PUBLIC DISCLOSURE COPY

PLEASE FILE IN A SAFE PLACE

ARMANINO ADVISORY LLC

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning JUL 1 and ending JUN 30 C Name of organization D Employer identification number Check if applicable: Address change ACCION OPPORTUNITY FUND INC. Name change 45-4127501 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated 111 WEST ST. JOHN STREET 800 (408)297-0204 248,043. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return SAN JOSE, CA 95113 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: DAVID COULTAS Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions HTTPS://AOFUND.ORG/ H(c) Group exemption number K Form of organization: X Corporation Trust Association Other Year of formation: 2011 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: TO ASSIST IN BUILDING WORLD Activities & Governance CLASS MICROFINANCE INSTITUTIONS (SEE SCHEDULE O FOR CONTINUATION) if the organization discontinued its operations or disposed of more than 25% of its net assets. 19 Number of voting members of the governing body (Part VI, line 1a) 18 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 19 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Current Year** 11,028, 7,947. Contributions and grants (Part VIII, line 1h) 8 10,000. 0. Program service revenue (Part VIII, line 2g) 175,096, 240 096. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 0. 11 196,124 248 043. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 644,000 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,337,576. 677,415. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,981,576. 677,415. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,785,452. -429,372. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5,704,404. 4,468,032. Total assets (Part X, line 16) 807,000. 0 Total liabilities (Part X, line 26) 三年 4,897,404. 4,468,032. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block 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.

May the II	RS discuss this	return with the preparer shown abo	ve? See instructions		X Yes No		
		SAN JOSE, CA 95113		Phon	e no.408-200-6400		
Use Only	se Only Firm's address 50 W. SAN FERNANDO ST, STE 500						
Preparer	Firm's name	ARMANINO ADVISORY LLC		Firm'	s EIN 94-6214841		
Paid	Print/Type preparent		' '				
	Type or print na						
Here	DAVID COULT	AS, CHIEF FINANCIAL & OPER	ATING OFFICER				
Sign	Signature of offi	icer		Date			

	1990 (2023) ACCION OPPORTUNITY FUND INC.	45-4127501	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:		
	ACCION OPPORTUNITY FUND. INC. (AOF) WAS INCORPORATED ON DECEMBER 7,		
	2011. THE MISSION OF AOF IS TO ASSIST IN BUILDING WORLD CLASS		
	MICROFINANCE INSTITUTIONS IN THE UNITED STATES TO ENHANCE ECONOMIC		
	DEVELOPMENT AND INDIVIDUALS' SELF SUFFICIENCY THROUGH (SEE SCH. 0)		
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ves	X No
3	If "Yes," describe these changes on Schedule O.	1es	140
4	· · · · · · · · · · · · · · · · · · ·	manaurad by aypanaa	
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses, a	na
	revenue, if any, for each program service reported.		
4a		nue \$	
	ACCION ENVISIONS A WORLD IN WHICH HARD WORKING ENTREPRENEURS HAVE THE		
	FINANCIAL ACCESS AND TOOLS THEY NEED TO IMPROVE THEIR LIVES AND ENHANCE		
	THE WELL-BEING OF THEIR FAMILIES, COMMUNITIES AND LOCAL ECONOMIES FOR		
	YEARS TO COME. ACCION OPPORTUNITY FUND, INC. WAS FORMED IN 2011 TO		
	ELEVATE AND SUPPORT THE WORK OF ITS MEMBERS AS WELL AS OTHER LEADING		
	MICRO LENDERS ON A NATIONAL SCALE. PRIORITY STRATEGIES FOR REALIZING		
	THIS ARE AS FOLLOWS: PROPELLING THE FLOW OF RESOURCES, SUPPORT, TOOLS		
	AND INFORMATION TO ALL MEMBER AND NON-MEMBER MICROFINANCE		
	ORGANIZATIONS - INCLUDING FUNDRAISING, TRAINING AND EDUCATION, MEDIA.		
	PARTNERSHIP AND PROGRAMMATIC OPPORTUNITIES- TO ENCOURAGE THEIR		
	DEVELOPMENT, INCREASING ACCESS TO CREDIT AND OTHERWISE PROMOTING		
	FINANCIAL INCLUSION AND FINANCIAL HEALTH THROUGH TRAINING (SEE SCH. 0)		
4b	(Code:) (Expenses \$ including grants of \$) (Rever	nuo ¢	,
1.0	Todaling grants of \$\psi\$ \tag{\tag{\tag{\tag{\tag{\tag{\tag{		
4c	(Code:) (Expenses \$ including grants of \$) (Rever	nue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 677,415.		
		Form	990 (2023

45-4127501

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	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	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l		.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			Х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Λ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12a	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х

332003 12-21-23

	990 (2023) ACCION OPPORTUNITY FUND INC.	45-4127501	Р	age 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
			1	1 77

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			l
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			

	Check if Schedule O contains a response or note to any line in this Part V							
			_		Yes	No		
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	0					
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0					
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?			10				

332004 12-21-23

Form 990		45-4127501	Pa	age 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	~ 1.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Α
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		x
٨		7c		25
d e		7e		х
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans Then the ground of recovery as head.			
	Enter the amount of reserves on hand Did the exemplation receive any payments for indeed template any payments for indeed template any payments.	110		Х
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b		
IJ		15		x
	excess parachute payment(s) during the year?	13		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Let The the number of voting members of the governing body at the end of the tax year 1a		Check if Schedule O contains a response or note to any line in this Part VI				X					
the ten number of voting members of the governing body, or the governing body delegated bread submired in the case manetal differences in voting rights among members of the governing body, or the governing body delegated bread submired to an executive committee or similar committee, explain on Schedule 0. b. Enter the number of voting members exceed the committee of similar committee, explain on Schedule 0. b. Enter the number of voting members included on line 1a, above, who are independent of the committee	Sec	tion A. Governing Body and Management									
If there are material differences in voting rights among members of the governing body, or if the governing body delegated froad authority to an executive committee or similar committee, opipion on Schedule 0. 10 b Enter the number of voting members included on line 1a, above, who are independent 1. 12 b) Identify the number of voting members included on line 1a, above, who are independent of the process o					Yes	No					
the three are material differences in voting rights among members of the governing body difference that authority to an excustive committee, organic and Schilder D. b Enter the number of voting members included on line 1s, above, who are independent 2	1a	Enter the number of voting members of the governing body at the end of the tax year 1a	19								
body delegated broad authority to an executive committee or similar committee, optain on Schedule D. 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, directors, trustees, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3											
b Enter the number of voting members included on line 1s, above, who are independent 1b 1 1e 2 2											
2 Did any officer, director, trustee, or key employees and a family relationship or a business relationship with any other officer, director, trustees, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 J X V Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 J X V Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 7a Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more member of the governing body? 5 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Did the organization thave members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Did the organization thave the governing body? 6 Did the organization thave the governing body? 7 Did the organization thave the power to elect the governing body? 8 Did the organization thave the power the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is maliniq address? If Y Yes, "organize the names and addresses on Schedule O to Power the power organized on have located chapters, tranches, or affiliates? 10 If Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes? 10 If Yes," did the organization have a written conflict of interest policy? If Yes, "governing body before filing the	h										
a Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization have mare during the year of a significant diversion of the organization asseste? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any, governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 Bid the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there are officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? It *!vs.* "provide the names and addresses on Schedule O 8 Did the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 11 In Has the organization have local chapters, branches, or affiliates? 12 Did the organization have a written conflict of interest policy? If *!\no,* go to line 13 13 Lescribe on Schedule O the process, if any, used by the organization is exempt purpose? 14 Did the organization have a written conflict of interest policy? If *!\no,* go to line 13 15 Did the organization have a written conflict of interest policy? If *!\no,* go to line 13 16 Did the organization have a written conflict of interest policy? 17 Did the organization have a written conflict of interest policy?											
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, fusitees, or key employees to a management company or other person? 3 J X 4 Did the organization become aware during the year of a significant diversion of the organization's assests? 5 Did the organization become aware during the year of a significant diversion of the organization's assests? 6 X 7a Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization remained and the second procedure of the process of	_			2		x					
of officers, directors, flusteess, or key employees to a management company or other person? 4	2										
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 JK 5 Did the organization can eavere during the year of a significant diversion of the organization's assets? 6 JK 7a Did the organization have members or stockholders? 7b Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a KX 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's maining address? If Yes's, Provide the names and addressess on Schedule O 9 JK 8 Section B. Policies (This Section B requests information about policies not required by the Internal Pavenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If Yes, I'd if the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b I X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 10a Did the organization have a written conflict of interest policy? If 'No,' go line 13 10b Were officies, directors, or trustess, and key employees required to disclose annually interest that could give rise to conflict? 10c Did the organization have a written demanded the organization of the regional process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 1	3			_		v					
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6						_					
6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Aver any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8 Is been committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization in smiling address? If Yes; "myride the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by: the Internal Revenue Code.) Yes, No. 10a Did the organization have local chapters, branches, or affiliates? 10 If Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Is Section on Schedule O how this was done. 11a Has the organization have a written conflict of interest policy? If No," go to line 13 12b Describe on Schedule O how this was done. 12c I Did the organization have a written world and enforce compliance with the policy? "Yes," describe on Schedule O how this was done. 12c I Did the organization have a written benefit or an enforce compliance with the policy? "Yes," describe on Schedule O Managination have a written believe the more of the following persons include a review and approval by independent persons, comparability data, and											
Ta Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? A rea my operance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? B Set organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? B Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, "provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves No. 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Ex; did the organization have local thapters, branches, or affiliates or some stream or some provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officians, directors, or trustes, and key employees required to disclose annually interest that could give is to conflicts? 12b X 13 Did the organization have a written whistleblower policy? 13 X 15b Uther officians on have a written whistleblower policy? 15c If the organization have a written policy or top management official 15d Uther officians on have a written policy or top management official	5					X					
more members of the governing body? b Ave any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b 3 bill the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's malling address? If **I*** provide the names and addresses on Schedule O Section B. Policies **It is a provide the names and addresses on Schedule O Section B. Policies **It is a provide the names and addresses on Schedule O Section B. Policies **It is a provide the names and addresses on Schedule O Did the organization have local chapters, branches, or affiliates? 10a Did the organization have local chapters, branches, or affiliates? 10b If **Is a the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If **Is a the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 2 b Did the organization regularly and consistently monitor and enforce compliance with the policy? If **I**y*s, **describe on Schedule O how this was done c Did the organization have a written obcument retention and destruction policy? 13 Did the organization have a written obcument retention and destructions. 14 Did the organization have a written policy or procedure requiring the organization to evaluate its participation in joint	6			6	Х						
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If "Yes." provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves. No. 10a Did the organization have local chapters, branches, or affiliates? b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 12b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Describe on Schedule O the process, if any, used by the organization they were officers, directors, or trustes, and key employees required to disolese annually interests that could give rise to conflicts? 12b X 12c Did the organization have a written world and enforce compliance with the policy? If "Yes," describe on Schedule O they this knas done. 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written world and enforce compliance with the policy? If "Yes," describe on Schedule O they this knas done. 15 Did the process for determining compensation of the deliberation and decision? 16a Did the organization have a written decoment retertion and destruction policy? 17 List the organization is process on Schedule O. Se	7a										
persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If 'Yes,' trouvide the names and addresses on Schacule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Z 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12b Use afficers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Use or organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe on Schedule O how this was done 12c X 13 Did the organization have a written comment retention and destruction policy? 13c Y 15d Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15d Did the organization is offer. Exp. Cap. Lip. May. May. Ma				7a	Х						
B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? g Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves No 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If "Yes," did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustess, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written document retention and destruction policy? 13 Did the organization have a written written of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement w	b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization for provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b V J Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c V J Did the organization have a written obtained a written whistleblower policy? 13b J Did the organization have a written document retention and destruction policy? 14D Did the organization have a written document retention and destruction policy? 15D Did the organization have a written policy or procedure requiring the organization to evaluate its participation in 15b V T T Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Did the organization for the process on Sch		persons other than the governing body?		7b		Х					
b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a V	8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a V	а	The governing body?		8a	Х						
Section B. Policies (this certor, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," approide the names and addresses on Schedule O. 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written of the organization to review this Form 990. 12b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12c Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written over any employees required to disclose annually interests that could give rise to conflicts? 15 Did the organization have a written document retention and destruction policy? 15 Did the organization have a written document retention and destruction policy? 16 Did the organization have a written document retention and destruction and decision? 17 Did the organization have a written document retention and destructions. 18 Did the organization of the organization of the following persons include a review and approval by independent persons, comparation of the organization of the deliberation and decision? 18 Did the organization of the organization of the organization of the organization of the deliberation and decision? 18 Did the organization of the organization of the organization of the org	b			8b	Х						
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Ves	9										
Section B. Policies This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a X				9		х					
No No No No No No No No	Sec										
10a		(This Section B requests information about policies not required by the internal nevenue Gode.)			Vas	No					
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 11a X 11b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c X 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. 12c X 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b Vers. If yes, "did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arra	102	Did the organization have local chanters, branches, or affiliates?		102		110					
and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 12b Diescribe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a I Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c I Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a T Ho organization's CEO, Executive Director, or top management official 15a T Ho organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 15a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 15a I List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, TL, MA, MD, MI, NJ, NM, NY, NC 15cettion C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, TL, MA, MD, MI, NJ, NM, NY, NC 18 Section C. Disclosure				IUa							
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. 12b Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC Section G104 requires an organization to make its Forms 1023 (1024 or 1024A, if apply). X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how)	b			40h	x						
b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, TL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024A, if applicable, 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website	44-										
12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b X 2 2 2 3 2 2 3 2 2 3 2 3 3			orm?	11a	Λ						
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15 Tyes' to line 15a or 15b, describe the process on Schedule O. See instructions. 16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 Did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books											
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15 If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC exempt status with respect to such arrangements? Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	12a	, g									
on Schedule O how this was done				12b	X						
Did the organization have a written whistleblower policy? 13	С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 The organization's CEO, Executive Director, or top management official 15 Other officers or key employees of the organization 15 If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16 Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 Diff "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.		on Schedule O how this was done		12c	Х						
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Did the organization of 15b, describe the organization if "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Diff "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. \[\begin{arrange} \text{X} \text{ Upon request} \text{ Other (explain on Schedule O)} Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	13	Did the organization have a written whistleblower policy?		13	Х						
persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	14	Did the organization have a written document retention and destruction policy?		14	Х						
a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 16a X	15	Did the process for determining compensation of the following persons include a review and approval by independent									
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, TL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311		persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 1	а	The organization's CEO, Executive Director, or top management official		15a	Х						
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, TL, MA, MD, MT, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311				15b		Х					
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a											
taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	16a	·									
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311				16a		х					
in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	h	• •		.54							
exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filedAR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website											
 List the states with which a copy of this Form 990 is required to be filedAR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that applyX Own websiteAnother's websiteX Upon requestOther (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311 				16h							
 List the states with which a copy of this Form 990 is required to be filedAR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that applyX Own websiteAnother's websiteX Upon requestOther (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311 	800			IOD							
 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311 			NC								
for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Y Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311											
 X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311 	18		vu1(c)(3)s	only)	availal	ole					
 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311 											
statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311		Own website Another's website Upon request Other (explain on Schedule O)									
State the name, address, and telephone number of the person who possesses the organization's books and records KATE LAWRENCE - (650) 613-9311	19		olicy, and	financ	cial						
KATE LAWRENCE - (650) 613-9311		statements available to the public during the tax year.									
	20	State the name, address, and telephone number of the person who possesses the organization's books and records									
111 W ST. JOHN ST SUITE 800, SAN JOSE, CA 95113		KATE LAWRENCE - (650) 613-9311									
		111 W ST. JOHN ST SUITE 800, SAN JOSE, CA 95113									

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)		(C)			(D)	(E)	(F)		
Name and title	Average	(do	Position (do not check more than one		one	Reportable	Reportable	Estimated		
	hours per	box, unles		ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		er an	la a a	recio	r/trus	tee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	m pen		1099-NEC)	1000 NEO)	and related
	below	Individual trustee or director	Institutional trustee	la la	Key employee	Highest compensated employee	le.	,		organizations
	line)	Indiv	Instit	Officer	Key 6	High empl	Former			
(1) LUZ LOPEZ URRUTIA	3.00									
CHIEF EXECUTIVE OFFICER	37.00	Х		Х				0.	408,275.	20,346.
(2) CHRISTOPHER PILKERTON	0.25									
CHIEF LEGAL & REGULATORY STRATEGY OF	39.75				Х			0.	335,072.	33,145.
(3) MICHAEL RAPAPORT	1.50									
PRESIDENT, COO	38.50			Х				0.	255,243.	31,883.
(4) DAVID COULTAS	3.00									
EVP & CFO	37.00			Х				0.	231,626.	19,063.
(5) GREG AVIS	1.50									
BOARD CHAIR	1.50	Х		Х				0.	0.	0.
(6) CARETHA COLEMAN	1.50									
VICE CHAIR	1.50	Х		Х				0.	0.	0.
(7) MICKEY KONSON (TO DEC 2023)	1.50									
DIRECTOR & SECRETARY	1.50	Х		Х				0.	0.	0.
(8) ESTEBAN ALTSCHUL	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(9) TODD BAKER	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(10) SWATI BHATIA	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(11) PHIL BLACK	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(12) DICKSON CHU	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(13) SOLANA COZZO	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(14) JONI CROPPER	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(15) DEBRA ENGEL	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(16) MADELEINE FACKLER	1.50									
DIRECTOR	1.50	Х						0.	0.	0.
(17) BRIAN GRAHAM	1.50									
DIRECTOR	1.50	Х						0.	0.	0.

332007 12-21-23

Form 990 (2023) ACCION OPPOR	TUNITY FUND	IN	c.						45-412750	1	Р	age 8
Part VII Section A. Officers, Directors, Trus	stees, Key Emp	oloy	ees,	and	Hiç	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	(B) (C) Position (do not check more than one box, unless person is both ar						(D) Reportable compensation from	(E) Reportable compensation from related	am	(F) timate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	frorga orga and	pensa om th anizat d relat inizati	e tion ted
(18) PARKER HUDNUT	1.50											
DIRECTOR	1.50	Х						0.	0.			0.
(19) LATA KRISHNAN DIRECTOR	1.50	х						0.	0.			0.
(20) JUANITA LOTT	1.50											
DIRECTOR	1.50	Х						0.	0.			0.
(21) SAM RAMOS	1.50											
DIRECTOR	1.50	Х						0.	0.			0.
(22) MICHAEL SCHLEIN DIRECTOR	1.50	x						0.	0.			0.
(23) DIANA TAYLOR	1.50											
DIRECTOR	1.50	х						0.	0.			0.
(24) JIM KOSHLAND (TO AUG 2023)	1.50							_	_			
DIRECTOR	1.50	X						0.	0.			0.
1b Subtotal								0.	1,230,216.		104,	437.
c Total from continuation sheets to Part V								0.	0.			0.
d Total (add lines 1b and 1c)								0.	1,230,216.		104,	437.
2 Total number of individuals (including but r compensation from the organization	not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			0
									1		Yes	No

			res	NO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		Х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address NONE	(B) Description of services	(C) Compensation
Total number of independent contractors (including but not limited to those listed		

Form 990 (2023)

\$100,000 of compensation from the organization

45-4127501

Form 990 (2023)	ACCION OPPORTUNITY FUND INC.
Part VIII	Statement of Revenue

		Check if Schedule O contains a response or	r note to any lin	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
SS	1	a Federated campaigns1a					
ant		b Membership dues 1b					
ច្ច		c Fundraising events 1c					
fts, r A		d Related organizations 1d					
ig je		e Government grants (contributions) 1e					
Sin		f All other contributions, gifts, grants, and					
e ti		similar amounts not included above 1f	7,947.				
ĢË			,,,,,,,,				
Contributions, Gifts, Grants and Other Similar Amounts		b Tatal Add Bass 1 a 16		7,947.			
0 %			Business Code	.,			
_	2	<u>†</u>					
Şi							
Ser							
Z Z							
gra Re							
Program Service Revenue		f All other program service revenue					
		g Total. Add lines 2a-2f					
\neg	3	Investment income (including dividends, interes					
	_	other similar amounts)		240,096.			240,096.
	4	Income from investment of tax-exempt bond pro		,			,
	5	Royalties					
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		b Less: cost or other basis					
e		and sales expenses 7b					
len		c Gain or (loss)7c					
Re		d Net gain or (loss)					
Other Revenue	8	a Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events					
	9	a Gross income from gaming activities. See					
		Part IV, line 199a					
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
	10	a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
$\overline{}$		c Net income or (loss) from sales of inventory	Business Code				
Snc	11 :						
nec		b					
ella		c					
Miscellaneous Revenue		d All other revenue					
2		e Total. Add lines 11a-11d					
	12	Total revenue. See instructions		248,043.	0.	0.	240,096.

332009 12-21-23

45-4127501

Da :	Check if Schedule O contains a response		(B)	(C) Management and	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			,	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages Pension plan accruals and contributions (include				
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10					
11	Payroll taxes Fees for services (nonemployees):				
''	Management				
b	Legal				
c	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance Character Stranger and Applied Control of the Control of				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	INTER-CO SERVICE EXPENS	677,415.	677,415.		
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	677,415.	677,415.	0.	0.
26	Joint costs . Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2023) Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X A Beginning of year Beginning of year	_
2 Savings and temporary cash investments 2 4,468,00 3 Pledges and grants receivable, net 292,053. 3 4 Accounts receivable, net 3,242. 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 11,665. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 5,377,597. 12 13 Investments - program-related. See Part IV, line 11 13	
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	32.
4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 11,665. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments · publicly traded securities 11 Investments · other securities. See Part IV, line 11 5,377,597. 12 Investments · program-related. See Part IV, line 11 13	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 15 Investments - program-related. See Part IV, line 11	
controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 11,665. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 5,377,597. 12 13 Investments - program-related. See Part IV, line 11 13	
8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 11,665. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 5,377,597. 12 13 Investments - program-related. See Part IV, line 11 13	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11	
b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 5,377,597. 12 13 Investments - program-related. See Part IV, line 11 13	
11Investments - publicly traded securities1112Investments - other securities. See Part IV, line 115,377,597. 1213Investments - program-related. See Part IV, line 1113	
12Investments - other securities. See Part IV, line 115,377,597.1213Investments - program-related. See Part IV, line 1113	
13 Investments - program-related. See Part IV, line 11	
15 Other assets. See Part IV, line 11	
16 Total assets. Add lines 1 through 15 (must equal line 33) 5,704,404. 16 4,468,00	32.
17 Accounts payable and accrued expenses 807,000. 17	
18 Grants payable 18	
19 Deferred revenue 19	
20 Tax-exempt bond liabilities 20	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 21	
22 Loans and other payables to any current or former officer, director	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22	
controlled entity or family member of any of these persons	
23 Secured mortgages and notes payable to unrelated third parties 23	
24 Unsecured notes and loans payable to unrelated third parties 24	
25 Other liabilities (including federal income tax, payables to related third	
parties, and other liabilities not included on lines 17-24). Complete Part X	
of Schedule D	
26 Total liabilities. Add lines 17 through 25 807,000 26	0.
Organizations that follow FASB ASC 958, check here	
and complete lines 27, 28, 32, and 33.	
27 Net assets without donor restrictions 4,234,094. 27 4,468,05	132.
28 Net assets with donor restrictions 663,310. 28	0.
Organizations that do not follow FASB ASC 958, check here	
and complete lines 29 through 33.	
δ 29 Capital stock or trust principal, or current funds	
30 Paid-in or capital surplus, or land, building, or equipment fund 30	
31 Retained earnings, endowment, accumulated income, or other funds	
and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances and complete lines 27, 28, 32, and 33. 4, 468, 01 4, 234, 094. 27 4, 468, 01 4, 234, 094. 27 4, 468, 01 4, 234, 094. 27 4, 468, 01 4, 468, 01 4, 897, 404. 32 4, 468, 01)32.
33 Total liabilities and net assets/fund balances 5,704,404. 33 4,468,00	132.

Form	1990 (2023) ACCION OPPORTUNITY FUND INC.	45-412750	1	Pag	ge 12	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		248,	043.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		677,	415.	
3	3 Revenue less expenses. Subtract line 2 from line 1					
4						
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	4,	468,	032.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			\Box	Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

		ACCION	OPPORTUNITY FU	ND INC.					45-4127501
Pa	ırt I	Reason for Public (Charity Status. ((All organizations must c	omplete th	nis part.) S	ee instructions	3.	
The 1 2 3 4	orgar	nization is not a private found A church, convention of che A school described in sect A hospital or a cooperative A medical research organiz city, and state:	ation because it is: (Furches, or association 170(b)(1)(A)(ii). (A)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)(b)	For lines 1 through 12, cl n of churches described Attach Schedule E (Form unization described in se	heck only only on the section 170 ection 170	one box.) n 170(b)(1 n(b)(1)(A)(ii	I)(A)(i). i).		the hospital's name,
5 6 7 8 9	X	An organization operated for section 170(b)(1)(A)(iv). (CA federal, state, or local government An organization that normal section 170(b)(1)(A)(vi). (CA community trust described An agricultural research orgor university or a non-land-guniversity:	Complete Part II.) vernment or governm Illy receives a substar omplete Part II.) ed in section 170(b)(panization described	nental unit described in a ntial part of its support fr 1)(A)(vi). (Complete Part in section 170(b)(1)(A)(i	section 17 rom a gove t II.) ix) operate	70(b)(1)(A) ernmental i	(v). unit or from th	e general p land-grant	oublic described in college
10 11 12		An organization that normal activities related to its exemincome and unrelated busing See section 509(a)(2). (Con An organization organized an organization organized and activities of the section of th	npt functions, subject ness taxable income mplete Part III.) and operated exclusi	t to certain exceptions; a (less section 511 tax) fro vely to test for public sat	and (2) no one on busines fety. See	more than sses acquii section 50	33 1/3% of its red by the organical (4).	support for anization a	rom gross investment ifter June 30, 1975.
a	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having						giving upporting		
c	: [control or management o organization(s). You mus Type III functionally inte its supported organization	f the supporting orga t complete Part IV, s grated. A supporting	anization vested in the sa Sections A and C. g organization operated	ame perso	ns that contion with, a	ntrol or manag	e the supp	ported
e		that is not functionally trequirement (see instructional Check this box if the organization).	egrated. The organiz ions). You must con anization received a v	ation generally must sat nplete Part IV, Sections written determination fro	isfy a distr A and D, m the IRS	ibution red and Part ' that it is a	quirement and V.	an attentiv	
		functionally integrated, or		nally integrated supporting	ng organiz	ation.			
		er the number of supported on vide the following information	•	d organization(s)					
<u>g</u>		(i) Name of supported organization	(ii) EIN	d organization(s). (iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the orga in your governi Yes	nization listed ng document?	(v) Amount of support (see in:	•	(vi) Amount of other support (see instructions)
Tate	al .						ı		I

332021 12-21-23

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5,437,578.	6,243,469.	4,909,087.	11,028.	7,947.	16,609,109.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5,437,578.	6,243,469.	4,909,087.	11,028.	7,947.	16,609,109.
5	The portion of total contributions	, ,	, ,	, ,	,	,	
Ŭ	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
							11,022,130.
6							5,586,979.
	Public support. Subtract line 5 from line 4.						3,300,373.
	• • • • • • • • • • • • • • • • • • • •	(a) 2019	(h) 2020	(a) 2001	(4) 2022	(e) 2023	(f) Total
	ndar year (or fiscal year beginning in)	5,437,578.	(b) 2020 6,243,469.	(c) 2021 4,909,087.	(d) 2022 11,028.	7,947.	(f) Total 16,609,109.
	Amounts from line 4	3,437,370.	0,243,403.	4,505,007.	11,020.	7,5=7.	10,000,100.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	05 000	1 020	005	155 006	240 226	F12 004
	and income from similar sources	95,999.	1,038.	995.	175,096.	240,096.	513,224.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						17,122,333.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	449,610.
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax ye	ear as a section 50	01(c)(3)	
_	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2023 (li					14	32.63 %
	Public support percentage from 2022					15	36.91 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or mo	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and I	ine 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			X
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop here	e. Explain in Part \	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, chec	k this box and sto	op here. Explain ir	Part VI how the	
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization		-	•	• • •		
	<u> </u>		,	. ,			(Form 990) 2023

332022 12-21-23

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2022 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	ation	
b	33 1/3% support tests - 2022. If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

332023 12-21-23

Schedule A (Form 990) 2023

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
1	l		
2	2		
3	а		
3	h		
<u> </u>			
3	_		
4:	9		
	ч		
41	h		
	<u> </u>		
1	_		
4	C		
_	_		
5	a		
5	h		
5			_
3			
6	,		
	,		
7			
8	,		
9:	a .		
3	u		
91	h		
9	,		
9	^		
9	ن		
10)a		
	·u		
10	b		
10	'n		L

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	1.10		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations	2		
000	tion of Type it oupporting organizations		.,	· ·
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). stion D. All Type III Supporting Organizations	1		
360	tion b. All Type III Supporting Organizations			l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions))-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Vas " describe in Part VI the role played by the organization in this regard	3b		

ACCION OPPORTUNITY FUND INC.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
•	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see
	inate actional	, 5	3 9-	`

Schedule A (Form 990) 2023

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continued)									
Secti	on D - Distributions			Current Year								
1	1 Amounts paid to supported organizations to accomplish exempt purposes 1											
2	Amounts paid to perform activity that directly furthers exemp											
	organizations, in excess of income from activity	2										
3	Administrative expenses paid to accomplish exempt purpose	3										
4	Amounts paid to acquire exempt-use assets		4									
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5									
_6	Other distributions (describe in Part VI). See instructions.		6									
7	Total annual distributions. Add lines 1 through 6.		7									
8	Distributions to attentive supported organizations to which the	ne organization is responsive										
	(provide details in Part VI). See instructions.		8									
9	Distributable amount for 2023 from Section C, line 6		9									
10	Line 8 amount divided by line 9 amount		10									
		(i)	(ii)	(iii)								
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	Distributable Amount for 2023								
1	Distributable amount for 2023 from Section C, line 6											
2	Underdistributions, if any, for years prior to 2023 (reason-											
	able cause required - explain in Part VI). See instructions.											
3	Excess distributions carryover, if any, to 2023											
<u>a</u>	From 2018											
<u>b</u>	From 2019											
c	From 2020											
d	From 2021											
<u>e</u>	From 2022											
<u>f</u>	Total of lines 3a through 3e											
<u>g</u>	Applied to underdistributions of prior years											
<u>h</u>	Applied to 2023 distributable amount											
<u>_i</u>	Carryover from 2018 not applied (see instructions)											
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.											
4	Distributions for 2023 from Section D,											
	line 7: \$											
<u>a</u>	Applied to underdistributions of prior years											
<u>b</u>	Applied to 2023 distributable amount											
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.											
5	Remaining underdistributions for years prior to 2023, if											
	any. Subtract lines 3g and 4a from line 2. For result greater											
	than zero, explain in Part VI. See instructions.											
6	Remaining underdistributions for 2023. Subtract lines 3h											
	and 4b from line 1. For result greater than zero, explain in											
	Part VI. See instructions.											
7	Excess distributions carryover to 2024. Add lines 3j											
	and 4c.											
8	Breakdown of line 7:											
	Excess from 2019											
	Excess from 2020											
	Excess from 2021											
<u>a</u>	Excess from 2022 Excess from 2023											

Schedule A (Form 990) 2023

Part VI	Supplemental Information Boston Bosto
i dit vi	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
-	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

ACCION OPPORTUNITY FUND INC.

Employer identification number

45-4127501

Pa	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor a	dvised funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds car	be used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpo	ose conferring
	impermissible private benefit?		Yes No
Pa			90, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (for example, recreat	ion or education) Preservation	n of a historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete lines 2a throu	ed conservation contribution in the fo	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b			
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acquir	• • •	
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by	the organization during the tax
	year		
4	Number of states where property subject to conservation ease	•	
5	Does the organization have a written policy regarding the peri		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcing t	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing cons	ervation easements during the vear
		J , , , , , , , , , , , , , , , , , , ,	<i>5</i> ,
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 1	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial sta	ements that describes the
_	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
па	If the organization elected, as permitted under FASB ASC 958	•	
	of art, historical treasures, or other similar assets held for publication and its Dark VIII the text of the feature to the fe		•
	service, provide in Part XIII the text of the footnote to its finance		
р	If the organization elected, as permitted under FASB ASC 958	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in	furtherance of public service,
	provide the following amounts relating to these items.		•
	(i) Revenue included on Form 990, Part VIII, line 1		
_			The state of the s
2	If the organization received or held works of art, historical trea		ncial gain, provide
	the following amounts required to be reported under FASB AS	_	•
a	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. line 10c. column (B))

Schedule D (Form 990) 2023 ACCION OPPORTUNIT	Y FUND INC.	4	5-412/501 Page 3
Part VII Investments - Other Securities	5 000 B 1 N/ II	111 0 5 000 5 1 1 1 1 1 1 1 1 1 1 1 1 1	
Complete if the organization answered "Yes" of			d of voor morket value
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-ot-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Tatal (Col. (h) must squal Form 000, Port V, line 10, sel. (P))			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d of year market value
	(b) book value	(c) Method of Valuation. Cost of en	u-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	Faura 000 David IV line	11d Coo Forms 000 Boot V line 15	
Complete if the organization answered "Yes" o		Trd. See Form 990, Part X, line 15.	(h) Dook volue
···	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	1
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col.	(B))		
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	o the organization's financial statements t	hat reports the

Schedule D (Form 990) 2023

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Par	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Reve	nue per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
	Other (Describe in Part XIII.)		
	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Par	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Expe	enses per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, ,	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	.)	5
	t XIII Supplemental Information		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b	; Part V, line 4; Part X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional information.	
D3.D0	v		
PART	X, LINE 2:		
3 O E	AND AOFCD ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER THE	DDOUTGIONG OF	
HOI	AND ACTED ARE EXEMIT FROM PEDERAL INCOME TAXES UNDER THE	TROVIDIOND OF	
SECT	ION 50L(C) (3) OF THE INTERNAL REVENUE CODE. IN ADDITION,	AOF AND	
		1101 1110	
AOFC	D QUALIFY FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAVE	BEEN	
	- -		
CLAS	SIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS.	INCOME WHICH	
IS N	OT RELATED TO EXEMPT PURPOSES LESS APPLICABLE DEDUCTIONS,	IS SUBJECT	
	·		
TO F	EDERAL AND STATE CORPORATE INCOME TAXES. THE ORGANIZATION	HAD NO	
UNRE	LATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2024.		
AOF	IS EXEMPT FROM NEW YORK STATE INCOME TAXES UNDER SECTION	102 OF THE	
NOT-	FOR-PROFIT CORPORATION LAW, AOF MAY BE LIABLE FOR INCOME	TAXES BASED	
o:	NGOVE TILDUED TV OFFICE GENERAL THE	1001 TED 155	
ON I	NCOME EARNED IN OTHER STATES AND IN WHICH IT HAS NOT YET	APPLIED FOR	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

QUZ3
Open to Public

45-4127501

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

ACCION OPPORTUNITY FUND INC.

Inspection
Employer identification number

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2023

Regulations section 53.4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) LUZ LOPEZ URRUTIA		0.	0.	0.	0.	0.	0.	0.	
	(i) (ii)	355,775.	52,500.	0.	12,200.	8,146.	428,621.	0,	
(2) CHRISTOPHER PILKERTON	(i)	0.	0.	0.	0.	0.	0.	0,	
CHIEF LEGAL & REGULATORY STRATEGY OF	ii)	284,087.	50,985.	0.	12,200.	20,945.	368,217.	0.	
(3) MICHAEL RAPAPORT	(i)	0.	0.	0.	0.	0.	0.	0,	
	ii)	191,125.	37,080.	27,038.	12,200.	19,683.	287,126.	0.	
(4) DAVID COULTAS	(i)	0.	0.	0.	0.	0.	0.	0.	
	ii)	216,626.	15,000.	0.	0.	19,063.	250,689.	0.	
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
((i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								
	(i)								
	ii)								

Page 2

Schedule J (Form 990) 2023

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
A RELATED ORGANIZATION, ACCION OPPORTUNITY FUND COMMUNITY DEVELOPMENT,
COMPENSATED OFFICERS. THE METHODS USED BY THE RELATED ORGANIZATION TO
ESTABLISH THE COMPENSATION INCLUDE:
COMPENSATION SURVEY OR STUDY
FORM 990 OF OTHER ORGANIZATIONS
APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE

SCHEDULE 0 (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Employer identification number

ACCION OPPORTUNITY FUND INC.	45-4127501						
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:							
IN THE UNITED STATES TO ENHANCE ECONOMIC DEVELOPMENT AND INDIVIDUALS'							
SELF SUFFICIENCY THROUGH INCREASING ACCESS TO CREDIT AND OTHERWISE							
PROMOTING FINANCIAL INCLUSION AND FINANCIAL HEALTH THROUGH TRAINING AND							
MENTORING FOR MEMBERS OF LOW-TO-MODERATE INCOME COMMUNITIES.							
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:							
INCREASING ACCESS TO CREDIT AND OTHERWISE PROMOTING FINANCIAL INCLUSION							
AND FINANCIAL HEALTH THROUGH TRAINING AND MENTORING FOR MEMBERS OF							
LOW-TO-MODERATE INCOME COMMUNITIES.	LOW-TO-MODERATE INCOME COMMUNITIES.						
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:							
AND MENTORING FOR MEMBERS OF LOW-TO-MODERATE INCOME COMMUNITIES.							
FORM 990, PART VI, SECTION A, LINE 6:							
THE MEMBERS OF THE CORPORATION ARE THOSE INDIVIDUALS SERVING FROM TIME TO							
TIME AS MEMBERS OF THE BOARD OF DRECTORS OF THE CORPORATION.							
FORM 990, PART VI, SECTION A, LINE 7A:							
THE NUMBER OF DIRECTORS ON THE BOARD OF DIRECTORS (THE "DIRECTORS," AND							
EACH A "DIRECTOR") SHALL BE FIXED EXCLUSIVELY BY THE BOARD OF DIRECTORS							
PURSUANT TO A RESOLUTION ADOPTED BY TWO-THIRDS OF THE BOARD OF DIRECTORS							
THEN AUTHORIZED.							

EACH DIRECTOR SHALL BE ELECTED BY THE AFFIRMATIVE VOTE OF A MAJORITY OF THE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization **Employer identification number** ACCION OPPORTUNITY FUND INC. 45-4127501 VOTES CAST AT A MEMBER MEETING AT WHICH A QUORUM IS PRESENT. FORM 990, PART VI, SECTION B, LINE 11B: THE AUDIT COMMITTEE OF ACCION OPPORTUNITY FUND COMMUNITY DEVELOPMENT, A RELATED CALIFORNIA NONPROFIT ORGANIZATION, SHALL HAVE THE RESPONSIBILITY FOR REVIEWING THE ORGANIZATION'S FORM 990 (INCLUDING ALL PERTINENT SCHEDULES) BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE. ONCE THE AUDIT COMMITTEE HAS APPROVED THE DRAFT FORM 990, IT SHALL BE SENT TO ALL MEMBERS OF THE BOARD OF DIRECTORS FOR THEIR REVIEW, PRIOR TO FILING WITH THE IRS. ONCE THE REVIEW PERIOD HAS BEEN DULY EXPIRED. THE FORM 990 IS FILED WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY WAS APPROVED BY THE BOARD OF DIRECTORS ON DECEMBER 11, 2011 AND AMENDED IN 2012. THE BOARD ADOPTED TWO SUPPLEMENTARY POLICIES POR ITS CONFLICT OF INTEREST POLICY AT ITS AUGUST 9, 2012 BOARD MEETING, WHICH ARE AS FOLLOWS. CONFLICT OF INTEREST FORMS ARE SIGNED ANNUALLY. APPROVAL OF PROCEDURES FOR EVALUATING INTERESTED TRANSACTIONS: IN FURTHERANCE OF THE CONFLICT OF INTEREST POLICY OF THE COMPANY. THE COMPANY PROPOSES THAT WHEN THE BOARD EVALUATES A POTENTIAL INTERESTED TRANSACTION WHERE A MORE ADVANTAGEOUS TRANSACTION FOR THE COMPANY IS NOT REASONABLY POSSIBLE THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST THAT THE BOARD DETERMINE BY A MAJORITY VOTE OF DISINTERESTED DIRECTORS WHETHER SUCH TRANSACTION OR ARRANGEMENT IS IN THE COMPANY'S BEST INTEREST FOR ITS OWN BENEFIT AND WHETHER SUCH TRANSACTION IS FAIR AND REASONABLE. A LIST OF ALL OUR VENDORS IS PROVIDED WITH THE COI FORMS IN ORDER TO HELP THE

<u>Schedule O (Form 990) 2023</u> Page **2**

Employer identification number Name of the organization ACCION OPPORTUNITY FUND INC. 45-4127501 BOARD MEMBERS MORE EASILY DETERMINE POSSIBLE CONFLICTS OF INTEREST. APPROVAL OF ANNUAL REVIEW OF COMPANY TRANSACTIONS: IN FURTHERANCE OF THE CONFLICT OF INTEREST POLICY OF THE COMPANY. THE COMPANY PROPOSES THAT ANNUALLY, THAT THE AUDIT COMMITTEE REVIEW THE COMPANY'S PARTNERSHIPS AND CONTRACTS WITH ITS MEMBERS, DIRECTORS, OFFICERS AND THEIR AFFILIATES TO DETERMINE THAT SUCH CONTRACTS AND PARTNERSHIPS CONFORM TO THE COMPANY'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENTS OR PAYMENTS FOR GOODS AND SERVICES. FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT. IMPERMISSIBLE PRIVATE BENEFITS OR IN AN EXCESS BENEFIT TRANSACTION FOR THE COMPANY. FORM 990, PART VI, SECTION B, LINE 15A: THE OFFICERS AND KEY EMPLOYEES OF THIS ORGANIZATION ARE COMPENSATED BY A RELATED ORGANIZATION, ACCION OPPORTUNITY FUND COMMUNITY DEVELOPMENT (AOFCD). AOFCD USES A MARKET BASED SALARY STRUCTURE FROM 4 (FOUR) COMPETITIVE SETS: NON-PROFIT, FINANCIAL SERVICES-BANKS, FINANCIAL SERVICES-CREDIT UNION, AND FINTECH BASED ON SIZE, REVENUE, INDUSTRY, AND GEOGRAPHIC LOCATION TO CREATE MIN/MID/MAX RANGES FOR EACH ROLE. HUMAN RESOURCES REVIEWS EXTERNAL MARKET DATA ANNUALLY. THE BOARD OF DIRECTORS VOTES ON THE CEO'S SALARY. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AR, CA, FL, GA, IL, MA, MD, MI, NJ, NM, NY, NC, PA, VA, AL, HI, KS, KY, MN, MS, NH, ND, OR, RI, SC TN,WV,WI FORM 990, PART VI, SECTION C, LINE 19:

Name of the organization ACCION OPPORTUNITY FUND INC.	Employer identification number 45-4127501
AOF MAKES ITS FORM 990 AND 1023 AVAILABLE UPON REQUEST	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

ACCION OPPORTUNITY FUND INC.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule R (Form 990) 2023

45-4127501

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	or Total inco	me End-of-yea	ar assets Direc	(f) Direct controlling entity					
Part II Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization a	answered "Yes" on Form 990), Part IV, line 34, t	pecause it had one	e or more related tax-ex	empt					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	conti	g) 512(b)(13) rolled tity?				
				501(c)(3))		Yes	No				
ACCION OPPORTUNITY FUND COMMUNITY											
, , ,	SMALL BUSINESS LENDING AND NEW MARKET TAX CREDIT	CALIFORNIA	501(C)(3)	LINE 7	ACCION OPPORTUNITY FUNI	х					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(H	1)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Dispropo alloca		20 of Schedule	mana partr	ging er?	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
LCD NEW MARKETS FUND XXII -												
47-1131031, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A		K	N/A
LCD NEW MARKETS FUND XXIII -												
47-1146746, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A		x	N/A
LCD NEW MARKETS FUND XXIV -												
47-1151234, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A		x	N/A
LCD NEW MARKETS FUND XXV -												
81-4931866, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A		X	N/A

Part IV | Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled tity?
		country						Yes	No

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(a)	(4)	(0)	(5)	(a)	T /	٠١	(i)	/:\	Т	(14)
(a) Name, address, and EIN	(b) Primary activity	(c) Legal	(d) Direct controlling	(e) Predominant income	(f) Share of total	(g) Share of	1 .	1)	(i) Code V-UBI	(j)	- 1	(k) Percentage
of related organization	Filliary activity	domicile (state or	entity	(related, unrelated,	income	end-of-year	Dispropate alloc		amount in box	manag	ا ging	ownership
		foreign country)		excluded from tax under sections 512-514)		assets	Yes		20 of Schedule K-1 (Form 1065)	yes I	\neg	
LCD NEW MARKETS FUND XXVI -		0041147)					103	140	(*	103	10	
81-4959450, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		X	N/A	x		N/A
LCD NEW MARKETS FUND XXVII -												
81-4987352, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x		N/A
LCD NEW MARKETS FUND XXVIII -											T	
81-5019797, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x		N/A
LCD NEW MARKETS FUND XXIX -												
81-5030853, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x		N/A
LCD NEW MARKETS FUND XXX -												
81-5047591, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x		N/A
LCD NEW MARKETS FUND XXXI -												
84-2183852, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		х	N/A	X		N/A
LCD NEW MARKETS FUND XXXII -												
84-2239967, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		х	N/A	X		N/A
LCD NEW MARKETS FUND XXXIII -												
84-2245040, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	X		N/A
LCD NEW MARKETS FUND XXXIV -	_											
84-2264312, 111 WEST ST. JOHN	PROVIDES LOANS											
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME											
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	Х		N/A

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal	Direct controlling	Predominant income	Share of total	Share of	Disprop		Code V-UBI	General	or Percentage
of related organization		domicile (state or	entity	(related, unrelated, excluded from tax under	income	end-of-year	ate alloc	cations?	amount in box 20 of Schedule	managi partner	^{ig} l ownership
		foreign country)		sections 512-514)		assets	Yes	No		Yes N	0
LCD NEW MARKETS FUND XXXV -											
84-2275554, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XXXVII -											
84-2351711, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND, LLC -	ATTRACT CAPITAL										
16-1666636, 111 WEST ST. JOHN	TO REAL ESTATE										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	AREAS	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XXXVI -											
84-2313746, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XXXVIII											
- 87-3466204, 111 WEST ST.	PROVIDES LOANS										
JOHN STREET, SUITE 800, SAN	IN LOW INCOME										
JOSE, CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XL -											
88-2039128, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XLI -											
88-2065471, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XLII -											
88-2115282, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	x	N/A
LCD NEW MARKETS FUND XXXIX -											
87-3474224, 111 WEST ST. JOHN	PROVIDES LOANS										
STREET, SUITE 800, SAN JOSE,	IN LOW INCOME										
CA 95113	COMMUNITIES	DE	N/A	N/A	N/A	N/A		x	N/A	х	N/A

Part V	Transactions With Related Organizations.	Complete if the organization answered "	Yes" on Form 990, Part IV, line 34, 35b, or 36.
--------	--	---	---

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No			
1	During the tax year, did the organization engage in any of the following transactions	with one or more re	elated organizations listed i	n Parts II-IV?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Х			
	Gift, grant, or capital contribution to related organization(s)				1b		Х			
С	Gift, grant, or capital contribution from related organization(s)				1c		Х			
d	d Loans or loan guarantees to or for related organization(s)									
	Loans or loan guarantees by related organization(s)				1e		Х			
f	Dividends from related organization(s)				1f		Х			
g Sale of assets to related organization(s)										
h Purchase of assets from related organization(s)										
i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)										
k Lease of facilities, equipment, or other assets from related organization(s)										
Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
	Sharing of paid employees with related organization(s)				10	Х				
р	Reimbursement paid to related organization(s) for expenses				1p	Х				
	Reimbursement paid by related organization(s) for expenses				1q		Х			
r	Other transfer of cash or property to related organization(s)				1r		Х			
	Other transfer of cash or property from related organization(s)				1s		Х			
	If the answer to any of the above is "Yes," see the instructions for information on wh									
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	olved					
1) 2	ACCION OPPORTUNITY FUND COMMUNITY DEVELOPMENT	Р	677,415.	FMV						
2)										
3)										
4)										
+)										
5)										
-,										

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
	_								000) 0000