA STATE SUPERINTENDENT'S TEACHER OF THE YEAR PROGRAM 2500 N LINCOLN BLVD OKLAHOMA CITY, OK 73105		HIGHER ED FD	14 RECIPIENTS PLUS EXPENSES	22,344.
PAYNE EDUCATION CENTER 3240 WEST BRITTON ROAD OKLAHOMA CITY, OK 73120		PUBLIC CHARITY	SCHOLARSHIPS FOR OKLAHOMA TEACHERS	155,000.
PM GRANTS PO BOX 2406 EDMOND, OK 73083-2406		PRIVATE FDN	11 RECIPIENTS	25,292.
REGIONAL FOOD BANK 3355 S. PURDUE OKLAHOMA CITY, OK 73137		PUBLIC CHARITY	ASSISTANCE FOR EDUCATION & COMMUNITY	21,000.
<b>Total from continuation sheets</b>				

**Part XIV** Supplementary Information (continued)

**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
UNIVERSITY OF SCIENCE & ARTS OF OKLAHOMA FOUNDATION 1727 W ALABAMA CHICKASHA, OK 73018		PUBLIC CHARITY	SUPPORT GENERAL SCHOLARSHIP AWARDS AND PROGRAM COSTS	5,000.
VETERANS AFFAIRS MEDICAL CENTER 921 NE 13TH ST OKLAHOMA CITY, OK 73104-5028		GOVERNMENT AGENCY	VETERAN TRANSPORTATION FOR MEDICAL CARE	12,000.
VIZAVANCE 6 NE 63RD OKLAHOMA CITY, OK 73105		PUBLIC CHARITY	VISION SCREENING CHILDREN IN PUB SCH	300,000.
YMCA 7130 AIR CARGO RD OKLAHOMA CITY, OK 73159		PUBLIC CHARITY	MILITARY WELCOME CENTER	12,000.
UNIVERSITY OF CENTRAL OKLAHOMA FOUNDATION 100 N UNIVERSITY DR EDMOND, OK 73034		PUBLIC CHARITY	EDUCATION ENDOWMENT	100,000.
KONAWA PUBLIC SCHOOLS 701 W SOUTH ST KONAWA, OK 74849		PUBLIC CHARITY	PUBLIC SCHOOL SUPPORT	2,500.
MAUD PUBLIC SCHOOLS PO BOX 130 MAUD, OK 74854		PUBLIC CHARITY	PUBLIC SCHOOL SUPPORT	2,500.
<b>Total from continuation sheets</b>				



**Part XIV** Supplementary Information (continued)

**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
ARNETT PUBLIC SCHOOLS PO BOX 317 ARNETT, OK 73832		PUBLIC CHARITY	PUBLIC SCHOOL SUPPORT	12,000.
OWASSO COPS FOR KIDS PO BOX 149 OWASSO, OK 74055		PUBLIC CHARITY	PUBLIC CHARITY SUPPORT	5,000.

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

OMB No. 1545-0047

**2022**

Name of the organization

MASONIC CHARITY FOUNDATION OF OKLAHOMA

Employer identification number

73-6097262

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>	Employer identification number  <b>73-6097262</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERTRUDE MOORE TESTAMENTARY TRUST  PO BOX 5555  MCALLEN, TX 78502-5555	\$ 20,535.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ROBERT G. MORELAND REVOCABLE TRUST  400 MARKET STREET  CANTON, OH 44702	\$ 10,642.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	CLYDE R. EVANS CHARITABLE TRUST  PO BOX 21708  OKLAHOMA CITY, OK 73156	\$ 68,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	ARTHUR JOHN EASTWOOD TRUST  3801 VIA DE LA URRACA  GREEN VALLEY, AZ 85614	\$ 820,762.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	OSCAR FRANKLIN SHAW TESTAMENTARY TRUST JP MORGAN, TRUSTEE 2200 ROSS AVE, FLOOR 05  DALLAS, TX 75201	\$ 6,895.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	LINDA CLAIRE MANTOOTH HONIG ESTATE  11730 PEBBLETON DR  HOUSTON, TX 77070	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>	Employer identification number  <b>73-6097262</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SCOTT DRAUGHON REVOCABLE LIVING TRUST  10304 REDBRIDGE CT  NORTH CHESTERFIELD, VA 23236	\$ 42,435.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	TREVATHAN ESTATE  300 S PIERCE  EL RENO, OK 73036	\$ 7,757.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>	Employer identification number  <b>73-6097262</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization  <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>	Employer identification number  <b>73-6097262</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

# Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return. **FORM 990-PF**

**2022**

Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name <b>MASONIC CHARITY FOUNDATION OF OKLAHOMA</b>	Employer identification number <b>73-6097262</b>
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**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1 Total tax (see instructions) .....		<b>1</b>	<b>54,504.</b>
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	<b>2a</b>		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	<b>2b</b>		
c Credit for federal tax paid on fuels (see instructions) .....	<b>2c</b>		
d <b>Total.</b> Add lines 2a through 2c .....		<b>2d</b>	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....		<b>3</b>	<b>54,504.</b>
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....		<b>4</b>	<b>139,467.</b>
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		<b>5</b>	<b>54,504.</b>

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6  The corporation is using the adjusted seasonal installment method.
- 7  The corporation is using the annualized income installment method.
- 8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>					
		(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	<b>9</b>	<b>05/15/22</b>	<b>06/15/22</b>	<b>09/15/22</b>	<b>12/15/22</b>
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	<b>10</b>	<b>13,626.</b>	<b>13,626.</b>	<b>13,626.</b>	<b>13,626.</b>
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	<b>11</b>	<b>110,447.</b>			
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column .....	<b>12</b>		<b>96,821.</b>	<b>83,195.</b>	<b>69,569.</b>
13 Add lines 11 and 12 .....	<b>13</b>		<b>96,821.</b>	<b>83,195.</b>	<b>69,569.</b>
14 Add amounts on lines 16 and 17 of the preceding column .....	<b>14</b>				
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	<b>15</b>	<b>110,447.</b>	<b>96,821.</b>	<b>83,195.</b>	<b>69,569.</b>
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	<b>16</b>		<b>0.</b>	<b>0.</b>	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	<b>17</b>				
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	<b>18</b>	<b>96,821.</b>	<b>83,195.</b>	<b>69,569.</b>	

Go to **Part IV** on page 2 to figure the penalty. Do not go to **Part IV** if there are no entries on line 17 - no penalty is owed.

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions ..... <b>19</b>				
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2022 and before 7/1/2022 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 4\% (0.04)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 6\% (0.06)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2022 and before 4/1/2023 .....	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 7\% (0.07)}{365}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2023 and before 7/1/2023 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2023 and before 10/1/2023 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2023 and before 1/1/2024 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2023 and before 3/16/2024 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b> \$			0.

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



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

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
NOW INTEREST	3,106.	3,106.	
TOTAL TO PART I, LINE 3	3,106.	3,106.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS	2,340,281.	0.	2,340,281.	2,340,281.	
INVESTMENT					
INTEREST	377,648.	0.	377,648.	377,648.	
TO PART I, LINE 4	2,717,929.	0.	2,717,929.	2,717,929.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTIES	1,582,661.	1,582,661.	
OTHER INCOME	1,367.	1,367.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,584,028.	1,584,028.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL AND PROFESSIONAL EXPENSE	675.	0.		675.
TO FM 990-PF, PG 1, LN 16A	675.	0.		675.

FORM 990-PF

ACCOUNTING FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING EXPENSE	65,365.	0.		65,365.
TO FORM 990-PF, PG 1, LN 16B	65,365.	0.		65,365.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	135.	135.		0.
MINERAL TAXES	1,381.	1,381.		0.
REAL ESTATE TAXES	4,273.	4,273.		0.
PAYROLL TAXES	20,737.	0.		20,737.
EXCISE TAX	75,000.	0.		0.
TO FORM 990-PF, PG 1, LN 18	101,526.	5,789.		20,737.

FORM 990-PF

OTHER EXPENSES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSE	5,791.	0.		5,791.
BANK CHARGES	1,783.	0.		1,783.
COMPUTER EXPENSE	24,882.	0.		24,882.
INSURANCE	15,725.	0.		15,725.
MANAGEMENT FEE	328,504.	328,504.		0.
OFFICE SUPPLIES	7,268.	0.		7,268.
POSTAGE	5,859.	0.		5,859.
PROPERTY MAINTENANCE	13,648.	0.		13,648.
REPAIRS AND EQUIPMENT	2,644.	0.		2,644.
TELEPHONE	6,334.	0.		6,334.
TRAINING AND MEMBERSHIPS	799.	0.		799.
UTILITIES	13,864.	0.		13,864.
TO FORM 990-PF, PG 1, LN 23	427,101.	328,504.		98,597.

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 8

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT OBLIGATIONS	X		3,638,754.	3,638,754.
TOTAL U.S. GOVERNMENT OBLIGATIONS			3,638,754.	3,638,754.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			3,638,754.	3,638,754.

FORM 990-PF CORPORATE STOCK STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	79,821,270.	79,821,270.
TOTAL TO FORM 990-PF, PART II, LINE 10B	79,821,270.	79,821,270.

FORM 990-PF OTHER INVESTMENTS STATEMENT 10

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN LIMITED PARTNERSHIP	COST	7,635,179.	7,635,179.
MINERAL RIGHTS	COST	1,235.	1,235.
PRIVATE EQUITY	COST	787,152.	787,152.
REAL ESTATE	COST	16.	16.
TOTAL TO FORM 990-PF, PART II, LINE 13		8,423,582.	8,423,582.

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

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
ACCOUNTING SOFTWARE	6,000.	6,000.	0.
COMPUTER(3)-WORKROOM, HP			
LAPTOP	3,727.	3,727.	0.
SERVER SOFTWARE	540.	540.	0.
BUILDING	359,833.	287,871.	71,962.
PARKING LOT ADDITION	20,987.	20,987.	0.
SERVER	12,024.	12,024.	0.
CARPET/LINOLEUM-NORTHCUTT	13,083.	13,083.	0.
MELODIE PC	1,008.	1,008.	0.
DELL LAPTOP	673.	673.	0.
SIDEWALK, PICNIC PAD	4,332.	2,167.	2,165.
CABLE/ELEC/LED FIXTURE INSTALL	1,793.	423.	1,370.
INTAACT ACCOUNTING SOFTWARE	8,730.	8,730.	0.
PROJECTOR	906.	906.	0.
HVAC UNIT, SOUTH SIDE	7,162.	1,430.	5,732.
POSTAGE MACHINE	1,826.	1,826.	0.
XEROX C8045H2 COPIER	12,414.	12,414.	0.
SAMSUNG REFRIGERATOR	1,228.	1,228.	0.
LAND	147,457.	0.	147,457.
SPRINKLER SYSTEM REPLACEMENT	2,520.	672.	1,848.
HVAC UNIT, 2 OF 3	7,162.	1,170.	5,992.
HVAC UNIT, 3 OF 3	8,018.	1,314.	6,704.
2018 FORD EXPLORER	36,443.	32,802.	3,641.
3 PCS (JOHN/JULIE/ETHEL)	3,974.	3,577.	397.
BECKY PC	1,030.	927.	103.
TAG, TAX, & TITLE	1,750.	1,400.	350.
ROOF REPLACEMENT	84,946.	8,177.	76,769.
OFFICE CHAIRS	1,169.	936.	233.
DELL LATITUDE LAPTOP	1,566.	783.	783.
DELL XPS15 LAPTOP AND MS			
SURFACE PRO	5,945.	1,090.	4,855.
CONFERENCE ROOM VIDEO			
CONFERENCE EQUIP	4,887.	407.	4,480.
<b>TOTAL TO FM 990-PF, PART II, LN 14</b>	<b>763,133.</b>	<b>428,292.</b>	<b>334,841.</b>

FORM 990-PF OTHER ASSETS STATEMENT 12

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

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BEDFORD ROWLAND JR. 1104 CANTERBURY BLVD ALTUS, OK 73521	DIRECTOR 1.00	0.	0.	0.
BOBBY LAWS 1604 TRUMAN DR ALTUS, OK 73521	DIRECTOR 1.00	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 3601 NW 36TH ST. OKLAHOMA CITY, OK 73112	2ND VICE PRESIDENT 1.00	0.	0.	0.
JACK PAINTER 19498 E 650 RD HENNESSEY, OK 73742	1ST VICE PRESIDENT 1.00	0.	0.	0.
JOHN ALLFORD 1108 CIRCLE DR. MCALESTER, OK 74501	DIRECTOR 1.00	0.	0.	0.
JOHN CHURCH 11904 S RANGE RD PERKINS, OK 74059	DIRECTOR 1.00	0.	0.	0.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

JOHN LOGAN 13913 KIRKLAND RIDGE EDMOND, OK 73013	EXECUTIVE DIRECTOR 40.00	220,435.	0.	28,349.
L. CLAY STUART PO BOX 39 SHATTUCK, OK 73858	DIRECTOR 1.00	0.	0.	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	PRESIDENT 1.00	0.	0.	0.
PRESTON DOERFLINGER 1110 SHERWOOD LANE, APT. 209 NICHOLS HILLS, OK 73116	DIRECTOR 1.00	0.	0.	0.
RICHARD ALLISON 2502 WILDWOOD DR 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.

MASONIC CHARITY FOUNDATION OF OKLAHOMA

73-6097262

WILLIAM CLOUD	DIRECTOR			
PO BOX 651	1.00	0.	0.	0.
BLANCHARD, OK 73010				

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

<u>220,435.</u>	<u>0.</u>	<u>28,349.</u>
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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 APPROVED 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 DESCRIPTION, TOTAL MARKET VALUE

RAYONIER INC REIT 593.28  
 KOPERNIK GLBL A/C-INST #8201 2,974,947.06  
 KOPERNIK GLBL A/C-INST #8201 481,486.79  
 KOPERNIK GLBL A/C-INST #8201 177,203.89  
 KOPERNIK GLBL A/C-INST #8201 33,615.44  
 CHAMPLAIN M/C-INST #1355 2,387,711.86  
 CHAMPLAIN M/C-INST #1355 443,432.21  
 CHAMPLAIN M/C-INST #1355 156,906.79  
 CHAMPLAIN M/C-INST #1355 34,110.17  
 JENSEN QUALITY GRWTH-Y #6299 7,669,151.49  
 JENSEN QUALITY GRWTH-Y #6299 1,357,596.92  
 JENSEN QUALITY GRWTH-Y #6299 470,810.30  
 JENSEN QUALITY GRWTH-Y #6299 103,738.61  
 VANGUARD EQ INC-ADM #0565 8,381,283.64  
 VANGUARD EQ INC-ADM #0565 1,485,476.03  
 VANGUARD EQ INC-ADM #0565 538,556.97  
 VANGUARD EQ INC-ADM #0565 113,373.99  
 VANGUARD INSTL INDX-INST #0094 7,439,351.11  
 VANGUARD INSTL INDX-INST #0094 1,341,155.61  
 VANGUARD INSTL INDX-INST #0094 466,194.64  
 VANGUARD INSTL INDX-INST #0094 111,189.10  
 DFA GLBL R/E SECURITIES-I #5416 2,565,468.04  
 DFA GLBL R/E SECURITIES-I #5416 418,765.27  
 DFA GLBL R/E SECURITIES-I #5416 154,738.46  
 DFA GLBL R/E SECURITIES-I #5416 90,372.71  
 DODGE & COX INTL STK #1048 5,242,811.61  
 DODGE & COX INTL STK #1048 951,211.76  
 DODGE & COX INTL STK #1048 347,708.15  
 DODGE & COX INTL STK #1048 85,808.56  
 MFS INTL EQ-INST #0403 4,922,921.80  
 MFS INTL EQ-INST #0403 883,212.31  
 MFS INTL EQ-INST #0403 321,243.43  
 MFS INTL EQ-INST #0403 73,434.03  
 VANGUARD TOTAL INTL STK-INST #1869 5,004,874.65  
 VANGUARD TOTAL INTL STK-INST #1869 887,035.12  
 VANGUARD TOTAL INTL STK-INST #1869 304,126.35  
 VANGUARD TOTAL INTL STK-INST #1869 67,583.70  
 BLACKROCK MULTI-ASSET INC-K #1981 3,431,700.67  
 BLACKROCK MULTI-ASSET INC-K #1981 567,024.17  
 BLACKROCK MULTI-ASSET INC-K #1981 206,840.58  
 BLACKROCK MULTI-ASSET INC-K #1981 33,996.33  
 VANGUARD TOT BD MKT INDX-INST #0222 3,748,960.65  
 VANGUARD TOT BD MKT INDX-INST #0222 686,801.56  
 VANGUARD TOT BD MKT INDX-INST #0222 309,070.97  
 VANGUARD TOT BD MKT INDX-INST #0222 65,621.09  
 VANGUARD INFL PROT SECS-ADM #5119 2,407,444.52

VANGUARD INFL PROT SECS-ADM #5119 405,831.31  
 VANGUARD INFL PROT SECS-ADM #5119 142,743.92  
 VANGUARD INFL PROT SECS-ADM #5119 31,216.96  
 VANGUARD L/T TREAS INDX-ADM #1944 1,923,047.34  
 VANGUARD L/T TREAS INDX-ADM #1944 332,296.67  
 VANGUARD L/T TREAS INDX-ADM #1944 115,866.57  
 VANGUARD L/T TREAS INDX-ADM #1944 24,628.88  
 TOTAL MUTUAL FUNDS 72,922,294.04

ALAMOS GOLD INC. 43,786.41  
 COMPASS MINERALS INTERNATIONAL 71,750.00  
 ELEMENT SOLUTIONS INC 28,649.25  
 GLATFELTER CORP 6,580.26  
 SCHNITZER STEEL INDS INC-A 6,926.90  
 SENSIENT TECHNOLOGIES CORP 16,990.36  
 SILGAN HOLDINGS INC 41,420.16  
 AAR CORP 33,809.70  
 AZZ INC 42,531.60  
 APOGEE ENTERPRISES INC 47,572.20  
 ASTEC INDUSTRIES INC 32,162.06  
 CIRCOR INTERNATIONAL INC 37,497.40  
 COLUMBUS MCKINNON CORP/NY 17,988.38  
 ENERSYS 47,922.16  
 KBR INC 50,054.40  
 MERCURY SYSTEMS INC 43,845.20  
 QUANEX BUILDING PRODUCTS 35,259.52  
 REGAL REYNOLD CORPORATION 76,787.20  
 SPX TECHNOLOGIES INC 71,558.50  
 STERLING INFRASTRUCTURE, INC. 46,740.00  
 SUMMIT MATERIALS INC 30,604.42  
 DIGITALBRIDGE GROUP INC 10,250.78  
 AMERICAN EAGLE OUTFITTERS 17,659.40  
 CARTER'S INC 22,308.39  
 GILDAN ACTIVEWEAR INC 24,249.00  
 HARLEY-DAVIDSON INC 14,060.80  
 STEVEN MADDEN LTD 14,413.96  
 MODINE MANUFACTURING CO 39,441.96  
 OLLIE'S BARGAIN OUTLET HOLDING 37,050.44  
 PVH CORP 19,906.38  
 PAPA JOHN'S INTL INC 8,231.00  
 QUOTIENT TECHNOLOGY INC 11,531.66  
 REV GROUP INC 42,870.14  
 SP PLUS CORP 57,218.56  
 COTY INC CL A 73,752.96  
 HAIN CELESTIAL GROUP INC 54,348.62  
 TREEHOUSE FOODS INC 10,616.70  
 DRIL-QUIP INC 29,751.15  
 HELMERICH & PAYNE 35,244.27  
 PDC ENERGY INC 23,297.16  
 RANGE RESOURCES CORP 27,396.90  
 COMMUNITY BANK SYSTEM INC 26,313.10  
 COUSINS PROPERTIES INC REIT 19,953.81  
 EHEALTH INC 2,657.16  
 EMPIRE STATE REALTY TRUST INC REIT 12,165.70  
 ENTERPRISE FINANCIAL SERVICE 29,278.08  
 EQUITY COMMONWEALTH REIT 135,112.67  
 GLACIER BANCORP INC 38,794.70  
 GREEN DOT CORP 13,178.06  
 HANCOCK WHITNEY CORPORATION 34,502.07  
 HURON CONSULTING GROUP INC 12,124.20

LAKELAND FINANCIAL CORP 14,229.15  
 NATIONAL BANK HOLDINGS CORP 46,823.91  
 PACIFIC PREMIER BANCORP INC 28,751.16  
 PHYSICIANS REIT 20,952.56  
 SEACOAST BANKING CORP OF FLORIDA 43,666.00  
 SOUTHSTATE CORPORATION 35,354.68  
 STAG INDUSTRIAL REIT 30,371.40  
 TERRENO REALTY CORP REIT 27,411.34  
 UMPQUA HOLDINGS CORP 28,720.65  
 UNITED COMMUNITY BANKS INC 42,385.20  
 WESBANCO INC 31,765.82  
 ALKERMES PLC 18,891.99  
 ANGIODYNAMICS INC 9,308.52  
 BIOCRYST PHARMACEUTICALS INC 26,886.16  
 BLUEPRINT MEDICINES CORP 7,447.70  
 ICU MEDICAL INC 75,275.44  
 IMMUNOGEN INC 15,966.24  
 PEDIATRIX MEDICAL GROUP, INC. 17,401.06  
 NEOGENOMICS INC 14,100.24  
 ORTHOFIX MEDICAL INC 65,983.42  
 SURMODICS INC 15,968.16  
 BELDEN CDT INC 64,422.40  
 CSG SYSTEMS INTL INC 11,840.40  
 CONDUENT INC 22,157.55  
 DESKTOP METAL INC 2,771.68  
 FARO TECHNOLOGIES INC 30,615.81  
 NCR CORPORATION 20,085.78  
 ONESPAN INC 4,117.92  
 PROGRESS SOFTWARE CORP 108,417.05  
 ALLETE INC 41,286.40  
 AVISTA CORP 22,524.72  
 NEW JERSEY RESOURCES CORP 41,780.04  
 OGE ENERGY CORP 37,928.45  
 PNM RESOURCES INC 44,642.85  
 DUE FROM BROKERS 202.29  
 TOTAL SBH 2,798,570.00

COHEN & STEERS LP - COHEN & STEERS 4,472,797.00  
 CHEVRON STOCK 568,632.00

SUMMARY OF SECURITIES:

FUND	TOTAL PER FUND	MASONIC	*THROCKMORTON
MUTAL FUNDS	72,922,294	72,053,605	868,689
SBH SMALL CAP	2,798,570	2,766,229	32,341
COHEN & STEERS	4,472,797	4,432,804	39,993
CHEVRON STOCK	568,632	568,632	
TOTAL	80,762,293	79,821,270	941,023

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

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
4	ACCOUNTING SOFTWARE	06/21/05	SL	5.00		16	6,000.				6,000.	6,000.		0.	6,000.
9	COMPUTER(3)-WORKROOM, HP LAPTOP	07/03/05	SL	5.00		16	3,727.				3,727.	3,727.		0.	3,727.
10	SERVER SOFTWARE	01/01/13	SL	5.00		16	540.				540.	540.		0.	540.
12	BUILDING	06/13/05	SL	40.00		16	359,833.				359,833.	278,875.		8,996.	287,871.
13	PARKING LOT ADDITION	06/15/05	SL	20.00		16	20,987.				20,987.	20,987.		0.	20,987.
15	SERVER	01/01/13	SL	5.00		16	12,024.				12,024.	12,024.		0.	12,024.
16	CARPET/LINOLEUM-NORTHCUTT	01/31/13	SL	7.00		16	13,083.				13,083.	13,083.		0.	13,083.
18	MELODIE PC	06/30/14	SL	5.00		16	1,008.				1,008.	1,008.		0.	1,008.
20	DELL LAPTOP	12/31/14	SL	5.00		16	673.				673.	673.		0.	673.
21	SIDEWALK, PICNIC PAD	10/08/15	SL	15.00		16	4,332.				4,332.	1,878.		289.	2,167.
23	CABLE/ELEC/LED FIXTURE INSTALL	10/11/16	SL	27.50	MM	16	1,793.				1,793.	358.		65.	423.
24	INTAACT ACCOUNTING SOFTWARE	03/11/16	SL	3.00		16	8,730.				8,730.	8,730.		0.	8,730.
25	PROJECTOR	07/28/16	SL	5.00		16	906.				906.	906.		0.	906.
26	HVAC UNIT, SOUTH SIDE	06/21/17	SL	27.50	MM	16	7,162.				7,162.	1,170.		260.	1,430.
27	POSTAGE MACHINE	04/05/17	SL	5.00		16	1,826.				1,826.	1,734.		92.	1,826.
28	XEROX C8045H2 COPIER	11/30/17	SL	5.00		16	12,414.				12,414.	10,139.		2,275.	12,414.
29	SAMSUNG REFRIGERATOR	12/28/17	SL	5.00		16	1,228.				1,228.	984.		244.	1,228.
30	LAND	01/01/90	L				147,457.				147,457.			0.	

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
31	SPRINKLER SYSTEM REPLACEMENT	12/31/18	SL	15.00		16	2,520.				2,520.	504.		168.	672.
32	HVAC UNIT, 2 OF 3	12/31/18	SL	27.50	MM	16	7,162.				7,162.	910.		260.	1,170.
33	HVAC UNIT, 3 OF 3	12/31/18	SL	27.50	MM	16	8,018.				8,018.	1,022.		292.	1,314.
34	2018 FORD EXPLORER	12/03/18	SL	5.00		21	36,443.				36,443.	25,513.		7,289.	32,802.
35	3 PCS (JOHN/JULIE/ETHEL)	03/20/18	SL	5.00		16	3,974.				3,974.	2,782.		795.	3,577.
38	BECKY PC	12/31/18	SL	5.00		16	1,030.				1,030.	721.		206.	927.
39	TAG, TAX, & TITLE	01/01/19	SL	5.00		16	1,750.				1,750.	1,050.		350.	1,400.
40	ROOF REPLACEMENT	08/04/20	SL	27.50	MM	16	84,946.				84,946.	4,906.		3,271.	8,177.
41	OFFICE CHAIRS	03/18/20	SL	5.00		16	1,169.				1,169.	702.		234.	936.
42	DELL LATITUDE LAPTOP	04/03/20	SL	5.00		16	1,566.				1,566.	470.		313.	783.
43	DELL XPS15 LAPTOP AND MS SURFACE PRO	02/15/22	SL	5.00		16	5,945.				5,945.			1,090.	1,090.
44	CONFERENCE ROOM VIDEO CONFERENCE EQUIP	07/28/22	SL	5.00		16	4,887.				4,887.			407.	407.
	* TOTAL 990-PF PG 1 DEPR						763,133.				763,133.	401,396.		26,896.	428,292.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						752,301.			0.	752,301.	401,396.			426,795.
	ACQUISITIONS						10,832.			0.	10,832.	0.			1,497.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						763,133.			0.	763,133.	401,396.			428,292.

**2022 DEPRECIATION AND AMORTIZATION REPORT**

FORM 990-PF PAGE 1

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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
	ENDING ACCUM DEPR											428,292.			
	ENDING BOOK VALUE											334,841.			

**Depreciation and Amortization**  
(Including Information on Listed Property) 990-PF

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**MASONIC CHARITY FOUNDATION OF OKLAHOMA** FORM 990-PF PAGE 1 73-6097262

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,700,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	19,607.

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

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

**Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System**

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

**Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System**

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	30-year	/		30 yrs.	MM	S/L	
d	40-year	/		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	7,289.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	26,896.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

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

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

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

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

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost.

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

26 Property used more than 50% in a qualified business use: 2018 FORD EXPLOERER 120318100.00% 36,443. 36,443.5.00 SL -HY 7,289.

27 Property used 50% or less in a qualified business use: Table with columns for percentage and S/L.

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 7,289.

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

Section B - Information on Use of Vehicles

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

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows 30-36 include questions about miles driven and 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.

Table for Section C with questions 37-41 and Yes/No columns.

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

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2022 tax year:

43 Amortization of costs that began before your 2022 tax year 43

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



# TAX RETURN FILING INSTRUCTIONS

OKLAHOMA FORM 512E

**FOR THE YEAR ENDING**

December 31, 2022

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**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

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**To be Signed and Dated By:**

The authorized individual(s).

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**Amount of Tax:**

Total Tax	\$	0
Less: payments and credits	\$	0
Plus: other amount		0
Plus: nterest and penalties	\$	0
No payment required	\$	

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**Overpayment:**

Credited to your estimated tax	\$	0
Other amount	\$	0
Refunded to you	\$	0

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**Make Check Payable To:**

Not applicable

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

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

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

November 15, 2023

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**Special Instructions:**

# Oklahoma Return of Organization Exempt from Income Tax

Section 501(c) of the Internal Revenue Code

Form 512-E  
2022



**PART 1**  
For the year January 1 - December 31, 2022, or other taxable year beginning:  **2022** ending:

Name of Organization: **MASONIC CHARITY FOUNDATION OF OKLAH** Federal Employer Identification Number: **73-6097262** Date Qualified for Tax Exempt Status: **01/01/1979**

Address (Number and Street): **P.O. BOX 2406**

City: **EDMOND** State or Province: **OKLAHOMA** Country:  ZIP or Foreign Postal Code: **73083**

Place an 'X' if: (1)  Initial Return (2)  Final Return (3)  Amended return (See Schedule 512E-X on page 2)

**PART 2: STATEMENT OF UNRELATED BUSINESS TAXABLE INCOME**  
(Please read instructions on pages 3-4)

	Total Federal	Allocable Oklahoma
A Total unrelated trade or business income - applicable Federal Form(s) 990	<input type="text"/>	<input type="text"/>
B Total unrelated trade or business deductions - applicable Fed. Form(s) 990	<input type="text"/>	<input type="text"/>
C Unrelated business taxable income - enter here and on line 1 below	<input type="text"/>	<input type="text"/>

**INCOME SUBJECT TO TAX**

1	Unrelated business taxable income - from statement above (allocable to Oklahoma)	1	<input type="text"/>	<input type="text"/>
2	Other net income - <b>provide</b> schedule	2	<input type="text"/>	<input type="text"/>
3	Oklahoma Capital Gain deduction (provide Form 561-C)	3	<input type="text"/>	<input type="text"/>
4	Oklahoma taxable income (total of lines 1, 2 and 3)	4	<input type="text"/>	<input type="text"/>

**TAX COMPUTATION**

5	Tax at 4% of line 4. If trust - see rate schedule on page 3 and place an '1' in the box. If recapturing the Oklahoma Affordable Housing Tax Credit, add the recaptured credit here and enter a '2' in the box. If making an Okla. installment payment pursuant to IRC Sec. 965(h) and 68 OS Sec. 2368(K), add the installment payment here and enter a "3" in the box	5	<input type="text"/>	<input type="text"/>
6	<b>Less:</b> Other Credits Form (total from Form 511CR)	6	<input type="text"/>	<input type="text"/>
7	Balance of tax due (line 5 minus line 6, but not less than zero)	7	<input type="text"/>	<input type="text"/>
8	2022 Oklahoma estimated tax and extension payments and prior year carryforward	8	<input type="text"/>	<input type="text"/>
9	Oklahoma withholding ( <b>provide</b> Form 1099, Form 500A, Form 500B or other withholding statement)	9	<input type="text"/>	<input type="text"/>
10	Amount paid with original return and amount paid after it was filed (amended return only)	10	<input type="text"/>	<input type="text"/>
11	Any refunds or overpayment applied (amended return only)	11	<input type="text"/>	<input type="text"/>
12	Total of lines 8 through 11	12	<input type="text"/>	<input type="text"/>
13	Overpayment (if line 12 is larger than line 7 enter amount overpaid)	13	<input type="text"/>	<input type="text"/>
14	Amount of line 13 to be credited to 2023 estimated tax (original return only)	14	<input type="text"/>	<input type="text"/>

