

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 private foundations)
Do not enter social security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2016
Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

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

C Name of organization
FINCA INTERNATIONAL INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
1201 15TH ST NW 8TH FLOOR

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20005

F Name and address of principal officer
RUPERT W SCOFIELD
1201 15TH ST NW 8TH FLOOR
WASHINGTON, DC 20005

D Employer identification number
13-3240109

E Telephone number
(202) 682-1510

G Gross receipts \$ 49,952,713

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

- I** Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527
- J** Website: ▶ WWW.FINCA.ORG
- K** Form of organization Corporation Trust Association Other ▶

L Year of formation 1984 **M** State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
ALLEVIATE POVERTY BY HELPING PEOPLE BUILD ASSETS, CREATE JOBS AND RAISE THEIR STANDARD OF LIVING

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	11
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	150
6 Total number of volunteers (estimate if necessary)	25
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	20,354,935	20,107,097
9 Program service revenue (Part VIII, line 2g)	30,159,885	16,794,813
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,017,667	9,369,099
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,811,791	3,681,704
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	62,344,278	49,952,713
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	23,137,692	19,427,492
16a Professional fundraising fees (Part IX, column (A), line 11e)	301,392	419,168
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,021,943		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	30,870,804	28,995,426
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	54,309,888	48,842,086
19 Revenue less expenses Subtract line 18 from line 12	8,034,390	1,110,627
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	140,032,171	145,444,902
21 Total liabilities (Part X, line 26)	48,412,575	47,050,769
22 Net assets or fund balances Subtract line 21 from line 20	91,619,596	98,394,133

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

Sign Here Signature of officer _____ Date 2017-11-09

RUPERT W SCOFIELD PRESIDENT AND CO-CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name JOHN W SADOFF JR Preparer's signature JOHN W SADOFF JR Date _____ Check if self-employed PTIN P00540589

Firm's name ▶ DELOITTE TAX LLP Firm's EIN ▶ 86-1065772

Firm's address ▶ 191 PEACHTREE STREET NE STE 2000 Phone no (404) 220-1500
ATLANTA, GA 30303

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
FINCA'S MISSION IS TO ALLEVIATE POVERTY BY HELPING PEOPLE BUILD ASSETS, CREATE JOBS AND RAISE THEIR STANDARD OF LIVING

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 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? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 33,656,341 including grants of \$) (Revenue \$ 20,476,517)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 33,656,341

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 19 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
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? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part 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 [X]

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (13); 1b Enter the number of voting members included in line 1a, above, who are independent (11); 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? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 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? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 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 in Schedule O (No)

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (Yes); 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? (Yes); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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 The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in 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? (Yes); 16b 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? (Yes)

Section C. Disclosure

Table with 2 columns: Question, Answer. Row 17: List the States with which a copy of this Form 990 is required to be filed (AL, AK, AR, CA, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, MI, MS, MN, NH, NJ, NM, OK, OR, PA, RI, SC, TN, UT, VA, WI, WV, NY); Row 18: Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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 in Schedule O); Row 19: Describe in 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; Row 20: State the name, address, and telephone number of the person who possesses the organization's books and records (DEBRA SPAGNOLA CFO 1201 15TH STREET NW WASHINGTON, DC 20005 (202) 682-1510)

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	24,736			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	20,082,361			
	g Noncash contributions included in lines 1a-1f \$ _____		1,733,734			
	h Total. Add lines 1a-1f		20,107,097			
Program Service Revenue		Business Code				
	2a MANAGEMENT FEES	900099	7,444,535	7,444,535		
	b INTEREST REV - BRANCHE	522298	6,199,116	6,199,116		
	c AFFIL LOAN PORT REV	900099	3,334,119	3,334,119		
	d OTHER REVENUE	900099	18,490	18,490		
	e K-1 ORDINARY INCOME	900099	-201,447	-201,447		
	f All other program service revenue					
g Total. Add lines 2a-2f		16,794,813				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		9,369,099		9,369,099	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		3,681,704	3,681,704		
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b Less direct expenses	b			
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See Instructions		49,952,713	20,476,517	0	9,369,099	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) 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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,464,817	2,760,850	673,331	30,636
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	45,259	45,259		
7 Other salaries and wages	15,083,162	11,584,203	3,057,755	441,204
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	113,330		113,330	
9 Other employee benefits				
10 Payroll taxes	720,924		720,924	
11 Fees for services (non-employees)				
a Management	6,771,148	4,448,764	1,365,949	956,435
b Legal	220,069	220,069		
c Accounting	574,133	17,339	556,794	
d Lobbying				
e Professional fundraising services See Part IV, line 17	419,168			419,168
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	127,651	107,451	20,200	
13 Office expenses	3,705,976	2,319,573	262,855	1,123,548
14 Information technology	786,300	301,646	484,654	
15 Royalties				
16 Occupancy	1,373,434	430,714	942,720	
17 Travel	2,199,602	1,262,359	887,772	49,471
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	61,228	61,108		120
20 Interest	3,960,318	3,825,039	135,279	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	345,048	119,666	225,382	
23 Insurance	99,345		99,345	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LOAN CAPITAL	2,744,538	2,736,774	7,764	
b LICENSE AND SUBS FEES	2,046,748	220,984	1,825,764	
c TAXES AND OTHER INCOME	1,660,974	1,553,399	107,575	
d OTHER	1,204,159	1,090,033	113,357	769
e All other expenses	1,114,755	551,111	563,052	592
25 Total functional expenses. Add lines 1 through 24e	48,842,086	33,656,341	12,163,802	3,021,943
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	7,332,242	1	5,953,334
	2 Savings and temporary cash investments	6,118,305	2	1,538,055
	3 Pledges and grants receivable, net	2,482,430	3	2,195,375
	4 Accounts receivable, net	7,065,146	4	9,055,772
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	22,121,939	7	28,536,631
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	492,674	9	0
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	3,471,334		
	b Less accumulated depreciation	1,970,603		
	11 Investments—publicly traded securities	7,584	11	7,343
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11	92,326,463	13	96,124,320
	14 Intangible assets	76,899	14	29,417
	15 Other assets See Part IV, line 11	157,563	15	503,924
16 Total assets. Add lines 1 through 15 (must equal line 34)	140,032,171	16	145,444,902	
Liabilities	17 Accounts payable and accrued expenses	11,004,269	17	13,546,240
	18 Grants payable		18	
	19 Deferred revenue	2,340,187	19	570,724
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	28,486,060	23	29,225,907
	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	6,582,059	25	3,707,898
	26 Total liabilities. Add lines 17 through 25	48,412,575	26	47,050,769
Net Assets or Fund Balances	27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	90,661,295	27	98,100,598
	28 Temporarily restricted net assets	958,301	28	293,535
	29 Permanently restricted net assets		29	
	30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	91,619,596	33	98,394,133
	34 Total liabilities and net assets/fund balances	140,032,171	34	145,444,902

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,952,713
2	Total expenses (must equal Part IX, column (A), line 25)	2	48,842,086
3	Revenue less expenses Subtract line 2 from line 1	3	1,110,627
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	91,619,596
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	86,378
9	Other changes in net assets or fund balances (explain in Schedule O)	9	5,577,532
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	98,394,133

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>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</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>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</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>c 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?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</p>	2c	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>	3a	Yes	
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</p>	3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 13-3240109

Name: FINCA INTERNATIONAL INC

Form 990 (2016)

Form 990, Part III, Line 4a:

OVER THE COURSE OF 2016, THE OVER 10,000 EMPLOYEES AT FINCA INTERNATIONAL AND ITS AFFILIATES DISBURSED \$1.1 BILLION IN LOANS AVERAGING \$847 TO ITS CLIENTS, THE MAJORITY OF WHOM ARE WOMEN. MORE THAN 1.3 MILLION INDIVIDUALS VOLUNTARILY SAVE ON A REGULAR BASIS, WITH A TOTAL SAVINGS OF OVER \$216 MILLION, EQUATING TO AN AVERAGE SAVINGS OF \$167 PER CLIENT. SEE SCHEDULE O FOR MORE DETAILED INFORMATION. AS OF DECEMBER 31, 2016, FINCA'S AFFILIATES OPERATED IN THE FOLLOWING COUNTRIES AND HAD THE FOLLOWING NUMBER OF BENEFICIARIES: AFRICA * DEMOCRATIC REPUBLIC OF CONGO 223,833 BENEFICIARIES * MALAWI 48,523 BENEFICIARIES * NIGERIA 20,012 BENEFICIARIES * TANZANIA 78,183 BENEFICIARIES * UGANDA 138,976 BENEFICIARIES * ZAMBIA 88,763 BENEFICIARIES. LATIN AMERICA & THE CARIBBEAN * ECUADOR 25,840 BENEFICIARIES * GUATEMALA 30,166 BENEFICIARIES * HAITI 39,694 BENEFICIARIES * HONDURAS 42,210 BENEFICIARIES * NICARAGUA 43,261 BENEFICIARIES. MIDDLE EAST AND SOUTH ASIA * AFGHANISTAN 24,922 BENEFICIARIES * JORDAN 26,901 BENEFICIARIES * PAKISTAN 406,984 BENEFICIARIES. EURASIA AND EUROPE * ARMENIA 41,621 BENEFICIARIES * AZERBAIJAN 66,686 BENEFICIARIES * GEORGIA 102,587 BENEFICIARIES * KOSOVO 14,522 BENEFICIARIES * KYRGYZSTAN 118,570 BENEFICIARIES * RUSSIA 3,591 BENEFICIARIES * TAJIKISTAN 37,022 BENEFICIARIES. FINCA HAS EMBARKED ON A COMPREHENSIVE INITIATIVE TO MONITOR AND MANAGE SOCIAL PERFORMANCE THAT INCLUDES IDENTIFYING AND TRACKING SOCIAL PERFORMANCE INDICATORS ON AN ONGOING BASIS TO ENSURE THAT FINCA REMAINS FOCUSED ON CLIENT WELFARE AND PROTECTION, INCREASES TRANSPARENCY WITH PARTNERS, AND DEVELOPS NEW PRODUCTS THAT ARE TAILORED TO ENHANCE CLIENT WELL-BEING. THE EXISTENCE OF A BOARD LEVEL SOCIAL PERFORMANCE AUDIT COMMITTEE SIGNIFIES THE ORGANIZATION'S UNWAVERING COMMITMENT TO IMPROVE THE LIVELIHOODS OF CLIENTS THROUGH THE PROVISION OF PRODUCTS AND SERVICES THAT CLIENTS SAY THEY NEED. BUILDING ON THE PIONEERING CLIENT ASSESSMENT TOOL THAT FINCA INTERNATIONAL USES TO MEASURE THE IMPACT OF OUR PRODUCTS AND SERVICES ON THE LIVES OF OUR CLIENTS AND THEIR FAMILIES, THE SOCIAL PERFORMANCE AUDIT COMMITTEE HAS CREATED A SPECIFIC, COMPREHENSIVE AND MEASURABLE DEFINITION OF FINCA INTERNATIONAL'S SOCIAL PERFORMANCE. TO BE SUCCESSFUL IN ITS COMMITMENT TO SOCIAL PERFORMANCE, FINCA INTERNATIONAL NEEDS TO SHOW THAT IT HAS * EXPANDED ACCESS TO FINANCIAL SERVICES, PRIMARILY AMONG UNDERSERVED, LOW-INCOME PEOPLE AND COMMUNITIES, * INCREASED EMPLOYMENT AND INCOMES, * IMPROVED LIVING STANDARDS, AND, * EMPOWERED OUR CLIENTS AND HELPED THEM ACHIEVE THEIR PERSONAL ASPIRATIONS. AS PART OF ITS PROGRAM SERVICE REVENUES, THE ORGANIZATION RECEIVED CONTRIBUTIONS OF SERVICES, WHICH ARE NOT INCLUDED IN THE REVENUES REPORTED ON FORM 990, PART VIII. THE CONTRIBUTIONS RECEIVED DURING THE TAX YEAR INCLUDE THE FOLLOWING: PROFESSIONAL SERVICES CREDIT SUISSE - \$36,382; ADVERTISEMENTS GOOGLE - \$388,220; LEGAL SERVICES CLIFFORD CHANCE - \$326,305; COVINGTON & BURLING - \$353,308; KIRKLAND & ELLIS - \$6,534; LATHAM & WATKINS - \$128,920; ORRICK, HERRINGTON & SUTCLIFFE - \$212,685; DENTONS - \$7,641; HENGELER MUELLER - \$5,056.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES TREVAIL DIRECTOR (BEG 09/16)	5 00 0 00	X						0	0	0
PETER EPP DIRECTOR (BEG 06/16)	5 00 0 00	X						0	0	0
AMANDA ELLIS DIRECTOR (BEG 06/16)	5 00 0 00	X						0	0	0
FRED SEYMOUR DIRECTOR	5 00 0 00	X						0	0	0
HAROLD D JASTRAM DIRECTOR	5 00 0 00	X						0	0	0
DAVID E WEISMAN DIRECTOR	5 00 0 00	X						0	0	0
JAMES SEMAKADDE DIRECTOR	5 00 0 00	X						0	0	0
AGRINA MUSSA DIRECTOR	5 00 0 00	X						0	0	0
JOHN ELKINS DIRECTOR	5 00 0 00	X						0	0	0
ROBERT W HATCH CHAIRMAN	10 00 0 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN K HATCH DIRECTOR	10 00 0 00	X						72,917	0	0
RICHARD M WILLIAMSON DIRECTOR	5 00 0 00	X						0	0	0
RUPERT W SCOFIELD PRESIDENT & CO - CEO	50 00 0 00	X		X				392,080	0	35,919
VOLKER RENNER VP OF CREDIT AND SAVINGS	50 00 0 00			X				240,881	0	0
MICHAEL GAMA-LOBO VP - REGIONAL DIRECTOR	50 00 0 00			X				163,476	0	69,631
JOHN LOPEZ SENIOR ATTORNEY	50 00 0 00			X				178,607	0	0
DENNIS MILLSAPS VP & CHIEF TECHNOLOGY OFFICER	50 00 0 00			X				254,715	0	23,880
KEITH SANDBLOOM VP - REGIONAL DIRECTOR	50 00 0 00			X				194,280	0	37,626
ZARLASHT WARDAK VP - REGIONAL DIRECTOR	50 00 0 00			X				255,421	0	39,833
JEFFREY SMITH VP, CHIEF AUDIT & RISK OFFICER	50 00 0 00			X				189,449	0	31,372

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors								(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)								
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JEFFREY A FLOWERS VP - REGIONAL DIRECTOR	50 00 0 00			X				203,543	0	30,633
ROMAN HINGORANI VP & CFO	50 00 0 00			X				290,308	0	27,549
P DANIEL SMITH VP & GENERAL COUNSEL	50 00 0 00			X				278,461	0	18,661
ANDREE SIMON VP & CO - CEO	50 00 0 00			X				309,055	0	12,600
SCOTT TINDALL DIRECTOR TREASURY SERV (END 10/16)	50 00 0 00				X			181,753	0	370
FRANCA ROFE VP - HR	50 00 0 00				X			167,620	0	11,360
CHIKAKO KUNO DIRECTOR, TEMA	50 00 0 00				X			203,983	0	20,308
SOLEDAD GOMPF VP - NEW BUSINESS DEV	50 00 0 00				X			183,062	0	495,462
MARIA VILELA DEPUTY GENERAL COUNSEL	50 00 0 00					X		191,942	0	34,936
STEPHANIE BAGOT SENIOR ATTORNEY	50 00 0 00					X		184,078	0	15,795

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SONA GANDHI LOCAL COUNTRY CEO	25 00					X		61,853	131,042	21,790
ALEJANDRO JAKUBOWICZ DEPUTY REGIONAL DIRECTOR	50 00					X		217,183	0	22,319
JEREMY DANFORD GLOBAL TAX DIRECTOR	0 00					X		200,680	0	12,444

SCHEDULE A
(Form 990 or
990EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization
FINCA INTERNATIONAL INC

Employer identification number
13-3240109

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 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 exempt 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)**. (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **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.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s) _____

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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, 8, or 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	18,743,053	27,525,208	22,225,233	20,354,935	20,107,097	108,955,526
2 Tax revenues levied for the organization'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	18,743,053	27,525,208	22,225,233	20,354,935	20,107,097	108,955,526
5 The portion of total contributions 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, column (f)						1,626,051
6 Public support. Subtract line 5 from line 4						107,329,475

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
7 Amounts from line 4	18,743,053	27,525,208	22,225,233	20,354,935	20,107,097	108,955,526
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,559,057	12,793,365	8,536,137	11,819,458	13,050,803	58,758,820
9 Net income from unrelated business activities, whether or not the business is regularly carried on	23,580	38,101	38,461	10,000	0	110,142
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	11,895,482	31,763,541	32,682,014	30,159,885	16,794,813	123,295,735
11 Total support. Add lines 7 through 10						291,120,223
12 Gross receipts from related activities, etc (see instructions)					12	123,295,735

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	36.870 %
15 Public support percentage for 2015 Schedule A, Part II, line 14	15	65.500 %

- 16a 33 1/3% support test—2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
1	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 organization'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						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
9	Amounts from line 6						
10a	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						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	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 five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15	Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2015 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2015 Schedule A, Part III, line 17	18	
19a	33 1/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b	33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 (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 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
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 in 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 in 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.)		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
		11a	
		11b	
		11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
		1	
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
		2	

Section C. Type II Supporting 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
		1	

Section D. All Type III Supporting Organizations

		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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
		2	
3	By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
		3	

Section 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)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	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? <i>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.</i>		
		2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>		
		2b	
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	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? <i>Provide details in Part VI.</i>		
		3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
		3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section 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)	1	
a Average monthly value of securities	1a	
b Average monthly cash balances	1b	
c Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
e 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 1-1/2% 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 .035	6	
7 Recoveries of prior-year distributions	7	
8 Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount

		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 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 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013.			
d From 2014.			
e From 2015.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b Excess from 2013.			
c Excess from 2014.			
d Excess from 2015.			
e Excess from 2016.			

Part 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).

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047
2016
Open to Public Inspection

▶ **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.**

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number
13-3240109

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of 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 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|----------------------------------------|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--------------------------------------------------------------------------------------------------------|---------------|----|
| | Yes | No |
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,875,340	539,806	1,335,534
d Equipment		1,036,749	947,536	89,213
e Other		559,245	483,261	75,984
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				1,500,731

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INVESTMENT IN PARTNERSHIP AND SUBS	96,124,320	C
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)	96,124,320	

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED PENSION OBLIGATION	3,707,898
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	3,707,898

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 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			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 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			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	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 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Provide 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 any additional information.

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 13-3240109

Name: FINCA INTERNATIONAL INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	FINCA RECORDS UNRECOGNIZED TAX BENEFITS AS LIABILITIES IN ACCORDANCE WITH ASC 740 AND ADJUSTS THESE LIABILITIES WHEN ITS JUDGMENT CHANGES AS A RESULT OF THE EVALUATION OF NEW INFORMATION NOT PREVIOUSLY AVAILABLE BECAUSE OF THE COMPLEXITY OF SOME OF THESE UNCERTAINTIES, THE ULTIMATE RESOLUTION MAY RESULT IN A PAYMENT THAT IS MATERIALLY DIFFERENT FROM OUR CURRENT ESTIMATE OF THE UNRECOGNIZED TAX BENEFIT LIABILITIES THESE DIFFERENCES WILL BE REFLECTED AS INCREASES OR DECREASES TO INCOME TAX EXPENSE IN THE PERIOD IN WHICH NEW INFORMATION IS AVAILABLE AT DECEMBER 31, 2016, FINCA DID NOT RECORD ANY ADDITIONAL UNRECOGNIZED TAX BENEFITS FINCA BELIEVES THAT IT IS NOT REASONABLY POSSIBLE THAT ANY UNRECOGNIZED TAX BENEFITS WILL SIGNIFICANTLY INCREASE OR DECREASE WITHIN 12 MONTHS OF THE REPORTING DATE AT DECEMBER 31, 2016, NO ESTIMATED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS WERE ACCRUED ACCRUED INTEREST AND PENALTIES ARE GENERALLY INCLUDED WITHIN THE RELATED ACCRUED LIABILITIES LINE IN THE CONSOLIDATED STATEMENT OF FINANCIAL POSITION FINCA IS SUBJECT TO TAXATION IN THE UNITED STATES AND VARIOUS STATES AND FOREIGN JURISDICTIONS AS OF DECEMBER 31, 2016, FINCA'S TAX YEARS 2007-2016 ARE SUBJECT TO EXAMINATION BY THE TAX AUTHORITIES

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

**Open to Public
Inspection**

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number
13-3240109

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	2	192			3,338,000
b Total from continuation sheets to Part I	1	1			2,040,138
c Totals (add lines 3a and 3b)	3	193			5,378,138

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Additional Data

Software ID:

Software Version:

EIN: 13-3240109

Name: FINCA INTERNATIONAL INC

Schedule F (Form 990) 2016

Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	1	1	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	323,663
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	179	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	1,776,797
CENTRAL AMERICA & THE CARIBBEAN	0	1	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	275,615

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
RUSSIA AND NEIGHBORING STATES	0	5	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	573,648
SOUTH ASIA	0	2	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	240,019
SOUTH AMERICA	0	1	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	57,008

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	2	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	91,250
MIDDLE EAST AND NORTH AFRICA	0	1	PROGRAM SERVICES	FINANCIAL SERVICES FOR THE POOR	
CENTRAL AMERICA & THE CARIBBEAN	0	0	INVESTMENTS	INVESTMENTS	1,900,000

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	1	1	PROGRAM SERVICES	SELLING PRODUCTS	140,138

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number
13-3240109

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 PUBLIC INTEREST COMMUNICATIONS INC 7700 LEESBURG PIKE SUITE 301 NORTH FALLS CHURCH, VA 22043	TELEMARKETING		No	15,806	28,471	-12,665
2 SD&A TELESERVICES INC 5757 W CENTURY BLVD 300 LOS ANGELES, CA 90045	FUNDRAISING CONSULTANT		No	10,253	39,103	-28,850
3 INTEGRATED DIRECT MARKETING LLC 1250 CONNECTICUT AVE NW 200 WASHINGTON, DC 20036	FUNDRAISING CONSULTING		No	0	367,510	-367,510
4 KOSOVO ADDIS 1205 CARDINAL LANE CHERRY HILL, NJ 08003	FUNDRAISING CONSULTING		No	0	10,500	-10,500
5						
6						
7						
8						
9						
10						
Total				26,059	445,584	-419,525

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d)
		(event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
11 Net income summary Subtract line 10 from line 3, column (d) ▶					

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Revenue	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
Revenue	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party

Name ▶

Address ▶

- 16** Gaming manager information
- Name ▶
- Gaming manager compensation ▶ \$
- Description of services provided ▶
- Director/officer Employee Independent contractor

- 17** Mandatory distributions
- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
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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 are not 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 compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

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.

Return Reference	Explanation
See Additional Data	

Additional Data

Software ID:
Software Version:
EIN: 13-3240109
Name: FINCA INTERNATIONAL INC

Part III, Supplemental Information

Return Reference	Explanation
PART I, LINE 1A	FINCA INTERNATIONAL PROVIDED TAX GROSS-UP PAYMENTS FOR EXPATRIATE EMPLOYEES SONA GANDHI, LESLIE ENRIGHT, AND MICHAEL GAMA-LOBO IN 2016 HOUSING ALLOWANCES WERE PROVIDED FOR HOUSING COSTS PAID TO THE FOLLOWING EXPATRIATE EMPLOYEES JEFFREY FLOWERS, SONA GANDHI, MICHAEL GAMA-LOBO, AND ALEJANDRO JAKUBOWICZ THE GROSS-UP PAYMENTS AND HOUSING ALLOWANCES WERE TREATED AS TAXABLE COMPENSATION

Part III, Supplemental Information

Return Reference	Explanation
PART I, LINES 4A-B	SEVERANCE PAYMENTS WERE MADE TO THE FOLLOWING PERSONS RONALD AIZER AND SCOTT TINDALL IN THE AMOUNT OF \$34,753 AND \$26,938, RESPECTIVELY

Part III, Supplemental Information

Return Reference	Explanation
PART I, LINES 4A-B	THE FOLLOWING PERSONS PARTICIPATED IN A SECTION 457(F) SUPPLEMENTAL NONQUALIFIED DEFERRED COMPENSATION PLAN AND ARE NOT VESTED SOLEDAD GOMPF (\$452,499 DEFERRED COMPENSATION ACCRUAL) RUPERT SCOFIELD AND JOHN HATCH HAD PREVIOUSLY VESTED IN THE PLAN JOHN HATCH RECEIVED A PAYMENT OF \$72,719 DURING 2016, NO OTHER LISTED PERSON RECEIVED PAYMENT DURING 2016, EXCEPT AS NOTED BELOW THE PLAN IS A DEFINED BENEFIT PENSION PLAN

Part III, Supplemental Information

Return Reference	Explanation
FORM 990, SCHEDULE J	VOLKER RENNER, VP OF CREDIT AND SAVINGS, RECEIVED COMPENSATION FOR SERVICES RENDERED TO FINCA FROM EAFS CONSULTING GMBH, AN ORGANIZATION THAT IS UNRELATED TO FINCA THE AMOUNT OF COMPENSATION PAID DURING TAX YEAR 2016 WAS \$240,881

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 RUPERT W SCOFIELD PRESIDENT & CO - CEO	(i)	390,556	0	1,524	21,498	14,421	427,999	0
	(ii)	0	0	0	0	0	0	0
1 VOLKER RENNER VP OF CREDIT AND SAVINGS	(i)	240,881	0	0	0	0	240,881	0
	(ii)	0	0	0	0	0	0	0
2 MICHAEL GAMA-LOBO VP - REGIONAL DIRECTOR	(i)	125,998	0	37,478	10,311	59,320	233,107	0
	(ii)	0	0	0	0	0	0	0
3 JOHN LOPEZ SENIOR ATTORNEY	(i)	177,083	0	1,524	0	0	178,607	0
	(ii)	0	0	0	0	0	0	0
4 DENNIS MILLSAPS VP & CHIEF TECHNOLOGY OFFICER	(i)	253,191	0	1,524	625	23,255	278,595	0
	(ii)	0	0	0	0	0	0	0
5 KEITH SANDBLOOM VP - REGIONAL DIRECTOR	(i)	178,706	15,400	174	11,178	26,448	231,906	0
	(ii)	0	0	0	0	0	0	0
6 ZARLASHT WARDAK VP - REGIONAL DIRECTOR	(i)	153,383	0	102,038	18,000	21,833	295,254	0
	(ii)	0	0	0	0	0	0	0
7 JEFFREY SMITH VP, CHIEF AUDIT & RISK OFFICER	(i)	188,657	0	792	948	30,424	220,821	0
	(ii)	0	0	0	0	0	0	0
8 JEFFREY A FLOWERS VP - REGIONAL DIRECTOR	(i)	177,731	0	25,812	11,246	19,387	234,176	0
	(ii)	0	0	0	0	0	0	0
9 ROMAN HINGORANI VP & CFO	(i)	290,032	0	276	1,131	26,418	317,857	0
	(ii)	0	0	0	0	0	0	0
10 DANIEL SMITH VP & GENERAL COUNSEL	(i)	278,185	0	276	932	17,729	297,122	0
	(ii)	0	0	0	0	0	0	0
11 ANDREE SIMON VP & CO - CEO	(i)	271,375	37,500	180	1,969	10,631	321,655	0
	(ii)	0	0	0	0	0	0	0
12 SCOTT TINDALL DIRECTOR TREASURY SERV (END 10/16)	(i)	181,126	0	627	0	370	182,123	0
	(ii)	0	0	0	0	0	0	0
13 FRANCA ROFEVP - HR	(i)	158,844	8,500	276	762	10,598	178,980	0
	(ii)	0	0	0	0	0	0	0
14 CHIKAKO KUNO DIRECTOR, TEMA	(i)	203,467	0	516	15,408	4,900	224,291	0
	(ii)	0	0	0	0	0	0	0
15 SOLEDAD GOMPF VP - NEW BUSINESS DEV	(i)	182,270	0	792	463,831	31,631	678,524	0
	(ii)	0	0	0	0	0	0	0
16 MARIA VILELA DEPUTY GENERAL COUNSEL	(i)	191,834	0	108	14,400	20,536	226,878	0
	(ii)	0	0	0	0	0	0	0
17 STEPHANIE BAGOT SENIOR ATTORNEY	(i)	173,958	10,000	120	6,680	9,115	199,873	0
	(ii)	0	0	0	0	0	0	0
18 SONA GANDHI LOCAL COUNTRY CEO	(i)	36,048	0	25,805	0	21,790	83,643	0
	(ii)	131,042	0	0	0	0	131,042	0
19 ALEJANDRO JAKUBOWICZ DEPUTY REGIONAL DIRECTOR	(i)	184,267	0	32,916	1,040	21,279	239,502	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 JEREMY DANFORD GLOBAL TAX DIRECTOR	(i) 191,500	9,000	180	921	11,523	213,124	0
	(ii) 0	0	0	0	0	0	0

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization FINCA INTERNATIONAL INC

Employer identification number 13-3240109

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) JULIE HOUSER	FAMILY MEMBER - CEO	39,690	EMPLOYMENT		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2016

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number
13-3240109

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	72	247,075	COST OR SELLING PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (SOFTWARE LICENSES)	X	1	1,486,659	COST OR SELLING PRIC
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a	Yes	
33		

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE AMOUNT IN COLUMN (B) REFERS TO THE NUMBER OF CONTRIBUTIONS
PART I, LINE 32B	FINCA USED CHARLES SCHWAB BROKERAGE SERVICES TO SELL DONATED SECURITIES

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number

13-3240109

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	<p>THE CHAIRMAN OF THE BOARD, ROBERT W HATCH, IS THE BROTHER OF THE FOUNDER, JOHN HATCH, WHO IS ALSO A DIRECTOR AND A RETIRED EMPLOYEE ROBERT HATCH, GIVEN SIGNIFICANT MANAGEMENT EXPERIENCE, ASSISTED IN FOUNDING THE ORGANIZATION AND IN PROVIDING LEADERSHIP AS BOARD CHAIRMAN THROUGHOUT FINCA'S HISTORY JOHN HATCH, RICHARD WILLIAMSON, HAROLD JASTRAM, AND RUPERT SCOFIELD ARE ALL MEMBERS OF THE BOARD OF DIRECTORS AND MINOR SHAREHOLDERS OF CEREAL INGREDIENTS, INC WHICH IS OWNED BY ROBERT HATCH, THE CHAIRMAN OF FINCA INTERNATIONAL'S BOARD OF DIRECTORS RICHARD WILLIAMSON HAS A FINANCIAL TRANSACTION WITH CEREAL INGREDIENTS, INC RICHARD WILLIAMSON AND ROBERT HATCH ARE ALSO BOTH DIRECTORS OF THE HEALTHY BACK STORE</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	UNDER FINCA INTERNATIONAL'S CONSTITUENT DOCUMENTS, MEMBERS ARE THE FUNCTIONAL EQUIVALENT OF SHAREHOLDERS BUT HOLD NO ECONOMIC INTEREST. THEY FUNCTION AS STEWARDS OF THE CHARITABLE MISSION AND SERVE AS THE ULTIMATE GOVERNANCE AUTHORITY FOR THE ORGANIZATION. FINCA HAS 4 (FOUR) MEMBERS, EACH OF WHOM HAVE EQUAL VOTING RIGHTS AND DEVOTE CONSIDERABLE TIME AND ATTENTION TO ITS ACTIVITIES. MEMBERSHIPS IN FINCA ARE NOT SOLD AS FUNDRAISING MECHANISMS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS, AS DESCRIBED IN LINE 6, ELECT THE GOVERNING BODY OF FINCA, WHICH IS FINCA INTERNATIONAL'S BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	CERTAIN KEY DECISIONS OF THE GOVERNING BODY, FINCA INTERNATIONAL'S BOARD OF DIRECTORS, ARE SUBJECT TO THE APPROVAL BY THE MEMBERS OF THE ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PRESENTED TO THE 990 REVIEW TEAM WHICH COMPRISES THE AUDIT COMMITTEE, AND REPRESENTATIVES FROM HUMAN RESOURCES, LEGAL, AND FINANCE THE TEAM REVIEWS THE DOCUMENT AND A MEETING IS SCHEDULED TO DISCUSS PENDING QUESTIONS WITH THE DIRECTOR OF TAX THIS PROCESS INCLUDES REVIEWING AND GIVING FINAL APPROVAL OF ALL SECTIONS, SCHEDULES, CHECKLISTS, AND ALL DISCLOSURES ON THE RETURN

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTERESTS ON AN ONGOING BASIS. CONFLICTS OF INTERESTS ARE PROHIBITED BY THE FINCA CODE OF CONDUCT AND PERSONNEL MANUAL, SUBJECT TO ANY EXCEPTIONS BASED ON A STANDARD OF FAIRNESS AND BEST INTERESTS OF THE COMPANY BY AN INDEPENDENT AUDIT COMMITTEE. CONFLICTS, INCLUDING RELATED PARTY TRANSACTIONS, ARE STRONGLY DISCOURAGED AND APPROVED, IF AT ALL, ON AN EXCEPTIONAL BASIS. THE PROCESS IS MONITORED THROUGH ACKNOWLEDGMENT OF THE POLICY PROHIBITING AND REQUIRING REPORTING OF ANY CONFLICTS, ALONG WITH INTERNAL AUDITS AND OTHER CONTROLS (INCLUDING THE CONTRACT REVIEW PROCESS). THE FINCA CODE OF CONDUCT, APPLICABLE TO ALL FINCA PERSONS GLOBALLY, PROVIDES A CONFIDENTIAL REPORTING MECHANISM ("HOTLINE") FOR REPORTING VIOLATIONS OF THE CODE, INCLUDING CONFLICTS OF INTERESTS. FORM 990, PART VI, LINE 13. THE FINCA GLOBAL CODE OF CONDUCT CONTAINS A FORMAL CONFIDENTIAL REPORTING MECHANISM, OR "WHISTLEBLOWER" PROCESS, FOR REPORTING SUSPECTED VIOLATIONS OF THE CODE OR OF LAW. THE CODE OF CONDUCT PROVIDES A SET OF STANDARDS FOR ETHICAL BUSINESS CONDUCT FOR ALL FINCA PERSONS WORLDWIDE. EMPLOYEES HAVE BEEN TRAINED ON THE CODE AND ON THE REPORTING MECHANISM, INCLUDING REINFORCEMENT BY THE CHIEF EXECUTIVE OFFICER THAT THE CODE REPRESENTS FINCA STANDARDS. REPORTS MAY BE MADE TO LOCAL MANAGEMENT OR DIRECTLY THROUGH A CONFIDENTIAL REPORTING LINE TO THE GLOBAL VICE PRESIDENT AND GENERAL COUNSEL OR THE GLOBAL VICE PRESIDENT - HUMAN RESOURCES.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PROCESS FOR DETERMINING THE CEO AND OTHER OFFICERS' COMPENSATION IS PERFORMED BY THE HUMAN RESOURCES DEPARTMENT AND REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS' COMPENSATION COMMITTEE THE CEO IS EXCLUDED FROM THE COMPENSATION COMMITTEE DURING THE REVIEW AND APPROVAL OF THE CEO'S COMPENSATION THE PROCESS INCLUDES A REVIEW OF OTHER FORM 990S AND COMPENSATION SURVEYS, AND THERE IS CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION THE REVIEW IS PERFORMED ANNUALLY FORM 990, PART VI, LINE 15B THE PROCESS FOR DETERMINING ALL OFFICERS' COMPENSATION IS PERFORMED BY THE HUMAN RESOURCES DEPARTMENT AND REVIEWED AND APPROVED BY THE THE BOARD OF DIRECTORS' COMPENSATION COMMITTEE THE PROCESS INCLUDES A REVIEW OF OTHER FORM 990S AND COMPENSATION SURVEYS, AND THERE IS CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION THE REVIEW IS PERFORMED ANNUALLY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST AND ON ITS OWN WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CURRENCY TRANSLATION ADJUSTMENT -146,387 UNAMORTIZED PENSION PRIOR SERVICE COSTS -13,792 PARTNERSHIP K-1 INCOME 5,737,388 OTHER 323

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2	FINCA INTERNATIONAL'S FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2016

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
FINCA INTERNATIONAL INC

Employer identification number

13-3240109

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 or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) FINCA PLUS LLC 1201 15TH STREET NW 8TH FLOOR WASHINGTON, DC 20005 46-4312538	SOLAR ENERGY PRODUCTS	DE	337,786	300,159	FINCA INTERNATIONAL INC
(2) FINCA CAPITAL FUND LLC 1201 15TH STREET NW 8TH FLOOR WASHINGTON, DC 20005 26-0648736	DORMANT	DE	0	0	FINCA INTERNATIONAL INC
(3) FINCA LICENSING & SUPPORT LLC 1201 15TH STREET NW 8TH FLOOR WASHINGTON, DC 20005	DORMANT	DE	0	0	FINCA INTERNATIONAL INC

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

See Additional Data Table

(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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) FINCA MICROFINANCE HOLDINGS COMPANY LLC 1201 15TH STREET NW 8TH FLOOR WASHINGTON, DC 20005 45-0793602	HOLDING COMPANY	DC	FINCA INTERNATIONAL INC	RELATED	20,176,339	178,584,258	Yes				No	62.930 %
(2) FINCA MICROFINANCE GLOBAL SERVICES LLC 1201 15TH STREET NW 8TH FLOOR WASHINGTON, DC 20005 81-1408194	DORMANT	DC	FINCA MICROFINANCE HOLDINGS LLC	RELATED		62,930	Yes				No	62.930 %

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.

See Additional Data Table

(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	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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

Note. 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 related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a Yes	
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d Yes	
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference**Explanation**

Additional Data

Software ID:
Software Version:
EIN: 13-3240109
Name: FINCA INTERNATIONAL INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(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 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) AV GUSTAVO DIAZ ORDAZ 12 COL CANT CUERNAVACA MX	MICROFINANCE OPERATIONS	MX			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	
(1) PASEO GENERAL ESCALON Y CALLE CIRCU SAN SALVADOR ES	MICROFINANCE OPERATIONS	ES			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	
(2) 26 RUE METELLUS PETIONVILLE PORTAUPRINCE HA	MICROFINANCE OPERATIONS	HA			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	
(3) COL TEPEYAC AVE LAS MINITAS TEGUCIGALPA HO	DORMANT	HO			FINCA INTERNATIONAL INC	Yes	
(4) AGATANGEGHOS STREET 2A YEREVAN 0023 AM	DORMANT	AM			FINCA INTERNATIONAL INC	Yes	
(5) AVDA AMAZONAS N39-123 Y JOSE ARIZA QUITO EC	MICROFINANCE OPERATIONS	EC			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	
(6) DE LA ROTONDA DEL GUEGUENSE MANAGUA NU	MICROFINANCE OPERATIONS	NU			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	
(7) 3A AVENIDA 10-35 ZONA 09 GUATEMALA CITY GT	MICROFINANCE OPERATIONS	GT			FINCA MICROFINANCE HOLDING COMPANY LLC	Yes	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) FINCA AFGHANISTAN HOUSE NO 100 ST NO 8 QALA-E-FA KABUL AF	MICROFINANCE OPERATIONS	AF	FINCA MICROFINANCE COOPERATIEF UA	C	3,531,832	11,564,070	62.930 %		No
(1) FINCA UNIVERSAL CREDIT ORGANIZATION CJSC AGATANGEGHOS STREET 2A YEREVAN 0023 AM	MICROFINANCE OPERATIONS	AM	FINCA MICROFINANCE COOPERATIEF UA	C	11,437,227	38,071,272	62.930 %		No
(2) FINCA AZERBAIJAN LLC 44 JAFAR JABBARLI STREET CASPIAN P BAKU 1065 AJ	MICROFINANCE OPERATIONS	AJ	FINCA MICROFINANCE COOPERATIEF UA	C	23,508,879	30,997,261	62.930 %		No
(3) MICRO-FINANCE SOLUTIONS INC PO BOX 309GT UGLAND HOUSE SOUTH C GEORGETOWN FC1 CJ	IT SERVICES	CJ	FINCA INTERNATIONAL INC	C	35,593	10,000	100.000 %		No
(4) FINCA DR CONGO SARL 1286 AVE TOMBALBAYE BP KINSHASA 13447 CG	MICROFINANCE OPERATIONS	CG	FINCA MICROFINANCE HOLDING COMPANY LLC	C	23,868,771	59,264,504	62.930 %		No
(5) JSC MFO FINCA 71 VAZHA-PSAVELA AVENUE TBILISI 0186 GG	MICROFINANCE OPERATIONS	GG	FINCA MICROFINANCE COOPERATIEF UA	C	16,133,340	66,022,398	62.930 %		No
(6) FINCA MICROFINANZAS SA DE CV PASEO GENERAL ESCALON Y CALLE CIRCU SAN SALVADOR ES	MICROFINANCE OPERATIONS	ES	FINCA MICROFINANCE HOLDING COMPANY LLC	C			62.930 %		No
(7) BANCO PARA LA ASISTENCIA COMUNITARIA FINCA SA AVDA AMAZONAS N39-123 Y JOSE ARIZA QUITO EC	MICROFINANCE OPERATIONS	EC	FINCA MICROFINANCE HOLDING COMPANY LLC	C	5,863,869	29,325,556	62.930 %		No
(8) FINCA TRANSFERT SARL 1286 AVE TOMBALBAYE BP KINSHASA CG	MICROFINANCE OPERATIONS	CG	FINCA DR CONGO SARL	C	21,743	868,781	62.930 %		No
(9) FINANCIERA FINCA HONDURAS SA COL TEPEYAC AV LAS MINITAS TEGUCIGALPA HO	MICROFINANCE OPERATIONS	HO	FINCA MICROFINANCE HOLDING COMPANY LLC	C	5,750,850	15,937,752	62.930 %		No
(10) FINCA HAITI SA 26 RUE METELLUS PETIONVILLE PORTAUPRINCE HA	MICROFINANCE OPERATIONS	HA	FINCA MICROFINANCE HOLDING COMPANY LLC	C	2,988,286	7,059,226	62.930 %		No
(11) FINCA MICROFINANZAS SA 3A AVE 10-35 ZONA 09 GUATEMALA CITY GT	DORMANT	GT	FINCA MICROFINANCE HOLDING COMPANY LLC	C			62.930 %		No
(12) MFSI GUATEMALA SA CALZADA ROOSEVELT 22-43 ZONA 11 GUATEMALA CITY 01011 GT	IT SERVICES	GT	MICRO FINANCE SOLUTIONS INC	C	56	57,770	100.000 %		No
(13) FINCA LIMITED (MALAWI) HENDERSON ST PRIVATE BAG 382 BLANTYRE 3 MI	MICROFINANCE OPERATIONS	MI	FINCA MICROFINANCE COOPERATIEF UA	C	4,973,129	10,494,285	62.930 %		No
(14) FINCA MICRO-CREDIT COMPANY CJSC 93/2 SHOPOKOV STREET BISKEK KG	MICROFINANCE OPERATIONS	KG	FINCA MICROFINANCE HOLDING COMPANY LLC	C	23,215,112	71,581,093	62.930 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(16) FINCA KOSOVE SHA ROBERT DOLL 5 PRISHTINA KV	MICROFINANCE OPERATIONS	KV	FINCA MICROFINANCE HOLDING COMPANY LLC	C		7,651	62.930 %		No
(1) SPECIALIZED MICRO LOANS (PRIVATE SHAREHOLDING COMPANY) OFFICE 23 24 4TH FLOOR DURRET K AMMAN JO	MICROFINANCE OPERATIONS	JO	FINCA MICROFINANCE HOLDING COMPANY LLC	C	5,243,239	18,509,102	62.930 %		No
(2) FINCA MICROFINANCE BANK LIMITED (NG) 20 WETHERAL ROAD OWERRI NI	MICROFINANCE OPERATIONS	NI	FINCA MICROFINANCE COOPERATIEF UA	C	1,269,072	2,515,626	62.930 %		No
(3) FINANCIERA FINCA NICARAGUA SA DE LA ROTUNDA DEL GUEGUENSE 3 CUADR MANAGUA NU	MICROFINANCE OPERATIONS	NU	FINCA MICROFINANCE HOLDING COMPANY LLC	C	9,491,629	30,579,967	62.930 %		No
(4) FINCA NETWORK SUPPORT BV DE ENTRE 99-197 ZUIDOOST AMSTERDAM 1101HE NL	IT SERVICES	NL	FINCA MICROFINANCE COOPERATIEF UA	C	3,687,152	1,995,255	62.930 %		No
(5) FINCA MICROFINANCE COOPERATIEF UA DE ENTRE 99-197 ZUIDOOST AMSTERDAM 1101HE NL	HOLDING COMPANY	NL	FINCA MICROFINANCE HOLDING COMPANY LLC	C	4,099,467	74,315,941	62.930 %		No
(6) FINANCIERA FINCA SA DE CV SOFOM AV GUSTAVO DIAZ ORDAZ NO 12 CUERNAVACA CP 62448 MX	MICROFINANCE OPERATIONS	MX	TENEDORA FINCA SAPI DE CV	C			62.930 %		No
(7) FINCA UGANDA LIMITED PLOT 11A ACACIA AVENUE KOLOLO KAMPALA UG	MICROFINANCE OPERATIONS	UG	FINCA MICROFINANCE HOLDING COMPANY LLC	C	9,634,733	24,822,507	62.930 %		No
(8) FINCA MICROFINANCE BANK LIMITED PLOT 84 MOROGORO ROAD PO BOX 7878 DAR ES SALAAM TZ	MICROFINANCE OPERATIONS	TZ	FINCA MICROFINANCE HOLDING COMPANY LLC	C	11,794,690	28,819,994	62.930 %		No
(9) FINCA MICRO-CREDIT DEPOSIT ORGANIZATION LLC 9 JABBOR RASULOV STREET DUSHANBE TI	MICROFINANCE OPERATIONS	TI	FINCA MICROFINANCE HOLDING COMPANY LLC	C	5,613,545	18,611,629	62.930 %		No
(10) FINCA CJSC 111 REVOLUTSIONNAYA STREET SAMARA 443079 RS	MICROFINANCE OPERATIONS	RS	FINCA MICROFINANCE HOLDING COMPANY LLC	C	1,738,969	4,764,249	62.930 %		No
(11) FINCA MICROFINANCE BANK LIMITED (PAKISTAN) 387-E JOHAR TOWN LAHORE PK	MICROFINANCE OPERATIONS	PK	FINCA MICROFINANCE COOPERATIEF UA	C	17,104,944	80,743,874	54.370 %		No
(12) FINCA SERVICES USA LLC 21635 RED RUM DRIVE ASHBURN, VA 20147 90-0866365	IT SERVICES	VA	FINCA MICROFINANCE HOLDING COMPANY LLC	C	1,785,028	2,739,362	62.930 %		No
(13) FINCA ZAMBIA HOLDING LIMITED PLOT NO 609 ZAMBEZI ROAD ROMA 2N LUSAKA ZA	DORMANT	ZA	FINCA MICROFINANCE COOPERATIEF UA	C		932	62.930 %		No
(14) FINCA ZAMBIA LIMITED PLOT NO 609 ZAMBEZI ROAD ROMA 2N LUSAKA ZA	MICROFINANCE OPERATIONS	ZA	FINCA MICROFINANCE COOPERATIEF UA	C	7,222,871	10,887,202	62.930 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(31) FINCA AFRICA IT SERVICE CENTER LIMITED ADAMS HOUSE PLOT 11 PORTAL AVE P KAMPALA UG	IT SERVICES	UG	FINCA INTERNATIONAL INC	C			75 100 %		No
(1) TENEDORA FINCA SAPI DE CV AV GUSTAVO DIAZ ORDAZ NO 12 CUERNAVACA CP 62448 MX	HOLDING COMPANY	MX	FINCA MICROFINANCE HOLDING COMPANY LLC	C	10,149,816	12,931,701	62 930 %		No
(2) FINCASERVICIOS - LATINOAMERICA SA CALZADA ROOSEVELT 22-43 ZONA 11 GUATEMALA CITY GAUTEMALA GT	DORMANT	GT	FINCA MICROFINANCE HOLDING COMPANY LLC	C		2,248	62 930 %		No

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	FUNDACION INTERNATIONAL PARA LA ASISTENCIA COMUNITARIA DE GUATEMALA	A	173,382	FMV
(1)	FINCA HAITI SA	A	3,177	FMV
(2)	FINCA MICROFINANCE HOLDINGS COMPANY LLC	B	3,034,119	FMV
(3)	FUNDACION INTERNATIONAL PARA LA ASISTENCIA COMUNITARIA DE GUATEMALA	D	2,606,100	FMV
(4)	FINCA HAITI SA	D	300,000	FMV
(5)	FINCA MICROFINANCE HOLDINGS COMPANY LLC	L	18,076,288	FMV
(6)	FINCA SERVICES USA LLC	M	668,570	FMV
(7)	FINCA UNIVERSAL CREDIT ORGANIZATION CJSC	M	76,320	FMV
(8)	FINCA LIMITED (MALAWI)	M	377,309	FMV
(9)	FINCA UGANDA LIMITED	M	332,005	FMV
(10)	FINCA MICRO-CREDIT DEPOSIT ORGANIZATION LLC	M	69,097	FMV
(11)	FINCA MICROFINANCE BANK LIMITED (PAKISTAN)	M	54,316	FMV
(12)	FINCA ZAMBIA LIMITED	M	720,388	FMV
(13)	FINCA DR CONGO SARL	M	344,147	FMV
(14)	FINCA NETWORK SUPPORT BV	M	137,661	FMV
(15)	FINCA MICROFINANCE BANK LIMITED (TANZANIA)	M	776,243	FMV
(16)	FINCA DR CONGO SARL	Q	64,390	FMV
(17)	FINCA MICROFINANCE BANK LIMITED (NG)	Q	58,227	FMV
(18)	FINCA AZERBAIJAN LLC	Q	64,250	FMV
(19)	FINCA AFGHANISTAN	Q	63,346	FMV
(20)	FINCA MICRO-CREDIT DEPOSIT ORGANIZATION LLC	Q	55,334	FMV