

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)

2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2007 calendar year, or tax year beginning

, 2007, and ending

, 20

- B Check if applicable
[X] Address change
Name change
Initial return
Termination
Amended return
Application pending

C Name of organization
ORPHANS INTERNATIONAL AMERICA, INC.
Number and street (or P O box if mail is not delivered to street address)
Room/suite
PO Box 20196
City or town, state or country, and ZIP + 4
New York NY 10014

D Employer identification number
43-1971411
E Telephone number
F Accounting method:
Cash [] Accrual [X]
Other (specify) []

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

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes [] No [X]
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? Yes [] No [X]
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [] No [X]

G Website: WWW.OIWW.ORG

J Organization type (check only one) [X] 501(c) (3) (insert no) [] 4947(a)(1) or [] 527

K Check here [] if the organization is not a 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.

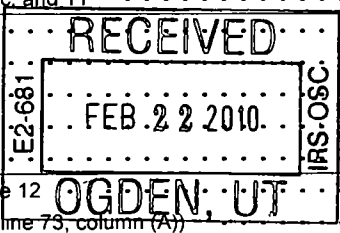
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 245,328

I Group Exemption Number
M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

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

Table with 3 main columns: Description, Amount, and Total. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Rents, Other investment income, Sales of assets, Special events, Inventory sales, Other revenue, Total revenue, Expenses, and Net Assets.

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Handwritten initials and number: GT 10

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22 a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22a				
22 b	Other grants and allocations (attach schedule) (cash \$ 77,340 noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	77,340	77,340		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25 a	Compensation of current officers, directors, key employees, etc listed in Part V-A	25a	21,996	9,165	12,831	
b	Compensation of former officers, directors, key employees, etc listed in Part V-B	25b				
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26	Salaries and wages of employees not included on lines 25a, b, and c	26				
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28	1,000	417	583	
29	Payroll taxes	29	3,134	1,306	1,828	
30	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32				
33	Supplies	33				
34	Telephone	34	2,335	973	1,362	
35	Postage and shipping	35	4,770	83	4,687	
36	Occupancy	36	12,067		5,962	
37	Equipment rental and maintenance	37				
38	Printing and publications	38				
39	Travel	39	19,797	13,101	6,696	
40	Conferences, conventions, and meetings	40	6,355	200	6,155	
41	Interest	41	4,809		4,809	
42	Depreciation, depletion, etc (attach schedule)	42	792		792	
43	Other expenses not covered above (itemize)					
a	OIWW UNREASONABLE EXP	43a	59,235		59,235	
b	BANK CHARGES	43b	6,915	3,971	2,944	
c	PROJECT DEVELOPMENT EXP	43c	21,625		21,625	
d	PROFESSIONAL FEES	43d	8,276	2,926	5,350	
e	ADVERTISING	43e	4,223		4,223	
f	INSURANCE	43f	852		852	
g	OIWW EXPENSE ALLOWANCE	43g	4,800		4,800	
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	260,321	109,482	138,579	12,260

Joint Costs. Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

<p>a See SERVICES</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	18,805
<p>b See SERVICES</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	32,941
<p>c See SERVICES</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	41,260
<p>d See SERVICES</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	16,476
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►</p>	109,482

Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A)		(B)	
		Beginning of year		End of year	
A s s e t s	45	Cash - non-interest-bearing	13,082	45	69,437
	46	Savings and temporary cash investments		46	
	47 a	Accounts receivable		47a	
	b	Less allowance for doubtful accounts		47b	47c
	48 a	Pledges receivable		48a	
	b	Less allowance for doubtful accounts		48b	48c
	49	Grants receivable		49	
	50 a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51 a	Other notes and loans receivable (attach schedule)		51a	
	b	Less allowance for doubtful accounts		51b	51c
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
	54 a	Investments - publicly-traded securities	3,026	54a	4,118
	b	Investments - other securities (attach schedule)		54b	
	55 a	Investments - land, buildings, and equipment basis		55a	
	b	Less accumulated depreciation (attach schedule)		55b	55c
	56	Investments - other (attach schedule)		56	
	57 a	Land, buildings, and equipment basis	2,375	57a	
b	Less accumulated depreciation (attach schedule) STM116	2,045	57b	57c	
58	Other assets, including program-related investments (describe STM116)	1,122	58	330	
59	Total assets (must equal line 74) Add lines 45 through 58	17,230	59	73,885	
L i a b i l i t i e s	60	Accounts payable and accrued expenses	29,753	60	15,634
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)	14,500	63	21,268
	64 a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe STM121)		65	79,000
66	Total liabilities. Add lines 60 through 65	44,253	66	115,902	
N F u n d A B s e l e t a n c e r s	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	(79,312)	67	(114,623)
	68	Temporarily restricted	52,289	68	72,607
	69	Permanently restricted	0	69	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	(27,023)	73	(42,016)	
74	Total liabilities and net assets/fund balances. Add lines 66 and 73	17,230	74	73,886	

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)		
82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
83b			
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
84b			
85a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
85b			
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
85g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
85h			
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
86b			
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
87b			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
88b			
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
b	501(c)(3) and 501(c)(4) orgs 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," attach a statement explaining each transaction	89b	X
89b			
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
89e			
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
89f			
g	For supporting organizations and sponsoring organizations maintaining donor advised funds Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
89g			
90a	List the states with which a copy of this return is filed NY		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions)	90b	1
90b			
91a	The books are in care of THE ORGANIZATION Telephone no Located at PO Box 20196 NEW YORK NY ZIP + 4 10014		
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)? 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	91b	X
91b			

Part VI Other Information (continued)

Yes No

- c At any time during the calendar year, did the organization maintain an office outside of the United States?
If "Yes," enter the name of the foreign country
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here
and enter the amount of tax-exempt interest received or accrued during the tax year

Part VII Analysis of Income-Producing Activities (See the instructions)

Table with columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include: 93 Program service revenue, 94 Membership dues and assessments, 95 Interest on savings & temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 98 Net rental income or (loss) from personal property, 99 Other investment income, 100 Gain or (loss) from sales of assets other than inventory, 101 Net income or (loss) from special events, 102 Gross profit or (loss) from sales of inventory, 103 Other revenue, 104 Subtotal, 105 Total.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13)

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

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.

Please Sign Here

Signature of officer: *Kristie DeKoker* Date: 11/28/10

Type or print name and title: Kristie DeKoker

Paid Preparer's Use Only

Preparer's signature: *Matthew Dipasquale* Date: 01-25-2010 Check if self-employed: Preparer's SSN or PTIN (See Gen Inst X): P00396363

Firm's name (or yours if self-employed), address, and ZIP + 4: MATTHEW DIPASQUALE CPA LLC, 7 SECORA ROAD H-18, Monsey, NY 10952

EIN: 20-3987537 Phone no: 9143193025

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information -- (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are 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 & deferred compensation	(e) Expense account and other allowances
NONE		0	0	0
Total number of other employees paid over \$50,000 ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶		

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities (Yes, No); 2a-2e. Other acts (Sale, Lending, etc.); 3a-3d. Grants and services; 4a-4c. Donor advised funds; d-g. Fund totals.

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions)

I certify that the organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	248,353	275,667	77,821	49,952	651,793
16 Membership fees received	0	0	0	0	0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	0	0	0	0	0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	248,353	275,667	77,821	49,952	651,793
24 Line 23 minus line 17	248,353	275,667	77,821	49,952	651,793
25 Enter 1% of line 23	2,484	2,757	778	500	

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24	26a	0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts	26b	
c Total support for section 509(a)(1) test Enter line 24, column (e)	26c	
d Add Amounts from column (e) for lines 18 19 22 26b	26d	
e Public support (line 26c minus line 26d total)	26e	
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f	%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year

(2006) _____ (2005) _____ (2004) _____ (2003) _____

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year

(2006) _____ (2005) _____ (2004) _____ (2003) _____

c Add Amounts from column (e) for lines 15 16 17 20 21	27c	651,793
d Add Line 27a total and line 27b total	27d	
e Public support (line 27c total minus line 27d total)	27e	651,793
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)	27f	651,793
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	100.00%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See page 9 of the instructions)

(To be completed ONLY by schools that checked the box on line 6 in Part iv)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions)
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table-		
	If the amount on line 40 is- The lobbying nontaxable amount is-		
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	41	
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 13 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			0
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- a** Transfers from the reporting organization to a noncharitable exempt organization of
 - (i)** Cash
 - (ii)** Other assets
- b** Other transactions
 - (i)** Sales or exchanges of assets with a noncharitable exempt organization
 - (ii)** Purchases of assets from a noncharitable exempt organization
 - (iii)** Rental of facilities, equipment, or other assets
 - (iv)** Reimbursement arrangements
 - (v)** Loans or loan guarantees
 - (vi)** Performance of services or membership or fundraising solicitations
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		
a(ii)		
b(i)		
b(ii)		
b(iii)		
b(iv)		
b(v)		
b(vi)		
c		

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Federal Supporting Statements

2007 PG01

Name(s) as shown on return

FEIN

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

PART III-STATEMENT 3

Statement #

Unformatted Statement

ORPHANS INTERNATIONAL AMERICA, INC. WAS ESTABLISHED FOR THE PURPOSE OF PROVIDING FUNDING FOR THE PHYSICAL, EMOTIONAL, AND SOCIAL NEEDS OF ORPHANS THROUGH SMALL ORPHANAGES IN IMPROVERISHED AREAS THROUGHOUT THE WORLD. ORPHANS INTERNATIONAL AMERICA IS A FUNDRAISING ARM OF ORPHANS INTERNATIONAL WORLDWIDE, WHICH WORKS TO ENSURE NOT ONLY THE SURVIVAL OF ITS ORPHANED CHILDREN BUT TO ENABLE THEM TO BECOME CONTRIBUTING MEMBERS OF A GLOBAL SOCIETY THROUGH SERVICE TO THEIR LOCAL COMMUNITIES. ORPHANS INTERNATIONAL WORLDWIDE OPERATES IN TROUBLED, OFTEN POST-DISASTER REGIONS AND TEACHES LEADERSHIP, RESPONSIBILITY, DIVERSITY AND CONFLICT MANAGEMENT THROUGH AN APPROACH THAT IS INTERFAITH, INTERRACIAL, INTERNATIONAL, INTERGENERATIONAL, AND INTERNET-CONNECTED. ITS MISSION IS RAISING GLOBAL CITIZENS.

FORM 990, SCH FOR PART IV, LINE 57
LAND ETC. SCHEDULE

PG 01
Statement #116

<u>Category or Item</u>	<u>Basis</u>	<u>Accumulated Depreciation</u>	<u>End of Year</u>
	2,375	2,045	330
TOTAL	<u>2,375</u>	<u>2,045</u>	<u>330</u>

FORM 990, SCH FOR PART IV, LINE 65
OTHER LIABILITIES SCHEDULE 2

PG 01
Statement #121

<u>Description</u>	<u>Beginning of year</u>	<u>End of year</u>
LINE OF CREDIT		79,000
TOTAL		<u>79,000</u>

Statement of Program Service Accomplishments

2007 01

Name(s) as shown on return

Your Social Security Number

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

FORM 990, PART III (a)

Grants and Allocations	\$0
Program Service Expenses	\$18805
Includes Foreign Grants	NO

Explanation

ORPHANS INTERNATIONAL- INDONESIA

MAINTENANCE OF ORPHANAGE- STAFF TRAINING- SALARIES- SUPPPORT OF CHILDREN

Statement of Program Service Accomplishments

2007 01

Name(s) as shown on return

Your Social Security Number

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

FORM 990, PART III (b)

Grants and Allocations	\$0
Program Service Expenses	\$32941
Includes Foreign Grants	NO

Explanation

ORPHANS INTERNATIONAL- HAITI

MAINTENANCE OF ORPHANAGE- STAFF TRAINING- SALARIES- SUPPPORT OF CHILDREN

Statement of Program Service Accomplishments

2007 01

Name(s) as shown on return

Your Social Security Number

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

FORM 990, PART III (c)

Grants and Allocations	\$0
Program Service Expenses	\$41260
Includes Foreign Grants	NO

Explanation

ORPHANS INTERNATIONAL- SRILANKA

MAINTENANCE OF ORPHANAGE- STAFF TRAINING- SALARIES- SUPPORT OF CHILDREN

Statement of Program Service Accomplishments

2007 01

Name(s) as shown on return

Your Social Security Number

ORPHANS INTERNATIONAL AMERICA, INC.

43-1971411

FORM 990, PART III (d)

Grants and Allocations	\$0
Program Service Expenses	\$16476
Includes Foreign Grants	NO

Explanation

ORPHANS INTERNATIONAL- EL SALVADOR

MAINTENANCE OF ORPHANAGE- STAFF TRAINING- SALARIES- SUPPORT OF CHILDREN

ORPHANS INTERNATIONAL AMERICA, INC.

FIN: 43-1971411

OIWW UNREASONABLE EXPENSES

Based on the tardiness of its 2007 and 2008 financial statements and 990 filings and questionable financial practices described in the organizations 2006 audit Management Letter, presented to the Board of Directors on January 30, 2009, the board commenced a rigorous self-review.

The board found gross mismanagement of the organization and its finances. Apparently, accurate financial records were not kept, funds were blatantly misused, and financial reports were manipulated to mislead the board and public.

Based on the financial records provided to the board upon commencing its financial review and preparing the financials, the board identified the following unreasonable expenses:

Missing or Unaccounted for Cash	\$13,500
Over-Reimbursement or Overpayment of Rent	9,236
Other Unreasonable Expenses	<u>36,500</u>
Total	\$59,236

It appears that unilateral access to the organization's bank accounts was possible through the use of a debit card that was intended only for travel purposes but which may have been used without the board's knowledge or consent for other purposes.

Due to a) incomplete financial documentation, b) expense receipts for items that clearly had no business purpose, c) expenses that had indeterminable or questionable purpose, and d) expenditures or reimbursements that exceeded approved limits as stated in historical board minutes and resolutions, the board categorized the expenditures accordingly.

The board is considering options for recovery of these funds.