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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

Employer identification number

DRUZE ORPHANS AND CHARITABLE ORGANIZATION

13-4067139

**PART 4:1. ORGANIZATION IS A CHARITABLE ORGANIZATION HELPING ORPHANS AND ECONOMIC DEPRESSED TO ENABLE THEM TO
RECEIVE EDUCATIONAL TRAINING.**

PART 6:12A. OUR CONFLICT OF INTEREST IS EXPRESSLY STATED ACCORDING TO REGULATIONS OF THE UNITED STATES

DEPARTMENT OF TREASURY.

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Oct. 06, 2011 LTR 2694C 0 R
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DRUZE ORPHANS & CHARITABLE
ORGANIZATION
247 W 38TH ST
NEW YORK NY 10018

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Adina V. Kafetsky
Signature of officer or trustee

11/10/11
Date

Ass. Treasurer
Title