

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2007

Open to Public Inspection

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

A For the 2007 calendar year, or tax year beginning 01-01-2007 and ending 12-31-2007

- B Check if applicable
Address change
Name change
Initial return
Final return
Amended return
Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization ACCION INTERNATIONAL
Number and street (or P O box if mail is not delivered to street address) Room/suite 56 ROLAND STREET
City or town, state or country, and ZIP + 4 BOSTON, MA 02129

D Employer identification number 13-2535763
E Telephone number (617) 625-7080
F Accounting method Cash Accrual Other (specify)

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

G Web site: N/A

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

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 148,750,643

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes" enter number of affiliates
H(c) Are all affiliates included? Yes No
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

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

Table with columns for Revenue, Expenses, and Net Assets. Rows include Contributions, Program service revenue, Membership dues, Interest on savings, Dividends, Gross rents, Other investment income, Gross amount from sales of assets, Special events and activities, Gross sales of inventory, Other revenue, Total revenue, Program services, Management and general, Fundraising, Payments to affiliates, Total expenses, Excess or (deficit) for the year, Net assets or fund balances at beginning of year, Other changes in net assets, and Net assets or fund balances at end of year.

**Part II Statement of Functional Expenses**

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

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b>	Grants paid from donor advised funds (attach Schedule) (cash \$ <sup>0</sup> noncash \$ <sup>0</sup> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b>	Other grants and allocations (attach schedule) <input checked="" type="checkbox"/> (cash \$438,656 noncash \$ <sup>0</sup> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>	438,656	438,656	
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b>	Compensation of current officers, directors, key employees etc Listed in Part V-A (attach schedule)	<b>25a</b>	431,773	352,197	47,859
<b>b</b>	Compensation of former officers, directors, key employees etc listed in Part V-B (attach schedule)	<b>25b</b>			
<b>c</b>	Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>			
<b>26</b>	Salaries and wages of employees not included on lines 25a, b and c	<b>26</b>	9,122,177	7,251,065	1,221,713
<b>27</b>	Pension plan contributions not included on lines 25a, b and c	<b>27</b>			
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>28</b>	1,301,950	1,145,802	0
<b>29</b>	Payroll taxes	<b>29</b>			
<b>30</b>	Professional fundraising fees	<b>30</b>			
<b>31</b>	Accounting fees	<b>31</b>	291,210	137,424	153,786
<b>32</b>	Legal fees	<b>32</b>	172,533	84,821	87,712
<b>33</b>	Supplies	<b>33</b>			
<b>34</b>	Telephone	<b>34</b>	215,316	164,823	35,968
<b>35</b>	Postage and shipping	<b>35</b>	253,641	66,497	13,178
<b>36</b>	Occupancy	<b>36</b>	685,448	481,759	126,647
<b>37</b>	Equipment rental and maintenance	<b>37</b>	175,859	101,272	66,487
<b>38</b>	Printing and publications	<b>38</b>	538,941	442,458	15,817
<b>39</b>	Travel	<b>39</b>	2,759,066	2,426,590	256,698
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>	433,661	408,830	11,666
<b>41</b>	Interest	<b>41</b>	332,426	298,393	29,757
<b>42</b>	Depreciation, depletion, etc (attach schedule)	<b>42</b>	194,784	134,791	38,996
<b>43</b>	Other expenses not covered above (itemize)				
<b>a</b>	PROFESSIONAL SERVICES	<b>43a</b>	2,839,536	2,036,180	430,714
<b>b</b>	OFFICE EXPENSES	<b>43b</b>	208,925	129,433	62,097
<b>c</b>	ADVERTISING & MARKETING	<b>43c</b>	50,103	50,064	-708
<b>d</b>	PROVISION FOR LOAN LOSS	<b>43d</b>	642,665	557,136	-14,471
<b>e</b>	OTHER EXPENSES	<b>43e</b>	87,906	55,099	31,859
<b>f</b>		<b>43f</b>			
<b>g</b>		<b>43g</b>			
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	21,176,576	16,763,290	2,615,775

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$<sup>0</sup>, (ii) the amount allocated to Program services \$<sup>0</sup>, (iii) the amount allocated to Management and general \$<sup>0</sup>, and (iv) the amount allocated to Fundraising \$<sup>0</sup>

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

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

What is the organization's primary exempt purpose? <b>▶ SUPPORT MICROENTERPRISE DEVELOPMENT</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
<b>a</b> INTERNATIONAL OPERATIONS THROUGH A NETWORK OF PRIVATE INDEPENDENT INSTITUTIONS IN 14 LATIN AMERICAN COUNTRIES (THE "AFFILIATES"), ACCION SEEKS TO ENSURE LONG-TERM AVAILABILITY OF MICROCREDIT BY HELPING THESE INSTITUTIONS ACHIEVE LARGE-SCALE OPERATIONS, FINANCIAL SELF-SUFFICIENCY, AND ACCESS TO LENDING CAPITAL FROM THE INTERNATIONAL FINANCIAL MARKETS. IN ADDITION, ACCION WORKS WITH NINE NONAFFILIATED INSTITUTIONS IN LATIN AMERICA, THE CARIBBEAN, AND SUB-SAHARAN AFRICA.  (Grants and allocations \$ 438,656) If this amount includes foreign grants, check here <input type="checkbox"/>	9,646,543
<b>b</b> FINANCIAL SERVICES PROVIDE LOAN GUARANTEES VIA STANDBY LETTERS OF CREDIT, DIRECT INVESTMENT IN VARIOUS MICROFINANCE INSTITUTIONS AND OTHER SUPPORT FOR THE FINANCIAL SERVICE NEEDS OF MFI'S.  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	2,790,008
<b>c</b> POLICY & FINANCIAL POLICY CONDUCTS RESEARCH, PLANNING, EVALUATION AND DISSEMINATION OF INFORMATION IN SUPPORT OF MICROENTERPRISE DEVELOPMENT.  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	3,277,593
<b>d</b> COMMUNICATIONS THIS PROGRAM DEPARTMENT PROVIDES INFORMATION ABOUT ACCION INTERNATIONAL AND MICROENTERPRISE TO THE PUBLIC THROUGH THE ACCION WEBSITE, QUARTERLY BULLETINS, PROGRAM ANNUAL REPORTS, AND OTHER PERIODIC REPORTS AND PUBLICATIONS.  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	1,049,146
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), Program services) . . . . <input type="checkbox"/>	16,763,290

**Part IV Balance Sheets (See the instructions.)**

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

		<b>(A)</b>		<b>(B)</b>		
		Beginning of year		End of year		
Assets	<b>45</b> Cash—non-interest-bearing . . . . .		3,583,742	<b>45</b>	127,551,986	
	<b>46</b> Savings and temporary cash investments . . . . .			<b>46</b>		
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b>	1,070,738			
	<b>b</b> Less allowance for doubtful accounts	<b>47b</b>	20,000	466,728	<b>47c</b>	1,050,738
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b>	1,477,118			
	<b>b</b> Less allowance for doubtful accounts	<b>48b</b>		1,528,763	<b>48c</b>	1,477,118
	<b>49</b> Grants receivable . . . . .		13,992,729	<b>49</b>	10,743,059	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>50a</b>		
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule) . . . . .			<b>50b</b>		
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>	0			
	<b>b</b> Less allowance for doubtful accounts	<b>51b</b>		328,000	<b>51c</b>	0
	<b>52</b> Inventories for sale or use . . . . .			<b>52</b>		
	<b>53</b> Prepaid expenses and deferred charges . . . . .		199,967	<b>53</b>	173,788	
	<b>54a</b> Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		7,941,354	<b>54a</b>	8,204,326	
	<b>b</b> Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			<b>54b</b>		
	<b>55a</b> Investments—land, buildings, and equipment basis . . . . .	<b>55a</b>				
	<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		<b>55c</b>		
	<b>56</b> Investments—other (attach schedule) . . . . .		10,788,956	<b>56</b>	186,793,280	
	<b>57a</b> Land, buildings, and equipment basis	<b>57a</b>	854,966			
	<b>b</b> Less accumulated depreciation (attach schedule) . . . . .	<b>57b</b>	263,395	235,128	<b>57c</b>	591,571
<b>58</b> Other assets, including program-related investments (describe <input type="checkbox"/> _____ )		3,237,082	<b>58</b>	3,439,466		
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58 . . . . .		42,302,449	<b>59</b>	340,025,332		
Liabilities	<b>60</b> Accounts payable and accrued expenses . . . . .		1,042,627	<b>60</b>	0	
	<b>61</b> Grants payable . . . . .			<b>61</b>		
	<b>62</b> Deferred revenue . . . . .			<b>62</b>		
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .			<b>63</b>		
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .			<b>64a</b>		
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		7,251,343	<b>64b</b>	7,139,469	
	<b>65</b> Other liabilities (describe <input type="checkbox"/> _____ )		122,487	<b>65</b>	1,108,762	
<b>66 Total liabilities</b> Add lines 60 through 65 . . . . .		8,416,457	<b>66</b>	8,248,231		
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>					
	<b>67</b> Unrestricted . . . . .		14,651,696	<b>67</b>	317,793,116	
	<b>68</b> Temporarily restricted . . . . .		19,234,296	<b>68</b>	13,983,985	
	<b>69</b> Permanently restricted . . . . .			<b>69</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>					
	<b>70</b> Capital stock, trust principal, or current funds . . . . .			<b>70</b>		
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .			<b>71</b>		
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .			<b>72</b>		
	<b>73 Total net assets or fund balances</b> Add lines 67 through 69 <b>or</b> lines 70 through 72 (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b> equal line 21) . . . . .		33,885,992	<b>73</b>	331,777,101	
	<b>74 Total liabilities and net assets / fund balances</b> Add lines 66 and 73 . . . . .		42,302,449	<b>74</b>	340,025,332	

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

Table with columns for line items (a, b, c, d, e) and amounts. Includes sub-rows b1-b4 and d1-d2. Total revenue reported as 148,750,643.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Table with columns for line items (a, b, c, d, e) and amounts. Includes sub-rows b1-b4 and d1-d2. Total expenses reported as 21,176,576.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

Table with 5 columns: (A) Name and address, (B) Title and average hours per week devoted to position, (C) Compensation (If not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. First row contains 'See Additional Data Table'.

**Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)**

Table with 3 columns: Question (75a-75d), Yes, No. 75a: Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings. 75b: Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s). 75c: Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization". 75d: Does the organization have a written conflict of interest policy?

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)**

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation (If not paid enter -0-), (D) Contributions to employee benefit plans and deferred compensation plans, (E) Expense account and other allowances.

**Part VI Other Information (See the instructions.)**

Table with 3 columns: Question (76-81b), Yes, No. 76: Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change. 77: Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes. 78a: Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 78b: If "Yes," has it filed a tax return on Form 990-T for this year? 79: Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement. 80a: Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? 80b: If "Yes," enter the name of the organization and check whether it is exempt or nonexempt. 81a: Enter direct or indirect political expenditures (See line 81 instructions). 81b: Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

Form 990 (2007) Part VI Other Information (continued)
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 284,697
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 0
86b Gross receipts, included on line 12, for public use of club facilities 0
87 501(c)(12) orgs. Enter a Gross income from members or shareholders 0
87b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 0
88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX
88b At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 0, section 4912 0, section 4955
89b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
89e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?
89f All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
90a List the states with which a copy of this return is filed See Additional Data Table
90b Number of employees employed in the pay period that includes March 12, 2007 (See instructions) 225
91a The books are in care of TAWHEED HAZARIKA Telephone no (617) 625-7080
56 ROLAND STREET SUITE 300
Located at BOSTON, MA ZIP + 4 02129
91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
If "Yes," enter the name of the foreign country BE
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

**Part VI Other Information (continued)**

**c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes  No

If "Yes," enter the name of the foreign country **CO**

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here  and enter the amount of tax-exempt interest received or accrued during the tax year **92**

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

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> CONTRACT REVENUE					2,705,827
<b>b</b> LICENSE FEE REV					118,911
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					652,903
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities . . . . .			14	4,883,289	
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property . . . . .					
<b>b</b> non debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory					134,447,185
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory			01	72,608	
<b>103</b> Other revenue <b>a</b> MISCELLANEOUS					45,509
<b>b</b> MANAGEMENT FEE	541610	782,442			
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E)) . . . . .		782,442		4,955,897	137,970,335
<b>105</b> Total (add line 104, columns (B), (D), and (E)) . . . . .					143,708,674

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

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

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

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

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

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

**(a)** Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**(b)** Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

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



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

				Yes	No
<b>106</b> Did the reporting organization <b>make</b> any transfers <b>to</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity				Yes	
(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a ACCION USA C/O ACCION INTERNATIONAL 56 ROLAND BOSTON, MA 02129	043219159	INTERCOMPANY TRANSACTION	105,000		
<b>Totals</b>			105,000		

				Yes	No
<b>107</b> Did the reporting organization <b>receive</b> any transfers <b>from</b> a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity					No
(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer		
a					
b					
c					
<b>Totals</b>					

		Yes	No
<b>108</b> Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?			No

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.

<b>Please Sign Here</b>	Signature of officer	2008-08-07
	TARA KENNEY TREASURER Type or print name and title	Date

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date
	Firm's name (or yours if self-employed), address, and ZIP + 4 Deloitte Tax LLP 200 Berkeley Street Boston, MA 02116	

SCHEDULE A (Form 990 or 990EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2007

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

Department of the Treasury Internal Revenue Service

Name of the organization ACCION INTERNATIONAL

Employer identification number

13-2535763

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.")

Table with 5 columns: (a) Name and address of each employee paid more than \$50,000; (b) Title and average hours per week devoted to position; (c) Compensation; (d) Contributions to employee benefit plans & deferred compensation; (e) Expense account and other allowances. Rows include ENRIQUE FERRARO, CARLOS CASTELLO, ELIZABETH RHYNE, ROY JACOBOWITZ, JOHN FISCHER, and a total row for 64 employees.

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter "None.")

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$50,000; (b) Type of service; (c) Compensation. Rows include MONITOR CO GRP, JOHN SCHRODER, HANNES MANDORFF, SOLUTIONS TECHNOLOGY, and LESLIE THEODORE, plus a total row for 5 contractors.

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page 2 for instructions.)

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$50,000; (b) Type of service; (c) Compensation. The first row contains 'None' in column (a). A total row at the bottom shows 0 contractors.

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

**Yes No**

<p><b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶\$ _____(Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B )</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	<b>1</b>		No
<p><b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) 📄</p> <p><b>a</b> Sale, exchange, or leasing property?</p>	<b>2a</b>		No
<p><b>b</b> Lending of money or other extension of credit?</p>	<b>2b</b>		No
<p><b>c</b> Furnishing of goods, services, or facilities?</p>	<b>2c</b>		No
<p><b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	<b>2d</b>	Yes	
<p><b>e</b> Transfer of any part of its income or assets?</p>	<b>2e</b>		No
<p><b>3a</b> Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments ) 📄</p>	<b>3a</b>	Yes	
<p><b>b</b> Did the organization have a section 403(b) annuity plan for its employees?</p>	<b>3b</b>		No
<p><b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	<b>3c</b>		No
<p><b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	<b>3d</b>		No
<p><b>4a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	<b>4a</b>	Yes	
<p><b>b</b> Did the organization make any taxable distributions under section 4966?</p>	<b>4b</b>		No
<p><b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?</p>	<b>4c</b>		No
<p><b>d</b> Enter the total number of donor advised funds owned at the end of the tax year ▶ _____</p>			
<p><b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____</p>			
<p><b>f</b> Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ 0 _____</p>			
<p><b>g</b> Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ 0 _____</p>			

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)

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

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

**Provide the following information about the supported organizations. (see page 7 of the instructions.)**

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

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions )

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

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

<b>Calendar year (or fiscal year beginning in)</b>	<b>(a) 2006</b>	<b>(b) 2005</b>	<b>(c) 2004</b>	<b>(d) 2003</b>	<b>(e) Total</b>
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	10,732,726	15,680,135	5,510,237	5,407,649	37,330,747
<b>16</b> Membership fees received	255,859	226,829	232,060	71,889	786,637
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	2,606,801	2,018,104	2,037,666	2,125,490	8,788,061
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	4,741,327	1,707,637	1,357,151	475,442	8,281,557
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					0
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	35,943	615,459	617,234	4,954	1,273,590
<b>23</b> Total of lines 15 through 22	18,372,656	20,248,164	9,754,348	8,085,424	56,460,592
<b>24</b> Line 23 minus line 17	15,765,855	18,230,060	7,716,682	5,959,934	47,672,531
<b>25</b> Enter 1% of line 23	183,727	202,482	97,543	80,854	
<b>26 Organizations described on lines 10 or 11:</b>					
<b>a</b> Enter 2% of amount in column (e), line 24					<b>26a</b> 953,451
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					<b>26b</b> 13,649,932
<b>c</b> Total support for section 509(a)(1) test. Enter line 24, column (e).					<b>26c</b> 47,672,531
<b>d</b> Add: Amounts from column (e) for lines 18 8,281,557 19 0 22 26 b 13,649,932					<b>26d</b> 23,205,079
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 24,467,452
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 51.32%
<b>27 Organizations described on line 12:</b>					
<b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
<b>c</b> Add: Amounts from column (e) for lines 15 16 _____ 17 20 _____ 21 _____					<b>27c</b> _____
<b>d</b> Add: Line 27a total _____ and line 27b total _____					<b>27d</b> _____
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27e</b> _____
<b>f</b> Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					<b>27f</b> _____
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> _____
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> _____
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 7 of the instructions.)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

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

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)  
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

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

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred )

**(a)**  
Affiliated group  
totals

**(b)**  
To be completed  
for all electing  
organizations

<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>	
<b>39</b> Other exempt purpose expenditures	<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>	
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table— <b>If the amount on line 40 is—</b> <b>The lobbying nontaxable amount is—</b> Not over \$500,000                                      20% of the amount on line 40 Over \$500,000 but not over \$1,000,000        \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000     \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000    \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000                                      \$1,000,000	<b>41</b>	
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>	
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>	0
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>	0

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

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
 See the instructions for lines 45 through 50 on page 11 of the instructions )

**Lobbying Expenditures During 4-Year Averaging Period**

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

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount
	No	

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





**Additional Data****Software ID:****Software Version:****EIN:** 13-2535763**Name:** ACCION INTERNATIONAL**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
MARIA OTERO 733 15TH STREET NW SUITE 700 WASHINGTON,DC 20005	PRESIDENT & CEO 35 0	234,000	11,100	0
CATHERINE QUENSE 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	SR VP AND CFO (KEY EMPLOYEE) 35 0	178,923	7,750	0
RUSSELL FAUCETT 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	SECRETARY 0 5	0	0	0
TARA KENNEY 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	TREASURER 0 5	0	0	0
ALVARO RODRIGUEZ ARREGUI 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	CHAIR 0 5	0	0	0
GUSTAVO HERRERO 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
TERENCE CANAVAN 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
ROBERT HELANDER 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
CROCKER NEVIN 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
DANIEL MARTIN 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR EMERITUS 0 5	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
JOHN SCOTT 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
NANCY SHERWOOD TRUITT 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
MICHAEL CHU 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	VICE-CHAIR 0 5	0	0	0
JANE M SIEBELS 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0
ANNE STETSON 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0
TOM MCDERMOTT 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR EMERITUS 0 5	0	0	0
TITUS BRENNINKMEIJER 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0
JOSE FERNANDEZ 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0
HENRY MILLER 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0
CHRISTOPHER SMART 56 ROLAND STREET SUITE 300 BOSTON, MA 02129	DIRECTOR 0 5	0	0	0

**Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:**

<b>(A) Name and address</b>	<b>(B) Title and average hours per week devoted to position</b>	<b>(C) Compensation (If not paid, enter -0-.)</b>	<b>(D) Contributions to employee benefit plans &amp; deferred compensation plans</b>	<b>(E) Expense account and other allowances</b>
BRIAN CLANCY 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
GABRIEL ROZMAN 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
MICHAEL SCHLEIN 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
SAM SCOTT 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
DIANA TAYLOR 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
ROBERT STRASSLER 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
RICHARD HUBER 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	DIRECTOR 0 5	0	0	0
CHANTAL AGARWAL 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	ASSISTANT SECRETARY 0 5	0	0	0
KEVIN SAUNDERS 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	ASSISTANT SECRETARY 0 5	0	0	0

**Form 990, Part VI, Line 80b - If "Yes", enter the name of the organization and whether it is exempt or nonexempt:**

Name of the Organization	Exempt	Nonexempt
CENTRO ACCION MICROEMPRESAUAL	X	
ACCION INVESTMENT MANAGEMENT COMPA LLC		X
ACCION GATEWAY FUND LLC		X

**Form 990, Part VI, Line 90a - List the states with which a copy of this return is filed:**

List the states with which a copy of this return is filed	AL, AK, AS, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MH, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SD, TN, TX, UT, VT, VA, WA, WV
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**Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:**

<b>Line No.</b> ▼	<b>Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).</b>
93A	ASSISTS LENDING PROGRAMS IN ESTABLISHING AND MAINTAINING EFFICIENT LENDING OPERATIONS AIDS ACCESS TO CREDIT FOR MICROENTERPRISE LENDING PROGRAMS AFFILIATION FEES CONTRIBUTE TO COVERING THE COST OF NETWORK CONFERENCES, ANNUAL REPORTS AND OTHER PERIODIC COMMUNICATION SALES OF ASSETS OF MICROENTERPRISE LENDING PROGRAMS INCREASE IN PRESENT VALUE OF GRANTS RECEIVED, WHICH FURTHERS THE EXEMPT PURPOSES OF ACCION INTERNTIONAL
0	ASSISTS LENDING PROGRAMS IN ESTABLISHING AND MAINTAINING EFFICIENT LENDING OPERATIONS AIDS ACCESS TO CREDIT FOR MICROENTERPRISE LENDING PROGRAMS AFFILIATION FEES CONTRIBUTE TO COVERING THE COST OF NETWORK CONFERENCES, ANNUAL REPORTS AND OTHER PERIODIC COMMUNICATION SALES OF ASSETS OF MICROENTERPRISE LENDING PROGRAMS INCREASE IN PRESENT VALUE OF GRANTS RECEIVED, WHICH FURTHERS THE EXEMPT PURPOSES OF ACCION INTERNTIONAL
93B	ASSISTS LENDING PROGRAMS IN ESTABLISHING AND MAINTAINING EFFICIENT LENDING OPERATIONS AIDS ACCESS TO CREDIT FOR MICROENTERPRISE LENDING PROGRAMS AFFILIATION FEES CONTRIBUTE TO COVERING THE COST OF NETWORK CONFERENCES, ANNUAL REPORTS AND OTHER PERIODIC COMMUNICATION SALES OF ASSETS OF MICROENTERPRISE LENDING PROGRAMS INCREASE IN PRESENT VALUE OF GRANTS RECEIVED, WHICH FURTHERS THE EXEMPT PURPOSES OF ACCION INTERNTIONAL
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94	ASSISTS LENDING PROGRAMS IN ESTABLISHING AND MAINTAINING EFFICIENT LENDING OPERATIONS AIDS ACCESS TO CREDIT FOR MICROENTERPRISE LENDING PROGRAMS AFFILIATION FEES CONTRIBUTE TO COVERING THE COST OF NETWORK CONFERENCES, ANNUAL REPORTS AND OTHER PERIODIC COMMUNICATION SALES OF ASSETS OF MICROENTERPRISE LENDING PROGRAMS INCREASE IN PRESENT VALUE OF GRANTS RECEIVED, WHICH FURTHERS THE EXEMPT PURPOSES OF ACCION INTERNTIONAL
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99	ASSISTS LENDING PROGRAMS IN ESTABLISHING AND MAINTAINING EFFICIENT LENDING OPERATIONS AIDS ACCESS TO CREDIT FOR MICROENTERPRISE LENDING PROGRAMS AFFILIATION FEES CONTRIBUTE TO COVERING THE COST OF NETWORK CONFERENCES, ANNUAL REPORTS AND OTHER PERIODIC COMMUNICATION SALES OF ASSETS OF MICROENTERPRISE LENDING PROGRAMS INCREASE IN PRESENT VALUE OF GRANTS RECEIVED, WHICH FURTHERS THE EXEMPT PURPOSES OF ACCION INTERNTIONAL
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## TY 2007 Cash Grants Paid Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Class of Activity	Recipient's name	Address	Amount	Relationship
	CITIBANK AWARDS	850 THIRD AVENUE 13TH FLOOR NEW YORK, NY 100226222	21,058	
	HARVARD BUSINESS SCHOOL	FINANCIAL OFFICE SOLDIERS FIELD RO BOSTON, MA 02163	307,156	
	MIF TRUST	C/O ACCION INTERNATIONAL 56 RONALD STREET BOSTON, MA 02129	5,442	
	ACCION USA		105,000	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2007 Compensation Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Name	Related Organization		Relationship	Compensation Amount	Benefit Plan Contributions	Expense Account	Compensation Description
	Name	EIN					
CATHERINE QUENSE	ACCION USA INC	04-3219159	SUPPORTED ORGANIZATION	17,500	0	0	



# TY 2007 General Explanation Attachment

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Identifier	Return Reference	Explanation
COMPARTAMOS FOOTNOTE	FORM 990, PART I, LINES 8A & D AND LINE 20	<p>Gain from Sale of Compartamos Stock 134,447,185 ACCION International was incorporated in 1965 with the purpose of assisting "in the improvement of social, economic and cultural conditions in the countries of the world. Such purposes may be achieved through the corporation's own programs, financial support of other organizations having related purposes, cooperation with such organizations or other appropriate means" (Articles of Incorporation). As per the ACCION website (www.accion.org), the mission of ACCION International is to give people the tools they need to work their way out of poverty. By providing microloans, business training and other financial services to poor men and women who start their own businesses, ACCION's partner lending organizations help people work their own way up the economic ladder, with dignity and pride. With just a little capital, people can grow their own businesses. They can earn enough to afford basics like running water, better food and schooling for their children. In a world where three billion people live on less than \$2 a day, it is not enough to help 1,000 or even 100,000 individuals. ACCION's goal is to bring microfinance to tens of millions of people - enough to truly change the world. We know that there will never be enough donations to do this. That's why ACCION has created an anti-poverty strategy that is permanent and self-sustaining. Over the past 20 years, ACCION has made small equity investments in several partner micro-finance institutions serving the poor around the world. Few if any of these investments have provided any return over the years, and several have been written off completely. An exception has been that of ACCION partner Banco Compartamos of Mexico, which serves over a million poor individuals. Compartamos is sued a public offering in April 2007, offering shares on the Mexican stock market and internationally to qualified institutional buyers. The offering permitted shareholders - of which ACCION was the second-largest, holding 18 percent through its Gateway Fund - to monetize their stake in the bank. Upon completion of the offering, ACCION sold half of its shares, realizing a net gain of \$134.4 million as reflected in Part 1, lines 8a &amp; d. ACCION retains a nine percent stake in Compartamos and, in line with GAAP, this unrealized gain represents \$170.4 million as reflected in Part 1, line 20 as Equity in ACCION Investment, Unrealized Gain on Investments, and Currency Translation Gain. These gains now provide us with far greater resources to strengthen microfinance and serve the poor around the world. ACCION will use this income to dramatically increase our support of less-mature and higher risk microfinance institutions, to train and develop microfinance professionals, to strengthen domestic US microlending, and to build collaborative partnerships with academia, business leaders and investors in order to extend inclusive finance to millions more of the world's poor. These positive changes in ACCION's balance sheet provide it with significant financial resources, which, in combination with public support, enable it to better achieve its important, exempt purpose.</p>

Identifier	Return Reference	Explanation
DEPRECIATION - LAND, BUILDINGS & EQUIPMENT	FORM 990, PART II LINE 42 AND PART IV LINE 57C	2007 2006 FURNITURE, FIXTURES, EQUIPMENT, 754,128 306,715 AND SOFTWARE LEASEHOLD IMPROVEMENTS 100,838 60,042 SUBTOTAL 854,966 366,757 LESS ACCUMULATED DEPRECIATION (263,395) (131,629) TOTAL LAND, BUILDINGS & EQUIPMENT 591,571 235,128 DEPRECIATION EXPENSE FOR THE YEARS ENDED 12/31/2007 and 12/31/2006 WAS \$194,784 AND \$88,309

**TY 2007 Investments - Other Schedule**

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	Book Value	Cost/FMV
BANCOSOL	3,431,169	
COOPERATIVA EMPRENDER	35,622	
ACCION INVESTMENTS, SPC	10,399,370	
FINAMERICA INVESTMENT	87,721	
AFRICAP INVESTMENT	202,988	
GATEWAY	1,710,170	
OTHER GATEWAY INVESTMENTS	169,230,378	
(SEE STMTS 1 & 2)		
EL COMERCIO	470,406	
INTEGRAL	710,453	
EMERGENCY LIQUIDITY FACILITY	40,000	
PRBC (PAY RENT BUILD CREDIT)	150,000	
UNITED VILLAGES	325,003	

## TY 2007 Mortgages and Notes Payable Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

**Total Mortgage Amount:** 7139469

<b>Item No.</b>	1
<b>Lender's Name</b>	LATIN AMERICAN BRIDGE FUND NOTES PA
<b>Lender's Title</b>	
<b>Relationship to Insider</b>	
<b>Original Amount of Loan</b>	
<b>Balance Due</b>	7139469
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	DUE IN VARYING AMOUNTS TO 2010
<b>Interest Rate</b>	
<b>Security Provided by Borrower</b>	
<b>Purpose of Loan</b>	
<b>Description of Lender Consideration</b>	
<b>Consideration FMV</b>	

## TY 2007 Other Assets Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	Beginning of Year Amount	End of Year Amount
CHARITABLE TRUSTS	223,581	218,774
CASH RESTRICTED FOR INVEST	0	351,185
LIQUIDITY RESERVE	3,000,000	2,845,636
LIFE INSURANCE POLICY	13,501	23,871

## TY 2007 Other Changes in Net Assets Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	Amount
EQUITY IN ACCION INVESTMENT (STMT 1 & 2)	3,122,689
UNREALIZED GAIN ON INVSTMTS (STMT 1 & 2)	166,867,367
CURRENCY TRANSLATION GAIN (STMT 1 & 2)	466,797
NET ASSET TRANSFER	105,000
CENTRO CURRENCY TRANSLATION LOSS	34,811

**TY 2007 Other Expenses Included Schedule**

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	Amount
CENTRO EXPENSES	521,441

## TY 2007 Other Liabilities Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	Beginning of Year Amount	End of Year Amount
NPV OF CHARITABLE TRUSTS	122,487	76,572
ACCOUNTS PAYABLE, ACCRUED LIABILITIES, & OTHER LIABILITIES	0	456,746
LINE OF CREDIT	0	575,444



**TY 2007 Other Notes/Loans  
Receivable Short Schedule**

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Category/Name	Amount
FUNDACION-DOMINICANA DE DESARROLLO, INC.	

**TY 2007 Other Revenues Included Schedule****Name:** ACCION INTERNATIONAL**EIN:** 13-2535763

<b>Description</b>	<b>Amount</b>
CENTRO REVENUE	434,102
EQUITY IN ACCION INVESTMENTS	3,122,689
CURRENCY TRANSLATION GAIN	466,797

**TY 2007 Employee Compensation Explanation****Name:** ACCION INTERNATIONAL**EIN:** 13-2535763

<b>Employee</b>	<b>Explanation</b>
ENRIQUE FERRARO	ENRIQUE FERRARO'S COMPENSATION INCLUDED BONUSES PAID DURING THE YEAR.
CARLOS CASTELLO	
ELIZABETH RHYNE	
ROY JACOBOWITZ	
JOHN FISCHER	

## TY 2007 Other Income Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Description	2006	2005	2004	2003	Total
MISCELLANEOUS	35,943	48,975	35,050	4,954	124,922
MANAGEMENT FEE	0	546,984	582,184	0	1,129,168
SERVICE FEE INCOME	0	19,500	0	0	19,500

## TY 2007 Scholarship Award Statement

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

**Statement:** IN ORDER TO DETERMINE THAT ORGANIZATIONS RECEIVING DISBURSEMENTS FROM ACCION INTERNATIONAL QUALIFY TO RECEIVE PAYMENTS, WE REQUEST PROOF OF THEIR NON-PROFIT STATUS AND A COPY OF THEIR FINANCIAL STATEMENTS. IN ADDITION, WE MAINTAIN SIGNIFICANT CONTACT WITH THESE ORGANIZATIONS, WHICH ARE MEMBERS OF OUR NETWORK, AND WE REGULARLY RECEIVE STATISTICAL AND NARRATIVE INFORMATION FROM THEM. WE ALSO PERIODICALLY PERFORM OUR OWN FINANCIAL AND OPERATIONAL EXAMINATIONS OF OUR AFFILIATES.

**TY 2007 Self Dealing Statement**

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Line Number	Explanation
2d	FORM 990, PART V

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2007 Supplemental Support Schedule

**Name:** ACCION INTERNATIONAL

**EIN:** 13-2535763

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2007	10,732,726	255,859	2,606,801	4,741,327				35,943	18,372,656
2004	15,680,135	226,829	2,018,104	1,707,637				615,459	20,248,164
2003	5,510,237	232,060	2,037,666	1,357,151				617,234	9,754,348
2002	5,407,649	71,889	2,125,490	475,442				4,954	8,085,424

Form **8453-EO**

### Exempt Organization Declaration and Signature for Electronic Filing

OMB No 1545-1878

For calendar year 2007, or tax year beginning \_\_\_\_\_, 2007, and ending \_\_\_\_\_, 20  
For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868  
▶ See instructions on back.

**2007**

Department of the Treasury  
Internal Revenue Service

Name of exempt organization

Employer identification number

ACCION INTERNATIONAL

13-2535763

#### Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return, if any. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, line 12)	1b	<u>148750643</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	

#### Part II Declaration of Officer

6  I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2007 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here

Diack Kenney 8/7/08  
Signature of officer Date

TREASURER  
Title

#### Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4183, Modernized e-file (MeF) Information for Authorized e-file Providers. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	<u>Jude Ref. Drake</u>	Date	<u>8/7/2008</u>	Check if also paid preparer	<input checked="" type="checkbox"/>	Check if self-employed	<input type="checkbox"/>	ERO's SSN or PTIN	<u>P00747996</u>
	Firm's name (or yours if self-employed), address, and ZIP code	<u>DELOITTE TAX, LLP</u>			<u>200 BERKELEY STREET</u>		<u>BOSTON MA 02116</u>		<u>Phone no. 617-437-2000</u>	
	Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.									

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code	EIN		
				Phone no.

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form 8453-EO (2007)