

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047
2020
Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020

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

C Name of organization
SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
201 VENTURE CIRCLE

City or town, state or province, country, and ZIP or foreign postal code
NASHVILLE, TN 37228

D Employer identification number
62-1823596

E Telephone number
(615) 425-7171

G Gross receipts \$ 20,538,342

F Name and address of principal officer:
CLINT GWIN
201 VENTURE CIRCLE
NASHVILLE, TN 37228

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

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

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.PATHWAYLENDING.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1999

M State of legal domicile: TN

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO PROVIDE LENDING AND EDUCATIONAL SERVICES TO UNDERSERVED SMALL BUSINESSES.

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) | 3 | 8 |
| 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 6 |
| 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) | 5 | 51 |
| 6 Total number of volunteers (estimate if necessary) | 6 | 25 |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 27,647 |
| b Net unrelated business taxable income from Form 990-T, line 39 | 7b | 0 |

| | Prior Year | Current Year |
|--|------------|--------------|
| 8 Contributions and grants (Part VIII, line 1h) | 6,533,706 | 12,388,380 |
| 9 Program service revenue (Part VIII, line 2g) | 6,849,204 | 7,641,018 |
| 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 682,455 | 348,367 |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | -64,009 | 36,204 |
| 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 14,001,356 | 20,413,969 |

| | | |
|---|------------|------------|
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 5,972,746 |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 5,172,364 | 5,855,901 |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,838 | | |
| 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 5,007,480 | 6,823,738 |
| 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 10,179,844 | 18,652,385 |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 3,821,512 | 1,761,584 |

| | Beginning of Current Year | End of Year |
|--|---------------------------|-------------|
| 20 Total assets (Part X, line 16) | 188,207,333 | 190,692,663 |
| 21 Total liabilities (Part X, line 26) | 155,844,196 | 156,567,942 |
| 22 Net assets or fund balances. Subtract line 21 from line 20 | 32,363,137 | 34,124,721 |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer: *****
Date: 2021-05-15
CLINT GWIN PRESIDENT
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2021-05-14
Check if self-employed PTIN: P00713593
Firm's name ▶ KRAFTCPAS PLLC Firm's EIN ▶ 62-0713250
Firm's address ▶ 555 GREAT CIRCLE ROAD Phone no. (615) 242-7351
NASHVILLE, TN 37228

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO PROVIDE LENDING SOLUTIONS AND EDUCATIONAL SERVICES THAT SUPPORTS THE DEVELOPMENT, GROWTH, AND PRESERVATION OF UNDERSERVED SMALL BUSINESSES, AFFORDABLE HOUSING, AND SUSTAINABLE COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 16,199,404 including grants of \$ 5,972,746) (Revenue \$ 7,966,504)
See Additional Data

4b (Code:) (Expenses \$ 1,758,395 including grants of \$) (Revenue \$ 25,012)
See Additional Data

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 ► 17,957,799

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

| | | Yes | No | |
|------------|--|-----|-----|----|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | Yes | |
| 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> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| 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? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | | No |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | No |
| 26 | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | Yes | |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | | No |
| b | A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | | No |
| c | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | Yes | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | | No |
| 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> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | Yes | |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 | | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | | |
| 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> | 36 | | No |
| 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> | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. | 38 | Yes | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

| | | Yes | No | |
|-----------|--|-----|-----|--|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 92 | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 7 Organizations that may receive deductible contributions under section 170(c). 8 Sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. 10 Section 501(c)(7) organizations. 11 Section 501(c)(12) organizations. 12a Section 4947(a)(1) non-exempt charitable trusts. 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 14a Did the organization receive any payments for indoor tanning services during the tax year? 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (8), 1b (6), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed TN
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: BARBARA HARRIS 201 VENTURE CIRCLE NASHVILLE, TN 37228 (615) 425-7171

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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 (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|--|---|-----------------------|---------|--------------|------------------------------|---------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) CLINT GWIN PRESIDENT AND CEO | 60.00 | | | X | | | 443,549 | 0 | 9,991 | |
| (2) HANK HELTON EXECUTIVE VICE PRESIDENT | 60.00 | | | X | | | 270,436 | 0 | 21,998 | |
| (3) BARBARA HARRIS EXECUTIVE VICE PRESIDENT AND CFO | 60.00 | | | X | | | 269,865 | 0 | 19,012 | |
| (4) AMY BUNTON EXECUTIVE VICE PRESIDENT AND COO | 60.00 | | | X | | | 266,225 | 0 | 18,359 | |
| (5) JOE AGNETTA SVP, CHIEF CREDIT OFFICER | 50.00 | | | | X | | 189,871 | 0 | 13,401 | |
| (6) DANIEL WILSON SVP OF LENDING OPERATIONS | 50.00 | | | | | X | 147,584 | 0 | 8,209 | |
| (7) KEITH HICKEY REGIONAL LENDER | 50.00 | | | | | X | 140,814 | 0 | 8,659 | |
| (8) ROBERT LANCASTER DIRECTOR OF ADVISORY SERVICES | 50.00 | | | | | X | 131,626 | 0 | 5,825 | |
| (9) LORI ROCHELLE SVP OF CORPORATE OPERATIONS | 50.00 | | | | | X | 125,613 | 0 | 16,049 | |
| (10) PAUL HOFFMANN SVP, DIRECTOR OF POLICY AND IMPACTS | 50.00 | | | | | X | 124,379 | 0 | 10,665 | |
| (11) TOM HUNTER CHAIRMAN | 1.50 | X | | X | | | 0 | 0 | 0 | |
| (12) JON DAVIES VICE CHAIRMAN | 1.50 | X | | X | | | 0 | 0 | 0 | |
| (13) DAVE BEREZOV DIRECTOR | 1.50 | X | | | | | 0 | 0 | 0 | |
| (14) HERB BYRD III DIRECTOR | 1.50 | X | | | | | 0 | 0 | 0 | |
| (15) IVANETTA DAVIS-SAMUELS DIRECTOR | 1.50 | X | | | | | 0 | 0 | 0 | |
| (16) ANDRE GIST DIRECTOR | 1.50 | X | | | | | 0 | 0 | 0 | |
| (17) CINDY HERRON DIRECTOR | 1.50 | X | | | | | 0 | 0 | 0 | |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations | |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|--|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | | |
| (18) HUGH QUEENER DIRECTOR | 1.50 | X | | | | | | 0 | 0 | 0 | |
| 1b Sub-Total ▶ | | | | | | | | | | | |
| c Total from continuation sheets to Part VII, Section A ▶ | | | | | | | | | | | |
| d Total (add lines 1b and 1c) ▶ | | | | | | | | 2,109,962 | 0 | 132,168 | |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 16

| | 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> | | No |
| 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> | Yes | |
| 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> | | No |

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. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|----------------------------------|---------------------|
| ACUMEN TECHNOLOGY 2699 FESSEY COURT STE 200 NASHVILLE, TN 37204 | TECHNOLOGY SUPPORT AND EQUIPMENT | 177,953 |
| BAKER DONELSON BEARMAN CALDWELL & BER 165 MADISON AV STE 2000 MEMPHIS, TN 38103 | LEGAL SERVICES | 141,874 |
| | | |
| | | |

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

Part VIII Statement of Revenue

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

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|---|--|---|----------------------|--|---|--|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e | 7,840,875 | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 4,547,505 | | | |
| | g Noncash contributions included in lines 1a - 1f:\$ | 1g | | | | |
| | h Total. Add lines 1a-1f | | | 12,388,380 | | |
| Program Service Revenue | 2a LOAN INTEREST | Business Code | | | | |
| | | 900099 | 7,039,240 | 7,039,240 | | |
| | b FINANCING FEES AND CHARGES | 900099 | 419,332 | 419,332 | | |
| | c FEE INCOME | 900099 | 182,446 | 182,446 | | |
| | d | | | | | |
| | e | | | | | |
| | f All other program service revenue. | | | | | |
| g Total. Add lines 2a-2f. | | 7,641,018 | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 350,498 | 350,498 | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | 6a Gross rents | (i) Real | 157,194 | | | |
| | | (ii) Personal | | | | |
| | | 6b Less: rental expenses | 120,990 | | | |
| | c Rental income or (loss) | 6c | 36,204 | | | |
| | d Net rental income or (loss) | | | 36,204 | 27,647 | 8,557 |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities | | | 1,252 | |
| | | (ii) Other | | | | |
| | | b Less: cost or other basis and sales expenses | 7b | | 3,383 | |
| | c Gain or (loss) | 7c | | -2,131 | | |
| | d Net gain or (loss) | | | -2,131 | | -2,131 |
| | 8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | |
| | | b Less: direct expenses | 8b | | | |
| c Net income or (loss) from fundraising events | | | | | | |
| 9a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | |
| | b Less: direct expenses | 9b | | | | |
| c Net income or (loss) from gaming activities | | | | | | |
| 10a Gross sales of inventory, less returns and allowances | 10a | | | | | |
| | b Less: cost of goods sold | 10b | | | | |
| c Net income or (loss) from sales of inventory | | | | | | |
| 11a Miscellaneous Revenue | | Business Code | | | | |
| b | | | | | | |
| c | | | | | | |
| d All other revenue | | | | | | |
| e Total. Add lines 11a-11d | | | | | | |
| 12 Total revenue. See instructions | | | 20,413,969 | 7,991,516 | 27,647 | 6,426 |

Part IX Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 5,496,233 | 5,496,233 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | 476,513 | 476,513 | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,522,706 | 1,071,229 | 451,374 | 103 |
| 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 | 3,627,655 | 3,531,966 | 94,464 | 1,225 |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 81,888 | 80,088 | 1,770 | 30 |
| 9 Other employee benefits | 286,472 | 261,086 | 25,304 | 82 |
| 10 Payroll taxes | 337,180 | 301,628 | 35,464 | 88 |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 168,465 | 161,432 | 7,033 | |
| c Accounting | 37,000 | 33,300 | 3,700 | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 769,196 | 736,519 | 32,677 | |
| 12 Advertising and promotion | 2,290 | 2,130 | 160 | |
| 13 Office expenses | 164,438 | 156,446 | 7,992 | |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 107,403 | 97,628 | 9,775 | |
| 17 Travel | 41,673 | 40,819 | 544 | 310 |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 67,961 | 67,041 | 920 | |
| 20 Interest | 2,041,306 | 2,041,101 | 205 | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 93,597 | 84,266 | 9,331 | |
| 23 Insurance | 81,904 | 73,725 | 8,179 | |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a LOAN LOSS PROVISION REC | 2,682,615 | 2,682,615 | | |
| b FORECLOSURE CARRYING CO | 465,010 | 465,010 | | |
| c MISCELLANEOUS | 67,469 | 65,847 | 1,622 | |
| d DUES, LICENSES & PERMIT | 32,390 | 30,258 | 2,132 | |
| e All other expenses | 1,021 | 919 | 102 | |
| 25 Total functional expenses. Add lines 1 through 24e | 18,652,385 | 17,957,799 | 692,748 | 1,838 |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). | | | | |

Part X Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|-------------|----------------------|
| Assets | 1 Cash—non-interest-bearing | 6,959,654 | 1 | 899,706 |
| | 2 Savings and temporary cash investments | 65,832,932 | 2 | 53,996,826 |
| | 3 Pledges and grants receivable, net | 1,101,697 | 3 | 955,007 |
| | 4 Accounts receivable, net | 625,677 | 4 | 1,965,864 |
| | 5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | 163,614 |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | 108,899,230 | 7 | 128,688,744 |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 167,467 | 9 | 342,251 |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 3,945,060 | | |
| | b Less: accumulated depreciation | 10b 831,277 | 3,216,211 | 10c 3,113,783 |
| | 11 Investments—publicly traded securities | | 11 | |
| | 12 Investments—other securities. See Part IV, line 11 | 249,000 | 12 | 301,200 |
| | 13 Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 1,155,465 | 15 | 265,668 |
| 16 Total assets. Add lines 1 through 15 (must equal line 33) | 188,207,333 | 16 | 190,692,663 | |
| Liabilities | 17 Accounts payable and accrued expenses | 1,467,215 | 17 | 2,323,342 |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 100,821 | 19 | 2,698,934 |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | 14,078,955 | 23 | 13,567,383 |
| | 24 Unsecured notes and loans payable to unrelated third parties | 103,655,576 | 24 | 100,554,924 |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D | 36,541,629 | 25 | 37,423,359 |
| | 26 Total liabilities. Add lines 17 through 25 | 155,844,196 | 26 | 156,567,942 |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 30,523,935 | 27 | 32,114,010 |
| | 28 Net assets with donor restrictions | 1,839,202 | 28 | 2,010,711 |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| 32 Total net assets or fund balances | 32,363,137 | 32 | 34,124,721 | |
| 33 Total liabilities and net assets/fund balances | 188,207,333 | 33 | 190,692,663 | |

Part XI Reconciliation of Net Assets

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

| | | | |
|-----------|--|-----------|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 20,413,969 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 18,652,385 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 1,761,584 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 32,363,137 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | 34,124,721 |

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

| | Yes | No |
|-----------|-----|----|
| 2a | | No |
| 2b | Yes | |
| 2c | Yes | |
| 3a | Yes | |
| 3b | Yes | |

Additional Data

Software ID:

Software Version:

EIN: 62-1823596

Name: SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Form 990 (2020)

Form 990, Part III, Line 4a:

LENDING PROGRAM: AS A COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION (CDFI) CERTIFIED BY THE U.S. DEPARTMENT OF THE TREASURY, SOUTHEAST COMMUNITY CAPITAL DBA PATHWAY LENDING PROVIDES SMALL BUSINESS LOANS TO QUALIFIED SMALL AND DISADVANTAGED BUSINESSES THROUGH VARIOUS GOVERNMENT AND NON-PROFIT LENDING PROGRAMS, INCLUDING: U.S. SMALL BUSINESS ADMINISTRATION (SBA), U.S. TREASURY DEPARTMENT CERTIFIED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION (CDFI), THE APPALACHIAN REGIONAL COMMISSION (ARC), THE TENNESSEE RURAL OPPORTUNITY FUND, THE TENNESSEE ENERGY EFFICIENCY LOAN PROGRAM, THE TENNESSEE SMALL BUSINESS JOB OPPORTUNITY FUND AND THE ALABAMA SMALL BUSINESS JOB OPPORTUNITY FUND, ETC. WE FOCUS OUR ACTIVITIES ON UNDERSERVED TARGET MARKETS THAT INCLUDE BUSINESSES LOCATED IN QUALIFIED INVESTMENT AREAS (AS DEFINED BY LOW-INCOME CENSUS TRACTS, POVERTY RATES, AND UNEMPLOYMENT STATISTICS), AFRICAN-AMERICAN OWNED BUSINESSES, AND LOW-INCOME OWNED BUSINESSES. OUR SERVICE AREA INCLUDES TENNESSEE AND ALABAMA, AS WELL AS PORTIONS OF MISSISSIPPI, ARKANSAS, AND KENTUCKY. IN 2020, SOUTHEAST COMMUNITY CAPITAL CORPORATION ORIGINATED \$46MM IN NEW LOANS, OF WHICH 76% OF LOANS BY NUMBER AND 81% OF LOANS BY DOLLAR ACTIVITY WERE IN QUALIFIED CDFI TARGET MARKETS. SOUTHEAST COMMUNITY CAPITAL CORPORATION MADE 173 LOANS AND LINES OF CREDIT TOTALING MORE THAN \$21.05MM TO SUPPORT THE CREATION, PRESERVATION, AND GROWTH OF SMALL BUSINESSES, AND 20 LOANS TOTALING APPROXIMATELY \$9.23MM TO SUPPORT THE IMPLEMENTATION OF ENERGY EFFICIENCY AND RENEWABLE ENERGY PROJECTS AT BUSINESSES ACROSS TENNESSEE. TOTAL ANNUAL ENERGY SAVINGS FROM THE ENERGY LOANS WERE \$383,320 WITH 3,529,597 KWH SAVED.

Form 990, Part III, Line 4b:

EDUCATIONAL PROGRAM: SOUTHEAST COMMUNITY CAPITAL CORPORATION PROVIDES BUSINESS EDUCATION AND TECHNICAL ASSISTANCE TO SMALL AND DISADVANTAGED BUSINESSES THROUGH VARIOUS GOVERNMENT AND NON-PROFIT SUPPORT PROGRAMS, INCLUDING: THE U.S. SMALL BUSINESS ADMINISTRATION, THE METROPOLITAN DEVELOPMENT HOUSING AGENCY AND VARIOUS FOUNDATIONS. SOUTHEAST COMMUNITY CAPITAL CORPORATION PROVIDES THIS THROUGH VARIOUS INTERNAL PROGRAMS, SUCH AS THE PATHWAY LENDING BUSINESS ADVISORY SERVICES TEAM, WOMEN'S BUSINESS CENTER, AND VETERANS BUSINESS OUTREACH CENTER. THE ASSISTANCE INCLUDES ACCESS TO FINANCIAL SERVICES, ACCESS TO CAPITAL NEEDS AND INCLUDES CLASSROOM EDUCATION, 1-ON-1 ASSISTANCE AND PEER LEARNING. IN 2020 SOUTHEAST COMMUNITY CAPITAL CORPORATION PROVIDED 15,791 HOURS OF EDUCATION; 9,692 WERE IN CLASSROOM/EVENTS SETTINGS, 5,897 WERE ONE-ON-ONE COUNSELING SESSIONS, AND 202 WERE IN GROUP COACHING SESSIONS. THERE WERE 2,050 UNIQUE CLIENTS SERVED, 60% WERE REPRESENTATIVE OF PATHWAY LENDING'S CDFI TARGET MARKETS (AS DEFINED BY LOW-INCOME CENSUS TRACTS OR MINORITY STATUS), WITH 48% BEING FEMALE, AND 30% BEING AFRICAN AMERICAN. THERE WERE 243 CLASSES, NETWORKING EVENTS, AND COHORT-BASED LEARNING SESSIONS CONDUCTED THAT FOCUSED ON ENTREPRENEURIAL EDUCATION IN AREAS SUCH AS CASH FLOW MANAGEMENT, FINANCIAL PREPARATION, REVENUE AND EXPENSE PROJECTIONS, ACCOUNTING SYSTEMS, AND MANAGEMENT.

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

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization
SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Employer identification number
62-1823596

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--|---|-----------|-----------|-----------|-----------|------------|------------|
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . . | 1,439,642 | 9,866,564 | 6,037,623 | 6,533,706 | 12,388,380 | 36,265,915 |
| 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 | 1,439,642 | 9,866,564 | 6,037,623 | 6,533,706 | 12,388,380 | 36,265,915 |
| 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) | | | | | | 2,823,092 |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 33,442,823 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--|---|-----------|-----------|-----------|-----------|------------|------------|
| 7 | Amounts from line 4. | 1,439,642 | 9,866,564 | 6,037,623 | 6,533,706 | 12,388,380 | 36,265,915 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. | | | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on. | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 36,265,915 |

12 Gross receipts from related activities, etc. (see instructions) **12** 32,861,379

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

| | | | |
|-----------|--|-----------|----------|
| 14 | Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) | 14 | 92.220 % |
| 15 | Public support percentage for 2019 Schedule A, Part II, line 14 | 15 | 90.960 % |

16a **33 1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b **33 1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a **10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (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) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
|--|---|----------|----------|----------|----------|----------|-----------|
| 9 | Amounts from line 6. | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. | | | | | | |
| c | Add lines 10a and 10b. | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 First 5 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 2020 (line 8, column (f) divided by line 13, column (f)) | 15 | |
| 16 | Public support percentage from 2019 Schedule A, Part III, line 15 | 16 | |

Section D. Computation of Investment Income Percentage

| | | | |
|-----------|--|-----------|--|
| 17 | Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f)) | 17 | |
| 18 | Investment income percentage from 2019 Schedule A, Part III, line 17 | 18 | |

19a 33 1/3% support tests—2020. 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—2019. 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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

| | | Yes | No |
|------------|--|-----|----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i> | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i> | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i> | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i> | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i> | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i> | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i> | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i> | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i> | | |
| b | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i> | | |
| c | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i> | | |
| 10a | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i> | | |
| b | Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i> | | |

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

| | | Yes | No |
|----------|---|-----|----|
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | | |

Section D. All Type III Supporting Organizations

| | | Yes | No |
|----------|--|-----|----|
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> | | |
| 3 | By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i> | | |

Section E. Type III Functionally-Integrated Supporting Organizations

| | | | |
|----------|--|--|--|
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions): | | |
| a | <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | |
| b | <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c | <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) | | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | |
| a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i> | | |
| b | Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i> | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. | | |
| a | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i> | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i> | | |

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

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

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---|--|----------------|--------------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3 | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | 1 | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by 0.035 | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |
| Section C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 | Enter 85% of line 1 | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 | Enter greater of line 2 or line 3 | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) | | |

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

| Section D - Distributions | | Current Year |
|---|-----------|---------------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 Amounts paid to acquire exempt-use assets | 4 | |
| 5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>) | 5 | |
| 6 Other distributions (<i>describe in Part VI</i>). See instructions | 6 | |
| 7 Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions | 8 | |
| 9 Distributable amount for 2020 from Section C, line 6 | 9 | |
| 10 Line 8 amount divided by Line 9 amount | 10 | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2020 | (iii) Distributable Amount for 2020 |
|--|-------------------------------------|---|--|
| 1 Distributable amount for 2020 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- <i>explain in Part VI</i>). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2020: | | | |
| a From 2015. | | | |
| b From 2016. | | | |
| c From 2017. | | | |
| d From 2018. | | | |
| e From 2019. | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2020 distributable amount | | | |
| i Carryover from 2015 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | |
| 4 Distributions for 2020 from Section D, line 7: | | | |
| \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2020 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | | |
| 5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions. | | | |
| 7 Excess distributions carryover to 2021. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2016. | | | |
| b Excess from 2017. | | | |
| c Excess from 2018. | | | |
| d Excess from 2019. | | | |
| e Excess from 2020. | | | |

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

| Facts And Circumstances Test |
|------------------------------|
| |

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2020 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING

Employer identification number: 62-1823596

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate value of contributions, grants, and end of year. Rows 5-6 for donor/donor advisor notification questions.

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

Form for Part II Conservation Easements. Includes questions 1-9 regarding purpose of easements, monitoring, and reporting. Includes a table for 'Held at the End of the Year' with rows 2a-2d.

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions 1a-1b and 2 regarding reporting of art 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 XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

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

Part V Endowment Funds.

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

Table with 5 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment
b Permanent endowment
c Term endowment
The percentages on lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) Unrelated organizations
(ii) Related organizations
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 3,113,783

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related.

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

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) | | |

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

| 1. (a) Description of liability | (b) Book value |
|--|-------------------|
| (1) Federal income taxes | |
| (2) LINES OF CREDIT | 37,000,000 |
| (3) UNAMORTIZED LOAN ORIGINATION FEES | 423,359 |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) | ▶ 37,423,359 |

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

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

| | | | | |
|----------|--|-----------|-----------|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 20,551,146 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | 16,187 | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 120,990 | |
| e | Add lines 2a through 2d | | 2e | 137,177 |
| 3 | Subtract line 2e from line 1 | | 3 | 20,413,969 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 : | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 0 |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | | 5 | 20,413,969 |

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

| | | | | |
|----------|---|-----------|-----------|------------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 18,789,562 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | 16,187 | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 120,990 | |
| e | Add lines 2a through 2d | | 2e | 137,177 |
| 3 | Subtract line 2e from line 1 | | 3 | 18,652,385 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 : | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 0 |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | 5 | 18,652,385 |

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference | Explanation |
|---------------------------|-------------|
| See Additional Data Table | |
| | |
| | |
| | |
| | |
| | |
| | |

Part XIII Supplemental Information *(continued)*

| Return Reference | Explanation |
|------------------|-------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Additional Data

Software ID:

Software Version:

EIN: 62-1823596

Name: SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Supplemental Information

| Return Reference | Explanation |
|------------------|--|
| PART X, LINE 2: | MANAGEMENT PERFORMS AN EVALUATION OF ALL INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE CORPORATION'S INCOME TAX RETURNS TO DETERMINE WHETHER THE INCOME TAX POSITIONS MEET A "MORE LIKELY THAN NOT" STANDARD OF BEING SUSTAINED UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITIES. MANAGEMENT HAS PERFORMED ITS EVALUATION OF ALL INCOME TAX POSITIONS TAKEN ON ALL OPEN INCOME TAX RETURNS AND HAS DETERMINED THAT THERE WERE NO POSITIONS TAKEN THAT DO NOT MEET THE "MORE LIKELY THAN NOT" STANDARD. ACCORDINGLY, THERE IS NO PROVISION FOR INCOME TAXES, PENALTIES OR INTEREST RECEIVABLE OR PAYABLE RELATING TO UNCERTAIN INCOME TAX POSITIONS IN THE ACCOMPANYING FINANCIAL STATEMENTS. |

Supplemental Information

| Return Reference | Explanation |
|--|--------------------------|
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | RENTAL EXPENSES 120,990. |

Supplemental Information

| Return Reference | Explanation |
|--|--------------------------|
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | RENTAL EXPENSES 120,990. |

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

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING

Employer identification number 62-1823596

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 31
3 Enter total number of other organizations listed in the line 1 table 222

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|------------------------------------|--------------------------|--------------------------|----------------------------------|---|--|
| (1) CORONAVIRUS RELIEF FUND GRANTS | 39 | 263,500 | | | CORONAVIRUS RELIEF FUND - FARMERS MARKET GRANT |
| (2) CORONAVIRUS RELIEF FUND GRANTS | 13 | 199,645 | | | CORONAVIRUS RELIEF FUND - SMALL BUSINESS & LIVE MUSIC GRANTS |
| (3) TRUIST LOAN RELIEF GRANTS | 1 | 12,369 | | | TRUIST GRANT LOAN RELIEF |
| (3) | | | | | |
| (4) | | | | | |
| (5) | | | | | |
| (6) | | | | | |
| (7) | | | | | |

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

| Return Reference | Explanation |
|------------------|--|
| PART I, LINE 2: | DURING 2020, THE ORGANIZATION WAS GRANTED CORONAVIRUS RELIEF FUNDING THROUGH METROPOLITAN NASHVILLE AND DAVIDSON COUNTY, TENNESSEE (METRO CARES GRANTS) TO MAKE GRANT AWARDS TO CERTAIN INDUSTRIES IMPACTED BY THE COVID-19 PANDEMIC - SPECIFICALLY ARTS ORGANIZATIONS, SMALL BUSINESSES, LIVE MUSIC VENUES AND VENDOR SPACE RENTALS AT THE NASHVILLE FARMERS MARKET. EACH GROUP HAD CERTAIN ELIGIBILITY CRITERIA THAT WAS REVIEWED PRIOR TO AWARDING THE FUNDS. ONCE THE FUNDS ARE DISBURSED, THERE ARE NO FURTHER MONITORING REQUIREMENTS. |

Additional Data

Software ID:
Software Version:
EIN: 62-1823596
Name: SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| 828 CHOCOLATES LLC 141 N PETERS RD KNOXVILLE, TN 37923 | 46-0779415 | | 6,194 | | | | LOAN RELIEF - TRUIST GRANT |
| ACTORS BRIDGE ENSEMBLE THEATER OF NASHVILLE INC 4610 CHARLOTTE AVE NASHVILLE, TN 37209 | 62-1734411 | 501(C)3 | 19,559 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ACTUAL FOOD NASHVILLE LLC 3914 GALLATIN PIKE NASHVILLE, TN 37216 | 81-3471628 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| ADAM TANAKA 1210 BIRDSALL ST OLD HICKORY, TN 37138 | 41-0431789 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ADVANCED SPINE & WELLNESS 176 THOMPSON LN STE 102 NASHVILLE, TN 37211 | 46-0873265 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| AKSHAR LLC 4230 HARDING RD STE 210A NASHVILLE, TN 37205 | 62-1858824 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ALIAS CHAMBER ENSEMBLE 1987 GATLIN DR NASHVILLE, TN 37210 | 20-1247243 | 501(C)3 | 5,816 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| ALICIA A HALL MD INCORPORATED 2004 HAYES STREET SUITE 260 NASHVILLE, TN 37203 | 26-4505634 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AMERICAN ENTERTAINMENT WORKS INC 3400 ROUNDWOOD FOREST DR ANTIOCH, TN 37013 | 46-2353020 | | 7,893 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| ANDREWS HOSPITALITY LLC 555 CHURCH ST STE 101 NASHVILLE, TN 37219 | 82-1407859 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ANZIE BLUE LLC 4239 HARDING PIKE 4 NASHVILLE, TN 37205 | 83-4411233 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| APPLE & OAK LLC 717 PORTER RD NASHVILLE, TN 37206 | 47-4989325 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| APTO LLC 818 18TH AVE S STE 10 NASHVILLE, TN 37203 | 47-4883790 | | 7,054 | | | | LOAN RELIEF - TRUIST GRANT |
| ARISTO MUSIC ASSOCIATES INC 1620 16TH AVENUE NASHVILLE, TN 37212 | 62-1084574 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ARTS AND BUSINESS COUNCIL OF GREATER NASHVILLE INC 1900 BELMONT BLVD NASHVILLE, TN 37212 | 20-3255129 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| ASCENT CLEANING SOLUTIONS LLC 424 CHURCH ST STE 2000 NASHVILLE, TN 37219 | 82-1957843 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AUM SHREE DUTT LLC 601 OLD HICKORY BLVD STE C NASHVILLE, TN 37209 | 30-0558967 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| BANDWAGON MUSIC & REPAIRLLC 7639 HIGHWAY 70 S NASHVILLE, TN 37221 | 81-2757428 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| BARISTA PARLOR GERMANTOWN LLC 1230 4TH AVE NORTH NASHVILLE, TN 37208 | 47-3382179 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| BARISTA PARLOR GOLDEN SOUND LLC 610 MAGAZINE STREET NASHVILLE, TN 37203 | 46-3975068 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BARISTA PARLOR LLC 519B GALLATIN AVENUE NASHVILLE, TN 37206 | 45-2934160 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| BARN FRESH PINBALL LLC 917 B ELVIRA AVE NASHVILLE, TN 37216 | 82-2421366 | | 9,388 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BELCOURT THEATRE INC 2102 BELCOURT AVE NASHVILLE, TN 37212 | 62-1770620 | 501(C)3 | 50,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| BLACK RIVER AT SOUND STAGE LLC 12 MUSIC CIRCLE SOUTH NASHVILLE, TN 37203 | 61-1685698 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BLISS NASHVILLE LLC 1519 CHURCH ST NASHVILLE, TN 37203 | 20-1035252 | | 67,033 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| BLUEBIRD CAFE INC 4104 HILLSBORO PIKE NASHVILLE, TN 37215 | 26-1382571 | | 39,872 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BONTEMPS LLC 3129 WILMOTH RD NASHVILLE, TN 37207 | 82-1354334 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| BRAHMANAND LLC 3958 CLARKSVILLE PIKE NASHVILLE, TN 37218 | 56-2618127 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BRIGHOUSE GREEN HOME CLEANING LLC 5115 MARYLAND WAY STE 205 BRENTWOOD, TN 37027 | 47-4493303 | | 11,024 | | | | LOAN RELIEF - TRUIST GRANT |
| BROOKE WORTHINGTON JEWELRY LLC 2182 BANDYWOOD DR NASHVILLE, TN 372152703 | 82-0637849 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BUBBLE LOVE LLC 900 ROSA L PARKS BLVD NASHVILLE, TN 37208 | 83-0755122 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| BUCANAS 2009 INC 3810 NOLENSVILLE PIKE NASHVILLE, TN 37211 | 27-1171202 | | 65,772 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CACAWA LLC 5115 CENTENNIAL BLVD NASHVILLE, TN 37209 | 47-4705783 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CARE SHERPA LLC 6409 HOLLY TRACE COURT NASHVILLE, TN 37221 | 83-3650106 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CC FENCING AND LOGISTICS LLC 1105 JOSEPH AVE STE 201 NASHVILLE, TN 37207 | 81-1066180 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CENTER FOR ELDER VETERANS RIGHTS PC 2701 BERRYWOOD DR NASHVILLE, TN 37204 | 27-0832851 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| CHATTANOOGA PLUMBING INC PO BOX 4098 CHATTANOOGA, TN 37405 | 62-0983324 | | 9,438 | | | | LOAN RELIEF - TRUIST GRANT |
| CHATTERBIRD 1409 WINTHORNE DRIVE NASHVILLE, TN 37217 | 47-4590416 | | 14,850 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CHEEKWOOD BOTANICAL GARDEN AND MUSEUM OF ART 1200 FORREST PARK DRIVE NASHVILLE, TN 37205 | 62-0627921 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| CHEERS LLC 2426 EASTLAND AVE NASHVILLE, TN 37206 | 82-4344766 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CHINASH SUGAR RUSH LLC 3611 GALLATIN PIKE NASHVILLE, TN 37216 | 82-5211976 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CHIRO NASH LLC 604 GALLATIN AVE STE 100 NASHVILLE, TN 37206 | 47-4356538 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CHOPPER LLC 1308 FORREST AVE NASHVILLE, TN 37207 | 82-1407181 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CHRISTMAS DISPLAYS INC 2905 ARMORY DRIVE NASHVILLE, TN 37204 | 62-1827282 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CITIZEN KITCHENS LLC 975 MAIN ST SUITE 4 NASHVILLE, TN 37206 | 47-4943761 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CITIZEN MARKET LLC 975 MAIN ST SUITE 105 NASHVILLE, TN 37206 | 83-1732673 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CLLD LLC PO BOX 40545 NASHVILLE, TN 37204 | 81-3183474 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| COLLINS LEGAL PLC 414 UNION ST STE 1110 NASHVILLE, TN 37219 | 46-2704087 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| COMPOST NASHVILLE LLC 726 RINGGOLD DRIVE NASHVILLE, TN 37207 | 46-5515797 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| COPPERLINE RANCH INC 3145 BRANDAU ROAD HERMITAGE, TN 37076 | 47-5443299 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| COUNTRY MUSIC FOUNDATION INC 222 FIFTH AVENUE SOUTH NASHVILLE, TN 37203 | 62-0753887 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| CREATIVES DAY 1801 BROOKEMEADOW LANE HERMITAGE, TN 37076 | 82-3969189 | | 9,910 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CROSSROADS SPORTS BAR LLC 2209 MURFREESBORO PK NASHVILLE, TN 37217 | 47-2945894 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| CUSTOM FIT BOOKKEEPING & TAX 7982-A COLEY DAVIS RD NASHVILLE, TN 37221 | 20-5285535 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DABBLE LLC 330 HARRISON STREET NASHVILLE, TN 37219 | 46-1925608 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DALMATIAN CREATIVE AGENCY INC 4322 HARDING PIKE STE 417 NASHVILLE, TN 37205 | 62-1695230 | | 6,351 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DANCE IN BLOOM LLC 7982 COLEY DAVIS RD NASHVILLE, TN 37221 | 20-8952766 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DANCING THROUGH THE CURRICULUM 31 BENZING RD ANTIOCH, TN 37013 | 46-1078466 | | 10,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DAVISHIRE INTERIORS INC 2106 21ST AVENUE SOUTH NASHVILLE, TN 37212 | 72-1472568 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DEL SUR HOSPITALITY LLC 2927 DICKERSON PIKE NASHVILLE, TN 37207 | 82-3012274 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DELTA RAE TOURING INC 2817 WEST END AVE STE 126 261 NASHVILLE, TN 37203 | 46-2876555 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DFOX LLC 5523 THALMAN DRIVE BRENTWOOD, TN 37027 | 46-4728349 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DISTRIBULINK INC 1830 AIR LANE DR SUITE 14 NASHVILLE, TN 372102817 | 81-2946814 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DOG AND A DUCK 5016 CENTENNIAL BLVD SUITE 200 NASHVILLE, TN 37209 | 27-3358790 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DOUBLE E ENTERPRISES LLC 741 TULIP GROVE ROAD HERMITAGE, TN 37076 | 62-1858811 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| DR PAUL J SOMERS JR 6114 ELIZABETHAN DR NASHVILLE, TN 37205 | 62-1061296 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DRKMTR COLLECTIVE LLC 1111 DICKERSON PIKE NASHVILLE, TN 37207 | 81-1916146 | | 35,519 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| DUGARD COMMUNICATIONS 2817 WEST END AVE STE 143 NASHVILLE, TN 37203 | 46-2425267 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EAST NASHVILLE BEER WORKS LLC 320 EAST TRINITY LANE NASHVILLE, TN 37207 | 47-4627262 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| EMERALD LUXURY TRANSPORTATION LLC 1321 MURFREESBORO PIKE SUITE 500 NASHVILLE, TN 37217 | 45-4341369 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ENCIRCLE ACUPUNCTURE 805 WOODLAND ST STE 340 NASHVILLE, TN 37206 | 27-2057487 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| ENDEAVOR PERFORMANCE LLC 1004 8TH AVE S SUITE 200 NASHVILLE, TN 37203 | 83-3058347 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ENTERTAIN 118 16TH AVENUE SOUTH 4353 NASHVILLE, TN 37203 | 81-4414907 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| EVAMORE 2713 GREYSTONE ROAD NASHVILLE, TN 37204 | 81-2957006 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EVER ALICE LLC 2209 BANDYWOOD DRIVE SUITE G NASHVILLE, TN 37215 | 82-4301904 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| EVOLUTION TEAM APPAREL INC 2908 WILFORD PACK DR ANTIOCH, TN 37013 | 46-3558457 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EXCEL FACILITY MANAGEMENT GROUP LLC 315 10TH AVENUE N SUITE 106D NASHVILLE, TN 37203 | 81-1741597 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| EXECUTIVE TRAVEL OF NASHVILLE 555 MARRIOTT DRIVE NASHVILLE, TN 37214 | 47-2429819 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FEATURE ENTERPRISES INC 718 THOMPSON LANE SUITE 108-130 NASHVILLE, TN 37204 | 62-1572561 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| FIRST HONEY LLC 509 3RD AVE NASHVILLE, TN 37210 | 82-2999682 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FLEMING & ASSOCIATES LLC 1321 MURFREESBORO PIKE STE 110 NASHVILLE, TN 37217 | 80-0225322 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| FM BAKERY LLC 200 HILL AVE SUITE 3 NASHVILLE, TN 37210 | 35-2530453 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| FRIST ART MUSEUM 919 BROADWAY NASHVILLE, TN 37212 | 62-1731492 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| GAYATRI MAA LLC 110 NORTHGATE DR GOODLETTSVILLE, TN 37072 | 27-0584376 | | 25,000 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GLOBAL EDUCATION CENTER 4822 CHARLOTTE AVENUE NASHVILLE, TN 37209 | 62-1681169 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| GOOD NEIGHBOR FESTIVALS 2817 WEST END AVE 126-439 NASHVILLE, TN 37203 | 46-3543791 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GRANT'S FAMILY ICE CREAM DBA BEN & JERRY'S 416A 21ST AVE SOUTH NASHVILLE, TN 37203 | 62-1863581 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| GREEN PEA SALON LLC 1113 12TH AVE SOUTH NASHVILLE, TN 37203 | 77-0697463 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GREENER ROOTS FARM LLC 323 WILHAGAN ROAD NASHVILLE, TN 37217 | 46-4966523 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| H&T'S HOME COOKING LLC 2264 MURFREESBORO PIKE NASHVILLE, TN 372173133 | 83-0420835 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HALE' LLC 2200 21ST AVE S STE 202 NASHVILLE, TN 37212 | 47-1421921 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| HALE FINANCIAL SERVICES INC 308 BLUEBIRD DRIVE DAVIDSON, TN 37072 | 20-0510488 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HARI LLC 1009 FAIRVIEW KNOLL COURT MT JULIET, TN 37122 | 62-1768865 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| HASD LLC 811 GALLATIN AVE NASHVILLE, TN 37206 | 82-2004137 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HIP HUES LLC 1201 4TH AVE S STE 116 NASHVILLE, TN 37210 | 46-1512788 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| I LOVE LOU LLC 1304 MCGAVOCK PIKE NASHVILLE, TN 37216 | 83-4719483 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| INNOVATION FOUNDATION INC 3145 BRANDAU ROAD HERMITAGE, TN 37076 | 26-1190499 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| INTERCEPT SERVICE AGENCY INC 3920 CLARKSVILLE PIKE NASHVILLE, TN 37218 | 27-1823915 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| INTERSECTION 2708 MASHBURN RD NASHVILLE, TN 37210 | 47-1855210 | | 7,548 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| JAZZ EMPOWERS 4739 CLARKSVILLE PIKE NASHVILLE, TN 37218 | 46-4864928 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| JET MACHINING SERVICES INC 117 REGIONAL PARK DR KINGSPORT, TN 37660 | 62-1337339 | | 8,614 | | | | LOAN RELIEF - TRUIST GRANT |
| JKO ENTERPRISES INC 900 ROSA L PARKS BLVD NASHVILLE, TN 37208 | 80-0265184 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| JT GRAY ENTERPRISES INC 402 12TH AVENUE S NASHVILLE, TN 37203 | 62-1333112 | | 100,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| KITCHEN TABLE MEDIA LLC 919 GALLATIN AVE 8 NASHVILLE, TN 37206 | 27-3230444 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LEADERSHIP MUSIC 34 MUSIC SQUARE EAST NASHVILLE, TN 37203 | 62-1404863 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| LITTLE GOURMAND LLC 2209 BANDYWOOD DR SUITE D NASHVILLE, TN 37215 | 37-1758302 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LITTLE HARPETH CHILDREN'S DENTISTRY 7640 HIGHWAY 70S STE 101 NASHVILLE, TN 37221 | 81-2712208 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| LIVING WATERS BREWING COMPANY LLC 1056 E TRINITY LN STE 101 NASHVILLE, TN 37216 | 82-4249952 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LIZ'S KITCHENLLC 107 MEMORIAL DRIVE UNIT A GOODLETTSVILLE, TN 37072 | 47-1393125 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| LNC NASHVILLE LLC 45 LINDSLEY AVE NASHVILLE, TN 37210 | 46-2519495 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LOVE CHILD CARE CENTER INC THE 810 EAST OLD HICKORY BLVD MADISON, TN 37115 | 62-1835973 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| LUXURY RIDE NASHVILLE INC 2633 GRANDVIEW AVE NASHVILLE, TN 37203 | 82-5431565 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MAC PRESENTS LLC 4106 SNEED ROAD NASHVILLE, TN 37215 | 71-0976150 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MAKE MUSIC NASHVILLE 1987 GATLIN DRIVE NASHVILLE, TN 37210 | 81-1447313 | 501(C)3 | 10,777 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MAKE NASHVILLE 620B DAVIDSON ST NASHVILLE, TN 37213 | 47-4075711 | | 19,414 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| MALONE STUDIOS INC 2143 UTOPIA AVE NASHVILLE, TN 37211 | 89-3198990 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MANNAT HOTEL LLC 4144 LEBANON PIKE HERMITAGE, TN 37076 | 26-3982056 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MC 1100 LLC 1040 DR MLK JR BLVD NASHVILLE, TN 37203 | 82-0675514 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MC TRISTAR LLC 2300 PATTERSON ST NASHVILLE, TN 37203 | 82-2398607 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MELLOW VAPE LLC 2124 GALLATIN PIKE NORTH MADISON, TN 37115 | 46-3667535 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MERCY LOUNGE LLC 1 CANNERY ROW NASHVILLE, TN 372034153 | 45-1534430 | | 147,162 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| MF HOLDINGS LLC 2927 DICKERSON PIKE NASHVILLE, TN 37207 | 82-1221431 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MJT NASHVILLE LLC 712 DICKERSON PIKE STE 2 NASHVILLE, TN 372075635 | 82-3903801 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MODULAR DESIGNS OF TENNESSEE LLC 819 WOODLAND STREET NASHVILLE, TN 37206 | 56-2019632 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MOKU MARKETING LLC P O BOX 508 MOSCOW, TN 38057 | 80-0249199 | | 6,208 | | | | LOAN RELIEF - TRUIST GRANT |
| MOLLY GREEN GREEN HILLS LLC 2126 ABBOT MARTIN RD SUITE 175 NASHVILLE, TN 37215 | 81-5106573 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MOLLY GREEN HILLSBORO VILLAGE LLC 1717 21ST AVENUE SOUTH NASHVILLE, TN 37212 | 84-2265918 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MOVES AND GROOVES INC 2275 MURFREESBORO PIKE SUITE 101 NASHVILLE, TN 37217 | 68-0516440 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MULTICULTURAL MEDIA 4605 GALLATIN PIKE NASHVILLE, TN 37216 | 46-2676705 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| MUSIC FOR SENIORS 161 RAINS AVENUE NASHVILLE, TN 37203 | 35-2438992 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE ACADEMY THEATRE AND NASHVILLE CHILDREN'S THEATRE ASSOCIATION 25 MIDDLETON STREET NASHVILLE, TN 37210 | 62-0637709 | 501(C)3 | 27,574 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| NASHVILLE BALLET 3630 REDMON STREET NASHVILLE, TN 37209 | 58-1440788 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE BUSINESS CONSULTING INC 4544 HARDING PIKE STE 211 NASHVILLE, TN 37205 | 27-1065166 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NASHVILLE CRAFT DISTILLERY 514 HAGAN STREET NASHVILLE, TN 37203 | 46-2843999 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| NASHVILLE CRAFT DISTILLERY LLC 514 HAGAN ST NASHVILLE, TN 37203 | 46-2843999 | | 10,486 | | | | LOAN RELIEF - TRUIST GRANT |
| NASHVILLE EDUCATION COMMUNITY ARTS TELEVISION 120 WHITE BRIDGE ROAD 46 NASHVILLE, TN 37209 | 27-0024733 | 501(C)3 | 8,149 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE EVENT LIGHTING LLC 100 TAYLOR PLACE STE A1 NASHVILLE, TN 37208 | 27-1883829 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NASHVILLE FILM FESTIVAL 161 RAINS AVE NASHVILLE, TN 37203 | 23-7258049 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE HANDY SERVICES LLC 337 BATTLE RD ANTIOCH, TN 37013 | 81-0973435 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NASHVILLE IN HARMONY 1021 GLENDALE LN NASHVILLE, TN 37204 | 20-3063200 | 501(C)3 | 11,180 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| NASHVILLE JAZZ WORKSHOP 1012 BUCHANAN STREET NASHVILLE, TN 37208 | 62-1837858 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| NASHVILLE OPERA ASSOCIATION 3622 REDMON STREET NASHVILLE, TN 37209 | 62-1119830 | 501(C)3 | 50,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| NASHVILLE PALACE PARTNERS LLC 2611 MCGAVOCK PIKE NASHVILLE, TN 37214 | 81-3235449 | | 60,420 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| NASHVILLE PHILHARMONIC ORCHESTRA PO BOX 121914 NASHVILLE, TN 37212 | 20-0787704 | 501(C)3 | 8,466 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| NASHVILLE REPERTORY THEATRE INC 161 RAINS AVENUE NASHVILLE, TN 37203 | 62-1811578 | 501(C)3 | 50,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| NASHVILLE SHAKESPEARE FESTIVAL 161 RAINS AVE NASHVILLE, TN 37203 | 58-1807951 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE SWEETS LLC 803 WOODLAND STREET NASHVILLE, TN 37206 | 45-2768357 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NASHVILLE SYMPHONY ASSOCIATION ONE SYMPHONY PLACE NASHVILLE, TN 37201 | 62-0550979 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NASHVILLE'S MEDIA SERVICES INC 314 HERMITAGE AVENUE NASHVILLE, TN 37210 | 62-1461509 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NATIONAL MUSEUM OF AFRICAN AMERICAN MUSIC 510 BROADWAY NASHVILLE, TN 37219 | 62-1867910 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| NEW DIALECT 522 ROSEDALE AVENUE NASHVILLE, TN 37211 | 46-3222189 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| NEXT GEN LLC P O BOX 508 MOSCOW, TN 38057 | 82-3061167 | | 7,060 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NEXT LEVEL BREWING COMPANY LLC 700 N BROADWAY ST KNOXVILLE, TN 37917 | 83-2078416 | | 9,595 | | | | LOAN RELIEF - TRUIST GRANT |
| NICKYS RESTAURANT I LLC 5026 CENTENNIAL BLVD NASHVILLE, TN 37209 | 81-1537324 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NO 308 LLC 407 GALLATIN AVE NASHVILLE, TN 372063220 | 27-3001032 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| NOMADIC GENIUS LLC 5049 TROUSDALE DRIVE NASHVILLE, TN 37220 | 27-3410352 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NSFH INC 100 TAYLOR ST STE C12 NASHVILLE, TN 37208 | 83-3789635 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| OM SAI 65 INC 110 MAPLEWOOD TRCE NASHVILLE, TN 37207 | 82-2316346 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| OPERATION SONG 4628 KENTUCKY AVENUE NASHVILLE, TN 37209 | 46-5442758 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| OZ ARTS NASHVILLE 6172 COCKRILL BEND CIRCLE NASHVILLE, TN 37209 | 46-0985602 | 501(C)3 | 50,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PAJU LLC 1604 8TH AVE SOUTH NASHVILLE, TN 37203 | 20-2122273 | | 27,066 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| PALI INC 1100 RUSSELL STREET 103 NASHVILLE, TN 37206 | 20-8281254 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PAPA TURNEY'S OLD FASHION BBQ 3979 BELL ROAD HERMITAGE, TN 37076 | 90-0974941 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| PAR ENTERPRISES LLC 711 SPENCE LANE NASHVILLE, TN 37217 | 04-3687850 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PDK LLC 8121 SAWYER BROWN RD STE 204 NASHVILLE, TN 37221 | 82-1569876 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| PEARL DIVER LLC 900 DIVISION ST NASHVILLE, TN 37203 | 82-1638194 | | 9,021 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PIEDMONTE & CO LLC 1018 GALE LANE NASHVILLE, TN 37204 | 81-1115399 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| PMK LCC 1111B BELL RD ANTIOCH, TN 37013 | 37-1945557 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| POP LLC 604 GALLATIN AVE STE 203 NASHVILLE, TN 37206 | 46-4123826 | | 6,007 | | | | LOAN RELIEF - TRUIST GRANT |
| POVERTY AND THE ARTS 1207 DICKERSON PIKE NASHVILLE, TN 37207 | 46-3699416 | 501(C)3 | 15,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| POWER NASHVILLE LLC P O BOX 81556 FRANKLIN, TN 37068 | 82-1763660 | | 6,202 | | | | LOAN RELIEF - TRUIST GRANT |
| PREMIERE HOME HEALTH INC 846 EAST MEADE AVE MADISON, TN 37115 | 62-1637122 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PRO VITA LLC 1329 6TH AVE N NASHVILLE, TN 37208 | 46-1414122 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| R STEWART SHOFNER MD PC 2004 HAYES STREET SUITE 335 NASHVILLE, TN 37203 | 62-1479385 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RD GALLATIN LLC 2420 GALLATIN AVE NASHVILLE, TN 37206 | 80-0184975 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| RED ROVER PET SERVICES LLC 315 HERMITAGE AVENUE NASHVILLE, TN 37210 | 74-3115260 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| REJOICE MINISTRIES 700 RUSSELL STREET NASHVILLE, TN 37206 | 62-1791396 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| RESCUE ELECTRIC LLC 4016 ENCHANTED WAY NASHVILLE, TN 37218 | 85-1120268 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RESURGEONCE LLC 4535 HARDING PIKE STE C-130 NASHVILLE, TN 37205 | 46-1318247 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| RHIZOME PRODUCTIONS INC 900 44TH AVE N NASHVILLE, TN 37209 | 27-4520401 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RICHARD MCGEE ATTORNEY 1308 ROSA L PARKS BLVD NASHVILLE, TN 37208 | 62-1309107 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| ROBERT L WEAVER CERTIFIED PUBLIC ACCOUNTANT PLLC P O BOX 3934 JOHNSON CITY, TN 37601 | 27-4461088 | | 5,683 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RODNEY MITCHELL SALON INC 1810 CHET ATKINS PLACE NASHVILLE, TN 37203 | 62-1776800 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| ROLF EAGLE LLC 823 MEERIDIAN ST NASHVILLE, TN 37208 | 47-4079125 | | 25,000 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RUDY'S JAZZ ROOM LLC 809 GLEAVES ST NASHVILLE, TN 37203 | 47-3045652 | | 69,345 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| RUFFIN CONSULTING 110 GLANCY ST SUITE 107 GOODLETTSVILLE, TN 37072 | 20-0770195 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SAVAS LLC 527 8TH AVE S STE125 NASHVILLE, TN 37203 | 47-2910438 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SAYLES EGAN LLC 700 CRAIGHEAD ST STE 301 NASHVILLE, TN 37204 | 84-1854803 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SCHAFER LAW FIRM PLLC 1604 16TH AVENUE N NASHVILLE, TN 37212 | 45-5508266 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SELECT HOME SOLUTIONS GROUP LLC 2817 WEST END AVENUE STE 126-449 NASHVILLE, TN 37203 | 47-5355733 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SHAANU LLC 246 5TH AVE NORTH NASHVILLE, TN 37219 | 94-3491037 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SHREE HARI LLC 353 MURFREESBORO ROAD NASHVILLE, TN 37210 | 62-1768862 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SHREE SAI RAM 150 WEST TRINITY LANE NASHVILLE, TN 37207 | 46-5763441 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SHRIJI MAHARAJ LLC 5633 CHARLOTTE AVE NASHVILLE, TN 37209 | 74-3195123 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SIGMA MANAGEMENT LLC 906 HARPETH VALLEY PLACE NASHVILLE, TN 37221 | 46-2362704 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SILVA ENTERTAINMENT LLC PO BOX 1645 HENDERSONVILLE, TN 37077 | 62-1775865 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SLOW BURN HOT CHICKEN 495B MYATT DRIVE MADISON, TN 37115 | 47-3401417 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SOHO SECTOR II INC 5133 HARDING PIKE STE B10 NASHVILLE, TN 37205 | 58-2441948 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SOMATEL HOTEL LLC 420 METROPLEX DRIVE NASHVILLE, TN 37211 | 83-4419964 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SOUTH INC 51 CENTURY BLVD SUITE 306 NASHVILLE, TN 37214 | 46-1983956 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SOUTHERN DOMESTIC DIVA 2514 EUGENIA AVENUE NASHVILLE, TN 37211 | 47-3975982 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SOUTHERN WORD INC 1704 CHARLOTTE AVE NASHVILLE, TN 37203 | 26-3547391 | 501(C)3 | 17,599 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SPRINGWATER INC 115 27TH AVE NASHVILLE, TN 37203 | 62-1094496 | | 18,037 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| SPROCKET THERAPY SOLUTIONS LLC 230 GREAT CIRCLE RD STE 202 NASHVILLE, TN 37228 | 46-3090010 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SPROCKETS LLC 3145 BRANDAU ROAD HERMITAGE, TN 37076 | 84-4387601 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| STREET THEATRE COMPANY 314 TANKSLEY AVENUE NASHVILLE, TN 37211 | 01-0868312 | 501(C)3 | 11,494 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SUBWAY 16679 1 HERMITAGE AVE NASHVILLE, TN 37210 | 30-0571821 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| SURREAL BLOW OUT BAR 414 WOODLAND STREET NASHVILLE, TN 37206 | 81-4970921 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SUZY WONG'S NASHVILLE LLC 1515 CHURCH STREET NASHVILLE, TN 37203 | 27-0539931 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| T & W CONSTRUCTION LLC 2405 LASONYA LA HORN LAKE, MS 38673 | 81-0783770 | | 21,301 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TALL BOY MARKETING 519 COLICE JEANNE NASHVILLE, TN 37221 | 46-4719561 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| TENNESSEE ASSOCIATION OF CRAFT ARTISTS 2423 EUGENIA AVENUE NASHVILLE, TN 37211 | 23-7309306 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| TENNESSEE PERFORMING ARTS CENTER MANAGEMENT CORPORATION 505 DEADERICK STREET 3RD FLOOR NASHVILLE, TN 37243 | 58-1320590 | 501(C)3 | 87,500 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| TENNESSEE WOMEN'S THEATER PROJECT 2301 ROSA L PARKS BOULEVARD NASHVILLE, TN 37228 | 48-1284622 | 501(C)3 | 7,002 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE 5 SPOT LLC 1006 FORREST AVE NASHVILLE, TN 37206 | 20-8415958 | | 31,254 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| THE BANG CANDY COMPANY LLC 1300 CLINTON ST STE 127 NASHVILLE, TN 37203 | 27-3493256 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE BASEMENT EAST LP 917 WOODLAND ST NASHVILLE, TN 37206 | 47-2695798 | | 18,999 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| THE BLOOMY RIND LLC 975 MAIN ST STE 4 NASHVILLE, TN 37206 | 27-2149506 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE CALLAWAY LLC 1020 N 16TH STREET NASHVILLE, TN 37206 | 81-1158485 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THE DRY HOUSE LLC 2104 CRESTMOOR ROAD NASHVILLE, TN 37215 | 46-4412365 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE EAST ROOM LLC 2412 GALLATIN AVE NASHVILLE, TN 37206 | 82-4938714 | | 12,463 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| THE FOUNTAIN OF JUICE LLC 908 51ST AVE N NASHVILLE, TN 37209 | 46-5290962 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE KINKEAD ENTERTAINMENT AGENCY 253 JACKSON MEADOWS DRIVE HERMITAGE, TN 37076 | 81-2084161 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THE LISTENING ROOM LLC 618 4TH AVE S NASHVILLE, TN 37210 | 46-0683818 | | 100,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE MOOSE MENS GROOMING LOUNGE 1203 16TH AVE SOUTH NASHVILLE, TN 37212 | 83-4162294 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THE PICNIC TAP HUNTERS LLC 975 MAIN ST STE 102 NASHVILLE, TN 37206 | 83-3857824 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE PICNIC TAP LLC 900 ROSA L PARKS BLVD NASHVILLE, TN 37208 | 46-5562348 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THE PORCH WRITERS' COLLECTIVE 2811 DOGWOOD PL NASHVILLE, TN 37204 | 46-4658139 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE SOUTHERN V LLC 1200 BUCHANAN STREET NASHVILLE, TN 37208 | 81-0984965 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THE THEATER BUG INC 2020 LINDELL AVE NASHVILLE, TN 37203 | 27-4141181 | | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE WEEDING WOMAN LLC 248B MORTON AVENUE NASHVILLE, TN 37211 | 20-4850370 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THINKTHRU INC 3805 CREEKSIDE DRIVE NASHVILLE, TN 37211 | 47-4446666 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THIRD AVE MUSEUM LLC 119 3RD AVE SOUTH NASHVILLE, TN 37201 | 81-2554583 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| THIRD COAST COMEDY LLC 1310 CLINTON STREE SUITE 121 NASHVILLE, TN 37203 | 47-5268984 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TNB-FITNESS LLC 509 CRAIGHEAD ST STE100 NASHVILLE, TN 37204 | 46-2918979 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| TNFOLD LLC 2408 LEBANON PIKE NASHVILLE, TN 37214 | 83-3840174 | | 21,683 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TOWN AND COUNTRY LLC 306 MAPLEWOOD TREE NASHVILLE, TN 37207 | 81-3308323 | | 7,432 | | | | LOAN RELIEF - TRUIST GRANT |
| TRADESHOW STOP INC 2901 ARMORY DR STE 101 NASHVILLE, TN 37204 | 37-1392336 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|--|
| TURNIP GREEN CREATIVE REUSE 407 HOUSTON STREET NASHVILLE, TN 37203 | 45-4123101 | 501(C)3 | 19,639 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |
| UNSCRIPTED 812 POTTER LN NASHVILLE, TN 37206 | 82-2846706 | | 8,078 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VAN MOL RESTORATION LLC 4106 SNEED ROAD NASHVILLE, TN 37215 | 46-4471220 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| VICE & VIRTUE COFFEE LLC 482 N HOLLYWOOD ST MEMPHIS, TN 38112 | 81-5412379 | | 9,677 | | | | LOAN RELIEF - TRUIST GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VINMAN CORP 818 3RD AVE NASHVILLE, TN 37210 | 62-1517639 | | 60,816 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - LIVE MUSIC VENUES |
| VINYL TAP LLC 2038 GREENWOOD AVENUE NASHVILLE, TN 37206 | 47-5059292 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VISION HOME HEALTH CARE LLC 2572A MURFREESBORO PIKE STE D NASHVILLE, TN 37217 | 46-2607333 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| VITA GROUP 615 LLC 1516 DEMONBREUN STREET NASHVILLE, TN 37202 | 81-0760915 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VIVID1 BUILDERS 402 BNA DRIVE SUITE 201 NASHVILLE, TN 37217 | 81-3476169 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| WO SMITHNASHVILLE COMMUNITY MUSIC SCHOOL 1125 8TH AVE S NASHVILLE, TN 37203 | 58-1560499 | 501(C)3 | 20,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| WHIZBANG INC 116 ORIEL AVENUE NASHVILLE, TN 37210 | 94-3429559 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| YOUTH EMPOWERMENT THROUGH ARTS AND HUMANITIES PO BOX 160964 NASHVILLE, TN 37216 | 77-0662610 | 501(C)3 | 17,540 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - ARTS ORGANIZATIONS |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ZA HILLSBORO VILLAGE LLC 2005 BELCOURT AVE NASHVILLE, TN 37212 | 83-3693981 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |
| ZAM INVESTMENTS INC 624 JEFFERSON ST NASHVILLE, TN 37208 | 82-2442297 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

| Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. | | | | | | | |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| ZULEMAS KITCHEN LLC 555 MARRIOTT DR STE 105 NASHVILLE, TN 37214 | 82-3657883 | | 10,000 | | | | CORONAVIRUS RELIEF FUND - METRO CARES GRANT - SMALL BUSINESS GRANTS |

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

| | |
|--|--|
| Name of the organization SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING | Employer identification number 62-1823596 |
|--|--|

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 on 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 type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input 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 | 1b | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a? | 2 | |
| 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. | | |
| <input checked="" type="checkbox"/> Compensation committee <input 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 on 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? | 4a | No |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | No |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | No |
| If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | |
| Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | |
| 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: | | |
| a The organization? | 5a | Yes |
| b Any related organization? | 5b | No |
| If "Yes," on line 5a or 5b, describe in Part III. | | |
| 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: | | |
| a The organization? | 6a | Yes |
| b Any related organization? | 6b | No |
| If "Yes," on line 6a or 6b, describe in Part III. | | |
| 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III. | 7 | No |
| 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. | 8 | No |
| 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | |

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

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

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| 1 CLINT GWIN PRESIDENT AND CEO | (i) | 330,688 | 112,861 | 0 | 8,161 | 1,830 | 453,540 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2 HANK HELTON EXECUTIVE VICE PRESIDENT | (i) | 220,331 | 50,105 | 0 | 10,760 | 11,238 | 292,434 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 3 BARBARA HARRIS EXECUTIVE VICE PRESIDENT AND CFO | (i) | 220,836 | 49,029 | 0 | 10,520 | 8,492 | 288,877 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 AMY BUNTON EXECUTIVE VICE PRESIDENT AND COO | (i) | 216,120 | 50,105 | 0 | 7,122 | 11,237 | 284,584 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5 JOE AGNETTA SVP, CHIEF CREDIT OFFICER | (i) | 173,513 | 16,358 | 0 | 7,556 | 5,845 | 203,272 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6 DANIEL WILSON SVP OF LENDING OPERATIONS | (i) | 134,906 | 12,678 | 0 | 2,500 | 5,709 | 155,793 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| Return Reference | Explanation |
|------------------|---|
| PART I, LINE 5 | BONUSES ARE BASED ON ESTABLISHED CORPORATE PERFORMANCE MEASURES 50% OF WHICH ARE BASED ON FINANCIAL CRITERIA INCLUDING CASH FLOW, ASSET GROWTH, LOAN GROWTH, NET ASSET GROWTH, LOAN PERFORMANCE AND COMPLIANCE. |
| PART I, LINE 6 | BONUSES ARE BASED ON ESTABLISHED CORPORATE PERFORMANCE MEASURES 50% OF WHICH ARE BASED ON FINANCIAL CRITERIA INCLUDING CASH FLOW, ASSET GROWTH, LOAN GROWTH, NET ASSET GROWTH, LOAN PERFORMANCE AND COMPLIANCE. |

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2020

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Employer identification number
62-1823596

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

| 1 | (a) Name of disqualified person | (b) Relationship between disqualified person and organization | (c) Description of transaction | (d) Corrected? | |
|---|---------------------------------|---|--------------------------------|----------------|----|
| | | | | Yes | No |
| | | | | | |
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| | | | | | |

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

| (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | (d) Loan to or from the organization? | | (e) Original principal amount | (f) Balance due | (g) In default? | | (h) Approved by board or committee? | | (i) Written agreement? | |
|-------------------------------|------------------------------------|--|---------------------------------------|------|-------------------------------|-----------------|-----------------|----|-------------------------------------|----|------------------------|----|
| | | | To | From | | | Yes | No | Yes | No | Yes | No |
| (1) ANDRE GIST | DIRECTOR OF THE ORGANIZATION | LOAN TO MIG, A COMPANY MAJORITY OWNED BY ANDRE GIST. | | X | 193,360 | 163,614 | | No | Yes | | Yes | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Total | | | | | | \$ | 163,614 | | | | | |

Part III Grants or Assistance Benefiting Interested Persons.

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

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|-------------------------------|---|--------------------------|------------------------|---------------------------|
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Part IV Business Transactions Involving Interested Persons.

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

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|---|---------------------------|---|---|----|
| | | | | Yes | No |
| (1) HUGH QUEENER | DIRECTOR OF THE ORGANIZATION | 229,062 | INTEREST PAID ON NOTE PAYABLE: MR. QUEENER IS THE EXECUTIVE VICE PRESIDENT AND CHIEF ADMINISTRATIVE OFFICER FOR PINNACLE BANK AND WAS INVOLVED WITH THE LOAN ON THE BUILDINGS AND IN THE NOTES PAYABLE IN TNROF, KCTJF, NOF AND TNSBJOF. THE TRANSACTIONS DURING THE YEAR INVOLVED INTEREST PAYMENTS MADE TO THE BANK UNDER THE NORMAL COURSE OF BUSINESS; NO PERSONAL GAIN OR PAYMENTS WERE MADE TO MR. QUEENER. | | No |
| (2) HUGH QUEENER | DIRECTOR OF THE ORGANIZATION | 173,686 | BANK ACCOUNTS HELD AT BANK: MR. QUEENER IS THE EXECUTIVE VICE PRESIDENT AND CHIEF ADMINISTRATIVE OFFICER FOR PINNACLE BANK WHERE SOUTHEAST COMMUNITY CAPITAL MAINTAINS INTEREST BEARING ACCOUNTS AND RECEIVED INTEREST IN THE NORMAL COURSE OF DOING BUSINESS. | | No |
| (3) HUGH QUEENER | DIRECTOR OF THE ORGANIZATION | 163,811 | PRINCIPAL AND INTEREST PAYMENTS ON THE MORTGAGES ON THE BUILDINGS: MR. QUEENER IS THE EXECUTIVE VICE PRESIDENT AND CHIEF ADMINISTRATIVE OFFICER FOR PINNACLE BANK WHERE SOUTHEAST COMMUNITY CAPITAL MADE PRINCIPAL AND INTEREST PAYMENTS TO THE BANK IN THE NORMAL COURSE OF DOING BUSINESS. | | No |
| (4) JON DAVIES | DIRECTOR OF THE ORGANIZATION | 409,110 | INTEREST PAID ON LOAN: MR. DAVIES IS THE SENIOR VICE PRESIDENT/COMPLIANCE EXECUTIVE, COMMUNITY AFFAIRS AND CONTRIBUTIONS FOR REGIONS FINANCIAL CORPORATION AND WAS INVOLVED WITH THE LOAN RECEIVED BY SOUTHEAST COMMUNITY CAPITAL. THE TRANSACTIONS DURING THE YEAR INVOLVED INTEREST PAYMENTS MADE TO THE BANK UNDER THE NORMAL COURSE OF BUSINESS; NO PERSONAL GAIN OR PAYMENTS WERE MADE TO MR. DAVIES. | | No |
| | | | | | |
| | | | | | |

Part V Supplemental Information

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

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|

SCHEDULE O
(Form 990 or 990-EZ)**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.

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

OMB No. 1545-0047

2020**Open to Public Inspection**

Department of the Treasury

Name of the organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION B, LINE 11B | THE PRESIDENT AND CFO REVIEW THE 990 BEFORE IT IS FILED WITH THE IRS. THEY COMPARE EACH LINE ITEM TO THE PRIOR YEAR FORM 990 AS WELL AS COMPARABLE FORM 990S FOR OTHER NOT-FOR-PROFIT ENTITIES. THE CURRENT YEAR FORM IS ALSO RECONCILED TO THE CURRENT YEAR FINANCIAL STATEMENTS. THE FORM 990 IS PRESENTED TO ALL BOARD MEMBERS BEFORE IT IS FILED FOR THEIR REVIEW. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION B, LINE 12C | ALL NEW EMPLOYEES ARE GIVEN AND REQUIRED TO SIGN AN EMPLOYEE HANDBOOK UPON HIRING. IT ADDRESSES A CODE OF CONDUCT INCLUDING A CONFLICT OF INTEREST STATEMENT AND A WHISTLEBLOWER POLICY. EACH EMPLOYEE IS ALSO REQUIRED TO SIGN ANNUALLY A STATEMENT THAT THEY HAVE NO CONFLICTS OF INTEREST. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---------------------------------------|---|
| FORM 990, PART VI, SECTION B, LINE 15 | SCC HAS A COMPENSATION COMMITTEE THAT MEETS AS NEEDED TO SET THE SALARIES OF THE PRESIDENT , SENIOR VICE PRESIDENTS, AND THE CHIEF FINANCIAL OFFICER. THE PRESIDENT WAS GIVEN DISCRETIONARY POWERS TO SET THE SALARIES OF ALL OTHER PERSONNEL AND TO GIVE THE BOARD AN OVERVIEW OF THOSE DECISIONS. THE PRESIDENT WAS ALSO GIVEN THE AUTHORITY TO INCREASE SALARIES WITHIN SET PARAMETERS FOR THE SVP AND CFO. ALL SALARIES ARE DISCLOSED TO THE COMMITTEE. A COMPENSATION POLICY WAS PUT INTO EFFECT ON 01/16/2008 IN ORDER TO COMPLY WITH INTERNAL REVENUE CODE SECTION 4958. WHEN THE SALARIES ARE PUT IN PLACE FOR ALL EMPLOYEES, A COMPARISON WITH OTHER SIMILAR ORGANIZATIONS IS MADE AND REVIEWED BY THE COMMITTEE. THE SALARIES ARE COMPIL ED FROM TAX RETURNS OF OTHER 990 ORGANIZATIONS THAT ARE PUBLISHED WITH GUIDESTAR. SALARY I NQUIRIES OF SIMILAR JOBS ARE REVIEWED ON CAREERBUILDER AND SALARY.COM AND OTHER FORMAL SAL ARY SURVEYS. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION C, LINE 19 | SCC MAINTAINS A WEBSITE AT WWW.PATHWAYLENDING.ORG WHERE THE PUBLIC IS GIVEN A CONTACT NAME FOR FURTHER INFORMATION REGARDING AVAILABILITY OF DISCLOSURES. THE 990 IS ALSO AVAILABLE ON THE GUIDESTAR WEBSITE. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-------------------------------|---|
| FORM 990, PART VII, SECTION B | AS PART OF THEIR LOAN PROGRAM, PATHWAY SOMETIMES REMITS PAYMENTS TO CERTAIN THIRD PARTY CREDITORS ON BEHALF OF THE LOAN CLIENT AS PART OF THE SERVICING OF THE LOAN OR AT THE TIME OF THE LOAN CLOSING. THESE CREDITORS THEN RECEIVE A FORM 1099 MISC FROM PATHWAY FOR SERVICES RENDERED TO THE LOAN CLIENT, NOT FOR SERVICES RENDERED TO PATHWAY. THUS, PATHWAY DOES NOT LIST THOSE CREDITORS AS PAYMENTS FOR SERVICES ON FORM 990, PART VII, SECTION B. |

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2020

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
SOUTHEAST COMMUNITY CAPITAL CORPORATION
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

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

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|--|--|---------------------|---------------------------|--|
| (1) PATHWAY MEMPHIS LLC 201 VENTURE CIRCLE NASHVILLE, TN 37228 | EXPAND OPERATIONS OF PATHWAY LENDING IN THE MEMPHIS, TN AREA | TN | -10,613 | 494,387 | SOUTHEAST COMMUNITY CAPITAL CORPORATION |
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Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|---|-------------------------|--|----------------------------------|---|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|---|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|--|----|
| | | | | | | | | Yes | No |
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

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 related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|--|--------------------------------------|-------------------------------|---|
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Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e) Are all partners section 501(c)(3) organizations? | | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|---|-------------------------|--|--|--|----|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
| | | | | Yes | No | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | | |
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Part VII **Supplemental Information**

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

| Return Reference | Explanation |
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