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Form **990-EZ**

Department of the Treasury  
Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.  
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

**2008**

Open to Public Inspection

**A** For the 2008 calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>OKLAHOMA FUNERAL DIRECTORS ASSOCIATION, INC.</b>	<b>D</b> Employer identification number <b>73-1059316</b>
	Number and street (or P O box, if mail is not delivered to street address) <b>6801 N. BROADWAY, SUITE 106</b>	<b>E</b> Telephone number <b>405.843.0730</b>
	City or town, state or country, and ZIP + 4 <b>OKLAHOMA CITY, OK 73116</b>	<b>F</b> Group Exemption Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

**I** Website: ▶ **WWW.OKFDA.COM**

**J** Organization type (check only one) — ☒ 501(c) ( 6 ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527

**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **191,502.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I)

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	<b>83,528.</b>
	<b>3</b> Membership dues and assessments	<b>3</b>	<b>65,802.</b>
	<b>4</b> Investment income	<b>4</b>	
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	<b>5c</b>	
	<b>6</b> Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1)	<b>6a</b>	
	<b>b</b> Less direct expenses other than fundraising expenses	<b>6b</b>	
<b>c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>b</b> Less cost of goods sold	<b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b> Other revenue (describe ▶ <b>SEE STATEMENT 4</b> )	<b>8</b>	<b>42,172.</b>	
<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	<b>191,502.</b>	
Expenses	<b>10</b> Grants and similar amounts paid (attach schedule)	<b>10</b>	
	<b>11</b> Benefits paid to or for members	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	<b>60,936.</b>
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	<b>7,855.</b>
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	<b>10,357.</b>
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	<b>15,194.</b>
	<b>16</b> Other expenses (describe ▶ <b>SEE STATEMENT 1</b> )	<b>16</b>	<b>98,692.</b>
	<b>17</b> Total expenses. Add lines 10 through 16	<b>17</b>	<b>193,034.</b>
Net Assets	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	<b>&lt;1,532.&gt;</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	<b>299,722.</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	<b>298,190.</b>

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments	<b>308,067.</b>	<b>304,871.</b>
<b>23</b> Land and buildings		
<b>24</b> Other assets (describe ▶ <b>SEE STATEMENT 2</b> )	<b>655.</b>	<b>1,579.</b>
<b>25</b> Total assets	<b>308,721.</b>	<b>306,450.</b>
<b>26</b> Total liabilities (describe ▶ <b>SEE STATEMENT 3</b> )	<b>8,999.</b>	<b>8,260.</b>
<b>27</b> Net assets or fund balances (line 27 of column (B) must agree with line 21)	<b>299,722.</b>	<b>298,190.</b>

## Form 990-EZ (2008)

Page 2

## Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

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832172  
12-17-08

Form **990-EZ** (2008)

**OKLAHOMA FUNERAL DIRECTORS  
ASSOCIATION, INC.**

73-1059316

**Part V Other Information** (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	X	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
b	Did the organization file Form 1120-POL for this year?	37b	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9	39a	N/A
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911	N/A	
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	N/A
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter amount of tax on line 40c reimbursed by the organization		0.
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41	List the states with which a copy of this return is filed	OK	
42a	The books are in care of	OKLAHOMA FUNERAL DIRECTORS ASSOCIAT	Telephone no. 405-843-0730
	Located at	6801 N. BROADWAY, SUITE 106, OKLAHOMA CITY, OK	ZIP + 4 73116
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	X
	If "Yes," enter the name of the foreign country		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c	X
	If "Yes," enter the name of the foreign country		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	N/A
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Form 990-EZ (2008)

OKLAHOMA FUNERAL DIRECTORS  
ASSOCIATION, INC.

73-1059316

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				
Total number of other employees paid over \$100,000				

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		
Total number of other independent contractors each receiving over \$100,000		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: ☒ Signature of officer: *[Signature]* AS AGENT Date: *5-10-10*

☒ Type or print name and title: *JAY BAINES Exec Dir.*

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: *5/10/10* Check if self-employed: ☐ Preparer's Identifying Number (See instr.): *P00265411*

Firm's name (or yours if self-employed), address, and ZIP + 4: **ENGELBACH ROBERTS & CO.  
4000 CLASSEN CTR STE 100C  
OKLAHOMA CITY, OK 73118**

EIN: **20-0265411** Phone no: **(405) 528-4000**

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
DESCRIPTION		AMOUNT	
DISTRICT MEETINGS		13,603.	
LEGISLATIVE COMMITTEE EXP		5,625.	
BOARD MEETING EXPENSES		1,917.	
INSURANCE		1,632.	
SCHOLARSHIP EXPENSE		1,500.	
CONTINUING EDUCATION EXPENSE		878.	
MISCELLANEOUS EXPENSE		1,257.	
TAXES -OTHER		111.	
BANK SERVICE CHARGES		208.	
OFFICE SUPPLIES AND POSTAGE		6,574.	
PAYROLL TAXES		4,345.	
TELEPHONE		3,646.	
TRAVEL		21,154.	
CONVENTION EXPENSE		36,242.	
TOTAL TO FORM 990-EZ, LINE 16		98,692.	

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
PREPAID EXPENSES AND DEFERRED CHARGES	655.	655.	
OTHER DEPRECIABLE ASSETS	0.	924.	
TOTAL TO FORM 990-EZ, LINE 24	655.	1,579.	

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
CUSTODIAN FUNDS	2,040.	716.	
MUSIC LICENSE PAYABLE	3,347.	3,347.	
SALES CLUB DUES PAYABLE	<70.>	0.	
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	2,211.	2,034.	
DEFERRED REVENUE	1,471.	2,163.	
TOTAL TO FORM 990-EZ, LINE 26	8,999.	8,260.	

FORM 990-EZ	OTHER REVENUE	STATEMENT	4
DESCRIPTION		AMOUNT	
INTEREST INCOME		5,912.	
ROYALTIES		36,260.	
TOTAL TO FORM 990-EZ, LINE 8		42,172.	

FORM 990-EZ

INFORMATION REGARDING TRANSFERS  
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 5

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,  
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL  
BENEFIT CONTRACT? . . . . . [ ] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,  
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO



990-EZ PG 2

STATEMENT 6

TO ASSIST IN THE CONDUCTING OF DISTRICT MEETINGS IN THE SIX DISTRICTS IN THE STATE FOR THE PURPOSE OF MAINTAINING MORE DIRECT COMMUNICATION AMONG THE MEMBERS. THESE MEETINGS ARE HELD AT LEAST FOUR TIMES A YEAR.

990-EZ PG 2

STATEMENT 7

TO ESTABLISH, DEVELOP AND MAINTAIN THE HIGHEST POSSIBLE STANDARD FOR ETHICAL CONDUCT AND PROFICIENCY FOR THOSE ENGAGED IN THE PROFESSION OF FUNERAL SERVICE. TO ENCOURAGE THE HIGHEST EDUCATIONAL LEVEL POSSIBLE OF ITS MEMBERS AND TO CONVEY TO CONSUMERS INFORMATION AS TO FUNERAL SERVICE, FUNERAL MERCHANDISE AND TO PROTECT THE CONSUMERS' INTEREST IN REGARD THERETO

FORM 990-EZ

OTHER PROGRAM SERVICES

STATEMENT 8

DESCRIPTIONGRANTSEXPENSESSCHOLARSHIPS ARE PROVIDED TO QUALIFIED STUDENTS WHO  
ENTER THE FIELD OF FUNERAL SERVICE

TOTAL TO FORM 990-EZ, LINE 31

elected  
April, 2009

## 2009-2010 OFDA OFFICERS, DISTRICT GOVERNORS

### Executive Board

#### President

Jay Hunn  
Hunn, Black & Merritt FH  
401 N Main St  
Eufaula, OK 74432  
PH 918-689-2553  
FX 918-689-5027

#### President-Elect

David Murch  
Callaway-Smith-Cobb F H.  
415 W. Main  
Marlow, OK 73055  
PH 580-658-5455  
FX 580-658-2048

#### Vice-President

Richard Dugger  
Brown-Dugger Funeral Hm  
1010 7th St  
Perry, OK 73077  
PH 580-336-4444  
FX 580-336-5710

#### Secr/Treasurer

Bill Marshall  
Marshall Funeral Home  
230 Flynn  
Alva, OK 73717  
PH 580-327-2311  
FX 580-327-4346

#### Immediate Past-President

Vernon Hoehn  
Fairview Funeral Home  
221 N. Main St  
Fairview, OK 73737  
PH 580-227-4722  
FX 580-227-4727

#### Policy Board Member

Brent Shain  
Mt. Olive Funeral Home  
Box 40  
Hugo, OK 74743  
PH 580-326-9627  
FX 580-326-9629

#### Executive Director

Jay Baines  
Oklahom Funeral Directors Assn.  
6801 N. Broadway, Suite 106  
Oklahoma City, OK 73116  
PH: 405-843-0730  
FX: 405-843-5404

### Board of Governors

#### District I

Jeremy Sparks  
6001 N. Grand Blvd.  
Oklahoma City, OK 73118  
PH 405-843-5771 672 588  
FX 405-842-9773 672 141

#### District II

Jim Dolton  
Collinsville Funeral Home  
1302 W Main St  
Collinsville, OK 74021  
PH 918-371-2516  
FX 918-371-2517

#### District III

Chann Hoehn  
Fairview Funeral Home  
221 N. Main St  
Fairview, OK 73737  
PH 580-227-4722  
FX 580-227-4727

#### District IV

Linda Newsom  
Lawton Ritter Gray Funeral H  
632 SW C Ave.  
Lawton, OK 73501  
PH 580-353-2940  
FX 580-353-1113

#### District V

Roger Clark  
Clark Funeral Service  
305 E. Main St  
Tishomingo, OK 73460  
PH: 580-371-2338  
FX: 580-371-2330

#### District VI

Tom Burkhardt  
Talihina Funeral Home  
204 2nd St  
Talihina, OK 74571  
PH 918-567-4114  
FX 918-567-3371