DLN: 93493318004039 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable FINCA INTERNATIONAL INC □ Address change 13-3240109 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1201 15TH STREET NW 8TH FLOOR ☐ Amended return ☐ Application pending (202) 682-1510 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC $\,$ 20005 G Gross receipts \$ 32,538,514 Name and address of principal officer H(a) Is this a group return for RUPERT W SCOFIELD ☐Yes **☑**No subordinates? 1201 15TH STREET NW 8TH FLOOR H(b) Are all subordinates WASHINGTON, DC 20005 ☐ Yes ☐No ıncluded? **✓** 501(c)(3) ☐ 501(c)() **◄** (insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW FINCA ORG L Year of formation 1984 M State of legal domicile NY K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities ALLEVIATE POVERTY BY HELPING PEOPLE BUILD ASSETS, CREATE JOBS AND RAISE THEIR STANDARD OF LIVING Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 13 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 17 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 19,419 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 19,051,488 16,676,131 Ravenua 8,763,214 11,893,224 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 39,498,936 3,724,145 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,677,032 133,439 70,990,670 32,426,939 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 6,884,923 7,128,279 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 506,930 470,319 b Total fundraising expenses (Part IX, column (D), line 25) ▶4,014,136 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 53,753,832 14,567,065 61,145,685 22,165,663 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 9,844,985 10,261,276 Net Assets or Fund Balances Beginning of Current Year End of Year 165,912,111 154,709,979 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 50,388,468 51,469,849 22 Net assets or fund balances Subtract line 21 from line 20 . 104,321,511 114,442,262 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 2019-11-12 Signature of officer Sign Here INDA TOSCANO CHIEF FINANCIAL OFFICER Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00540589 Paid self-employed Firm's name ► DELOITTE TAX LLP Firm's EIN ► 86-1065772 Preparer Use Only Firm's address ▶ 695 TOWN CENTER DR STE 1000 Phone no (714) 436-7100 COSTA MESA, CA 92626 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)