

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.

**2022**

Open to Public  
Inspection

<b>A</b> For the <b>2022</b> calendar year, or tax year beginning and ending																												
<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <b>SOUTHEAST COMMUNITY CAPITAL CORPORATION</b> <b>D/B/A PATHWAY LENDING</b></td> <td rowspan="4"><b>D</b> Employer identification number  <b>62-1823596</b></td> </tr> <tr> <td colspan="2">Doing business as</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2"><b>201 VENTURE CIRCLE</b></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <b>NASHVILLE, TN 37228</b></td> <td><b>E</b> Telephone number <b>615-425-7171</b></td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer: <b>CLINT GWIN</b> <b>SAME AS C ABOVE</b></td> <td><b>G</b> Gross receipts \$ <b>36,175,175.</b></td> </tr> <tr> <td colspan="2"><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td><b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2"><b>J</b> Website: <b>WWW.PATHWAYLENDING.ORG</b></td> <td><b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2"><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other</td> <td><b>H(c)</b> Group exemption number</td> </tr> <tr> <td colspan="2"><b>L</b> Year of formation: <b>1999</b></td> <td><b>M</b> State of legal domicile: <b>TN</b></td> </tr> </table>	<b>C</b> Name of organization <b>SOUTHEAST COMMUNITY CAPITAL CORPORATION</b> <b>D/B/A PATHWAY LENDING</b>		<b>D</b> Employer identification number  <b>62-1823596</b>	Doing business as		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>201 VENTURE CIRCLE</b>		City or town, state or province, country, and ZIP or foreign postal code <b>NASHVILLE, TN 37228</b>		<b>E</b> Telephone number <b>615-425-7171</b>	<b>F</b> Name and address of principal officer: <b>CLINT GWIN</b> <b>SAME AS C ABOVE</b>		<b>G</b> Gross receipts \$ <b>36,175,175.</b>	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>J</b> Website: <b>WWW.PATHWAYLENDING.ORG</b>		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>H(c)</b> Group exemption number	<b>L</b> Year of formation: <b>1999</b>		<b>M</b> State of legal domicile: <b>TN</b>
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**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE LENDING SOLUTIONS, EDUCATION AND SUPPORT SERVICES TO UNDERSERVED SMALL BUSINESSES.</b>																								
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.																								
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>8</b>																								
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>5</b>																								
	<b>5</b> Total number of individuals employed in calendar year 2022 (Part V, line 2a) ..... <b>66</b>																								
	<b>6</b> Total number of volunteers (estimate if necessary) ..... <b>1</b>																								
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>295,333.</b>																								
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11 ..... <b>270,703.</b>																									
<b>Revenue</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Prior Year</th> <th>Current Year</th> </tr> </thead> <tbody> <tr> <td><b>8</b> Contributions and grants (Part VIII, line 1h) .....</td> <td align="right">12,991,152.</td> <td align="right">23,297,847.</td> </tr> <tr> <td><b>9</b> Program service revenue (Part VIII, line 2g) .....</td> <td align="right">9,254,600.</td> <td align="right">9,225,414.</td> </tr> <tr> <td><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....</td> <td align="right">250,416.</td> <td align="right">1,867,757.</td> </tr> <tr> <td><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....</td> <td align="right">59,287.</td> <td align="right">-38,104.</td> </tr> <tr> <td><b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....</td> <td align="right">22,555,455.</td> <td align="right">34,352,914.</td> </tr> </tbody> </table>		Prior Year	Current Year	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	12,991,152.	23,297,847.	<b>9</b> Program service revenue (Part VIII, line 2g) .....	9,254,600.	9,225,414.	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	250,416.	1,867,757.	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	59,287.	-38,104.	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	22,555,455.	34,352,914.						
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**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer		Date		
	<b>CLINT GWIN, PRESIDENT</b>				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<b>FRANCES E. LEAHY</b>	<b>FRANCES E. LEAHY</b>	<b>05/10/23</b>		<b>P00713593</b>
<b>Preparer Use Only</b>	Firm's name	Firm's EIN	Phone no.		
	<b>KRAFTCPAS PLLC</b>	<b>62-0713250</b>	<b>615-242-7351</b>		
Firm's address <b>555 GREAT CIRCLE ROAD</b> <b>NASHVILLE, TN 37228</b>					

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**

**D/B/A PATHWAY LENDING**

Form 990 (2022)

62-1823596

Page **2**

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

**TO PROVIDE LENDING SOLUTIONS, EDUCATION AND SUPPORT SERVICES WHICH IMPACT 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 \$ 26,229,545. including grants of \$ 14,271,394. ) (Revenue \$ 10,500,573. )

**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.**

**4b** (Code: ) (Expenses \$ 2,182,498. including grants of \$ ) (Revenue \$ 153,880. )

**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.**

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

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 28,412,043.

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**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

Form 990 (2022)

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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<b>X</b>
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		<b>X</b>
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		<b>X</b>
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<b>X</b>
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i>		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		<b>X</b>
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>X</b>	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		<b>X</b>
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		<b>X</b>
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		<b>X</b>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<b>X</b>	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
<b>b</b> 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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		<b>X</b>
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		<b>X</b>
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		<b>X</b>
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		<b>X</b>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		<b>X</b>
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>X</b>	

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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> .....	<b>22</b> X	
<b>23</b> 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> .....	<b>23</b> X	
<b>24a</b> 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> .....		<b>24a</b> X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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> .....		<b>25a</b> X
<b>b</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> .....		<b>25b</b> X
<b>26</b> 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> .....	<b>26</b> X	
<b>27</b> 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> .....		<b>27</b> X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b>	X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b> X	
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> 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> .....	<b>32</b>	X
<b>33</b> 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> .....	<b>33</b> X	
<b>34</b> 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> .....	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	<b>35a</b>	X
<b>b</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> .....	<b>35b</b>	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		<b>36</b> X
<b>37</b> 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> .....		<b>37</b> X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	<b>38</b> X	

**Note:** All Form 990 filers are required to complete Schedule O

**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
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b> 49	
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....	<b>1b</b> 0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b> X	

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

		Yes	No
<b>2a</b> 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	<b>2a</b> 66		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	<b>X</b>	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	<b>X</b>	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>	<b>X</b>	
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>		<b>X</b>
<b>b</b> If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		<b>X</b>
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		<b>X</b>
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> 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?	<b>6a</b>		<b>X</b>
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>		<b>X</b>
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		<b>X</b>
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		<b>X</b>
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		<b>X</b>
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders	<b>11a</b>		
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		<b>X</b>
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>		
<b>15</b> 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? If "Yes," see the instructions and file Form 4720, Schedule N.	<b>15</b>		<b>X</b>
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>		<b>X</b>
<b>17 Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>		

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

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

**Section A. Governing Body and Management**

			Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	<b>8</b>		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
<b>b</b> Enter the number of voting members included on line 1a, above, who are independent	<b>1b</b>	<b>5</b>		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>			<b>X</b>
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	<b>3</b>			<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>			<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>			<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>			<b>X</b>
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>			<b>X</b>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>			<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
<b>a</b> The governing body?	<b>8a</b>		<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>		<b>X</b>	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<b>9</b>			<b>X</b>

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

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

**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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website    ☒ Another's website    ☒ Upon request    ☐ Other (explain on Schedule O)

**19** Describe on 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 - 615-425-7171  
201 VENTURE CIRCLE, NASHVILLE, TN 37228

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**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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the 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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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	50.00			X				517,787.	0.	15,675.
(2) BARBARA HARRIS EXECUTIVE VICE PRESIDENT A	50.00			X				322,260.	0.	19,861.
(3) HANK HELTON EXECUTIVE VICE PRESIDENT	50.00			X				321,252.	0.	26,016.
(4) AMY BUNTON EXECUTIVE VICE PRESIDENT A	50.00			X				316,617.	0.	25,989.
(5) KEITH HICKEY SVP, LENDING	50.00				X			211,725.	0.	21,907.
(6) JAMES (MIKE) BLACKWELL SVP, CHIEF CREDIT OFFICER	50.00				X			182,152.	0.	13,592.
(7) DANIEL WILSON SVP OF LENDING OPERATIONS	50.00				X			155,946.	0.	9,695.
(8) LESLIE HAYES SVP OF EDUCATION AND ENTRE	50.00				X			152,495.	0.	22,604.
(9) LORI ROCHELLE SVP OF CORPORATE OPERATION	50.00					X		140,140.	0.	8,522.
(10) JONATHAN EISEN REGIONAL LENDER	50.00					X		139,755.	0.	12,734.
(11) ROBERT LANCASTER DIRECTOR OF BUSINESS ADVISORY SERVIC	50.00					X		136,928.	0.	6,533.
(12) TRACY BUCKLEY COMMERCIAL REAL ESTATE LENDER	50.00					X		136,725.	0.	13,076.
(13) PAUL HOFFMANN DIRECTOR OF ECONOMIC AND SOCIAL IMPA	50.00					X		135,242.	0.	14,136.
(14) DR WILLIAM H (HERB) BYRD, III CHAIRMAN	1.50	X		X				0.	0.	0.
(15) JON DAVIES VICE CHAIRMAN	1.50	X		X				0.	0.	0.
(16) DAVE BEREZOV DIRECTOR	1.50	X						0.	0.	0.
(17) IVANETTA DAVIS-SAMUELS DIRECTOR	1.50	X						0.	0.	0.

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**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 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) ANDRE GIST DIRECTOR	1.50	X						0.	0.	0.
(19) CINDY HERRON DIRECTOR	1.50	X						0.	0.	0.
(20) TOM HUNTER DIRECTOR	1.50	X						0.	0.	0.
(21) HUGH QUEENER DIRECTOR	1.50	X						0.	0.	0.
<b>1b Subtotal</b> .....								2,869,024.	0.	210,340.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								2,869,024.	0.	210,340.

**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 **21**

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

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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 PO BOX 24989, NASHVILLE, TN 37202	TECHNOLOGY SUPPORT AND EQUIPMENT	222,220.
PROVISIONS TECHNOLOGY SOLUTIONS PO BOX 197605, NASHVILLE, TN 37219	TECHNOLOGY SUPPORT	137,113.

**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 **3**

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**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b>	Federated campaigns .....	<b>1a</b>				
	<b>b</b>	Membership dues .....	<b>1b</b>				
	<b>c</b>	Fundraising events .....	<b>1c</b>				
	<b>d</b>	Related organizations .....	<b>1d</b>				
	<b>e</b>	Government grants (contributions) .....	<b>1e</b>	13,749,728.			
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	9,548,119.			
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$			
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		23,297,847.			
<b>Program Service Revenue</b>	<b>2 a</b>	LOAN INTEREST	Business Code	522291	7,823,076.	7,823,076.	
	<b>b</b>	FINANCING FEES AND CHARGES		522291	970,413.	970,413.	
	<b>c</b>	FEE INCOME		522291	431,925.	431,925.	
	<b>d</b>						
	<b>e</b>						
	<b>f</b>	All other program service revenue .....					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f .....		9,225,414.			
	<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		1,429,039.	1,429,039.	
<b>4</b>		Income from investment of tax-exempt bond proceeds .....					
<b>5</b>		Royalties .....					
<b>6 a</b>		Gross rents .....	(i) Real	59,875.			
<b>b</b>		Less: rental expenses ...	(ii) Personal	97,979.			
<b>c</b>		Rental income or (loss)		-38,104.			
<b>d</b>		Net rental income or (loss) .....		-38,104.		-28,090.	-10,014.
<b>7 a</b>		Gross amount from sales of assets other than inventory	(i) Securities	2163000.			
<b>b</b>		Less: cost or other basis and sales expenses .....	(ii) Other	1724282.			
<b>c</b>		Gain or (loss) .....		438,718.			
<b>d</b>		Net gain or (loss) .....		438,718.		323,423.	115,295.
<b>8 a</b>		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....					
<b>b</b>		Less: direct expenses .....					
<b>c</b>		Net income or (loss) from fundraising events .....					
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....						
<b>b</b>	Less: direct expenses .....						
<b>c</b>	Net income or (loss) from gaming activities .....						
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....						
<b>b</b>	Less: cost of goods sold .....						
<b>c</b>	Net income or (loss) from sales of inventory .....						
<b>Miscellaneous Revenue</b>	<b>11 a</b>		Business Code				
	<b>b</b>						
	<b>c</b>						
	<b>d</b>	All other revenue .....					
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....					
	<b>12</b>	<b>Total revenue.</b> See instructions .....		34,352,914.	10654453.	295,333.	105,281.

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

D/B/A PATHWAY LENDING

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**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	6,907,452.	6,907,452.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	7,363,942.	7,363,942.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	2,335,573.	1,733,066.	602,385.	122.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	4,240,005.	4,080,883.	150,129.	8,993.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	96,799.	93,890.	2,689.	220.
<b>9</b> Other employee benefits	534,933.	480,304.	53,739.	890.
<b>10</b> Payroll taxes	454,755.	403,069.	51,041.	645.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	136,430.	135,921.	509.	
<b>c</b> Accounting	44,860.	40,374.	4,486.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	607,443.	589,385.	18,058.	
<b>12</b> Advertising and promotion	60,869.	60,699.	170.	
<b>13</b> Office expenses	278,757.	262,252.	16,505.	
<b>14</b> Information technology	367,076.	341,381.	25,695.	
<b>15</b> Royalties				
<b>16</b> Occupancy	120,704.	111,457.	9,247.	
<b>17</b> Travel	236,986.	232,464.	4,209.	313.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	159,409.	153,084.	6,278.	47.
<b>20</b> Interest	3,282,720.	3,280,559.	2,161.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	72,289.	65,060.	7,229.	
<b>23</b> Insurance	105,174.	94,673.	10,501.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>LOAN LOSS PROVISION REC</b>	1,887,918.	1,887,918.		
<b>b</b> <b>UBI TAX PAID</b>	84,862.		84,862.	
<b>c</b> <b>MISCELLANEOUS</b>	55,614.	53,985.	1,629.	
<b>d</b> <b>DUES, LICENSES AND PERM</b>	42,781.	40,225.	2,556.	
<b>e</b> All other expenses				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	29,477,351.	28,412,043.	1,054,078.	11,230.
<b>26</b> <b>Joint costs.</b> 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)				

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

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**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	13,062,503.	<b>1</b>	8,473,678.
	<b>2</b> Savings and temporary cash investments .....	99,541,182.	<b>2</b>	132,391,986.
	<b>3</b> Pledges and grants receivable, net .....	681,181.	<b>3</b>	277,519.
	<b>4</b> Accounts receivable, net .....	2,398,109.	<b>4</b>	1,104,640.
	<b>5</b> Loans and other receivables from 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 .....		<b>5</b>	361,453.
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....	408,547.	<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	144,254,869.	<b>7</b>	138,512,368.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	318,327.	<b>9</b>	316,112.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	2,255,283.		
	<b>b</b> Less: accumulated depreciation .....	907,422.		
		3,033,151.	<b>10c</b>	1,347,861.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	301,200.	<b>12</b>	258,200.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 .....	397,809.	<b>15</b>	533,561.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	264,396,878.	<b>16</b>	283,577,378.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,144,363.	<b>17</b>	4,217,429.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	6,112,020.	<b>19</b>	7,271,285.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	13,044,510.	<b>23</b>	11,896,168.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	141,782,080.	<b>24</b>	152,596,392.
	<b>25</b> 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 .....	57,893,940.	<b>25</b>	59,300,576.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	220,976,913.	<b>26</b>	235,281,850.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	41,409,254.	<b>27</b>	46,833,242.
	<b>28</b> Net assets with donor restrictions .....	2,010,711.	<b>28</b>	1,462,286.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	43,419,965.	<b>32</b>	48,295,528.
	<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	264,396,878.	<b>33</b>	283,577,378.

Form **990** (2022)

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

Form 990 (2022)

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**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	34,352,914.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	29,477,351.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	4,875,563.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	43,419,965.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	48,295,528.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>b</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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>c</b>	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 on Schedule O.	<b>X</b>	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	<b>X</b>	
<b>b</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 on Schedule O and describe any steps taken to undergo such audits _____	<b>X</b>	

Form **990** (2022)

**SCHEDULE A**  
**(Form 990)**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

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).)
- 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 **section 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 on 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		
<b>Total</b>						

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule A (Form 990) 2022

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	6037623.	6533706.	12388380.	12991152.	23247847.	61198708.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	6037623.	6533706.	12388380.	12991152.	23247847.	61198708.
<b>5</b> 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) .....						1217490.
<b>6 Public support.</b> Subtract line 5 from line 4.						59981218.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>7</b> Amounts from line 4 .....	6037623.	6533706.	12388380.	12991152.	23247847.	61198708.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....			27,647.	42,995.	295,333.	365,975.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						61564683.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	42,629,910.
<b>13 First 5 years.</b> 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 <b>stop here</b> .....						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	97.43 %
<b>15</b> Public support percentage from 2021 Schedule A, Part II, line 14 .....	<b>15</b>	90.35 %
<b>16a 33 1/3% support test - 2022.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2021.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2022.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		
		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		
		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		
		<input type="checkbox"/>

Schedule A (Form 990) 2022

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

Schedule A (Form 990) 2022

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**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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (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**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2022</b> (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from <b>2021</b> Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2022.** 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 - 2021.** 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, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> 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>b</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>		
<b>c</b> 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>		
<b>4a</b> 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>b</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>		
<b>c</b> 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>		
<b>5a</b> 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>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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>b</b> Did one or more disqualified persons (as defined on 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>		
<b>c</b> Did a disqualified person (as defined on 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>		
<b>10a</b> 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>b</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
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described on line 11a above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>2</b>		
<b>3</b> By reason of the relationship described on 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? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

	Yes	No
<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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? If "Yes," then in <b>Part VI</b> 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.		
<b>2a</b>		
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> 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? If "Yes" or "No" provide details in <b>Part VI</b> .		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.		
<b>3b</b>		

**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	<b>Adjusted Net Income</b> (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):		
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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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 0.85 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	<b>Distributable Amount.</b> 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).		

Schedule A (Form 990) 2022

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Schedule A (Form 990) 2022

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

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>	
<b>9</b> Distributable amount for 2022 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017			
<b>b</b> From 2018			
<b>c</b> From 2019			
<b>d</b> From 2020			
<b>e</b> From 2021			
<b>f Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7 Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018			
<b>b</b> Excess from 2019			
<b>c</b> Excess from 2020			
<b>d</b> Excess from 2021			
<b>e</b> Excess from 2022			

Schedule A (Form 990) 2022

SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule A (Form 990) 2022

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**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.)

Supplemental information area with horizontal lines for text entry.

**Schedule B**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990 or Form 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Name of the organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

**General Rule**

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ .....

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

Name of organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>1,000,000.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>690,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>778,633.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>511,086.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>1,857,536.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>1,508,601.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 12,161,344.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 1,270,847.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	LOAN FORGIVENESS	\$ 1,000,000.	06/05/22
8	LOAN FORGIVENESS	\$ 1,270,847.	04/26/22
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	



Name of organization

SOUTHEAST COMMUNITY CAPITAL CORPORATION  
D/B/A PATHWAY LENDING

Employer identification number

62-1823596

**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

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

**SCHEDULE D**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**Open to Public  
Inspection**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

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

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

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

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

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ..... \$ .....

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

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

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

b Assets included in Form 990, Part X ..... \$ .....

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

Schedule D (Form 990) 2022

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

Schedule D (Form 990) 2022

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**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 make significant use of its collection items (check all that apply):
- |   |  |
|---|--|
| <b>a</b> <input type="checkbox"/> Public exhibition                   | <b>d</b> <input type="checkbox"/> Loan or exchange program |
| <b>b</b> <input type="checkbox"/> Scholarly research                  | <b>e</b> <input type="checkbox"/> Other _____              |
| <b>c</b> <input type="checkbox"/> Preservation for future generations |  |
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 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 on Part XIII ☐

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

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

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

**b** If "Yes" on line 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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings		1,937,758.	682,642.	1,255,116.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		317,525.	224,780.	92,745.
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,347,861.

Schedule D (Form 990) 2022

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**  
**D/B/A PATHWAY LENDING**

Schedule D (Form 990) 2022

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**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A) .....		
(B) .....		
(C) .....		
(D) .....		
(E) .....		
(F) .....		
(G) .....		
(H) .....		
<b>Total.</b> (Col. (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) .....		
<b>Total.</b> (Col. (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) .....	
<b>Total.</b> (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) <b>LINES OF CREDIT</b>	<b>58,000,000.</b>
(3) <b>UNAMORTIZED LOAN ORIGINATION FEES</b>	<b>1,300,576.</b>
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>59,300,576.</b>

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... ☒

Schedule D (Form 990) 2022

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule D (Form 990) 2022

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**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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	34,459,920.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	9,027.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	97,979.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	107,006.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	34,352,914.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	34,352,914.

**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.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	29,584,357.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	9,027.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	97,979.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	107,006.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	29,477,351.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	29,477,351.

**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.

**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.

**Part XIII** Supplemental Information (continued)

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 97,979.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 97,979.

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

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, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☒ **Yes** ☐ **No**
- 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. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
SEWPRETTY DESIGNS 7602 MAPLEHURST DRIVE OOLTEWAH, TN 37363	85-2419771		12,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
D GLOBAL PARTNERS CONSULTING 1408 BARNBROOK CV ANTIOCH, TN 37013	85-2405020		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DOWNTOWN CANDLE COMPANY 3462 COBBLE STREET NASHVILLE, TN 37211	20-2092813		12,343.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRI CREATIVE GROUP LLC 6339 CHARLOTTE PIKE SUITE 965 NASHVILLE, TN 37207	82-2959753		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
EMERALD LUXURY TRANSPORTATION, LLC 1321 MURFREESBORO PIKE, SUITE 500 NASHVILLE, TN 37217	45-4341369		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WHIZBANG INC. 116 ORIEL AVENUE NASHVILLE, TN 37210	94-3429559		30,757.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... **0.**
- 3** Enter total number of other organizations listed in the line 1 table ..... **351.**

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Schedule I (Form 990) 2022

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIVING WATERS BREWING COMPANY LLC 1056 E TRINITY LN., SUITE 101 NASHVILLE, TN 37216	82-4249952		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CATFISH MOVING & SONS LLC 3520 CUMBERLAND COVE DRIVE NASHVILLE, TN 37207	47-4750736		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RHIZOME PRODUCTIONS INC 900 44TH AVENUE N. NASHVILLE, TN 37209	27-4520401		32,998.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ENCIRCLE ACUPUNCTURE 805 WOODLAND STREET, SUITE 340 NASHVILLE, TN 37206	27-2057487		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE CALLAWAY LLC 1020 N 16TH STREET NASHVILLE, TN 37206	81-1158485		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BARN FRESH PINBALL, LLC 917 B ELVIRA AVENUE NASHVILLE, TN 37216	82-2421366		20,115.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ANDRIVEEWS HOSPITALITY LLC 555 CHURCH STREET, SUITE 101 NASHVILLE, TN 37219	82-1407859		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SOUTHERN LIGHTS ELECTRIC CO. 2100 DUNN AVENUE NASHVILLE, TN 37211	46-1519707		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE FOUNTAIN OF JUICE, LLC 908 51ST AVENUE N. NASHVILLE, TN 37209	46-5290962		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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## SOUTHEAST COMMUNITY CAPITAL CORPORATION

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITTLE HARPETH CHILDRIVEEN'S DENTISTRY - 7640 HIGHWAY 70S, SUITE 101 - NASHVILLE, TN 37221	81-2712208		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TNB-FITNESS, LLC 509 CRAIGHEAD STREET, SUITE100 NASHVILLE, TN 37204	46-2918979		34,399.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BONTEMPS, LLC 5022 OLD HYDES FERRY PIKE NASHVILLE, TN 37218	82-1354334		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SHUGGA HI BAKERY AND CAF 206C POINT EAST DRIVE NASHVILLE, TN 37207	81-3124121		34,194.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FITNESS TENNESSEE V LLC 2310 LEBANON PIKE NASHVILLE, TN 37214	84-2351094		24,397.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE EAST ROOM LLC 2412 GALLATIN AVENUE NASHVILLE, TN 37206	82-4938714		17,330.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE DRIVEY HOUSE, LLC 2104 CRESTMOOR ROAD NASHVILLE, TN 37215	46-4412365		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LNC NASHVILLE, LLC 45 LINDSLEY AVENUE NASHVILLE, TN 37210	46-2519495		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SKYTOPIA 3908 LEBANON PK. #8145 HERMITAGE, TN 37076	46-3714423		12,870.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEKE COMPANY 519 SAINT JULES LN NASHVILLE, TN 37211	86-3543138		14,732.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JANE & WON INC 900 ROSA L PARKS BLVD. NASHVILLE, TN 37208-2600	82-2922007		18,198.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUITEELE ENTERPRISES INC. 6911 LENOX VILLAGE DRIVE. NASHVILLE, TN 37211	26-1173906		11,423.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FLEMING & ASSOCIATES, LLC 1321 MURFREESBORO PIKE, SUITE 110 NASHVILLE, TN 37217	80-0225322		29,247.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
HUMMUS CHICK, LLC 3510 HILLSBORO PIKE, #64 NASHVILLE, TN 37215	46-4259931		10,277.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
COMSTASIS LLC 1600 KNOWLES STREET NASHVILLE, TN 37208	83-3240679		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MICHELLE LORGE CO. 3805 CREEKSIDE DRIVE NASHVILLE, TN 37211	82-2318549		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LIZ'S KITCHEN, LLC 107 MEMORIAL DRIVE, UNIT A GOODLETTSVILLE, TN 37072	47-1393125		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RESCUE ELECTRIC LLC 4016 ENCHANTED WAY NASHVILLE, TN 37218	85-1120628		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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## SOUTHEAST COMMUNITY CAPITAL CORPORATION

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELLEVATED OUTCOMES LLC 1401 CALVIN AVENUE NASHVILLE, TN 37206	82-3719514		23,454.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DRIVEKMTTR COLLECTIVE, LLC 725 S DICKERSON RD GOODLETTSVILLE, TN 37072	81-1916146		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FOSUITER ENTERPRISES INC 7008 SPRINGWATER STREET SMYRNA, TN 37167	62-1851706		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NAJEAL HAIR STUDIO INC 2701 JEFFERSON STREET SUITE 102 NASHVILLE, TN 37208	33-1059193		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BUCANAS 2009 INC 3810 NOLENSVILLE PIKE NASHVILLE, TN 37211	27-1171202		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CACAWA, LLC. 5115 CENTENNIAL BLVD NASHVILLE, TN 37209	47-4705783		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
APPLE & OAK, LLC 717 PORTER RD NASHVILLE, TN 37206	47-4989325		28,942.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KEEPITFADED CO 939 POST OAK DRIVE ANTIOCH, TN 37013	84-3688019		15,824.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KNOCKOUT FITNESS LLC 2422 WINFORD AVENUE NASHVILLE, TN 37211	62-1712103		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIRSTAR PARTY TRAILER 4528 RACCOON TRAIL HERMITAGE, TN 37076	47-5197921		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ADEPT LIMOUSINE LLC. 440 LANDINGS WAY MT JULIET, TN 37122	62-1871015		21,131.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MUSIC CITY CREPES 900 ROSA L. PARKS BLVD. NASHVILLE, TN 37208	46-4077333		20,328.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CROSSROADS SPORTS BAR LLC 2209 MURFREESBORO PK NASHVILLE, TN 37217	47-2945894		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE SOUTHERN V, LLC 1200 BUCHANAN STREET NASHVILLE, TN 37208	81-0984965		32,921.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BUBBLE LOVE, LLC 900 ROSA L PARKS BLVD NASHVILLE, TN 37208	83-0755122		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GO BIG TRANSPORTATION, LLC 1600 DIVISION SUITEET, SUITE 225 NASHVILLE, TN 37203	46-4197195		15,128.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WAXING AND BLADING 5452 HICKORY PARK DRIVE ANTIOCH, TN 37013	36-7110375		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DOG AND A DUCK 5016 CENTENNIAL BLVD., SUITE 200 NASHVILLE, TN 37209	27-3358790		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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SOLTANI ENTERPRISES 329 PEACHTREE STREET NASHVILLE, TN 37210	82-4379900		10,110.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BRIGHTSKIES PAYROLL & BOOKKEEPING SERVICES, LLC - 41 PEABODY STREET NASHVILLE, TN 37210 - NASHVILLE, TN 37210	81-4940865		16,317.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
1 LIFELINE MEDICAL TRANSPORT LLC 1718 CHURCH STREET #330653 NASHVILLE, TN 37203	83-1950298		24,953.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
R & R CLEANING AND HOME ESSENTIALS, LLC - 6339 CHARLOTTE AVENUE UNIT B151 - NASHVILLE, TN 37209	36-4845081		11,938.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PRETTY GIRL COSMETICS 708 4TH AVENUE N NASHVILLE, TN 37219	85-2195985		11,293.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRILUNA LLC 1148 RIVERBIRCH WAY HERMITAGE, TN 37076	83-1457578		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SURREAL BLOW OUT BAR 414 WOODLAND STREET NASHVILLE, TN 37206	81-4970921		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CARE SHERPA LLC 6409 HOLLY TRACE COURT NASHVILLE, TN 37221	83-3650106		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NETWORKKNOWS LLC 201 WARREN CT OLD HICKORY, TN 37138-3846	84-2302747		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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GOLDEN CROSS LOGISTICS LLC PO BOX 1993 MADISON, TN 37116	47-2120275		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BROWN + FLATT ADVISORS, PLLC 527 RIVERGATE PARKWAY GOODLETTSVILLE, TN 37072	26-0043243		30,130.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DONELSON HOT YOGA LLC 2428 LEBANON PIKE NASHVILLE, TN 37214	82-3858751		18,751.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE STUDIO OF MUSCLE INTEGRATION, LLC - 328 BLUE HILLS DRIVE - NASHVILLE, TN 37214	30-0550610		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DOLLAR CITY LLC 833 HAMILTON CROSSING ANTIOCH, TN 37013	82-4226588		31,937.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SKYLAR MAINTENANCE & ELECTRIC LLC 1315 N 6TH ST NASHVILLE, TN 37207	82-2405537		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KERNELS GOURMET POPCORN LLC 2501 B GALLATIN AVENUE NASHVILLE, TN 37206	36-4763669		22,363.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CALISTA INC 101 PAGE RD NASHVILLE, TN 37205	82-2677398		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BRIGHTSIDE BAKESHOP, LLC 5402B PENNSYLVANIA AVENUE NASHVILLE, TN 37209	81-3870384		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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THE FREEDOM GROUP INC 4741 TROUSDALE DRIVE, SUITE 2 NASHVILLE, TN 37220	82-2267146		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SICKO, INC. 301 SOUTH PERIMETER PARK DRIVE SUITE NASHVILLE, TN 37211	84-2348053		15,032.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRES GAUCHOS LLC 3955 NOLENSVILLE PK NASHVILLE, TN 37211	81-4522743		16,617.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TITO'S PLAYLAND, LLC 3955 NOLENSVILLE PK NASHVILLE, TN 37211	81-0693201		18,383.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DDNS CONSULTING LLC 201 WARREN CT OLD HICKORY, TN 37138	84-3795690		24,841.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DIMETA SMITH CPA 3354 PERIMETER HILL DRIVE, SUITE 11 NASHVILLE, TN 37211	27-2443905		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRADE ON DEMAND INC. 3102 WEST END AVENUE, SUITE 400 NASHVILLE, TN 37203	82-2725623		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BLACK BUSINESS BOOM 6339 CHARLOTTE PIKE NASHVILLE, TN 37209	85-1176316		26,314.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ECHOES OF EDEN 1007 RIVERSIDE DRIVE NASHVILLE, TN 37206	83-2268409		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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COMMISSARY, LLC 2305 12TH AVENUE SOUTH UNIT B NASHVILLE, TN 37204	81-5411095		14,304.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FLORA LLC 305 E TRINITY LANE, SUITE 103 NASHVILLE, TN 37207	81-1363663		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ARCHINERD PLLC 1521B RUSSELL STREET NASHVILLE, TN 37206	85-1716144		18,576.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CASSANDRIVEA RUCKER 3524 KYBALD CT MURFREESBORO, TN 37128	88-1054216		16,340.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
IHN MANAGEMENT COMPANY, LLC 4334 LEBANON PK HERMITAGE, TN 37076	81-5365782		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NATURAL AWAKENINGS HAIR SALON LLC 5006 SOUTHFORK BLVD OLD HICKORY, TN 37138	47-1597199		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
COCORICO, LLC 712 STOCKELL ST NASHVILLE, TN 37207	84-2964370		30,482.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CATRICE JAMES CPA, PC 118 30TH AVENUE N NASHVILLE, TN 37203	40-0016372		18,286.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ENERGY ELECTIVES LLC 4921 INDIAN SUMMER DRIVE NASHVILLE, TN 37207	27-3125537		26,230.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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SANCHEZ-VEGA COMMUNICATIONS, LLC 5036 SUNSET WAY HERMITAGE, TN 37076	47-2861494		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MINORITIES IN MEDIA CONNECT 1623 9TH AVENUE NORTH NASHVILLE, TN 37208	81-3813130		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TOTALLY RAD TOYHOUSE 7013 CALDERWOOD DRIVE ANTIOCH, TN 37013	83-4343130		22,403.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KINNARD ENTERPRISES, INC. 1808 ANNALEE DRIVE ANTIOCH, TN 37013	62-1694813		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PLANE + SIMPL LLC 1315 DICKERSON PIKE NASHVILLE, TN 37207	82-1454640		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MILLER COMICS AND GAMES, INC. 1574C GALLATIN PIKE N MADISON, TN 37115	81-0869243		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE GOOD FILL LLC 1106 WOODLAND ST SUITE 2 NASHVILLE, TN 37206	82-1419615		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FAIRPOINTE PLANNING, LLC 704 WESLEYWOOD DRIVE NASHVILLE, TN 37205	83-2576828		16,762.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MATTHEWS DETAILING 4876 BARCLAY SQUARE DRIVE ANTIOCH, TN 37013	45-4373231		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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PEN & LEDGER LLC 780 PLOWSON ROAD MOUNT JULIET, TN 37203	47-2686853		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUCCULENT 887 SHARPE AVENUE NASHVILLE, TN 37206	81-5395660		21,405.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NASHVILLE CHIROPRACTIC, PLLC 917 8TH AVENUE S SUITE C NASHVILLE, TN 37203	47-2925813		32,923.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NINE TAIL LLC 1601 A RIVERSIDE DRIVE NASHVILLE, TN 37216	82-5337963		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
IN FULL BLOOM FLOWERS & GIFTS 3970 DODSON CHAPEL ROAD HERMITAGE, TN 37076	81-0711330		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MARIGOLD GOURMET POPCORN, LLC 818 13TH AVENUE S NASHVILLE, TN 37203	83-2997412		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RESERA LLC 1515 ELM HILL PIKE, SUITE 405 NASHVILLE, TN 37210	30-1003149		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TEMPERED CAFE, LLC 1201 5TH AVENUE N NASHVILLE, TN 37208	47-1954968		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CENTER STREET MEDIA 401 CENTER STREET OLD HICKORY, TN 37138	82-3764339		21,943.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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ALLANK & CO LLC 4535 HARDING PIKE, SUITE 302 NASHVILLE, TN 37205	46-1863288		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SURTI HOSPITALITY GROUP, LLC 1300B 3RD AVENUE N NASHVILLE, TN 37208	83-2034774		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ELEVATE CONSULTING, LLC 1011 GILLOCK STREET NASHVILLE, TN 37216	81-4214232		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JAMIE AND THE JONES LLC 1938 NEELYS BEND ROAD MADISON, TN 37115	45-2635224		15,636.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ATELIER UPTON SALON 1106 RICHMOND DRIVE NASHVILLE, TN 37216	47-2162804		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
2305 12 AVENUE SOUTH PARTNERS, LLC - 2305 12TH AVENUE S - NASHVILLE, TN 37204	83-0794006		13,875.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
A GREENER WAY, LLC P.O. BOX 1441 ANTIOCH, TN 37011	46-4094564		16,945.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JAMAR JACKSON PO BOX 281071 NASHVILLE, TN 37228	42-1649467		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRAMMELL LOVE LAW FIRM 7009 LENOX VILLAGE DRIVE, SUITE 103 NASHVILLE, TN 37211	26-1126832		14,749.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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RANDAL NASHVILLE BAMBOO GARDEN LLC 1800 WEST END AVENUE L-202 NASHVILLE, TN 37203	81-1636392		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DOUBLE S ENTERPRISES, LLC 5807 AVALON CT HERMITAGE, TN 37076	83-3313429		28,331.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BEAST HOUSE, INC. 3976 DICKERSON PIKE NASHVILLE, TN 37207	46-2927084		26,958.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
INNOVO MANAGEMENT LLC 100 TAYLOR ST UNIT A19 NASHVILLE, TN 37208	47-3178028		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PASSION TRANSPORTATION SERVICES, LLC - 1382 RURAL HILL RD UNIT 109 - ANTIOCH, TN 37013	82-3334644		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LAWSON INC 2739 LARMON DRIVE NASHVILLE, TN 37204	62-1050688		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
M&B'S IMPRESSIVE DESIGNS 907 RIVERGATE PARKWAY D3 GOODLETTSVILLE, TN 37072	81-2040285		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DATATEL NETWORK SERVICES LLC 1451 ELM HILL PIKE NASHVILLE, TN 37210	46-2723677		12,273.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SOUTH SIDE PUB, LLC 2190 NOLENSVILLE PIKE NASHVILLE, TN 37211	84-2172380		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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THE PLAYGROUND DOCTOR LLC 580 HIGHCREST DRIVE NASHVILLE, TN 37211	81-1716139		21,480.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JASON AND ASSOCIATES LLC 14977 OLD HICKORY BLVD NASHVILLE, TN 37211	45-1806519		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUITEPHENS BROTHERS AUTO INTERIOR, LLC - 1222A S DICKERSON RD - GOODLETTSVILLE, TN 37072	62-1677120		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MOULTRY PHOTOGRAPHY 1108 GOLDEN CREEK CT MURFREESBORO, TN 37129	84-2806522		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CURIOSITY AND COMPANY 301 DEMONBREUN ST UNIT 1113 NASHVILLE, TN 37201	82-3263760		17,250.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
HELEN'S HOT CHICKEN FAMILY CORPORATE LLC - 2010 SCARRITT PLACE - NASHVILLE, TN 37203	84-2828224		33,742.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
EXECUTIVE TRANSPORTATION, LLC 4592 WHITES CREEK PIKE WHITES CREEK, TN 37189	47-2432291		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RANDAL GRANNY 55002 PARTNERSHIP 4000 GRANNY WHITE PIKE NASHVILLE, TN 37204	45-5324685		25,178.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FORTY TEN LLC 4010 HILLSBORO PIKE NASHVILLE, TN 37215	82-1519538		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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MRB PROPERTY GROUP, INC 1111 FATHERLAND ST, UNIT 101 NASHVILLE, TN 37206	81-5405855		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SHOWPIECE SOLUTIONS LLC 818 19TH AVENUE SOUTH, APT 718 NASHVILLE, TN 37203	82-1001663		16,303.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CYH CORPORATION 2215 ELLISTON PL NASHVILLE, TN 37203	20-8038837		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MR. AARON'S GOODS 922 MITCHELL RD. NASHVILLE, TN 37206	84-2113136		11,179.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
OPPORTUNITY LANDSCAPES AND NURSERY LLC - 2605 JORDAN RIDGE DRIVE - NASHVILLE, TN 37218	45-5098866		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RA' NAILS INC 3340 VALLEY CREEK LANE NASHVILLE, TN 37207	46-4106261		12,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SERENDIPITY NASHVILLE INC. 2814 12TH AVENUE SOUTH SUITE 102 NASHVILLE, TN 37204	82-3895215		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ORLANDO J BOYD 1 VANTAGE WAY SUITE E-230 NASHVILLE, TN 37228	45-2537671		12,938.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FM21 TRUCKING LLC 1838 ISABELLE CT ANTIOCH, TN 37013	14-0974551		16,322.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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JANUARY MOON LLC 1816 ORDWAY PLACE NASHVILLE, TN 37206	47-4855363		13,353.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DAF LLC 3213 GRACE CREST POINT NASHVILLE, TN 37217	45-4953878		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SHOOTERS SPORTS BAR & GRILL 5851 OLD HICKORY BLVD SUITE B HERMITAGE, TN 37076	84-1693170		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LA SUPER MICHOCANA 3103 DEBBIE CT LA VERGNE, TN 37086	81-1985702		23,106.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THINKTHRU INC 3805 CREEKSIDE DRIVE NASHVILLE, TN 37211	47-4446666		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GO ANOTHER LEVEL INC. 1831 12TH AVENUE S SUITE 252 NASHVILLE, TN 37203	47-3457651		25,678.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MI COLOMBIA RESTAURANT LLC 1568 BELL ROAD NASHVILLE, TN 37211	82-4274503		34,968.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WCSQUIREWELL ENTERTAINMENT, LLC 612 W. DUE WEST AVENUE, G100 MADISON, TN 37115	84-3327518		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LOCKWOOD CRAFTSMEN LLC 207 ROSEHILL DRIVE GOODLETTSVILLE, TN 37072	82-2322007		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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TRUCKING FOR LESS LLC 615 CROLEY DRIVE NASHVILLE, TN 37209	46-4736044		27,156.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
A&M MARKETPLACE 7913 HARPEETH VIEW DRIVE NASHVILLE, TN 37221	84-2154982		25,595.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DETROIT AUTO & REPAIR 413 E OLD HICKORY BLVD MADISON, TN 37115	83-3370623		11,739.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
INTEGRITY SALON SERVICES INC. 4736 INDIAN SUMMER DRIVE. NASHVILLE, TN 37207	27-4551174		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BRANDON HENDERSON 983 DAVIDSON DRIVE NASHVILLE, TN 37205	82-1629215		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ABS AUTO SALES & SERVICE INC 2198 NOLENSVILLE PIKE NASHVILLE, TN 37210	83-0818750		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RYAN ROWLAND CREATIVE 223 MADISON ST, SUITE 211 MADISON, TN 37115	82-4132129		13,382.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
D&COMPANY PROMOTIONS LLC 3210 COLBY DRIVE NASHVILLE, TN 37211	46-3141005		10,335.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ART UP NASHVILLE LLC 1035 SEYMOUR AVENUE NASHVILLE, TN 37206	83-3188308		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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LAMAR BROTHERS, LLC 1006 FATHERLAND STREET 101B NASHVILLE, TN 37206	27-1803847		19,132.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JANIE LLC 2116 21ST AVENUE S NASHVILLE, TN 37212	46-0689059		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SEO ENTERPRISES, INC 222 OLD HICKORY BLVD SUITE 101 NASHVILLE, TN 37221	62-1431849		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RIO'S GRILL AND SUSHI LLC 237 4TH AVENUE NORTH NASHVILLE, TN 37219	82-5484076		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MILLER HOME SOLUTIONS LLC 4305 VALLEY GROVE DRIVE HERMITAGE, TN 37076	86-2097196		15,550.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GENTLE TOUCH HOME CARE SERVICES LLC - 509 CATO RIDGE CT - NASHVILLE, TN 37218	81-1203419		13,270.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LAMARVELOUS BALLOONS, LLC PO BOX 330543 NASHVILLE, TN 37013	87-4207840		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BLOOM ROOM MUSIC 574 JOYCE LANE NASHVILLE, TN 37216	82-4257488		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
AGRIN HEALTH LLC 507A HEATHER PLACE NASHVILLE, TN 37204	46-4826643		11,825.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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HTG COUNSELING AND CONSULTING, PLLC - P.O BOX 140581 - NASHVILLE, TN 37214	82-3531300		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WE CARE TOO HOMECARE SERVICES 607 W DUE WEST AVENUE SUITE 97 MADISON, TN 37115	26-4276468		15,227.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ONE ENTERPRISE 908 BLUE RIDGE DRIVE NASHVILLE, TN 37207	88-0661032		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MEMPHIS SOUL CAFE, LLC 2601 BROOKLYN AVENUE NASHVILLE, TN 37207	84-2232749		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BAR EAST LLC 1249 MARTIN STREET NASHVILLE, TN 37203	47-5577487		30,944.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DE-LUXE CLEANING SERVICES INC 106 REDD COURT NASHVILLE, TN 37211	90-0767577		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CAFE COCO LLC 210 LOUISE AVENUE NASHVILLE, TN 37203	87-2174607		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
VIRES LLC 6339 CHARLOTTE PIKE PMB 2044 NASHVILLE, TN 37209	27-2656677		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ARBITRAGE BROKERS. LLC 3161 LOCUST HOLLOW NOLENSVILLE, TN 37135	81-3038211		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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TAX AND INSURANCE SERVICES 455 ELYSIAN FIELDS RD NASHVILLE, TN 37211	83-1400825		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FREEDOM MANAGEMENT, LLC 1600 DRIVE DB TODD JR BLVD NASHVILLE, TN 37208	86-2320464		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RAKI & RUTH, LLC 331 GALLATIN PIKE S , SUITE 11 MADISON, TN 37115	88-2792243		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
VIZIONS INC. 3511 CAROLINE FARMS DRIVE MURFREESBORO, TN 37129	32-0644515		11,798.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
AO MEDIA LAB 240 NETHERLANDS BLVD LEBANON, TN 37090	85-3371832		15,226.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PAQUITA R PULLEN LLC 810 BELLEVUE RD APT 284 BELLEVUE, TN 37221	85-0756695		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DENISE L WILLIAMS 2594A MURFREESBORO PIKE NASHVILLE, TN 37217	68-0634658		14,185.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GHOT WINGZ, LLC 2617 GALLATIN PIKE NASHVILLE, TN 37216	38-3782501		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
A M SALES TRANSPORT LLC 1005 PRESTON DRIVE NASHVILLE, TN 37206	81-1119820		16,062.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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GRACEFUL HANDS CHIROPRACTIC & WELLNESS CENTER - 5505 EDMONDSON PIKE, SUITE 203 - NASHVILLE, TN 37211	47-1355555		19,839.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BEAUTY OBSESSION STUDIOS 903 DICKERSON PIKE NASHVILLE, TN 37207	85-2778130		19,141.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PREMIER FUNERAL & CREMATION SERVICES, LLC - 2706 LARMON AVENUE - NASHVILLE, TN 37204	83-0746470		12,103.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WISE CONTRACTORS LLC 4907 LOG CABIN RD B NASHVILLE, TN 37216	84-2578407		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TOLOGY BEAUTY SUPPLY 2417 CHAPMAN DRIVE NASHVILLE, TN 37206	05-0550763		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RADICAL RABBIT 497 ELYSIAN FIELDS RD APT E2 NASHVILLE, TN 37211	41-1759148		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MAGNIFICENT AUTO DETAIL 4206 MOSS RD ANTIOCH, TN 37013	45-4700251		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JACKSON PRIMARY CARE INC 3443 DICKERSON PIKE NASHVILLE, TN 37207	82-4734328		15,862.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PRECIOUS LITTLE FOOTSUITEPS CHILDCARE - 732 YOWELL AVENUE - MADISON, TN 37115	83-2112339		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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VILLAGE BAKERY AND PROVISIONS, LLC 212 THOMPSON LANE NASHVILLE, TN 37211	47-3008929		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SAWYER & GARNER LLC 4422 PECAN VALLEY RD NASHVILLE, TN 37218	81-5123180		12,461.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BEEMPIZZA LLC 207 RIDING CLUB CT GALLATIN, TN 37066	83-3054116		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PITTSTRANSPORTLLC P.O. BOX 1016 GOODLETTSVILLE, TN 37115	82-4736266		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LUXE BRIDAL STUDIO LLC 1224 2ND AVENUE S SUITE 101 NASHVILLE, TN 37210	85-0945873		26,151.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
XENERGY NET INC. 205 FREDIA VILLA MADISON, TN 37115	26-4045051		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ELITE ROOFING COMPANY OF NASHVILLE, INC. - 1048 JEFFERSON STREET - NASHVILLE, TN 37208	62-1481060		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
STORY WITH TORI SOLUTIONS 1437 TIMBER VALLEY DRIVE NASHVILLE, TN 37214	85-2239954		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PURSOLUTIONS, LLC 1203 RIVER VISTA AVENUE CHARLOTTESVILLE, VA 22901	47-4582954		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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PNK BUSINESS SERVICES INC 14977 OLD HICKORY BLVD NASHVILLE, TN 37211	20-8813828		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LOVE AND EXILE WINES LLC 715 MAIN ST NASHVILLE, TN 37206	81-5115953		21,417.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NASHVILLE URBAN WINERY LLC 715 MAIN ST, UNIT A NASHVILLE, TN 37206	81-3388087		13,583.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BEAUXS POSH UNISEX SALON PO BOX 1495 ANTIOCH, TN 37011	47-5654116		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MCM TRANSCO LLC 1345 BELL ROAD, UNIT 202 ANTIOCH, TN 37013	83-3188182		19,202.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
REED SMYTHE & COMPANY LLC 4411 HERBERT PL NASHVILLE, TN 37215	83-3072479		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GREENSTREET, INC 1101 MENZLER RD NASHVILLE, TN 37210	26-0525448		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BOBBY JOHN HENRY LLC 11 MUSIC SQ EAST #607 NASHVILLE, TN 37203	81-3979419		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MCH LANDSCAPING 401 CENTER STREET OLD HICKORY, TN 37138	83-2055222		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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RELEVANT WORKFORCE INC 711 WORK DRIVE NASHVILLE, TN 37207	85-2890523		13,658.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
VIP NASHVILLE ENT & TRANSPORT 3304 WILLIAM BAILEY DRIVE NASHVILLE, TN 37207-4241	85-1621043		12,679.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
XPRESS TAX & BIZ SOLUTIONS LLC 515 4TH AVENUE SO SUITE11 NASHVILLE, TN 37210	85-4150263		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CANVASTRY, LLC 711 MAIN ST NASHVILLE, TN 37206	85-3629350		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
N B GOODS LLC 1431 PAWNEE TRL NASHVILLE, TN 37115	88-0529319		19,704.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
2020 LLC 5016 CENTENNIAL BLVD. SUITE 200 NASHVILLE, TN 37209	84-4593374		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ELITE MOBILE HAIR SERVICING LLC 3106 TREVOR ST NASHVILLE, TN 37209	85-2701241		17,500.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUPREME EVOLUTION SERVICES, LLC 6146 BEALS LN NASHVILLE, TN 37218	81-4121729		21,418.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
XPLR, LLC 1451 ELM HILL PIKE SUITE 161 NASHVILLE, TN 37210	83-4377664		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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TRINITY COFFE LLC 156 DRIVEEVILLE DRIVE LA VERGNE, TN 37086	83-3128445		21,047.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CRY BABY 1219 17TH AVENUE S #4 NASHVILLE, TN 37212	83-2778992		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
URVOYCE 73 WHITE BRIDGE ROAD, SUITE 103-162 NASHVILLE, TN 37205	81-2108255		17,379.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
INNERG LLC 1807 9TH AVENUE NORTH NASHVILLE, TN 37207	61-1891274		10,564.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JLEE CONSTRUCTION LLC 5309 MURFREESBORO RD #694 LA VERGNE, TN 37086	27-5086025		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE WAREHOUSE COLLECTIVE LLC 4133 OUTER DRIVE NASHVILLE, TN 37204	84-1898653		20,348.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SWAGRUHA INDIAN RESTAURANT 900 ROSA L. PARKS BLVD. NASHVILLE, TN 37208	80-0144969		20,031.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BROOKS & ASSOCS. TAX CONSULTING SVCS LLC - 3001 HAMILTON CHURCH RD - ANTIOCH, TN 37013	85-4212459		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
AUTHENTICALLY AMERICAN, LLC 2617 GRANDVIEW AVENUE, SUITE #104 NASHVILLE, TN 37211	82-0769588		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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KRISUITEN ZACHARY 239 VETERANS PKWY, SUITE F1 MURFREESBORO, TN 37128	11-3817944		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TAX RESCUE USA 4741 TROUSDALE DRIVE SUITE 2 NASHVILLE, TN 37220	85-0859427		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUNSHINE INSURANCE LLC 467 BELL RD NASHVILLE, TN 37217	83-3614399		22,863.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CAMBO CONTRACTING SERVICES 1625 SHELBY TRACE MOUNT JULIET, TN 37122	27-2458641		31,088.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ALCHEMY SERVICES LLC 3529 COUNTRY WAY RD ANTIOCH, TN 37013	84-2754892		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
GODS KITCHEN INC 1318 6TH AVENUE N NASHVILLE, TN 37208	83-4582403		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
HAN CORPORATION 392 HARDING PLACE SUITE 240 NASHVILLE, TN 37211	32-0111561		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KORI WALDRIVEUP 4231 HARDING PIKE SUITE 2 NASHVILLE, TN 37205	82-1397258		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TARA TRAINING STUDIO LLC 3857 PARK ROYAL LN ANTIOCH, TN 37013	85-2448317		14,989.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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VISION CARE LLC 1321 MURFREESBORO PIKE, 140 NASHVILLE, TN 37217	32-0511441		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PRIME CLEANING SERVICES INC 2713 NOLENSVILLE PIKE SUITE 108 NASHVILLE, TN 37211	83-2923456		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ROLLED 4 EVER ICE CREAM 1120 4TH AVENUE NORTH SUITE 102 NASHVILLE, TN 37208	82-4847934		34,091.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SUSHI CIRCLE 914 WOODLAND ST NASHVILLE, TN 37206	08-5680624		14,331.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
A.L. DOBBS, P.C. 4121 CLARKSVILLE PIKE NASHVILLE, TN 37218	46-3585048		24,565.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
AD FONTES, INC 392 HARDING PL SUITE 240 NASHVILLE, TN 37211	45-5445055		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CHICAGO STYLE GYROS #1 LLC 900 ROSA L.PARKS BLVD NASHVILLE, TN 37208	20-3811421		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DADDY BOB'S EDIBLES & ELIXIRS, LLC 119 S 1ST ST PULASKI, TN 38478	47-2469277		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
JESSE GOLDBERG 6952 SOMERSET FARMS CIRCLE NASHVILLE, TN 37221	10-7381681		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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KASSIM H BAME 800 PEBBLE CREEK CIRCLE APT 308 ANTIOCH, TN 37013	57-7331282		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MARSHALL BROTHERS AUTOMOTIVE, INC 412 OAKLEIGH HILL NASHVILLE, TN 37215	58-2563768		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MICHAEL PANZINI 412 FOOTHILL ROAD NASHVILLE, TN 37217	00-5687342		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MOLINA STONE 3625 LONGHA VEN XING ANTIOCH, TN 37013	46-2386641		19,554.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MUSIC CITY ACOUSTICS 910 A HART LANE NASHVILLE, TN 37216	82-3961183		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
O'SAKE JAPANESE REST 2204 ELLISTON PL NASHVILLE, TN 37203	26-3727364		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WASHPAW GROOMING, LLC 901 BROADWAY AVENUE UNIT 23934 NASHVILLE, TN 37202	82-5480313		12,404.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WE KLEN 5105 PARISHWOOD CT NASHVILLE, TN 37211	93-2907536		26,830.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SEMAJ BEAUTY STUDIO 3524 CUMBERLAND COVE DRIVE. NASHVILLE, TN 37207	51-0743514		10,548.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOIRNATURALLY 5012 SINGING HILLS DRIVE ANTIOCH, TN 37013	87-3145585		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NICOLE DANSBY 1308 ROCK CREEK TRACE WHITES CREEK, TN 37189	41-2394262		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CINTORIA FRANKLIN SALON STUDIO 7029 SOUTH HAMPTON BLVD ANTIOCH, TN 37013	35-2706583		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
PAMPERU NAIL BOUTIQUELLC 520 HAROLD PREWETT DRIVE NASHVILLE, TN 37218	85-1821080		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TRINITY INVESUITEE 3765 GRACE FALLS DRIVE ANTIOCH, TN 37013	84-3117101		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
KIM & LEE LLC 3001 WEST END AVENUE NASHVILLE, TN 37203	26-3220811		19,575.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
AUGUSTINE KARLO 5353 CANE RIDGE ROAD APT 1009 ANTIOCH, TN 37013	41-4777962		22,034.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
STYLE CUBAN-AL ESTILO CUBANO 213 PEBBLE CREEK CIR ANTIOCH, TN 37013	82-3017956		32,410.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DJ'S ENTERPRISE, INC 1915 GALLATIN PIKE N MADISON, TN 37115	81-1520305		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

Schedule I (Form 990)

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule I (Form 990)

D/B/A PATHWAY LENDING

62-1823596

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHICAGO STYLE GYROS #5 INC 854 HILLWOOD BLVD NASHVILLE, TN 37209	30-0476802		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ASHTON KINNETZ LLC 211 LOUSIE AVENUE NASHVILLE, TN 37203	58-9667367		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TYB SUPERIOR TRANSPORT LLC 595 THOMAS JEFFERSON CIR MADISON, TN 37115	84-2291012		24,063.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BURRITOS LA MINA 116 EASTSIDE CT LA VERGNE, TN 37086	36-4827352		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
CAR PROS AUTOMOTIVE INC 1640 ANTIOCH PIKE ANTIOCH, TN 37013	82-3595225		19,570.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
EQUITY PLUS MORTGAGE INC. 4121 CLARKSVILLE PIKE NASHVILLE, TN 37218	83-2150214		23,961.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
D/FEAT, LLC 3118 MEADOWSIDE LN NASHVILLE, TN 37207	84-3029254		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WANDA FRENCH 1401 BUCHANAN ST SUITE 101 NASHVILLE, TN 37208	41-2175937		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
WASUITE ZERO LLC 7587 RIVER ROAD PIKE NASHVILLE, TN 37209	82-2952375		11,861.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

Schedule I (Form 990)

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule I (Form 990)

D/B/A PATHWAY LENDING

62-1823596

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SLEEPOVER COLLECTION PO BOX 78316 NASHVILLE, TN 37207	41-5659788		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
TENNESSEE COMMUNITY ENRICHMENT, INC. - 1130 OLD HICKORY BLVD - NASHVILLE, TN 37207	27-4693896		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
THE WHITE CACTUS SALON, LLC 3307 CHARLOTTE AVENUE NASHVILLE, TN 37209	82-2671259		33,153.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
G ELECTRIC 2617 WALKER LANE NASHVILLE, TN 37207	83-3413456		13,749.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
BOONE'S ACADEMY 1332 MAGNOLIA RD NASHVILLE, TN 37204	41-4333939		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
MART'S STUDIO FOR HAIR AND MAKEUP 5544 KENDALL DRIVE NASHVILLE, TN 37209	41-2020354		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
FCN CAPITAL FUND LLC 810 OAK MEADOW DRIVE #680681 FRANKLIN, TN 37068	30-1147953		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
SHJK FITNESS, LLC 3307 CHARLOTTE PIKE SUITE 3 NASHVILLE, TN 37209	83-1832132		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DANIEL DAMOT 7021 PAISLEY WOOD DRIVE ANTIOCH, TN 37013	76-3097339		11,233.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

Schedule I (Form 990)

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule I (Form 990)

D/B/A PATHWAY LENDING

62-1823596

Page 1

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRITISH AUDIO SERVICE, INC. 5343 CHARLOTTE AVENUE NASHVILLE, TN 37209	45-3039581		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
EMERGE CREATIVE LLC PO BOX 330178 NASHVILLE, TN 37203	45-5391152		35,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
LYNN STAFFING LLC 7087 BRADY HILL DRIVE CORDOVA, TN 38018	84-2479478		19,023.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
REDS 615 KITCHEN 1902 EASTSIDE AVENUE NASHVILLE, TN 37203	81-4140545		19,685.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ROYALTI NAILS AND SPA 2701 JEFFERSON STREET NASHVILLE, TN 37208	41-5430653		12,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
NEW HAT PROJECTS, LLC 2100 DUNN AVENUE NASHVILLE, TN 37211	81-2789384		19,921.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
DOMINIC L JADA 255 CHIMNEYTOP DRIVE APT G255 ANTIOCH, TN 37013	40-8899788		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
RICHARD RIVERA 308 PLUS PARK BLVD APT E8 NASHVILLE, TN 37217	55-1458123		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS
ALEMAYEHU ABEGAZ 6616 ASCOT DRIVE ANTIOCH, TN 37013	76-5347351		10,000.	0.			METRO NASHVILLE - SMALL BUSINESS GRANTS

Schedule I (Form 990)

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

D/B/A PATHWAY LENDING

62-1823596

**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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY	118	1,294,549.	0.		SMALL BUSINESS GRANTS
METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY	195	0.	153,276.		SMALL BUSINESS GRANTS PAID TO NASHVILLE FAIRGROUNDS TO PAY BOOTH RENTALS ON BEHALF OF INDIVIDUALS
TVA HOME UPLIFT	691	0.	5,916,117.		ENERGY EFFICIENCY GRANTS PAID TO TVA TO BENEFIT INDIVIDUAL HOMES

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

PART I, LINE 2:

DURING 2022, THE ORGANIZATION WAS GRANTED FUNDING THROUGH METROPOLITAN NASHVILLE AND DAVIDSON COUNTY, TENNESSEE TO MAKE GRANTS TO SMALL BUSINESSES.



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

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

**Part I Questions Regarding Compensation**

**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"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as 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 .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the 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"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <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** ☐ Yes ☒ No
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? ..... **4b** ☐ Yes ☒ No
- c** Participate in or receive payment from an equity-based compensation arrangement? ..... **4c** ☐ Yes ☒ No
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 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 ☒ No
- b** Any related organization? ..... **5b** ☐ Yes ☒ 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 ☒ No
- b** Any related organization? ..... **6b** ☐ Yes ☒ 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 on lines 5 and 6? If "Yes," describe in Part III .....

**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 .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

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

Schedule J (Form 990) 2022

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

D/B/A PATHWAY LENDING

62-1823596

Schedule J (Form 990) 2022

Page 2

**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 aren't 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 and/or 1099-NEC 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	(i)	348,662.	169,125.	0.	12,200.	3,475.	533,462.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BARBARA HARRIS	(i)	250,074.	72,186.	0.	12,200.	7,661.	342,121.	0.
EXECUTIVE VICE PRESIDENT A	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) HANK HELTON	(i)	249,066.	72,186.	0.	12,200.	13,816.	347,268.	0.
EXECUTIVE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) AMY BUNTON	(i)	244,431.	72,186.	0.	7,741.	18,248.	342,606.	0.
EXECUTIVE VICE PRESIDENT A	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KEITH HICKEY	(i)	155,205.	56,520.	0.	8,441.	13,466.	233,632.	0.
SVP, LENDING	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JAMES (MIKE) BLACKWELL	(i)	175,152.	7,000.	0.	0.	13,592.	195,744.	0.
SVP, CHIEF CREDIT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) DANIEL WILSON	(i)	138,610.	17,336.	0.	2,500.	7,195.	165,641.	0.
SVP OF LENDING OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LESLIE HAYES	(i)	135,023.	17,472.	0.	4,852.	17,752.	175,099.	0.
SVP OF EDUCATION AND ENTRE	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JONATHAN EISEN	(i)	85,238.	54,517.	0.	5,587.	7,147.	152,489.	0.
REGIONAL LENDER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III	Supplemental Information
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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.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**SCHEDULE L**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open To Public  
Inspection**

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

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
ANDRE GIST	DIRECTOR	LOAN TO		X	495,000.	361,453.		X	X		X	
Total						\$ 361,453.						

**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

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

Schedule L (Form 990) 2022

SEE PART V FOR CONTINUATIONS

## SOUTHEAST COMMUNITY CAPITAL CORPORATION

Schedule L (Form 990) 2022

D/B/A PATHWAY LENDING

62-1823596 Page 2

**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
HUGH QUEENER	DIRECTOR OF THE ORG	426,426.	INTEREST PA		X
HUGH QUEENER	DIRECTOR OF THE ORG	318,445.	BANK ACCOUN		X
HUGH QUEENER	DIRECTOR OF THE ORG	1,724,388.	PRINCIPAL A		X
JON DAVIES	DIRECTOR OF THE ORG	584,748.	INTEREST PA		X
JON DAVIES	DIRECTOR OF THE ORG	108,772.	BANK ACCOUN		X

**Part V Supplemental Information.**

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

## SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: ANDRE GIST

(B) RELATIONSHIP WITH ORGANIZATION: DIRECTOR OF THE ORGANIZATION

(C) PURPOSE OF LOAN: LOAN TO MIG, A COMPANY MAJORITY OWNED BY ANDRE GIST.

## SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: HUGH QUEENER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DIRECTOR OF THE ORGANIZATION

(D) DESCRIPTION OF TRANSACTION: 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.

(A) NAME OF PERSON: HUGH QUEENER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

DIRECTOR OF THE ORGANIZATION

Schedule L (Form 990) 2022

**Part V** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(D) DESCRIPTION OF TRANSACTION: 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.

(A) NAME OF PERSON: HUGH QUEENER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:  
DIRECTOR OF THE ORGANIZATION

(D) DESCRIPTION OF TRANSACTION: 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.

(A) NAME OF PERSON: JON DAVIES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:  
DIRECTOR OF THE ORGANIZATION

(D) DESCRIPTION OF TRANSACTION: 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.

(A) NAME OF PERSON: JON DAVIES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:  
DIRECTOR OF THE ORGANIZATION

**Part V** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

(D) DESCRIPTION OF TRANSACTION: BANK ACCOUNTS HELD AT BANK: MR. DAVIES  
IS THE SENIOR VICE PRESIDENT/COMPLIANCE EXECUTIVE, COMMUNITY AFFAIRS AND  
CONTRIBUTIONS FOR REGIONS FINANCIAL CORPORATION WHERE SOUTHEAST COMMUNITY  
CAPITAL MAINTAINS INTEREST BEARING ACCOUNTS AND RECEIVED INTEREST IN THE  
NORMAL COURSE OF DOING BUSINESS.

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Open to Public  
Inspection

Name of the organization	SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING	Employer identification number 62-1823596
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FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

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 2022, SOUTHEAST COMMUNITY CAPITAL CORPORATION ORIGINATED \$50.8MM IN  
NEW LOANS, OF WHICH 79.9% OF LOANS BY NUMBER AND 80.1% OF LOANS BY  
DOLLAR ACTIVITY WERE IN QUALIFIED CDFI TARGET MARKETS.

SOUTHEAST COMMUNITY CAPITAL CORPORATION MADE 182 LOANS AND LINES OF  
CREDIT, TOTALING MORE THAN \$25.7MM TO SUPPORT THE CREATION,  
PRESERVATION, AND GROWTH OF SMALL BUSINESSES. THE ORGANIZATION ALSO  
SUPPORTED AFFORDABLE HOUSING AND REAL ESTATE INITIATIVES BY MAKING 5  
LOANS TOTALING OVER \$18.1MM TO SUPPORT AFFORDABLE HOUSING, AND 2 LOANS  
TOTALING APPROXIMATELY \$2.0MM TO SUPPORT MIXED-USE DEVELOPMENTS IN THE  
MEMPHIS MEDICAL DISTRICT, WHICH SUPPORTED APPROXIMATELY \$8.5MM IN TOTAL  
PROJECT COSTS. COLLECTIVELY, THESE LOANS RESULTED IN THE CREATION AND  
PRESERVATION OF 467 RENTAL UNITS.

SOUTHEAST COMMUNITY CAPITAL CORPORATION ALSO OFFERS CLIMATE-CENTERED  
LOANS. IN 2022, IT MADE 18 LOANS TOTALING APPROXIMATELY \$4.9MM TO  
SUPPORT THE IMPLEMENTATION OF ENERGY EFFICIENCY AND RENEWABLE ENERGY  
PROJECTS AT BUSINESSES ACCROSS TENNESSEE. TOTAL ANNUAL ENERGY SAVINGS  
FROM THE ENERGY LOANS WERE \$467,685 WITH 4,918,891 KWH GENERATED

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

Schedule O (Form 990) 2022

232211 10-28-22



Name of the organization	SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING	Employer identification number 62-1823596
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THROUGH RENEWABLE SOURCES OR SAVED THROUGH EFFICIENCY EFFORTS.

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

IN 2022 SOUTHEAST COMMUNITY CAPITAL CORPORATION PROVIDED 17,518 HOURS OF EDUCATION; 10,761 WERE IN CLASSROOM/EVENTS SETTINGS AND 6,757 WERE ONE-ON-ONE COUNSELING SESSIONS. THERE WERE 2,933 UNIQUE CLIENTS SERVED, 76% WERE REPRESENTATIVE OF PATHWAY LENDING'S CDFI TARGET MARKETS (AS DEFINED BY BEING LOCATED IN QUALIFIED LOW-TO-MODERATE INCOME CENSUS TRACTS, OR HAVING A MAJORITY LOW-INCOME OR MINORITY OWNER), WITH 40% BEING FEMALE, AND 40% BEING AFRICAN AMERICAN. THERE WERE 92 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.

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.

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

Name of the organization	SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING	Employer identification number 62-1823596
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SIGN ANNUALLY A STATEMENT THAT THEY HAVE NO CONFLICTS OF INTEREST.

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 COMPILED FROM TAX RETURNS OF OTHER 990 ORGANIZATIONS THAT ARE PUBLISHED WITH GUIDESTAR. SALARY INQUIRIES OF SIMILAR JOBS ARE REVIEWED ON CAREERBUILDER AND SALARY.COM AND OTHER FORMAL SALARY SURVEYS.

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.

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

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

Employer identification number  
**62-1823596**

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, BUT THEY ARE INCLUDED IN THE TOTAL

NUMBER OF 1099S OVER \$100,000.

FORM 990, PART XII, LINE 2C

THE PROCESS IS THE SAME AS IN THE PRIOR YEAR.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**  
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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization <div style="text-align: center;"><b>SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A PATHWAY LENDING</b></div>	Employer identification number <div style="text-align: center;"><b>62-1823596</b></div>
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**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
PATHWAY MEMPHIS LLC 201 VENTURE CIRCLE NASHVILLE, TN 37228	EXPAND OPERATIONS OF PATHWAY LENDING IN THE MEMPHIS, TN AREA	TENNESSEE	-9,646.	1,400,978.	SOUTHEAST COMMUNITY CAPITAL CORPORATION

**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

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

Schedule R (Form 990) 2022



[illegible]

**SOUTHEAST COMMUNITY CAPITAL CORPORATION**

Schedule R (Form 990) 2022

**D/B/A PATHWAY LENDING**

**62-1823596** Page **3**

**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
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by related organization(s) .....	<b>1e</b>	X
<b>f</b> Dividends from related organization(s) .....	<b>1f</b>	X
<b>g</b> Sale of assets to related organization(s) .....	<b>1g</b>	X
<b>h</b> Purchase of assets from related organization(s) .....	<b>1h</b>	X
<b>i</b> Exchange of assets with related organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....	<b>1j</b>	X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	<b>1l</b>	X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....	<b>1m</b>	X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	<b>1n</b>	X
<b>o</b> Sharing of paid employees with related organization(s) .....	<b>1o</b>	X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....	<b>1p</b>	X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property to related organization(s) .....	<b>1r</b>	X
<b>s</b> Other transfer of cash or property from related organization(s) .....	<b>1s</b>	X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			





**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

**PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:**

NAME OF RELATED ORGANIZATION:

PATHWAY LENDING CDE ADVISORS, LLC

DIRECT CONTROLLING ENTITY: SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A

PATHWAY LENDING

NAME OF RELATED ORGANIZATION:

PATHWAY LENDING CDE, LLC

DIRECT CONTROLLING ENTITY: SOUTHEAST COMMUNITY CAPITAL CORPORATION D/B/A

PATHWAY LENDING

NAME OF RELATED ORGANIZATION:

BIRCHSTONE VILLAGE, LP

PRIMARY ACTIVITY: CONSTRUCTION OF 228-UNIT MULTIFAMILY AFFORDABLE HOUSING

**PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:**

NAME OF RELATED ORGANIZATION:

PL BIRCHSTONE VILLAGE, INC.

PRIMARY ACTIVITY: SERVE AS GENERAL PARTNER OF BIRCHSTONE VILLAGE LP

(228-UNIT AFFORDABLE HOUSI

DIRECT CONTROLLING ENTITY: SOUTHEAST COMMUNITY CAPITAL CORPORATION