

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2010

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> 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 1101 14TH STREET, NW, 11TH FLOOR City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005 F Name and address of principal officer: RUPERT W. SCOFIELD SAME AS C ABOVE	D Employer identification number 13-3240109 E Telephone number 202-682-1510 G Gross receipts \$ 38,783,866. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.FINCA.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1984 M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>FINANCIAL SERVICES TO THE WORLD'S LOWEST INCOME ENTREPRENEURS. FOR FULL PICTURE, SEE SCHED O</u> 2 Check this box <input type="checkbox"/> 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) 3 16 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 115 6 Total number of volunteers (estimate if necessary) 6 75 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 26,128. b Net unrelated business taxable income from Form 990-T, line 34 7b 4,469.																									
Revenue		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Prior Year</th> <th>Current Year</th> </tr> </thead> <tbody> <tr><td>8 Contributions and grants (Part VIII, line 1h)</td><td style="text-align: right;">25,535,820.</td><td style="text-align: right;">19,228,973.</td></tr> <tr><td>9 Program service revenue (Part VIII, line 2g)</td><td style="text-align: right;">12,269,879.</td><td style="text-align: right;">17,584,072.</td></tr> <tr><td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td style="text-align: right;">5,153,466.</td><td style="text-align: right;">-31,439.</td></tr> <tr><td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td style="text-align: right;">0.</td><td style="text-align: right;">60,514.</td></tr> <tr><td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td style="text-align: right;">42,959,165.</td><td style="text-align: right;">36,842,120.</td></tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	25,535,820.	19,228,973.	9 Program service revenue (Part VIII, line 2g)	12,269,879.	17,584,072.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,153,466.	-31,439.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	60,514.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	42,959,165.	36,842,120.						
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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 DANE STEVEN MCGUIRE, CHIEF FINANCIAL OFFICER Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name MICHAEL SORRELLS, CPA Preparer's signature Date Check <input type="checkbox"/> if self-employed PTIN	
	Firm's name ▶ BDO USA, LLP Firm's address ▶ 7101 WISCONSIN AVE., SUITE 800 BETHESDA, MD 20814-4827	Firm's EIN ▶ Phone no. (301) 654-4900

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF FINCA INTERNATIONAL IS TO PROVIDE FINANCIAL SERVICES TO THE WORLD'S LOWEST-INCOME ENTREPRENEURS SO THEY CAN CREATE JOBS, BUILD ASSETS, AND IMPROVE 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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 29,397,764. including grants of \$) (Revenue \$ 17,584,072.) AS OF DECEMBER 31, 2010, FINCA PROVIDED 764,770 INDIVIDUALS ACROSS 21 COUNTRIES IN AFRICA, EURASIA, LATIN AMERICA AND THE GREATER MIDDLE EAST WITH LOANS, SAVINGS, INSURANCE AND OTHER FINANCIAL SERVICES DESIGNED TO HELP THEM BUILD THEIR SMALL BUSINESSES AND IMPROVE THEIR OWN PROSPECTS AND THE LIVES OF THREE MILLION DEPENDENTS. OVER THE COURSE OF 2010, FINCA'S 7,000 EMPLOYEES DISBURSED OVER \$802 MILLION IN LOANS AVERAGING \$597 TO ITS CLIENTS, MORE THAN TWO-THIRDS OF WHOM ARE WOMEN. FINCA CLIENTS SAVED \$30.8 MILLION TO INVEST IN THEIR SMALL BUSINESSES, THEIR HOMES AND THE EDUCATION OF THEIR CHILDREN. FINCA MICROINSURANCE POLICIES PROTECTED NEARLY 1.1 MILLION CLIENTS AND FAMILY MEMBERS AROUND THE WORLD IN 2010. (CONTINUED IN SCHEDULE O.)

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

SEE SCHEDULE O

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 29,397,764.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	X	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		
20b			

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
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) and 501(c)(4) 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>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
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>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
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>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	X	
a 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> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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>	X	
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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

X

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

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

Check if Schedule O contains a response to any question 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; 1b Enter the number of voting members included in line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Does the organization have members or stockholders?; 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?; 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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 Does the organization have local chapters, branches, or affiliates?; 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13; 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done; 13 Does the organization have a written whistleblower policy?; 14 Does the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, CT, DC, DE, FL, GA, HI, IA; 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request; 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: CFO FINCA INTERNATIONAL, INC. - 202-682-1510 1101 14TH STREET, NW, 11TH FLOOR, WASHINGTON, DC 20005

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

Check if Schedule O contains a response to any question in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
ROBERT W. HATCH CHAIRMAN	10.00	X					0.	0.	0.	
JOHN K. HATCH SECRETARY & HISTORIAN	10.00	X					25,338.	0.	24,445.	
RICHARD M. WILLIAMSON ASSISTANT TREASURER	5.00	X					0.	0.	0.	
SHAWN HASSEL DIRECTOR	5.00	X					0.	0.	0.	
CARLOS CAMACHO, SR. DIRECTOR	5.00	X					0.	0.	0.	
JOHN ELKINS DIRECTOR	5.00	X					0.	0.	0.	
JO ANN FIELD DIRECTOR	5.00	X					0.	0.	0.	
MICHAEL GREEN DIRECTOR	5.00	X					0.	0.	0.	
AGRINA MUSSA DIRECTOR	5.00	X					0.	0.	0.	
SOLEDAD DELEON HURST DIRECTOR	5.00	X					0.	0.	0.	
HAROLD D. JASTRAM DIRECTOR	5.00	X					0.	0.	0.	
PAUL LEFORT DIRECTOR	5.00	X					0.	0.	0.	
JAMES SEMAKADDE DIRECTOR	5.00	X					0.	0.	0.	
RITA E. SPILLMAN DIRECTOR	5.00	X					0.	0.	0.	
DAVID E. WEISMAN DIRECTOR	5.00	X					0.	0.	0.	
RUPERT W. SCOFIELD PRESIDENT & CEO, DIRECTOR	50.00	X		X			369,473.	0.	26,949.	
VOLKER RENNEN VP & CHIEF OPERATIONS OFFICER	50.00			X			237,144.	0.	64,093.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(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			
DANE S. MCGUIRE CFO	50.00			X				100,619.	0.	6,683.
BRAULIO OLIVEIRA VP & CHIEF INFORMATION OFFICER	50.00			X				188,310.	0.	17,865.
ANTHONY SINGLETON VP & REGIONAL DIRECTOR	50.00			X				239,879.	0.	27,311.
DONALD CRANE VP & GENERAL COUNSEL	50.00			X				232,535.	0.	10,783.
SOLEDAD GOMPF VP NEW BUSINESS DEVELOPMENT	50.00			X				212,294.	0.	21,939.
JEFFREY A. FLOWERS VP & REGIONAL DIR-EURASIA	50.00			X				194,687.	0.	19,606.
YURIY SHULHAN VP & REGIONAL DIR-LATIN AMERICA	50.00			X				172,254.	0.	13,463.
GWEN ANDREOTTI VP OF H&BR	50.00			X				154,847.	0.	18,372.
TIMOTHY CHILDRESS DIRECTOR & GLOBAL CONTROLLER	50.00			X				152,388.	0.	12,777.
1b Sub-total								2,279,768.	0.	264,286.
c Total from continuation sheets to Part VII, Section A								1,072,546.	0.	109,505.
d Total (add lines 1b and 1c)								3,352,314.	0.	373,791.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **30**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
THE PRODUCTION ADVANTAGE, 14120 SULLYFIELD CIR. STE C, CHANTILLY, VA 20151	PRINTING & MAILING	3,041,571.
MELING & ASSOCIATES, 561/2 MERCHANTS ROW, STE 211, RYTLAND, VT 05701	MAILING	544,801.
THE GLOVER PARK GRP. LLC, 1025 F. STREET NW 8TH FLOOR, WASHINGTON, DC 20004	CONSULTING	287,483.
MCGLADREY & PULLEN, 1501 M STREET NW, STE 340, WASHINGTON, DC 20005	ACCOUNTING	277,950.
HOUTHOFF BURUMA, POSTBUS 75505, 1070 AM, AMSTERDAM, NETHERLANDS 1082	LEGAL	258,512.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **12**

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	952,402.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,913,742.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	14,362,829.				
	g Noncash contributions included in lines 1a-1f: \$		121,040.				
	h Total. Add lines 1a-1f		19,228,973.				
	Program Service Revenue	2 a INTEREST REV-BRANCHES	Business Code 900099	8,664,516.	8,664,516.		
b AFFILIATE FEES		900099	2,809,960.	2,809,960.			
c INTEREST REV-FCF		900099	1,731,754.	1,731,754.			
d							
e							
f All other program service revenue		900099	4,377,842.	4,377,842.			
g Total. Add lines 2a-2f			17,584,072.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,389,351.	1,389,351.			
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses	1,420,790.				
		c Gain or (loss)	-1,420,790.				
	d Net gain or (loss)		-1,420,790.	-1,420,790.			
	8 a Gross income from fundraising events (not including \$ 952,402. of contributions reported on line 1c). See Part IV, line 18	a	49,000.				
		b Less: direct expenses	520,956.				
c Net income or (loss) from fundraising events			-471,956.			-471,956.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a LIABILITY WRITE OFF	900099	506,342.	506,342.				
b MEXICO INSURANCE UBI	900099	26,128.		26,128.			
c							
d All other revenue							
e Total. Add lines 11a-11d		532,470.					
12 Total revenue. See instructions.		36,842,120.	18,058,975.	26,128.	-471,956.		

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,785,796.	1,643,370.	1,077,018.	65,408.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,872,357.	6,352,109.	2,356,317.	163,931.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	147,890.	84,032.	59,794.	4,064.
9 Other employee benefits	2,088,987.	1,257,587.	770,267.	61,133.
10 Payroll taxes	660,623.	448,393.	196,600.	15,630.
11 Fees for services (non-employees):				
a Management				
b Legal	358,738.	346,045.	12,693.	
c Accounting	349,681.	31,386.	318,295.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	32,971.			32,971.
f Investment management fees				
g Other	3,889,147.	3,049,906.	839,241.	
12 Advertising and promotion	48,625.	48,625.		
13 Office expenses	2,728,421.	989,971.	174,118.	1,564,332.
14 Information technology	336,724.	226,351.	110,373.	
15 Royalties				
16 Occupancy	1,133,793.	794,090.	339,703.	
17 Travel	2,041,388.	1,466,621.	488,830.	85,937.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	297,784.	182,162.	113,945.	1,677.
20 Interest	4,400,280.	3,642,954.	757,326.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	547,768.	249,686.	298,082.	
23 Insurance	64,930.	25,532.	39,398.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a LOAN CAPITAL	4,466,220.	4,466,220.		
b BAD DEBT EXP & ALLOWANC	1,619,898.	1,070,654.	549,244.	
c EQUIPMENT MAINT/VEHICLE	969,871.	862,097.	107,774.	
d DONATION EXPENSES	10,000.		10,000.	
e G & A ALLOCATIONS	0.	2,151,530.	-2,151,530.	
f All other expenses	976,793.	8,443.		968,350.
25 Total functional expenses. Add lines 1 through 24f	38,828,685.	29,397,764.	6,467,488.	2,963,433.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	5,313,100.	1	4,996,677.	
	2 Savings and temporary cash investments	27,176,412.	2	18,287,189.	
	3 Pledges and grants receivable, net	6,376,455.	3	35,035.	
	4 Accounts receivable, net	2,641,767.	4	3,739,364.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 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)		6		
	7 Notes and loans receivable, net	81,181,886.	7	57,566,473.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	649,115.	9	338,112.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,102,017.			
	b Less: accumulated depreciation	10b 1,837,044.	1,396,220.	10c 264,973.	
	11 Investments - publicly traded securities	10,035.	11	9,308.	
	12 Investments - other securities. See Part IV, line 11	1,207,592.	12	2,421,213.	
	13 Investments - program-related. See Part IV, line 11	32,536,223.	13	43,053,820.	
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	420,342.	15	237,157.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	158,909,147.	16	130,949,321.		
Liabilities	17 Accounts payable and accrued expenses	12,887,432.	17	8,040,657.	
	18 Grants payable		18		
	19 Deferred revenue	15,497,198.	19	11,169,160.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 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	63,943,692.	23	49,919,443.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D	3,725,918.	25	4,924,003.	
	26 Total liabilities. Add lines 17 through 25	96,054,240.	26	74,053,263.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	58,186,043.	27	54,384,971.	
	28 Temporarily restricted net assets	4,668,864.	28	2,511,087.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 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	62,854,907.	33	56,896,058.	
34 Total liabilities and net assets/fund balances	158,909,147.	34	130,949,321.		

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	36,842,120.
2	Total expenses (must equal Part IX, column (A), line 25)	2	38,828,685.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,986,565.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	62,854,907.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,972,284.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	56,896,058.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis		
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?	X	
3b	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.	X	

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	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, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	45,128,168.	49,226,429.	27,994,081.	25,535,820.	19,228,973.	167,113,471.
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	45,128,168.	49,226,429.	27,994,081.	25,535,820.	19,228,973.	167,113,471.
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)						
6 Public support. Subtract line 5 from line 4.						167,113,471.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	45,128,168.	49,226,429.	27,994,081.	25,535,820.	19,228,973.	167,113,471.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,048,799.	8,098,324.	8,236,267.	5,153,466.	1,389,351.	34,926,207.
9 Net income from unrelated business activities, whether or not the business is regularly carried on					26,128.	26,128.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					506,342.	506,342.
11 Total support. Add lines 7 through 10						202,572,148.
12 Gross receipts from related activities, etc. (see instructions)					12	
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	82.50	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	81.74	%
16a 33 1/3% support test - 2010. 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			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2009. 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			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2010. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
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			<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 IV.)						
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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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

b 33 1/3% support tests - 2009. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**

OMB No. 1545-0047

2010

Name of the organization

FINCA INTERNATIONAL, INC.

Employer identification number

13-3240109

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/> <hr/>	\$ 3,770,521.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	<hr/> <hr/> <hr/> <hr/>	\$ 927,715.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	<hr/> <hr/> <hr/> <hr/>	\$ 757,767.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	<hr/> <hr/> <hr/> <hr/>	\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<hr/> <hr/> <hr/> <hr/>	<hr/> <hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
--	---

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
--	---

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

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" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

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

Form for Part II Conservation Easements. Includes checkboxes for purposes of easements, a table for held at the end of the tax year (2a-2d), and questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for revenues and assets.

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 XIV.
- 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" to 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 XIV and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(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		224,247.	222,122.	2,125.
d Equipment		1,877,770.	1,614,922.	262,848.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				264,973.

Part VII Investments - Other Securities. 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)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) INVESTMENT IN SUBSIDIARIES	43,053,820.	COST
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶	43,053,820.	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) DEFERRED DEFINED PENSION OBLIGATION	3,923,648.
(3) OTHER LIABILITIES	1,000,355.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	4,924,003.

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	36,842,120.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	38,828,685.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-1,986,565.
4	Net unrealized gains (losses) on investments	4	-1,885,641.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-2,086,643.
9	Total adjustments (net). Add lines 4 through 8	9	-3,972,284.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-5,958,849.

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

1	Total revenue, gains, and other support per audited financial statements	1	35,561,634.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-1,885,641.
b	Donated services and use of facilities	2b	1,208,434.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	-1,124,235.
e	Add lines 2a through 2d	2e	-1,801,442.
3	Subtract line 2e from line 1	3	37,363,076.
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 XIV.)	4b	-520,956.
c	Add lines 4a and 4b	4c	-520,956.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	36,842,120.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	40,558,075.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,208,434.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	1,208,434.
3	Subtract line 2e from line 1	3	39,349,641.
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 XIV.)	4b	-520,956.
c	Add lines 4a and 4b	4c	-520,956.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	38,828,685.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: FINCA ADOPTED THE PROVISIONS OF ASC 740-10, INCOME

TAXES, (WHICH INCLUDES FIN 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES)

ON JANUARY 1, 2009. UNDER ASC 740-10, AN ORGANIZATION MUST RECOGNIZE THE

TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES

WHEN IT IS MORE-LIKELY-THAN-NOT THAT THE POSITION WILL BE SUSTAINED. THE

IMPLEMENTATION OF ASC 740-10 HAD NO IMPACT ON FINCA'S FINANCIAL

STATEMENTS. FINCA DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX

BENEFITS THAT SHOULD BE RECORDED. NO INTEREST OR PENALTIES WERE ACCRUED

Part XIV Supplemental Information (continued)

AS OF JULY 1, 2007 AS A RESULT OF THE ADOPTION OF ASC 740-10. FOR THE

YEARS ENDED DECEMBER 31, 2010 AND 2009, THERE WERE NO INTEREST OR

PENALTIES RECORDED OR INCLUDED IN THE STATEMENTS OF ACTIVITIES. FINCA IS

NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OR

LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2007.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

PENSION SERVICE COSTS -1,124,235.

ELIMINATION ENTRY OF THE FCF EQUITY -500,000.

FOREIGN CURRENCY TRANSLATION -462,408.

TOTAL TO SCHEDULE D, PART XI, LINE 8 -2,086,643.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PENSION SERVICE COSTS -1,124,235.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

EVENT DIRECT EXPENSES -520,956.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

EVENT DIRECT EXPENSES -520,956.

**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.

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 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
RUSSIA & THE NEWLY INDEPENDENT STATES -	1	22	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	1,480,351.
RUSSIA & THE NEWLY INDEPENDENT STATES -	0	0	INVESTMENT	INVESTMENT	21,373,686.
EUROPE (INCLUDING ICELAND & GREENLAND) -	1	260	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	7,330,350.
MIDDLE EAST AND NORTH AFRICA -	0	2	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	438,923.
MIDDLE EAST AND NORTH AFRICA -	0	0	INVESTMENT	INVESTMENT	1,683,144.
SOUTH ASIA - AFGHANISTAN, BANGLADESH,	0	6	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	533,176.
SOUTH ASIA - AFGHANISTAN, BANGLADESH,	0	0	INVESTMENT	INVESTMENT	100,000.
SUB-SAHARAN AFRICA - ANGOLA,	1	8	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	8,148,953.
3 a Sub-total	3	298			41,088,583.
b Total from continuation sheets to Part I	2	22			31,362,998.
c Totals (add lines 3a and 3b)	5	320			72,451,581.

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

Schedule F (Form 990) 2010

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(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 - ANGOLA,	0	0	INVESTMENT	INVESTMENT	10,373,353.
CENTRAL AMERICA AND THE CARIBBEAN -	1	18	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	8,506,829.
CENTRAL AMERICA AND THE CARIBBEAN -	0	0	INVESTMENT	INVESTMENT	6,743,432.
SOUTH AMERICA - ARGENTINA, BOLIVIA,	0	3	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	1,008,977.
SOUTH AMERICA - ARGENTINA, BOLIVIA,	0	0	INVESTMENT	INVESTMENT	2,776,096.
NORTH AMERICA - CANADA AND MEXICO, BUT	1	1	PROGRAM SERVICES	FINANCIAL SERVICES TO THE POOR	1,950,204.
NORTH AMERICA - CANADA AND MEXICO, BUT	0	0	INVESTMENT	INVESTMENT	4,107.
Totals	2	22			31,362,998.

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 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, 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2010

Part II Fundraising Events. Complete if the organization answered "Yes" to 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.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		GALA (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	1,001,402.			1,001,402.
	2 Less: Charitable contributions	952,402.			952,402.
	3 Gross income (line 1 minus line 2)	49,000.			49,000.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	14,750.			14,750.
	6 Rent/facility costs	269,785.			269,785.
	7 Food and beverages	85,888.			85,888.
	8 Entertainment	19,000.			19,000.
	9 Other direct expenses	131,533.			131,533.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(520,956)
	11 Net income summary. Combine line 3, column (d), and line 10				-471,956.

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

		(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				
	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)				()	
8 Net gaming income summary. Combine line 1, column d, and line 7					

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

a Is the organization licensed to operate 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 operate 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 operated 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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to 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).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: LAMB CONSULTING, INC.

(I) ADDRESS OF FUNDRAISER:

C/O CRAIG LAMB, 117 1/2 MARTINEZ STREET, SANTA FE, NM 87501

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

FINCA INTERNATIONAL, INC.

Employer identification number

13-3240109

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) 2010

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 in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(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 reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 RUPERT W. SCOFIELD	(i)	315,919.	53,554.	0.	19,740.	7,209.	396,422.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 VOLKER RENNER	(i)	212,532.	0.	24,612.	15,114.	48,979.	301,237.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 BRAULIO OLIVEIRA	(i)	183,310.	5,000.	0.	385.	17,480.	206,175.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 ANTHONY SINGLETON	(i)	202,431.	37,448.	0.	15,504.	11,807.	267,190.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 DONALD CRANE	(i)	212,535.	20,000.	0.	3,574.	7,209.	243,318.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 SOLEDAD GOMPF	(i)	135,844.	76,450.	0.	10,583.	11,356.	234,233.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 JEFFREY A. FLOWERS	(i)	151,555.	17,500.	25,632.	10,438.	9,168.	214,293.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 YURIY SHULHAN	(i)	101,979.	37,525.	32,750.	0.	13,463.	185,717.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 GWEN ANDREOTTI	(i)	151,097.	3,750.	0.	12,271.	6,101.	173,219.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 TIMOTHY CHILDRESS	(i)	152,388.	0.	0.	1,094.	11,683.	165,165.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 SCOTT TINDALL	(i)	145,655.	0.	0.	0.	9,259.	154,914.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 CHIKAKO KUNO	(i)	178,260.	20,000.	0.	0.	11,452.	209,712.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 LEONARDO POLIT	(i)	167,208.	4,200.	2,788.	1,110.	14,948.	190,254.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 EDUARDO ROMAN	(i)	109,325.	0.	35,052.	0.	8,096.	152,473.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 TIMOTHY TARRANT	(i)	144,377.	0.	1,101.	8,741.	13,589.	167,808.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16 MARIA V. VILETA	(i)	139,954.	0.	0.	11,088.	8,309.	159,351.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 1A: FINCA ALSO MAINTAINS A DEFERRED COMPENSATION AGREEMENT

FOR CERTAIN OFFICERS AND DIRECTORS, WHICH PROVIDES BENEFITS PAYABLE UPON

RETIREMENT FROM FINCA. FOR 2010, FINCA PROVIDED A TAX GROSS-UP PAYMENT TO

A PLAN PARTICIPANT TO ASSIST WITH TAX PAYMENTS WITH RESPECT TO THE

INCLUSION OF THE PRESENT VALUE OF THE BENEFIT DUE FOR PAST SERVICES.

HOUSING ALLOWANCE IS FOR HOUSING ALLOWANCE PAID TO OUR EXPATRIATES LIVING

IN THE COUNTRIES OUTSIDE THE UNITED STATES FOR WORK AT OUR AFFILIATE

OFFICES. THE ABOVE BENEFITS ARE TREATED AS TAXABLE COMPENSATION.

PART I, LINE 4B: SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN: JOHN

HATCH - \$45,000

PART I, LINE 6: FINCA INTERNATIONAL HAS AN ESTABLISHED INCENTIVE PLAN

PROGRAM THAT PAYS AN ANNUAL BONUS THAT USES BOTH FINANCIAL AND

NON-FINANCIAL CRITERIA. ONE OF THE FINANCIAL CRITERIA IS BASED UPON NET

OPERATING MARGIN OF THE SUBSIDIARY WHICH IS CALCULATED AS TOTAL INCOME FROM

OPERATIONS LESS TOTAL EXPENSES FROM OPERATIONS FOR THE PERIOD. THE

FOLLOWING PARTICIPATE IN THE PROGRAM: ANTHONY SINGLETON, SOLEDAD GOMPF,

JEFFREY FLOWERS, YUNI SHULHAN, LEONARDO POLIT, TIMMOTHY TARRANT AND MIKE

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

GAM-LOBO.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
▶ Attach to Form 990.**

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	9,057	121,040.	FMV
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 ▶ (_____)				
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**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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?		X
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?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
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.		

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

Schedule M (Form 990) (2010)

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE M, LINE 32B: FINCA USES CHARLES SCHWAB BROKER SERVICES TO
SELL DONATED SECURITIES.

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2010

Open to Public
Inspection

Name of the organization **FINCA INTERNATIONAL, INC.** Employer identification number **13-3240109**

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

FINCA'S SUCCESS IN DELIVERING FINANCIAL SERVICES TO THE WORLD'S

LOWEST-INCOME ENTREPRENEURS HINGES, IN PART, ON THE FORMATION OF A

NETWORK OF INDEPENDENT FINANCIAL ENTITIES, WHICH PERMITS FINCA TO

ACCEPT SAVINGS DEPOSITS AND PROVIDE A RANGE OF FINANCIAL SERVICES TO

ITS CLIENTS. WHILE ALL PROGRAMS ARE ALL CONTROLLED BY THE FINCA,

PURSUANT TO IRS REGULATIONS, REVENUE AND EXPENSES INCLUDED IN THIS FORM

990 ONLY REFLECT ACTIVITIES UNDERTAKEN DIRECTLY BY THE US-BASED 501C3.

FINCA'S CONSOLIDATED FINANCIAL STATEMENTS MORE ACCURATELY REPRESENT THE

BREADTH OF THE ORGANIZATION'S INTERNATIONAL NETWORK OF 21 PROGRAMS.

AS DESCRIBED ELSEWHERE IN PARTS VIII AND IX OF THIS FORM 990, THE 501C3

HAD REVENUE OF \$36,842,120 AND EXPENSES OF \$32,828,685 IN 2010. AS

REPRESENTED IN FINCA'S CONSOLIDATED FINANCIAL STATEMENT, THE FINCA

NETWORK HAD REVENUE (INCLUDING PROGRAM SERVICE INCOME, GRANTS AND

DONATIONS) IN EXCESS OF \$156 MILLION AND EXPENSES OF JUST OVER \$143

MILLION. HIGHLIGHTS FROM FINCA'S CONSOLIDATED FINANCIAL STATEMENTS ARE

PRESENTED BELOW AND ON THE NEXT PAGE. COPIES OF FINCA'S CONSOLIDATED

FINANCIAL STATEMENTS ARE AVAILABLE AT WWW.FINCA.ORG.

2010 FINCA CONSOLIDATED FINANCIAL STATEMENTS:

REVENUE

PRIMARY REVENUE \$ 151,674,069

CONTRIBUTIONS \$ 21,328,536

PROGRAM SERVICES \$ 130,345,533

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

Schedule O (Form 990 or 990-EZ) (2010)

032211
01-24-11

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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MEMBERSHIP \$ 0

OTHER REVENUE \$ 1,385,183

TOTAL REVENUE \$153,059,252

FUNCTIONAL EXPENSES

PROGRAM EXPENSES \$ 133,080,007

ADMINISTRATIVE EXPENSES \$ 6,467,488

FUNDRAISING EXPENSES \$ 3,484,391

PAYMENTS TO AFFILIATES \$ 0

TOTAL FUNCTIONAL EXPENSES \$ 143,031,885

EXCESS (OR DEFICIT) \$ 10,027,367

INDIRECT COST ALLOCATION \$ 2,151,530

BALANCE SHEET

ASSETS \$496,025,630

LIABILITIES \$365,555,842

NET ASSETS \$130,469,788

WORKING CAPITAL \$130,469,788

AS THE RATING ISSUED TO FINCA BY CHARITY NAVIGATOR ONLY CONSIDERS

INFORMATION REPORTED ON THIS FORM 990, THE CHARITY NAVIGATOR RATING

MISREPRESENTS FINCA'S EFFECTIVENESS IN STEWARDING DONOR CONTRIBUTIONS.

FOR EXAMPLE, CHARITY NAVIGATOR CONSIDERS FINCA'S FULL ADMINISTRATIVE

EXPENSES IN MANAGING ITS NETWORK OF 21 COUNTRIES BUT DOES NOT CONSIDER

PROGRAM EXPENSES FOR ITS ESTABLISHED INDEPENDENT FINANCIAL ENTITIES,

WHICH ACCOUNT FOR MORE THAN TWO THIRDS OF FINCA'S OVERALL PROGRAM

EXPENSES. TO LEARN MORE ABOUT THIS ISSUES AND FINCA'S FINANCIAL MODEL,

PLEASE VIEW FINCA'S ANNUAL REPORT AVAILABLE AT WWW.FINCA.ORG.

032212
01-24-11

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:

FINCA'S IMPACT:

THE MOST PROFOUND IMPACT OF FINCA'S WORK LIES IN ITS ABILITY TO UNLOCK

HUMAN CAPITAL AND MAKE IT PRODUCTIVE. OVER TIME, FINCA FACILITATES

FINANCIAL AND SOCIAL INCLUSION BY CONNECTING IMPOVERISHED INDIVIDUALS

TO THE FORMAL FINANCIAL SECTOR, PROVIDING EVEN THE LEAST WELL-OFF WITH

THE MEANS TO ESCAPE POVERTY AND ACHIEVE FINANCIAL INDEPENDENCE.

IN A 2010 SURVEY OF 749 FINCA CLIENTS IN RURAL AND PERI-URBAN AREAS OF

MALAWI, 36 PERCENT REPORTED THAT THEY HAD EITHER BEEN DENIED A LOAN

BEFORE BECOMING FINCA CLIENTS, OR HAD LACKED ACCESS TO LOANS. REALIZING

THE LIFE-CHANGING POTENTIAL OF HAVING ACCESS TO CAPITAL, A REMARKABLE

91 PERCENT PLANNED TO CONTINUE AS FINCA CLIENTS, AND 86 PERCENT SAID

THAT THEY WOULD RECOMMEND FINCA TO FRIENDS OR RELATIVES.

GOING BEYOND LOANS, BY PROVIDING LOW-INCOME HOUSEHOLDS WITH FINANCIAL

TOOLS THAT INCLUDE SAVINGS ACCOUNTS, INSURANCE PRODUCTS, AND THE

ABILITY TO SEND AND RECEIVE SMALL AMOUNTS OF CASH THROUGH SAFE AND

SECURE WIRE TRANSFER SERVICES, FINCA CLIENTS CAN BUILD ASSETS,

STABILIZE CONSUMPTION, AND CREATE FINANCIAL SAFETY NETS THAT CAN HELP

PROTECT THEIR FAMILIES AGAINST EXTERNAL SHOCKS. IN AGGREGATE, THESE

SERVICES HELP THE POOR IMPROVE THEIR LIVES, AND MAKE PLANNING FOR THE

FUTURE MORE REAL THAN EVER BEFORE.

THE LATEST STUDIES OF FINCA CLIENTS IN MEXICO SHOW AN INCREASE IN

CLIENT ASSETS ACROSS ALL CATEGORIES MEASURED, INDICATING THAT FINANCIAL

SERVICES ENABLE OUR CLIENTS TO IMPROVE THEIR LIVING STANDARDS WHILE

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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ALSO ACCUMULATING DURABLE ASSETS FOR THEIR BUSINESSES AND HOUSEHOLDS,

SOMETHING NEARLY UNHEARD OF IN POOR COMMUNITIES.

OWNERSHIP OF TRANSPORTATION ASSETS SUCH AS BICYCLES, MOTORCYCLES AND

PICKUP TRUCKS INCREASED SIGNIFICANTLY (30% ON AVERAGE BETWEEN 2007 AND

2009), INDICATING AN INCREASE IN MOBILITY, MAKING IT POSSIBLE FOR

FARMERS TO DELIVER THEIR PRODUCE TO MARKETS, AND PARENTS TO TAKE THEIR

CHILDREN TO SCHOOL. THIS GROWTH WAS ACCOMPANIED BY A 21% DECREASE IN

CLIENT TRANSPORTATION COSTS. BY SPENDING LESS ON TRANSPORTATION, OUR

CLIENTS CAN SPEND MORE ON HELPING THEIR CHILDREN EAT BETTER AND STAY IN

SCHOOL. THE NUMBER OF MEXICAN CLIENTS OWNING REFRIGERATORS AND WASHING

MACHINES BOTH OF WHICH ARE OFTEN USED BY CLIENTS IN THEIR BUSINESSES

AND THEIR HOUSEHOLDS, AND WHICH ARE SHOWN TO CONTRIBUTE TO IMPROVED

HEALTH AND TIME SAVINGS INCREASED BY 4 AND 12 PERCENT, RESPECTIVELY.

MICROENTERPRISES ARE ALSO CATALYSTS OF CHANGE FOR ENTIRE COMMUNITIES,

BRINGING EMPLOYMENT, CAPITAL, AND PRODUCTIVITY INTO POVERTY-STRICKEN

NEIGHBORHOODS AND VILLAGES AND HELPING TRIGGER ECONOMIC RECOVERY WHERE

IT IS NEEDED MOST. WHEN FINCA CLIENTS RECEIVE A LOAN IN SUPPORT OF

THEIR MICROENTERPRISE, THEY BECOME VEHICLES FOR LOCAL ECONOMIC

DEVELOPMENT, AS THE IMPACT OF THEIR INVESTMENTS FOR GROWTH RIPPLE

THROUGHOUT THEIR COMMUNITIES. THEY MAY PURCHASE RAW MATERIALS OR

SUPPLIES FROM A FELLOW MICROFINANCE CLIENT OR A WHOLESALER. THEY MAY

BUY A SEWING MACHINE, A BICYCLE OR A REFRIGERATOR FROM A DISTRIBUTOR.

THEY MAY RENT LAND, OR A MARKET STALL OR A SHOP, FROM A LANDLORD. THEY

MAY HIRE SOME OF THEIR NEIGHBORS TO HELP PRODUCE, TRANSPORT OR SELL

THEIR GOODS. AS THEY DO SO, THEY ARE LEVERAGING THEIR FINCA LOANS TO

HELP TRANSFORM BLIGHTED AREAS INTO VIBRANT COMMUNITIES, BUSTLING WITH

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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GRASSROOTS ECONOMIC ACTIVITY.

OF COURSE, ONE OF THE MOST IMPORTANT TRENDS THAT HAS EMERGED FROM
FINCA'S EXTENSIVE SOCIAL PERFORMANCE AND CLIENT RESEARCH HAS BEEN ITS
POWER TO GENERATE EMPLOYMENT. THIS DATA NOT ONLY SUGGESTS AN INCREASE
IN THE CLIENTS' STANDARD OF LIVING, BUT THE ENHANCEMENT OF THE LOCAL
ECONOMY. SURVEYS CONDUCTED IN 2010 OF MORE THAN 700 FINCA CLIENTS IN
MALAWI AND TANZANIA WHO OPERATE PRIMARILY AGRICULTURE-RELATED
BUSINESSES, FOUND THAT 26 PERCENT OF THEM HAD HIRED ONE OR MORE
NEIGHBORS AFTER RECEIVING THEIR FINCA LOANS. A SURVEY OF FINCA RUSSIA
CLIENTS IN 2007 FOUND THAT 35 PERCENT OF SOLIDARITY GROUP CLIENTS AND
60 PERCENT OF INDIVIDUAL LOAN CLIENTS EMPLOYED MORE THAN ONE PERSON FOR
THEIR BUSINESS ACTIVITIES.

IMPACTS INSIDE THE HOUSEHOLD ARE EQUALLY DRAMATIC. WE KNOW FROM FINCA
RESEARCH THAT, WHEN GIVEN THE FINANCIAL MEANS TO INCREASE THEIR INCOMES
AND IMPROVE THEIR FAMILIES' QUALITY OF LIFE, MOTHERS MAKE BETTER
NUTRITION FOR THEIR FAMILIES THEIR NUMBER ONE PRIORITY. WHEN ASKED HOW
MICROLOANS HAVE IMPACTED THEIR LIVES, WOMEN TYPICALLY RESPOND THAT THEY
CAN FEED THEIR CHILDREN MORE OFTEN, AND ARE ABLE TO ADD MORE VARIETY OF
FOODS TO THEIR DIETS. IN THE DEVELOPING WORLD, THAT CAN HAVE ENORMOUS,
LONG-LASTING IMPACT. A MULTIYEAR STUDY OF FINCA CLIENTS IN MEXICO (IN
WHICH 800 CLIENTS WERE SURVEYED IN 2007, AND 323 OF THEM WHO REMAINED
FINCA CLIENTS WERE INTERVIEWED AGAIN IN 2009) FOUND THAT:

* WHILE EIGHT PERCENT OF THE 323 CLIENTS REPORTED SURVIVING ON LESS
THAN TWO INTERNATIONAL DOLLARS PER DAY IN 2007, FIVE PERCENT OF THESE
CLIENTS RESURVEYED IN 2009 HAD MOVED ABOVE THE \$2 LEVEL OF DAILY PER

CAPITA EXPENDITURE.

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01-24-11

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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* MEXICAN CLIENTS REPORTING THAT THEY ALWAYS HAD ENOUGH OF THE TYPES OF FOOD THEY WANTED TO CONSUME INCREASED FROM 20 PERCENT IN 2007 TO 28 PERCENT IN 2009; AND

* CLIENTS WHO SAID THEY SOMETIMES, OR OFTEN, DID NOT HAVE ENOUGH FOOD DECLINED FROM 41 PERCENT TO 35 PERCENT.

FINALLY, FINCA CLIENTS OFTEN TELL US IT WAS OUR FAITH IN THEM TO MANAGE THEIR LOANS AND THEIR BUSINESSES WHICH LED TO THEIR ECONOMIC INDEPENDENCE, CREATING A SENSE OF DIGNITY AND PRIDE THEY HAD NEVER EXPERIENCED. THIS NEW SENSE OF SELF ESTEEM CAN TRANSFORM WOMEN'S POWER RELATIONSHIPS, RESULTING IN GREATER RESPECT FROM THEIR HUSBANDS AND CHILDREN, AND LAUNCHING THEM AS LEADERS IN THEIR SMALL COMMUNITIES.

ONE MEASURE OF THIS SENSE OF EMPOWERMENT CAN BE FOUND IN OUR CLIENTS REPORTING THEIR HEIGHTENED SENSE OF SELF-DETERMINATION. ASKED IN 2010 WHETHER THEY FELT ABLE TO MAKE IMPORTANT DECISIONS ON THEIR OWN THAT COULD CHANGE THE COURSE OF THEIR LIVES, 94 PERCENT OF 749 FINCA MALAWI CLIENTS SURVEYED REPLIED THAT THEY WERE TOTALLY (55 PERCENT) OR MOSTLY (39 PERCENT) ABLE TO MAKE THESE CRITICAL CHOICES INDEPENDENTLY. OF 2,326 CLIENTS SURVEYED IN ARMENIA, AZERBAIJAN, GEORGIA, KYRGYZSTAN, AND TAJIKISTAN IN 2007 AND 2008, 90 PERCENT REPORTED THAT THEY WERE TOTALLY (65 PERCENT) OR MOSTLY (25 PERCENT) ABLE TO MAKE IMPORTANT DECISIONS ON THEIR OWN.

FINCA'S EMPOWERMENT OF WOMEN IS EVIDENT IN OUR VILLAGE BANKING METHODOLOGY OF PEER-GUARANTEED LOANS FOR WOMEN GENERALLY STARTING VERY SMALL BUSINESSES, AS WELL AS OUR INDIVIDUAL LOAN PRODUCTS, WHICH PROVIDE THE ADDED ECONOMIC SUPPORT NEEDED TO OPEN LARGER BUSINESSES,

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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LIKE FLOWER SHOPS, RESTAURANTS OR BEAUTY SALONS. BOTH APPROACHES
EMPOWER WOMEN TO REALIZE THEIR DREAMS OF BUILDING THEIR BUSINESSES AND
PROVIDING THEIR FAMILIES WITH A BETTER LIFE. AS A RESULT, THEY CAN
BECOME LEADERS OF THEIR COMMUNITIES, AND SERVE AS ROLE MODELS TO
INSPIRE OTHER WOMEN. MOST IMPORTANT, THEY FIND THEIR OWN VOICES IN THEIR
HOMES WHERE THEIR HUSBANDS AND CHILDREN RESPECT AND LISTEN TO THEM.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

AFGHANISTAN, GEORGIA, TAJIKISTAN, JORDAN,
CANADA, UNITED KINGDOM, CAYMAN ISLANDS, UKRAINE,
GUATEMALA, HAITI, NICARAGUA, UGANDA,
MALAWI, CONGO, DEM REP, ECUADOR, KYRGYZSTAN,
TANZANIA, MEXICO, ZAMBIA, ARMENIA,
HONDURAS, EL SALVADOR, GEORGIA, RUSSIA,
AZERBAIJAN

FORM 990, PART VI, SECTION A, LINE 2: 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 ALL ARE MEMBERS OF
THE BOARD OF DIRECTORS AND MINOR SHAREHOLDERS FOR 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.

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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FORM 990, PART VI, SECTION A, LINE 6: UNDER FINCA'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 FOUR (4) 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.

FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS, AS DESCRIBED ABOVE, ELECT THE GOVERNING BODY OF FINCA, WHICH IS THE FINCA BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B: ANY DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY THE MEMBERS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS PRESENTED TO THE 990 REVIEW TEAM WHICH COMPRISES OF THE MANAGEMENT TEAM, THE GLOBAL CONTROLLER AND THE HQ CONTROLLER. THERE IS ALSO A REPRESENTATIVE OF THE COMPENSATION COMMITTEE PRESENT IN THE MANAGEMENT TEAM. THE MT REVIEWS THE DOCUMENT AND A MEETING IS SCHEDULED TO DISCUSS PENDING QUESTIONS WITH THE TAX PREPARERS. THIS PROCESS INCLUDES REVIEWING AND A FINAL APPROVAL OF ALL SECTIONS, SCHEDULES, CHECKLISTS AND ALL DISCLOSURES ON THE RETURN. A FINAL SIGNOFF OF THE FINAL DOCUMENT IS APPROVED BY ALL AT THE CLOSING REVIEW MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST ON AN ONGOING BASIS. CONFLICTS OF INTEREST ARE PROHIBITED BY THE FINCA CODE OF CONDUCT, AND PERSONNEL MANUAL, SUBJECT TO ANY EXCEPTIONS BASED ON A STANDARD OF

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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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 ACKNOWLEDGEMENT 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 INTEREST. THE ORGANIZATION UTILIZES ITS ANNUAL 990 QUESTIONNAIRES FOR ITS DIRECTORS AND OFFICERS (AS DETAILED WITHIN FROM 990) TO OBTAIN INFORMATION FOR FILING THE 990 AND TO REVIEW THE ORGANIZATIONS CODE OF CONDUCT.

FORM 990, PART VI, SECTION B, LINE 15: FINCA COMPENSATION COMMITTEE REVIEWS KEY PERSONAL COMPENSATION. AN INDEPENDENT CONSULTANT ADVISES THE COMPENSATION COMMITTEE. THE COMPENSATION COMMITTEE ALSO MAKES USE OF COMPENSATION SURVEYS AND DATA IN REVIEW AND APPROVAL. COMPENSATION DECISIONS ARE DOCUMENTED IN THE COMMITTEE'S MINUTES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK, AL, AR, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MS, MN, MO
MT, NC, ND, NE, NJ, NH, NM, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, WY

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND ITS OWN WEBSITE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

032212
01-24-11

Name of the organization FINCA INTERNATIONAL, INC.	Employer identification number 13-3240109
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NET UNREALIZED LOSSES ON INVESTMENTS:	-1,885,641.
UNAMORTIZED PENSION COSTS	-1,124,235.
ELIMINATION ENTRY OF THE FCF EQUITY	-500,000.
FOREIGN CURRENCY TRANSLATION	-462,408.
TOTAL TO FORM 990, PART XI, LINE 5	-3,972,284.

FORM 990, PART XII, LINE 2C

OVERSIGHT OF AUDIT

THERE HAVE BEEN NO CHANGES DURING THE YEAR IN THE PROCESS FOR OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS.

FORM 990, PART VI, LINE 13

WHISTLEBLOWER POLICY EXPLANATION

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 AND BUSINESS RESOURCES.

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization: **FINCA INTERNATIONAL, INC.**
Employer identification number: **13-3240109**

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN 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
FINCA LLC - 13-3240109 1101 14TH ST., NW 11TH FLOOR WASHINGTON, DC 20005	MICROFINANCE OPERATIONS	DISTRICT OF COLUMBIA	0.	0.	N/A
FINCA CAPITAL FUND LLC - 26-0648736 1101 14TH ST., NW 11TH FLOOR WASHINGTON, DC 20005	MICROFINANCE OPERATIONS	DISTRICT OF COLUMBIA	1,731,754.	15,223,849.	N/A
FINCA LICENSING & SUPPORT LLC 1101 14TH ST., NW 11TH FLOOR WASHINGTON, DC 20005	MICROFINANCE OPERATIONS	DELAWARE	0.	0.	N/A

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

(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
FINCA, USA - 52-2026830 1101 14TH STREET NW, FLOOR 11 WASHINGTON, DC 20005	MICROFINANCE OPERATIONS	MARYLAND	501(C)(3)	LINE 7	N/A		X
FINCA CHARITY FOUNDATION AGATANGEGHOS STREET, 2A YEREVAN, ARMENIA 0023	MICROFINANCE OPERATIONS	ARMENIA			N/A		X
FINCA MALAWI PLOT LK367, MICHIRU ROAD BLANTYRE, MALAWI	MICROFINANCE OPERATIONS	MALAWI			N/A		X
FINCA TANZANIA LIMITED PLOT 84, MOROGORO ROAD, MAGOMENI MWEMBE CHAI DAR ES SALAAM, TANZANIA	MICROFINANCE OPERATIONS	TANZANIA			N/A		X

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

Schedule R (Form 990) 2010

Part II Continuation of 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 organization?	
						Yes	No
FINCA HONDURAS							
COLONIA RUBEN DARIO, 3A CALLE, CASA							
TEGUCIGALPA, HONDURAS	MICROFINANCE OPERATIONS	HONDURAS			N/A		X
FINCA HAITI							
ANGLE RUE REBECCA ET LAMBERT							
PORT AU PRINCE, HAITI HE6110	MICROFINANCE OPERATIONS	HAITI			N/A		X
FINCA EL SALVADOR							
ALAMEDA ROOSEVELT #1807							
SAN SALVADOR, EL SALVADOR	MICROFINANCE OPERATIONS	EL SALVADOR			N/A		X
FINCA MEXICO							
CALLE DIAZ ORDAZ NO. 12, COL. CANTARRANAS							
CUERNAVACA, MEXICO 62448	MICROFINANCE OPERATIONS	MEXICO			N/A		X
FINCA GUATEMALA							
3A. CALLE 3-03 ZONA 10							
GUATEMALA CITY, GUATEMALA	MICROFINANCE OPERATIONS	GUATEMALA			N/A		X
FINCA NICARAGUA							
DE LA ROTONDA DEL GUEGUENSE, 3 CUADRAS AL LA							
MANAGUA, NICARAGUA	MICROFINANCE OPERATIONS	NICARAGUA			N/A		X
FINCA CANADA							
1S7 ADELAIDE STREET WEST SUITE 408							
TORONTO, CANADA 1 5 H4E7	MICROFINANCE OPERATIONS	CANADA			N/A		X
FINCA UK							
191 SPARROWS HERNE BUSHEY HEATH							
HERTFORDSHIRE, UNITED KINGDOM WDZ3 1A]	MICROFINANCE OPERATIONS	UNITED KINGDOM			N/A		X

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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) Disproportion- ate 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	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
FINCA UNIVERSAL CREDIT ORGANIZATION (ARMENIA) AGATANGEGHOS STREET, 2A YEREVAN, ARMENIA 0023	MICROFINANCE OPERATIONS	ARMENIA	YES	C CORP	8,713,600.	27,768,671.	100.00%
FINCA AZERBAIJAN LLC JAFAR JABBARLI STREET 44, CASPIAN PLAZA, 8TH FLOOR BAKU, AZERBAIJAN 1065	MICROFINANCE OPERATIONS	AZERBAIJAN/A		C CORP	31,174,000.	94,901,000.	100.00%
JSC MFO FINCA (GEORGIA) 71 VAZHA-PSHAVELA AVENUE, 3RD FLOOR, OFFICE 12 TBILISI, GEORGIA 0186	MICROFINANCE OPERATIONS	GEORGIA	YES	C CORP	8,560,797.	32,651,953.	100.00%
FINCA CLOSED JOINT STOCK COMPANY (KYRGYZSTAN) SHOPOKOVA STREET, 93/2 BISHKEK, KYRGYZSTAN 720021	MICROFINANCE OPERATIONS	KYRGYZSTAN	YES	C CORP	21,317,391.	55,999,000.	100.00%
FINCA MICRO-CREDIT COMPANY (RUSSIA) 111 REVOLUTSIONNAYA STREET SAMARA, RUSSIA 443079	MICROFINANCE OPERATIONS	RUSSIA	YES	C CORP	8,123,481.	25,703,522.	100.00%

Part IV Continuation of 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
FINCA MICRO-CREDIT DEPOSIT ORGANIZATION (TAJKISTAN) MUHAMMAD STR. 37 DUSHANBE, TAJIKISTAN 734013	MICROFINANCE OPERATIONS	TAJKISTAN	YES	C CORP	3,534,990.	8,256,450.	100.00%
FINCA DR CONGO SARL 1286 AVE TOMBALBAYE, ENTREE: AU COIN AVE COLONEL EBEBAY KINSHASA, CONGO, DEMO. REP. OF BP 13447	MICROFINANCE OPERATIONS	CONGO, DEMO. REP.	YES	C CORP	9,817,983.	23,054,465.	100.00%
FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE (UGANDA), PLOT 22 BEN KIWANUKA STREET, KAMPALA, UGANDA	MICROFINANCE OPERATIONS	UGANDA	YES	C CORP	7,071,182.	17,200,328.	100.00%
FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE-ZAMBIA LIMITED, P. O. BOX 50061, RIDGEWAY PLOT NO. 1215/3, LUSAKA, ZAMBIA	MICROFINANCE OPERATIONS	ZAMBIA	YES	C CORP	2,647,076.	4,902,904.	100.00%
BANCO PARA LA ASISTENCIA COMUNITARIA, FINCA S.A. (ECUADOR), AVDA. AMAZONAS N39-123 Y JOSE ARIZAGA, EDIFICIO AMAZONAS PLAZA, 9NO. PISO, QUITO, ECUADOR	MICROFINANCE OPERATIONS	ECUADOR	YES	C CORP	6,466,846.	33,031,901.	100.00%
SOCIEDAD FINANCIERA FINCA, S.A. (HONDURAS) COLONIA RUBEN DARIO, 3A CALLE, CASA 2316 TEGUCIGALPA, HONDURAS	MICROFINANCE OPERATIONS	HONDURAS	YES	C CORP	3,009,183.	7,667,194.	100.00%
FINCA AFGHANISTAN JOINT STOCK COMPANY HOUSE NO. 1132, STREET NO. 4, SHIRPOOR, DISTRICT 10 KABUL, AFGHANISTAN	MICROFINANCE OPERATIONS	AFGHANISTAN	YES	C CORP	879,893.	7,765,030.	100.00%
FINCA JORDAN SPECIALIZED MICRO LOANS COMPANY AL FARID BUILDING, 3RD FLOOR AMMAN, JORDAN	MICROFINANCE OPERATIONS	JORDAN	YES	C CORP	1,708,581.	6,840,305.	100.00%
FINANCIERA FINCA NICARAGUA, S.A. DE LA ROTONDA DEL GUEGUENSE, 3 CUADRAS AL LAGO, JUNTO MANAGUA, NICARAGUA	MICROFINANCE OPERATIONS	NICARAGUA	YES	C CORP	0.	1,965,197.	100.00%
FINCA AFRICA IT SERVICE CENTER ADAM HOUSE, PORTAL AVENUE PLOT 11, BLOCK B KAMPALA, UGANDA	MICROFINANCE OPERATIONS	UGANDA		C CORP	0.	0.	.00%
FINCA MICROFINANCE RESOURCE MAPLES & CALDER, UGLAND HOUSE, PO BOX 309 GT GEORGE TOWN, CAYMAN ISLANDS	MICROFINANCE OPERATIONS	CAYMAN ISLANDS		C CORP	0.	0.	.00%
MICRO-FINANCE SOLUTIONS, INC M&C CORP SRVS LTD, PO BOX 309 GT, UGLAND HOUSE, S CHURCH GEORGE TOWN, CAYMAN ISLANDS	MICROFINANCE OPERATIONS	CAYMAN ISLANDS	YES	C CORP	915,091.	1,331,907.	100.00%

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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?

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

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.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) FINCA DR CONGO SARL	A	54,738.FMV	
(2) FINCA DR CONGO SARL	P	60,909.FMV	
(3) FINCA DR CONGO SARL	R	170,184.FMV	
(4) FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE (MALAWI)	A	37,533.FMV	
(5) FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE (MALAWI)	P	54,553.FMV	
(6) FINCA TANZANIA LIMITED	A	35,890.FMV	

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)FINCA TANZANIA LIMITED	P	141,258.	FMV
(8)FUNDACION INTERNACIONAL PARA LA ASISTENCIA COMUNITARIA DE HONDURAS	R	88,684.	FMV
(9)FUNDACION INTERNACIONAL PARA LA ASISTENCIA COMUNITARIA DE HONDURAS	B	100,000.	FMV
(10)FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE (UGANDA)	A	149,212.	FMV
(11)FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE (UGANDA)	P	50,917.	FMV
(12)FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE-ZAMBIA LIMITED	A	26,377.	FMV
(13)FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE-ZAMBIA LIMITED	P	191,945.	FMV
(14)BANCO PARA LA ASISTENCIA COMUNITARIA,FINCA S.A. (ECUADOR)	A	235,111.	FMV
(15)BANCO PARA LA ASISTENCIA COMUNITARIA,FINCA S.A. (ECUADOR)	P	228,170.	FMV
(16)BANCO PARA LA ASISTENCIA COMUNITARIA,FINCA S.A. (ECUADOR)	D	2,250,000.	FMV
(17)ASOCIACION DE FOMENTO INTEGRAL COMUNITARIA DE EL SALVADOR	R	47,295.	FMV
(18)ASOCIACION DE FOMENTO INTEGRAL COMUNITARIA DE EL SALVADOR	P	128,422.	FMV
(19)MFSA GUATEMALA S.A	A	23,620.	FMV
(20)MFSA GUATEMALA S.A	R	100,923.	FMV
(21)MFSA GUATEMALA S.A	P	256,243.	FMV
(22)FINCA HAITI	A	67,638.	FMV
(23)FINCA HAITI	D	1,000,000.	FMV
(24)FINCA HAITI	P	9,631.	FMV

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) FINCA HAITI	R	55,968.	FMV
(8) FUNDACION INTEGRAL COMUNITARIA, AC (MEXICO)	A	-41,288.	FMV
(9) FUNDACION INTEGRAL COMUNITARIA, AC (MEXICO)	R	397,230.	FMV
(10) FUNDACION INTEGRAL COMUNITARIA, AC (MEXICO)	P	394,873.	FMV
(11) FINANCIERA FINCA NICARAGUA, S.A.	A	13,875.	FMV
(12) FINANCIERA FINCA NICARAGUA, S.A.	D	500,000.	FMV
(13) FINANCIERA FINCA NICARAGUA, S.A.	R	61,781.	FMV
(14) FINANCIERA FINCA NICARAGUA, S.A.	P	222,767.	FMV
(15) FINCA AZERBAIJAN LLC	A	544,057.	FMV
(16) FINCA AZERBAIJAN LLC	P	794,563.	FMV
(17) FINCA UNIVERSAL CREDIT ORGANIZATION (ARMENIA)	A	50,734.	FMV
(18) FINCA UNIVERSAL CREDIT ORGANIZATION (ARMENIA)	R	438,189.	FMV
(19) JSC MFO FINCA (GEORGIA)	A	180,386.	FMV
(20) JSC MFO FINCA (GEORGIA)	R	263,091.	FMV
(21) JSC MFO FINCA (GEORGIA)	P	148,663.	FMV
(22) JSC MFO FINCA (GEORGIA)	B	100,000.	FMV
(23) FINCA CLOSED JOINT STOCK COMPANY (KYRGYZSTAN)	A	474,746.	FMV
(24) FINCA CLOSED JOINT STOCK COMPANY (KYRGYZSTAN)	R	567,163.	FMV

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) FINCA CLOSED JOINT STOCK COMPANY (KYRGYZSTAN)	P	504,629.	FMV
(8) FINCA KOSOVO	R	298,497.	FMV
(9) FINCA KOSOVO	P	392,309.	FMV
(10) FINCA MICRO-CREDIT COMPANY (RUSSIA)	A	657,440.	FMV
(11) FINCA MICRO-CREDIT COMPANY (RUSSIA)	P	246,977.	FMV
(12) FINCA MICRO-CREDIT DEPOSIT ORGANIZATION (TAJIKISTAN)	A	80,060.	FMV
(13) FINCA MICRO-CREDIT DEPOSIT ORGANIZATION (TAJIKISTAN)	R	89,303.	FMV
(14) FINCA MICRO-CREDIT DEPOSIT ORGANIZATION (TAJIKISTAN)	P	309,624.	FMV
(15) FINCA MICRO-CREDIT DEPOSIT ORGANIZATION (TAJIKISTAN)	B	200,000.	FMV
(16) FINCA AFGHANISTAN JOINT STOCK COMPANY	R	204,513.	FMV
(17) FINCA AFGHANISTAN JOINT STOCK COMPANY	P	566,613.	FMV
(18) FINCA JORDAN SPECIALIZED MICRO LOANS COMPANY	B	542,100.	FMV
(19) FINCA JORDAN SPECIALIZED MICRO LOANS COMPANY	R	38,160.	FMV
(20) FINCA JORDAN SPECIALIZED MICRO LOANS COMPANY	P	412,071.	FMV
(21)			
(22)			
(23)			
(24)			

