

Return of Organization Exempt From Income Tax

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

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

g Open to Public n

OMB No. 1545-0047

	ernal Revenue		Go to www.irs.gov/Form990 for instructions a	nd the latest	information.	Inspection
Α	For the 20) 19 calend	ar year, or tax year beginning an	d ending		
в	Check if applicable:	C Name of	organization		D Employer identification	on number
	Address change	ACCI	ON EAST, INC.			
	Name change	Doing b	usiness as		11-3317234	
	Initial return Final return/		and street (or P.O. box if mail is not delivered to street address) AIDEN LANE	Room/suite 903	E Telephone number 646-833-453	14
Г	termin- ated Amended return	-	own, state or province, country, and ZIP or foreign postal code YORK, NY 10038	•	G Gross receipts \$ H(a) Is this a group return	7,085,002.
	Applica- tion pending	F Name a	nd address of principal officer: PAUL QUINTERO		for subordinates?	Yes X No
_		ot status: [X 50 1(c)(3) 50 1(c) ()◀ (insert no.) 4947(a)() or 📃 527		
			CCION.ORG		H(c) Group exemption nu	
ĸ	Form of org	janization; [X Corporation 🔄 Trust 🦳 Association 📄 Other 🕨	L Year	of formation: 1996 M Sta	ate of legal domicile: ${f NY}$
P	Part I S	ummary				
	1 Bri	efly describ	e the organization's mission or most significant activities: ACC	ION EMP	OWERS LOW-TO-N	IODERATE
- 8	אד 18	JCOME	BUSINESS OWNERS THROUGH ACCESS TO	CAPTT	AL AND FINANCI	AT,

Activities & Governance 2 Check this box lift the organization discontinued its operations or disposed of more than 25% of its net assets. 17 Number of voting members of the governing body (Part VI, line 1a) 3 3 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 50 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 17 6 6 Ο. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 39 0. 7b **Prior Year** Current Year 4,528,517. 3,871,881. Contributions and grants (Part VIII, line 1h) 8 Revenue 2,663,934. 3,136,377. 9 Program service revenue (Part VIII, line 2g) 5,126. 4,297. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 45,665. -7,531. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 7,190,046. 7,058,220. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,774,972. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ο. 13 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 4,710,997. 4,572,913. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. ▶ 816,415. **b** Total fundraising expenses (Part IX, column (D), line 25) 3,880,952. 4,372,191. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 8,945,104. 11,366,921. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 -4,176,875. -1,886,884. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 2 2 24,177,499. 22,639,228. 20 Total assets (Part X, line 16) 16,678,446. 17,013,732. 21 Total liabilities (Part X, line 26) e te 7,499,053. 5,625,496 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block

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

Sign Here	Signature d PAUL QUINTERO, CEO Type or print name and title		[Date	_
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN	_
Paid	MAGDALENA M. CZERNIAWSKI	MAGDALENA M.	CZERNIA06/18/	20 self-employed P00535099	
Preparer	Firm's name 🕒 MARKS PANETH LLE	2	F	Firm's EIN ▶ 11–3518842	
Use Only	Firm's address 💊 685 THIRD AVENUE	3			_
	NEW YORK, NY 100)17	F	Phone no. 212 - 503 - 8800	
May the I	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No	0
932001 01-2	0-20 LHA For Paperwork Reduction Act Not	ice. see the separate inst	tructions.	Form 990 (2019	9)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2019) ACCION EAST, INC. 11-3317234 Page	де 2
Pai	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	
	ACCION EMPOWERS LOW-TO-MODERATE INCOME BUSINESS OWNERS THROUGH ACCESS	
	TO CAPITAL AND FINANCIAL EDUCATION. WITH ECONOMIC OPPORTUNITY, THESE	
	ENTREPRENEURS, OFTEN MINORITIES AND WOMEN, CAN BUILD ASSETS, BETTER	
	PROVIDE FOR THEIR FAMILIES, CREATE EMPLOYMENT AND STRENGTHEN THEIR	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	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 \$6, 404, 348. including grants of \$) (Revenue \$1, 897, 315	<u> </u>
	ACCION EAST HAS TWO PRIMARY PROGRAMS, THE LARGEST OF WHICH IS THE	
	PROVISION OF MICROLOANS AND DEVELOPMENT SERVICES TO MICRO-ENTREPRENEURS	
	(I.E., ENTREPRENEURS THAT EMPLOY FIVE OR LESS EMPLOYEES). WE SERVE	
	LOW-TO MODERATE-INCOME, MINORITY, IMMIGRANT AND WOMEN ENTREPRENEURS,	
	POPULATIONS THAT LACK ACCESS TO MAINSTREAM CREDIT SOURCES. WITH	
	FINANCIAL INCLUSION, OUR CLIENTS GO ON TO BUILD ASSETS, GROW HOUSEHOLD	
	INCOMES AND CREATE JOBS FOR THEMSELVES AND OTHERS WITHIN THEIR LOCAL	
	COMMUNITIES.	
4b	(Code:) (Expenses \$ 1,016,494. including grants of \$) (Revenue \$ 1,343,841	
40	(Code:) (Expenses \$1,016,494. including grants of \$) (Revenue \$1,343,841 ACCION EAST IS A CERTIFIED COMMUNITY ADVANTAGE LENDER UNDER THE U.S.	•)
	SMALL BUSINESS ADMINISTRATION. THROUGH THIS PROGRAM, ACCION EAST OFFERS	
	SMALL BUSINESS LOANS RANGING FROM \$50,000 TO \$250,000 AND TECHNICAL	
	ASSISTANCE TO SMALL BUSINESS OWNERS IN THE FOURTEEN STATES IN WHICH IT	
	IS CERTIFIED (CT, DE, FL, GA, MA, MD, NC, NH, NJ, PA, RI, SC, VA).	
	LOANS ARE PARTIALLY GUARANTEED BY THE SBA AND HAVE TERMS UP TO 10	
	YEARS, PROVIDING ACCION THE FLEXIBILITY TO LEND TO GROWING SMALL	
	BUSINESSES, WITHOUT SACRIFICING THE AFFORDABLE PAYMENTS THAT MAKE OUR	
	LOANS ACCESSIBLE TO UNDERSERVED BUSINESSES.	
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 ► 7,420,842.	010

Form 9	aan (201	a١

 Form 990 (2019)
 ACCION EAST, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? // "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			<u> </u>
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
44	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			- 23
11	as applicable.			
_				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
	Part VI	<u>11a</u>	~	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11c</u>		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
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? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? /f "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form	aan	(2019)
	330	

 Form 990 (2019)
 ACCION EAST, INC.

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			37
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00-		х
~	"Yes," complete Schedule L, Part IV	28c		X
29 00	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
04	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>	31		
32		20		х
~~	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		22		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I	33		
54		34	x	
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	004		
D.	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u> ,	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	х	

	990 (2019) ACCION EAST, INC. 11-3317	234	Р	age 5					
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			<u> </u>					
_			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 50								
	, , , , ,	0	х						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>					
0	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e_{-file} (see instructions)								
за b									
	If "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	<u> </u>					
Ĩ	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x					
b									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	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?	7a	Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	<u> </u>					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
e									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g		X					
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>					
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.	0		<u> </u>					
ă	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		├──					
	Note: See the instructions for additional information the organization must report on Schedule O.								
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 13b Enter the amount of reserves on hand 13c								
C 14 c		140		x					
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		<u> </u>					
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	140							
15	excess parachute payment(s) during the year?	15		x					
	If "Yes," see instructions and file Form 4720, Schedule N.			<u> </u>					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x					
	If "Yes," complete Form 4720, Schedule O.								

					<u></u>		X					
Sec	tion A. Governing Body and Management											
		ı ı		4 🗖		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		17								
	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.			17								
b	Enter the number of voting members included on line 1a, above, who are independent	[1b]		17								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	ny other		_		37					
_	officer, director, trustee, or key employee?				2		X					
3	Did the organization delegate control over management duties customarily performed by or under the				•	v						
				r	3 4	X	х					
4												
5												
6	•											
7a												
	more members of the governing body?				7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, si						v					
_	persons other than the governing body?				7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				-	v						
a	The governing body?				8a	X						
b	Each committee with authority to act on behalf of the governing body?				8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				•		v					
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue (Code.)			N.						
40-	Did the exercities have lead charters branches as efficience			ſ	40-	Yes	No					
	Did the organization have local chapters, branches, or affiliates?				10a		Λ					
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch				104							
44.			filing the form		<u>10b</u> 11a	х						
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	y Deloie	ning the form	''	1 la	- 23						
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	x						
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12a 12b	X						
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "				120	- 23						
С		,			12c	x						
13	in Schedule O how this was done Did the organization have a written whistleblower policy?				13	X						
14				[14	X						
14	Did the organization have a written document retention and destruction policy?				14	- 23						
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	u by ind	ependent									
а	The organization's CEO, Executive Director, or top management official				15a	x						
a h					15b		Х					
U.	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				100							
169	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent wit	ha									
īJa	taxable entity during the year?				16a		х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				iva							
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		-									
					16b							
Sec	exempt status with respect to such arrangements?				100							
17	List the states with which a copy of this Form 990 is required to be filed NY											
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, al	nd 990-	E (Section 501)	(c)(3)s	only)	availa	ble					
	for public inspection. Indicate how you made these available. Check all that apply.			~,~,,~,0	<i>⊂≀</i> ⊪y)	- rand						
	Own website Another's website X Upon request Other (explain	on Sal	podulo ()									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		· ·	/. and	finan	cial						
	statements available to the public during the tax year.			, and		1						
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	records 🕨									
	WILLIAM POPELESKI (COO) - 646-833-4514	, and										
	80 MAIDEN LANE SUITE 903, NEW YORK, NY 10038											
					Form	990	/201					

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.

ACCION EAST, INC.

Form 990 (2019)

11-3317234 Page 6

Form 990 (2		11-3317234	Page 7
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 Comple	te this table for all persons required to be listed. Report compensation for the calendar vear endi	ng with or within the organization's	s tax vear.

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
	hours per	box	ox, unless person is both an officer and a director/trustee)				n an	compensation	compensation	amount of
	week		cer an	dad	recto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	99			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		96	nens		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		nploy	st con yee	_			organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) COLLEEN GALVIN	1.00		_		-					
DIRECTOR		x						0.	0.	0.
(2) CRISTINA SHAPIRO	1.00									
DIRECTOR		x						0.	0.	0.
(3) DANIEL DELEHANTY	1.00									
DIRECTOR		X						0.	0.	0.
(4) DENNIS LAGUEUX	1.00									
CHAIR OF THE BOARD	1.00	X		Х				0.	0.	0.
(5) TYLER VAN GUNDY	1.00									
DIRECTOR		X						0.	0.	0.
(6) GAIL SMITH	1.00									
DIRECTOR		X						0.	0.	0.
(7) JEROME WEISS	1.00									
DIRECTOR		X						0.	0.	0.
(8) JOSEPH HERNANDEZ	1.00									
DIRECTOR		X						0.	0.	0.
(9) KIMBERLY JOHNSON	1.00								_	_
TREASURER		X		Х				0.	0.	0.
(10) LAURA MILLER	1.00								_	_
DIRECTOR		X						0.	0.	0.
(11) LISA SERVON	1.00								_	_
DIRECTOR		X						0.	0.	0.
(12) MIA PARKER	1.00								_	-
DIRECTOR		x						0.	0.	0.
(13) MICHAEL HENRY	1.00									
DIRECTOR	1	x						0.	0.	0.
(14) PETER CURETON	1.00									
DIRECTOR	1	X						0.	0.	0.
(15) ROSHELLE NAGAR	1.00									
SECRETARY	1.00	X		Х				0.	0.	0.
(16) SUDHIR JAIN	1.00								_	•
DIRECTOR	1 00	X						0.	0.	0.
(17) THOMAS MCDERMOTT	1.00	I.,							<u>^</u>	<u>^</u>
VICE-CHAIR	1.00	Х		Х				0.	0.	0.

(A) Name and title	(B) (C) Average hours per wrock (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation	(E) Reportable compensatio	n		ed of	
	week (list any hours for related organizations below line)				lirecto		tee)	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	5	com fr org and	other pensa om th aniza d relat anizat	ation 1e tion ted
(18) PAUL QUINTERO CEO	36.50			x				281,535.		0.	2	6,7	45.
(19) WILLIAM POPELESKI COO	36.50			x				137,290.		0.			55.
(20) SEAN BERRY	36.50							137,230		<u>.</u>		0,0	<u></u>
CONTRACTED CFO	1.00			X				0.		0.			0.
(21) ANA H. HAMMOCK VP OF LENDING	37.50					x		149,184.		0.		1	20.
(22) FABIANA A. ESTRADA	37.50					^		149,104.		0.		<u> </u>	20.
DIRECTOR OF LENDING						х		109,779.		Ο.	1	5,8	68.
(23) RODRIGO CERVEIRA DIRECTOR OF SBA LENDING	37.50					x		116,046.		ο.	2	0,7	56.
1b Subtotal								793,834.		0.	8	2,3	<u>44.</u> 0.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								793,834.		0.	8	2.3	$\frac{0.}{44.}$
2 Total number of individuals (including but n compensation from the organization ►							o re		000 of reportable				5
												Yes	No
3 Did the organization list any former officer,													
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su											3		X
and related organizations greater than \$150),000? <i> f</i> "Yes,	" co	mple	ətə S	Sche	ədule	Jf	or such individual			4	Х	<u> </u>
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," corr								ed organization or individual for services			5		x
Section B. Independent Contractors	ipiele Scheduk	9 0 10	<u>JI SU</u>	ICH J	<u>oers</u>	011 .					5		
1 Complete this table for your five highest co the organization. Report compensation for	-								-	ensat	tion fro	om	
(A) Name and business			nan	<u>ig n</u>		51 111		(B) Description of s		0) ompe		
BURCHMAN TERRIO QUIST LLC		OA	D	ST	RE	ET	\neg	Decemption of e			ompo	lioulic	
15TH FLOOR, NEW YORK, NY								FIN. AND ACC	OUNTING		25	6,6	67.
2 Total number of independent contractors (in \$100,000 of compensation from the organia	-	ot lin	nitec	d to		se lis L	ted	above) who received mo	ore than				

	t VII		venue	<u> </u>					ugo
		Check if Schedule O c		nse c	or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue exclude from tax under sections 512 - 51
Contributions, Gifts, Grants and Other Similar Amounts	b c d f g	Membership dues	1d butions) 1e grants, and 1f above 1f ines 1a-1f 1g \$	2,	142,961. 51,496. 895,350. 782,074.	3,871,881.			
Program Service Revenue	2a b c d e f	LOAN PORTFOLI PROGRAM FEES		_	Business Code 525990 900099	1,897,315. 1,239,062.	1,897,315. 1,239,062.		
	g	Total. Add lines 2a-2f				3,136,377.			
	3 4 5	Investment income (includ other similar amounts) Income from investment o Royalties	f tax-exempt bor	nd pr	roceeds	4,297.			4,297
	6a b c	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real 6a 6b 6c		(ii) Personal				
Revenue	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securiti 7a		(ii) Other				
Other Rev	8 a	Net gain or (loss) Gross income from fundraisir including \$ <u>142</u> contributions reported on Part IV, line 18 Less: direct expenses	ng events (not <u>, 961 .</u> of line 1c). See	8a 8b					
	с 9 а	Net income or (loss) from t Gross income from gamin Part IV, line 19	iundraising even g activities. See		►	-7,618.			-7,618
	10 a	Net income or (loss) from g Gross sales of inventory, lo and allowances Less: cost of goods sold	ess returns	10a 10b					
Bevenue	11 a b	Net income or (loss) from s	sales of inventor	y	Business Code 900099	53,283.	53,283.		
Ĩ		All other revenue				53,283. 7,058,220.	2 100 660	0.	-3,321

Form 990 (2019)

ACCION EAST, INC.

11-3317234

Page **9**

Form 990 (2019)
----------------	---

Form 990 (2019) ACCION EAST, Part IX Statement of Functional Expenses INC.

	Check if Schedule O contains a respons		his Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	462 010	221 056	115 077	115 077
_	trustees, and key employees	463,910.	231,956.	115,977.	115,977
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	2,913,878.	2 200 060	156 672	250 227
7	Other salaries and wages	۵,۶۲3,8/۵۰	2,398,868.	156,673.	358,337
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	041 504	671,515.	E0 1E1	111 020
9	Other employee benefits	841,504. 353,621.	276,771.	<u>58,151.</u> 27,724.	111,838
10	Payroll taxes	353,041.	2/0,//1.		49,126
11	Fees for services (nonemployees):				
a	Management	18,206.		10 206	
b	Legal	10,200.		18,206.	
-	Accounting				
d					
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	E0E 700	212 101	120 022	E4 266
	column (A) amount, list line 11g expenses on Sch O.)	505,782. 49,241.	313,484. 23,506.	<u>138,032</u> . 21,666.	<u>54,266</u> 4,069
12	Advertising and promotion	495,241.	472,835.	20,187.	2,538
13	Office expenses	432,001.	312,630.	89,200.	30,171
14	Information technology	452,001.	512,050.	09,200.	JU, 1/1
15	Royalties	373,555.	298,108.	30,765.	44,682
16		163,598.	130,388.	13,542.	19,668
17		105,590.	130,300.	15,542.	19,000
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	11,066.	8,820.	916.	1,330
19 00	Conferences, conventions, and meetings	410,256.	410,256.	910.	т, ээр
20	Interest	410,2000	410,200.		
21	Payments to affiliates Depreciation, depletion, and amortization	162,475.	129,662.	13,380.	19,433
22		48,070.	43,133.	2,013.	2,924
23	Insurance	40,070.	45,155.	2,013.	4,944
24	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 0.)				
а	LOAN LOSS PROVISION	1,668,579.	1,668,579.	0.	0
b	OTHER EXPENSES	33,802.	30,331.	1,415.	2,056
c		,		· · ·	
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,945,104.	7,420,842.	707,847.	816,415
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Check here

if following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or not	e to any	ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			459,328.	1	1,309,810
	2	Savings and temporary cash investments	6,201,861.	2	143,779		
	3	Pledges and grants receivable, net			1,775,293.	3	1,448,360
	4	Accounts receivable, net			410,756.	4	439,315
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subs	tantial co	ntributor, or 35%			
		controlled entity or family member of any of the	se persor	s		5	
	6	Loans and other receivables from other disquali	fied perso	ons (as defined			
		under section 4958(f)(1)), and persons described	d in sectio	on 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net			14,824,691.	7	17,769,369
Assets	8	Inventories for sale or use		E E E E E E E E E E E E E E E E E E E		8	
As	9				159,638.	9	125,034
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	976,013.			
	b	Less: accumulated depreciation	10b	759,680.	345,932.	10c	216,333
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			0.	15	1,187,228
	16	Total assets. Add lines 1 through 15 (must equ			24,177,499.	16	22,639,228
	17	Accounts payable and accrued expenses	583,139.	17	576,546		
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete	Part IV of	Schedule D		21	
s	22	Loans and other payables to any current or form		Γ			
Ш		trustee, key employee, creator or founder, subs	tantial co	ntributor, or 35%			
LIADIIITIES		controlled entity or family member of any of the	se persor	s		22	
Ě	23	Secured mortgages and notes payable to unrela	ated third	parties		23	
	24	Unsecured notes and loans payable to unrelated	d third pa	rties	15,689,596.	24	14,784,675
	25	Other liabilities (including federal income tax, pa	yables to	related third			
		parties, and other liabilities not included on lines	s 17-24). (Complete Part X			
		of Schedule D			405,711.	25	1,652,511
	26				16,678,446.	26	17,013,732
		Organizations that follow FASB ASC 958, che	ck here	► X			
Net Assets or Fund Balances		and complete lines 27, 28, 32, and 33.					
ano	27	Net assets without donor restrictions			5,936,301.	27	4,937,405
Ба	28	Net assets with donor restrictions			1,562,752.	28	688,091
na		Organizations that do not follow FASB ASC 9	58, chec	k here 🕨 📃			
ΓL		and complete lines 29 through 33.					
5 0	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or ea	quipment	fund		30	
As	31	Retained earnings, endowment, accumulated in	come, or	other funds		31	
Net	32	Total net assets or fund balances		[7,499,053.	32	5,625,496
-	33	Total liabilities and net assets/fund balances			24,177,499.	33	22,639,228

Form 990 (2019) Part X Balance Sheet

ACCIO

Form	ACCION EAST, INC.	11-3	317234	Pag	је 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,058		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,945		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,886	, 88	<u>84.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,499	, 05	<u>53.</u>
5	Net unrealized gains (losses) on investments	5	13	, 32	<u>27.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	5,625	5,49	<u>96.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2</u> a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		<u>2</u> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	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?		<u>2</u> c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

SCHEDULE A

(Form 990 or 990-EZ)

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

ĺ	OMB No. 1545-0047
	2019
	Open to Public Inspection

Department of the Treasury Internal Revenue Service			► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection		
Name of	the organizati		Ŭ					Employer	r identification number		
		ACCI	ON EAST, I	NC.				1	1-3317234		
Part I	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.										
The organ	nization is not a	a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)					
1 🗂		•		on of churches described		,	I)(A)(i).				
2				Attach Schedule E (Form		• • •	<i>R R I</i>				
3				anization described in se			ii).				
4	•	•		njunction with a hospital)(iii). Enter	the hospital's name,		
	city, and stat	-	·						. ,		
5			or the benefit of a co	llege or university owned	or operat	ed by a go	overnmental u	init describe	əd in		
	section 170	(b)(1)(A)(iv). (C	Complete Part II.)	0 2	•	, ,					
6	A federal, sta	ite, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).				
7 X			•	ntial part of its support fr			. ,	he general i	public described in		
	•		omplete Part II.)		Ũ			5 1			
8				(1)(A)(vi). (Complete Par	t II.)						
9				in section 170(b)(1)(A)(ed in conju	unction with a	land-grant	college		
				ulture (see instructions).							
	university:			,			,	Ũ			
10		ion that norma	Illy receives: (1) more	than 33 1/3% of its sup	port from a	contributio	ns, members	hip fees, an	d gross receipts from		
	activities rela	ted to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more thar	n 33 1/3% of i	ts support f	from gross investment		
				(less section 511 tax) fro							
	See section	509(a)(2). (Co	mplete Part III.)								
11	An organizati	ion organized a	and operated exclusion	ively to test for public sat	fety. See	section 50	09(a)(4) .				
12	An organizati	ion organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	arry out the	purposes of one or		
	more publicly	/ supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3).	Check the box in		
	lines 12a thro	bugh 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.			
a	Type I. A s	upporting orga	anization operated, s	upervised, or controlled	by its sup	orted org	anization(s), t	ypically by	giving		
	the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	upporting		
	organizatio	n. You must o	complete Part IV, Se	ections A and B.	-						
b 🗌	Type II. As	supporting org	anization supervised	l or controlled in connect	ion with it	s supporte	ed organizatio	n(s), by hav	<i>i</i> ng		
	control or r	nanagement o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported		
	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.							
c 🗌	Type III fui	nctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functiona	lly integrate	əd with,		
	its support	ed organizatio	n(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.				
d	🗌 Type III no	n-functionally	/ integrated. A supp	porting organization oper	ated in co	nnection v	vith its suppo	rted organiz	zation(s)		
	that is not	functionally int	tegrated. The organiz	zation generally must sat	isfy a distr	ibution rea	quirement and	an attentiv	/eness		
	requiremer	nt (see instruct	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	v .				
e	Check this	box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III			
	functionally	/ integrated, o	r Type III non-functio	nally integrated supporti	ng organiz	ation.					
f Ent	er the number	of supported o	organizations								
g Pro			n about the supporte								
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) is the org in your govern	anization listed ing document?	(v) Amount c	-	(vi) Amount of other		
	organizatior	1		above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)		
			1	1	1	1			1		

	column (f)						4988338.		
6	Public support. Subtract line 5 from line 4.						21546436.		
	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
	Amounts from line 4	5752641.	6113444.	6268291.	4528517.	3871881.	26534774.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources	26,414.	2,505.	1,019.	5,126.	4,297.	39,361.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)			27,586.	19,254.	72,447.	119,287.		
11	Total support. Add lines 7 through 10						26693422.		
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 13	,485,731.		
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3)			
	organization, check this box and stor								
Se	ction C. Computation of Publi	c Support Per	centage						
14	Public support percentage for 2019 (ine 6, column (f) di	vided by line 11, c	olumn (f))		14	80.72 %		
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	80.55 %		
16a	33 1/3% support test - 2019. If the c	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization				► X		
k	33 1/3% support test - 2018. If the c	organization did no	t check a box on li	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition					
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	ind line 14 is 10%	or more,		
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and stop h	ere. Explain in Pa	rt VI how the orgar	nization		
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a p	oublicly supported	organization				
k	10% -facts-and-circumstances test	- 2018. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or		
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the								
	organization meets the "facts-and-circ	oumstances" test. ⁻	The organization q	ualifies as a public	ly supported orgar	nization			
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	3 >		
					Sche	edule A (Form 990	or 990-EZ) 2019		

(Form 990 or 990-EZ) 2019 ACCION EAST, INC. 5

(a) 2015

5752641.

5752641.

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

(b) 2016

6113444.

6113444.

(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.)

(c) 2017

6268291.

6268291.

(d) 2018

4528517.

4528517.

3871881.26534774.

3871881.26534774.

(f) Total

(e) 2019

Section A. Public Support

Calendar year (or fiscal year beginning in) 🕨

include any "unusual grants.")

2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge

4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11,

1 Gifts, grants, contributions, and membership fees received. (Do not

criedule A	. (
Part II	

Schedule A (Form 990 or 990-EZ) 2019	ACCION	EAST,	INC.	
--------------------------------------	--------	-------	------	--

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

11-3317234 Page 3

(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

Sei	Stion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3							
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support			•	•		•
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	L					
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) org	anization,
Sec	ction C. Computation of Publi	<u>c Support Per</u>	centage				
15	Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13, o	olumn (f))		15	%
	Public support percentage from 2018					16	%
See	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20) 19 (line 10c, colur	nn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2018 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2019. If the	organization did r				33 1/3%, and li	ne 17 is not
	more than 33 1/3%, check this box ar	-					
b	33 1/3% support tests - 2018. If the						1%, and
	line 18 is not more than 33 1/3%, che	•					·
20	Private foundation. If the organization		•			-	
	¥						

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

No

Yes

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	Mana a mainthe of the experimetical alterators of twisters device the terror of the state of the direct		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		1	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No, " explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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 Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	•		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	20		
о а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
~	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
-				

	(Form 990 or 990-EZ) 2019 ACCI		
Part V	Type III Non-Functionally I	ntegrated 509(a	a)(3) Supporting Organizations

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.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrated	Type III supporting orga	nization (see

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990 or 990-EZ) 2019

1

Par	t v Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exemp-	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	5	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which th	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 ACCION EAST, INC.

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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

FUNDRAISING INCO	DME
2017 AMOUNT: \$	27,586.
2018 AMOUNT: \$	19,254.
2019 AMOUNT: \$	19,164.
OTHER REVENUE	
2019 AMOUNT: \$	53,283.

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

11	- 3	31	.72	34
	-			_

ACCION EAST

Organization type (check or	ne):
Filers of:	Section:
Form 990 or 990-EZ	X 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

INC.

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

X 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 or 990-EZ), 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, 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., purposes. 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 for an exclusively religious.

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

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

SC	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047
	n 990)		anization answered "Yes" on Form 990,		2019
•		Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
	ment of the Treasury I Revenue Service		90 for instructions and the latest information	n.	Inspection
Nam	e of the organizati	on ACCION EAST, INC.			r identification number 11–3317234
Par	tl Organiza	ations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts.	Complete if the
<u> </u>		n answered "Yes" on Form 990, Part IV, lin			
	- · g	······································	(a) Donor advised funds	(b) Funds ar	nd other accounts
1	Total number at e	nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5			writing that the assets held in donor advised f	unds	
	are the organization	on's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	d only	
	for charitable purp		r donor advisor, or for any other purpose conf	0	
	impermissible priv	ate benefit?			Yes No
Par			ganization answered "Yes" on Form 990, Part	IV, line 7.	
1		servation easements held by the organization			
		n of land for public use (for example, recrea	,		
		of natural habitat	Preservation of a c	ertified historic	structure
~		n of open space			
2	·	с с ,	ied conservation contribution in the form of a		
_	day of the tax year				l at the End of the Tax Year
a h					
b	Ũ		ucture included in (a)		
c d			after 7/25/06, and not on a historic structure		
u				2d	
3			eased, extinguished, or terminated by the org		ng the tax
-	year 🕨				-9 - · · · · ·
4		where property subject to conservation eas	sement is located >		
5		tion have a written policy regarding the per			
	violations, and enf	forcement of the conservation easements if	holds?		Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	ation easement	ts during the year
7	Amount of expense	ses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easements du	ring the year
	▶\$				
8	Does each conser	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)	(B)(i)	
	and section 170(h				Yes No
9			on easements in its revenue and expense stat		
	,	, , ,	note to the organization's financial statements	that describes	sthe
Par		ounting for conservation easements.	Art, Historical Treasures, or Other	Similar As	sets
L u		f the organization answered "Yes" on Form			
19			8, not to report in its revenue statement and k	alance sheet v	Norks
Tu	•		blic exhibition, education, or research in furthe		
			ncial statements that describes these items.		-
b			8, to report in its revenue statement and bala	nce sheet work	(s of
-	•		exhibition, education, or research in furtheral		
		ing amounts relating to these items:	. ,		,
	•			▶ \$	
				N	
2			asures, or other similar assets for financial gai		
	-	unts required to be reported under FASB A	-		
а	Revenue included	on Form 990, Part VIII, line 1	-	🕨 💲	
b	Assets included in			▶ \$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 10-02-19 Schedule D (Form 990) 2019

Sche	dule D (Form 990) 2019 ACCION	EAST, INC.				11-	3317234	: Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or (Other S	imilar Ass	ets _{(contin}	ued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that m	nake signi	ficant use of	its	
	collection items (check all that apply):							
а	Public exhibition	c	l 📃 Loan or ex	change program	1			
b	Scholarly research	e	• 🗌 Other					
С	Preservation for future generations							
4	Provide a description of the organization's ca	ollections and explair	n how they further t	the organization'	s exempt	purpose in F	Part XIII.	
5	During the year, did the organization solicit of	or receive donations o	of art, historical trea	asures, or other s	similar ass	sets		
	to be sold to raise funds rather than to be m						Yes	No
Par	t IV Escrow and Custodial Arran		ete if the organizati	on answered "Ye	es" on Fo	rm 990, Part	IV, line 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod						_	
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
t	Ending balance					1f		
	Did the organization include an amount on F						Yes	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete							
<u> </u>		(a) Current year	(b) Prior year	(c) Two years		Three years h	ack (e) Four	vears hack
1a	Beginning of year balance	(a) Ourient year	(b) Horyean			Three years be		yoars back
h	Contributions							
c	Net investment earnings, gains, and losses							
ď	Grants or scholarships							
e	Other expenditures for facilities							
-	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the cur		e (line 1g, column (a)) held as:	•		•	
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%	_					
с	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	- uld equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	and administered	l for the o	rganization	_	
	by:							Yes No
	(i) Unrelated organizations						<u>3a(i)</u>	
	(ii) Related organizations						<u>3a(ii)</u>	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Schedule R?	•			3b	
4	Describe in Part XIII the intended uses of the	<u>v</u>	wment funds.					
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answere							
	Description of property	(a) Cost or c basis (investr		st or other s (other)	• •	imulated ciation	(d) Book	value
1a	Land							
b	Buildings							
С	Leasehold improvements			31,385.		1,221.),164.
d	Equipment			75,266.		1,489.		<u>,777.</u>
	Other			59,362.	56	<u>6,970.</u>		2,392.
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X. column (B). linə</u>	10c.)		🕨	216	5,333.

Schedule D (Form 990) 2019

(a) Description of security of calegory (not-day tarm of security) (b) Bock value (c) Method of valuation: Cost or end-of-year market value (b) Chosely held equity interests	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(2) Clover	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(3) Other (3) (4) (3) (5) (4) (6) (5) (7) (7) (8) (7) (7) (7) (8) (7) (9) (7) (9) (7) (10) (11) (12) (12) (13) (12) (14) (12) (17) (12) (18) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (19) (11) (10) (11) (11) (11) (12) (11) (13) (11) (14) (11) (15) (11) (16) (11) (17) (12) (18) (1	(1) Financial derivatives			
(3) Other (4) (4) (5) (5) (5) (6) (6) (7) (7) (8) (7) (9) (7) (9) (7) (9) (7) (9) (7) (10) (7) (11) (12) (12) (13) (13) (14) (14) (15) (15) (16) (16) (16) (17) (16) (18) (19) (19) (10) (10) (10) (12) (11) (13) (11) (14) (11) (15) (11) (16) (11) (17) (11) (18) (11) (19) (11) (10) (11) (11) (11) (12) (12) (13) (12) (14) (12) (15) (12	(2) Closely held equity interests			
[0] [0] [0] [0] [0] [1] [0] [2] [1] [1] [1] [1] [1] [1] [2] [2] [2] [2] [2] [3] [3] [4] [4] [6] [4] [6] [6] [6] [6] [6] [6] [6] [7] [6] [8] [9] [9] [9] [1] [9] [4] [9] [4] [9] [6] [1] [6] [2] [6] [2] [6] [3] [6] [4] [6] [4] [6] [4] [6] [4] [6] [4] [6] [4] [6] [6] [6] [6] [6] [6] [6]				
(c) (c) (b) (c) (c) (c)	(A)			
	(B)			
(B) (B) (C) (B) (B) (B) (C)	(C)			
(f) (g) (g) (g) (g) (g) Part Vill (g) Description of investment (g) Description of investment (g) Description of investment (g) Description of investment (g) Description of investment (g) Description of investment (g) Description of investment (g) (g) Description of investment (g) (g) (g) Carptets if the organization answered 'Yee' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (g) Carptets if the organization answered 'Yee' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (g) Carptets if the organization answered 'Yee' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (g) Carptets if the organization answered 'Yee' on Form 990, Part IV, line 11d. See Form 990, Part X, line 25. (g) Complete if the organization answered 'Yee' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (g) Complete if the organizati	(D)			
(G) (G) (G) (G) (G) (G) (Part VIII) Investments - Program Related. Complete if the organization answered 'Yee' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Method of valuation: Cost or end of year market value (I) (D) Bock value (G) Bock value (I) (D) Inst segual Form 990, Part X, col. (B) line 13.) (D) Bock value (I) SECURITY DEPOSIT (D) Bock value (I) (D) (D) ((E)			
(b) Tetal. (Od. (b) must equal Form 990, Part X, ed. (b) line 12.) Part Vill Jinvestments - Program Related. (a) Description of investment (a) Description of investment (b) Book value (a) Description of investment (b) Book value (c) (c) Method of valuation: Cost or end of year market value (c) (c) <	(F)			
Total. (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-yeer market value (d) (e) (f) (f) (g) (g) (h) (h)	(G)			
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) (a) (b) (c) (c) (c) (d) (c) (e) (c) (f) (c) (e) (c) (f) (c) (f) (c) (f) (c) (g) (c) (g) (c) (h) (c) (g) (c) (h) (c) (g) (c) (h) (c) (h) (c) (g) (c) (g) (c) (h) (c) (g) (c) (g) (c) (g) (c) (h) (c) (g) (c) (h) (c) (g) (c) (h) ((H)			
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) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (2) (a) (b) (c) (c) (3) (c) (c) (c) (c) (6) (c) (c) (c) (c) (6) (c) (c) (c) (c) (7) (c) (c) (c) (c) (7) (c) (c) (c) (c) (9) (c) (c) (c) (c) (a) Description (c) Book value (c) Book value (c) Book value (1) SECURITY DEPOSIT 86,571. (c) (c) (c) (a) (c) (c) (c) (c) (c) (6) (c) (c) (c) (c) (c) (7) (c) (c) (c) (c)	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) (c) (c) (3) (c) (c) (c) (c) (4) (c) (c) (c) (c) (6) (c) (c) (c) (c) (c) (6) (c) (c) (c) (c) (c) (7) (c) (c) (c) (c) (c) (9) (c) (c) (c) (c) (c) (c) (9) (c) (c)<				
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) (c) (c)<	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(2) (3) (3) (4) (5) (5) (6) (7) (7) (7) (8) (9) (9) (1) (1) (2) (2) (3) (9) (1) (1) (2) (2) (3) (2) (3) (3) (4) (1) SECURITY DEPOSIT (2) (2) (3) (4) (4) (5) (5) (1) (6) (1) (7) (3) (6) (6) (7) (6) (7) (6) (8) (6) (9) (1) (1) Description of Form 990, Part X, col. (6) line 15.) (2) Complete if the organization answered "Yes" on Form 990, Part IV, line 116 or 111. See Form 990, Part X, line 25. (1) (2) Description of liability (3) (4) (5) (6) (6) (6) <t< td=""><td></td><td></td><td></td><td>end-of-year market value</td></t<>				end-of-year market value
(3) (4) (4) (5) (6) (7) (8) (9) (9) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)▶ (b) Book value (1) SECURITY DEPOSIT (a) Description (a) Description (b) Book value (1) SECURITY DEPOSIT 86 c, 571. (2) CASH RESTRICTED FOR LOAN FUNDS 1 , 100 , 657. (3) (1) (4) (1) (5) (1) (6) (1) (7) (3) (8) (1) (9) (1) (1) Security Deposition (b) Book value (6) (1) (7) (3) (9) (1) (1) Forderal income taxes (1) 1, 187 , 228 . (1) Federal income taxes (1) (2) DEFERRED RENT (107 , 286 . (3) OTHER LIABILITIES (45 , 225 . (4) SUBORDINATED DEBT (1) , 500 , 000 . (5) (6) (7)				
(3) (4) (4) (5) (6) (7) (8) (9) (9) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)▶ (b) Book value (1) SECURITY DEPOSIT (a) Description (a) Description (b) Book value (1) SECURITY DEPOSIT 86 c, 571. (2) CASH RESTRICTED FOR LOAN FUNDS 1 , 100 , 657. (3) (1) (4) (1) (5) (1) (6) (1) (7) (3) (8) (1) (9) (1) (1) Security Deposition (b) Book value (6) (1) (7) (3) (9) (1) (1) Forderal income taxes (1) 1, 187 , 228 . (1) Federal income taxes (1) (2) DEFERRED RENT (107 , 286 . (3) OTHER LIABILITIES (45 , 225 . (4) SUBORDINATED DEBT (1) , 500 , 000 . (5) (6) (7)				
(5) (6) (7) (8) (9) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line (3.) ► (9) (9) (9) (1) SECURITY DEPOSIT (9) Eock value (1) SECURITY DEPOSIT 86, 571. (2) CASH RESTRICTED FOR LOAN FUNDS 1, 100, 657. (3) (9) (4) (5) (6) (7) (8) (9) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 1, 187, 228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (1)				
(5) (6) (7) (8) (9) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line (3.) ► (9) (9) (9) (1) SECURITY DEPOSIT (9) Eock value (1) SECURITY DEPOSIT 86, 571. (2) CASH RESTRICTED FOR LOAN FUNDS 1, 100, 657. (3) (9) (4) (5) (6) (7) (8) (9) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 1, 187, 228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (1)				
(6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ (a) Description (b) Book value (b) Book value (1) SECURITY DEPOSIT 86, 571. (a) Description (b) Book value (1) SECURITY DEPOSIT 86, 571. (a) Description (b) Book value (1) SECURITY DEPOSIT 86, 571. (a) CASH RESTRICTED FOR LOAN FUNDS 1, 100, 657. (3) (4) (6) (1) (7) (6) (6) (1) (7) (2) (8) (1) (9) (1), 187, 228. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 111. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (b) Book value (1) Federal income taxes (2) DEFERRED RENT (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (5) (6)				
(7) (8) (9) (9) (1) Form 990, Part X, col. (B) line 13.) ► (a) (a) Description (a) (b) Book value (1) SECURITY DEPOSIT (2) CASH RESTRICTED FOR LOAN FUNDS (3) (1, 100, 657. (3) (6) (6) (7) (8) (9) (7) (1, 187, 228. (7) (9) (7) (1, 187, 228. (7) (9) (9) (1, 187, 228. (9) (1, 187, 228. (1) Federal income tase (2) Description of liability (a) Description of liability (b) Book value (1) Federal income tase (2) DEFERRED RENT (3) (1) (1) Federal income tase (2) DEFERRED RENT (3) (1) (4) (1) (5) (1) (6) (1) (7) (1)				
(9) Total. (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) SECURITY DEPOSIT 86 , 571. (2) CASH RESTRICTED FOR LOAN FUNDS 1 , 100 , 657 . (3) (4) (5) (6) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 1 , 187 , 228 . 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 , 187 , 228 . Part X Other Liabilities. (b) Book value (1) Federal income taxes (b) Ebook value (2) DEFERRED RENT 107 , 286 . (3) OTHER LIABILITIES 45 , 225 . (4) SUBORDINATED DEBT 1 , 500 , 000 . (5) (5)	(7)			
Total. (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) SECURITY DEPOSIT 86,571. (2) CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) (4) (5) (6) (7) (8) (9) 1,187,228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) 1, 500, 000. (5) 1, 500, 000.	(8)			
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) SECURITY DEPOSIT 86,571. (2) CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) (4) (5) (6) (6) (7) (8) (9) Total. (Column (b) must equal form 990. Part X. col. (B) line 15.) 1,187,228. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 111. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (b) Book value (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (7)				
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) SECURITY DEPOSIT 86,571. (2) CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) (4) (5) (6) (6) (7) (8) (9) Total. (Column (b) must equal form 990. Part X. col. (B) line 15.) 1,187,228. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 111. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (b) Book value (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (7)	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
(a) Description (b) Book value (1) SECURITY DEPOSIT 86,571. (2) CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) 1,100,657. (4) (5) (6) (6) (7) 1,187,228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)				
(1) SECURITY DEPOSIT 86,571. (2) CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) (4) (5) (6) (7) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 1,187,228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
[2] CASH RESTRICTED FOR LOAN FUNDS 1,100,657. (3) (4) (5) (6) (7) (8) (9) 1,187,228. 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) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)	(a) [Description		(b) Book value
(3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990. Part X col. (B) line 15.) ▶ 1,187,228. 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 (1) Federal income taxes (b) Book value (2) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (6) (7) (7)	(1) SECURITY DEPOSIT			86,571.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 1,187,228. 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 (1) Federal income taxes (b) Book value (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)	(2) CASH RESTRICTED FOR LOAN F	UNDS		1,100,657.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 1, 187, 228. 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 (1) Federal income taxes (b) Book value (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)	(3)			
(6) (7) (8) (9) Total. (Column (b) must equal Form 990. Part X, col. (B) line 15.) ▶ 1, 187, 228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)				
(6) (7) (8) (9) Total. (Column (b) must equal Form 990. Part X, col. (B) line 15.) ▶ 1, 187, 228. 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 (b) Book value (1) Federal income taxes 107, 286. (2) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)	(5)			
(7) (8) (9) 1,187,228. 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, 187,228. 1. (a) Description of liability (b) Book value (1) Federal income taxes 107,286. (2) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (6) (7) (7)				
(8) (9) Total. (Column (b) must equal Form 990. Part X, col. (B) line 15.) 1, 187, 228. 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) DEFERRED RENT 107, 286. (3) OTHER LIABILITIES 45, 225. (4) SUBORDINATED DEBT 1, 500, 000. (5) (6) (7) (7)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 1,187,228. Part X Other Liabilities. ▶ 1,187,228. 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) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) ● ● (6) ● ● (7) ● ●				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 1,187,228. 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 (1) Federal income taxes (2) DEFERRED RENT (3) OTHER LIABILITIES (4) SUBORDINATED DEBT (5) (6) (7)				
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 (1) Federal income taxes (2) DEFERRED RENT (3) OTHER LIABILITIES (4) SUBORDINATED DEBT (5) (6) (7) (7)		15)		1,187,228.
1. (a) Description of liability (b) Book value (1) Federal income taxes (c) (2) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (a) (b) Book value (b) Book value (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c)				
1. (a) Description of liability (b) Book value (1) Federal income taxes (c) (2) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (a) (b) Book value (b) Book value (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c)	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	25.
(1) Federal income taxes (2) DEFERRED RENT (3) OTHER LIABILITIES (4) SUBORDINATED DEBT (5) (6) (7)	(a) Departmention of lightlity	, , ,		
(2) DEFERRED RENT 107,286. (3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (6) (7) (7)				
(3) OTHER LIABILITIES 45,225. (4) SUBORDINATED DEBT 1,500,000. (5) (6) (7) (7)				107,286.
(4) SUBORDINATED DEBT 1,500,000. (5) (6) (7) (7)				
(5) (6) (7)				
(6) (7)				,,
(7)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		25.)		1.652.511.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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 9					3317234 Page 4
Part XI Reco	nciliation of Revenue per Audited Financial Statements	With R	evenue per Ret	turn.	
Comp	ete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1 Total revenue	, gains, and other support per audited financial statements			1	7,204,249.
2 Amounts incl	uded on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealize	d gains (losses) on investments	2a	13,327.		
b Donated serv	ces and use of facilities	2b	132,702.		
c Recoveries of	prior year grants	2c			
d Other (Descri	be in Part XIII.)	2d			
e Add lines 2a	hrough 2d			2e	146,029.
3 Subtract line	2e from line 1			3	7,058,220.
4 Amounts incl	uded on Form 990, Part VIII, line 12, but not on line 1:				
a Investment ex	penses not included on Form 990, Part VIII, line 7b	4a			
b Other (Descri	be in Part XIII.)	4b			
c Add lines 4a	and 4b			4c	0.
5 Total revenue	. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	7,058,220.
Part XII Reco	nciliation of Expenses per Audited Financial Statement		Expenses per R	eturn).
Part XII Reco			Expenses per R	eturn	
Part XII Reco	nciliation of Expenses per Audited Financial Statement	s With I		eturn	n. 9,129,302.
Part XII Reco Comp 1 Total expense 2 Amounts incl	nciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25:	s With I			
Part XII Reco Comp 1 Total expense 2 Amounts incl	ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements	s With I			
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv	nciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25:	s With I			
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv	ete if the organization answered "Yes" on Form 990, Part IV, line 12a. es and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities	s With I	132,702.		
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments	s With I 2a 2b			9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments	2a 2b 2c 2d	132,702. 51,496.		9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments op in Part XIII.)	2a 2b 2c 2d	132,702.	1	9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a 3 Subtract line	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments be in Part XIII.) chrough 2d	2a 2b 2c 2d	132,702.	1 2e	9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a 3 Subtract line 4 Amounts incl	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. es and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments be in Part XIII.) chrough 2d 2e from line 1	2a 2b 2c 2d	132,702.	1 2e	9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a 3 Subtract line 4 Amounts incl a Investment exp	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. es and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments be in Part XIII.) chrough 2d 2e from line 1 uded on Form 990, Part IX, line 25, but not on line 1:	2a 2b 22 2d	132,702.	1 2e	9,129,302.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a 3 Subtract line 4 Amounts incl a Investment exp	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments be in Part XIII.) through 2d 2e from line 1 uded on Form 990, Part IX, line 25, but not on line 1: uppenses not included on Form 990, Part VIII, line 7b be in Part XIII.)	2a 2b 2c 2d 4a 4b	132,702.	1 2e	9,129,302. 184,198. 8,945,104. 0.
Part XII Recc Comp 1 Total expense 2 Amounts incl a Donated serv b Prior year adj c Other losses d Other (Descri e Add lines 2a 3 Subtract line 4 Amounts incl a Investment ex b Other (Descri c Add lines 4a 5 Total expense	Inciliation of Expenses per Audited Financial Statement ete if the organization answered "Yes" on Form 990, Part IV, line 12a. as and losses per audited financial statements uded on line 1 but not on Form 990, Part IX, line 25: ces and use of facilities ustments be in Part XIII.) chrough 2d 2e from line 1 uded on Form 990, Part IX, line 25, but not on line 1: uppenses not included on Form 990, Part VIII, line 7b be in Part XIII.)	2a 2b 2c 2d 4a 4b	132,702.	1 2e 3	9,129,302.

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:

ACCION BELIEVES IT HAS NO UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2019

AND 2018 IN ACCORDANCE WITH ACCOUNTING STANDARDS CODIFICATION ("ASC")

TOPIC 740, INCOME TAXES, WHICH PROVIDES STANDARDS FOR ESTABLISHING AND

CLASSIFYING ANY TAX PROVISIONS FOR UNCERTAIN TAX POSITIONS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RELATED ENTITY'S EXPENSES

51,496.

11-3317234 Page 4

	SCHEDULE G	Suppleme	ntal Info	rmation Reg	garding	Fund	raisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047
Image of the organization Impection Name of the organization Employer identification numbe ACCION EAST, INC. Industry identification numbe Image of the organization Employer identification numbe Image of the organization Image of the organization numbe Image of the organization raised funds through any of the following activities. Check all that apply. Image of the organization raised funds through any of the following activities. Check all that apply. Image of the organization raised funds through any of the following activities. Check all that apply. Image of the organization raise of the organization answered 'Yes' on Form 900, Part IV, ine 17. Form 900-EZ filers are not organized to organize of approximating and the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 900, Part IVI) or entity in connection with professional fundraising services? Image of the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 900, Part IVI) or entity in connection with professional fundraising services? Image of the organization have a written or oral agreement with any individual (including officers, directors, trustees, or response of individual or entities (thurdraisers) pursuant to agreements under which the fundraiser is to be organization (i) Name and address of individual or entities (thurdraisers) (ii) Organization Image of the organization (ii) Namount pa	(Form 990 or 990-EZ)								or 19,	or if the	2019
Name of the organization Employer identification number of inductors and not needed in other theorem 11-3317234 Part I Fundraising Activities. Complete it the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization reased funds through any of the following activities. Check all that apply. a Mail solicitations b Intermet and email solicitations c Solicitation of non-government grants c Phone solicitations c Phone solicitations c Phone solicitations 2 Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key ampleyees listed in from 990, Part IV) or entity in connection with professional fundratising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Activity (ii) Activity (iii) Activity (iiii) Activity (iiiiii) Activity (iiiiiiiiiiii)				•							
ACCION EAST, INC. 11-3317234 Part] Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not registration assed funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Internet and email solicitations g Solicitation of non-government grants c Phone solicitations g Solicitation of government grants d In-person solicitations g Solicitation of government grants d In-response solicitations g Solicitation of government grants d In-response solicitations g Yes Yes No H'''se', it the 10 highest paid individual or entities (fundraisers) pursuant to agreements under which the fundraiser g/ (y) Amount paid (or retained by indraisers) (i) Name			o to www.ir	s.gov/Form990) for instru	uction	s and	the latest informati	on.	Employer ir	•
Part Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e b Internet and email solicitations f c Phone solicitations g c Diversity is the 10 highest paid individuals or entities (fundraising services? Ves No b Internet and address of individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Activity (iii) Constrained by the fundraiser is to be compensated at least \$5,000 by the organization. (iv) Amount paid to or retained by the organization. (iv) Amount paid to organization. (iv) A	Name of the organization		EAST	INC.							
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Informet and email solicitations g Solicitation of government grants c Solicitations g Solicitation of government grants d Solicitations g Special fundraising services; fundraises, or key employees listed in form 990, Part Mio entity in connection with professional fundraising services; for real address of individual or entities (fundraiser) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entities (fundraiser) (ii) Activity (iii) Activity (iii) Activity (iii) Activity (iv) Gross receipts to the fundraiser is to be constrained by fundraiser is to be constrained by fundraiser is to be constrained by fundraiser (iv) Amount paid to (or related by fundraiser) (iv) Amount paid to (or related by fundraiser)	Part I Fundrais				ion answe	red "Y	es" or	Form 990 Part IV I	ine 1		
				in the organizat	lion anono	iou i	00 01	rronn coo, r arrn, i			
(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Activity (iv) Gross receipts from activity (v) Amount paid to (or retained by fundraiser) (vi) Amount paid to (or retained by fundraiser) Yes No Yes No Yes No Yes No Yes	 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list b If "Yes," list the 10 	ions email solicitations tations licitations on have a written c ed in Form 990, Pa highest paid indiv	or oral agree art VII) or ei viduals or ei	e f g ntity in connect ntities (fundrais	Solicitat Solicitat Special individual ion with pr	ion of ion of fundra (includ	non-ga govern ising a ing of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Y	
(i) Name and address of individual or entity (fundraiser) (ii) Activity Image custors of individual for activity (iv) Grant and by fundraiser is the custor of the c	compensated at le	ast \$5,000 by the	organizatic I	n.				1			
Image:	• •			(ii) Activity		or con	trol of		tò (c	or retained by fundraiser) to (or retained by)
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration						Yes	No				
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration	Total		<u> </u>				•				
	3 List all states in whi	ch the organizatio	n is registe	red or licensed	to solicit c	ontrib	utions	or has been notified	it is a	exempt from	registration

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

		of fundraising event contributions and gr	oss income on Form 990		vents with gross receip	ts greater than \$5,000.
				(b) Event #2 HARVEST	(c) Other events NONE	(d) Total events (add col. (a) through
			A20 LUNCHEON (event type)	FESTIVAL (event type)	(total number)	- col. (c))
Revenue						
Reve	1	Gross receipts	148,000.	14,125.		162,125.
	2	Less: Contributions	131,500.	11,461.		142,961
	3	Gross income (line 1 minus line 2)	16,500.	2,664.		19,164
	4	Cash prizes				
"	5	Noncash prizes				
penses	6	Rent/facility costs	4,783.	2,445.		7,228
Direct Expenses	7	Food and beverages	15,750.	3,804.		19,554
	8	Entertainment				
	9	Other direct expenses				
		Direct expense summary. Add lines 4 through	()			26,782
_	<u>11</u> rt I	Net income summary. Subtract line 10 from li	/ /	000 Det N/ Kee 40		-7,618
a		II Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered res on Form	1990, Part IV, line 19, or r	eponed more than	
				(b) Pull tabs/instant		(d) Total gaming (add
Hevenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c
eve						
r	1	Gross revenue				
Se	2	Cash prizes				
:xpense	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	5	Other direct expenses	Yes%	Yes %	Yes %	
	6	Volunteer labor		/∞ No	□ <u>No</u> %	
	1	Direct expense summary. Add lines 2 through	n 5 in column (d)		▶	
	8	Net gaming income summary. Subtract line 7	' from line 1. column (d)		▶	
						1
9	Ent	ter the state(s) in which the organization condu	ucts gaming activities:			
		he organization licensed to conduct gaming a No," explain:				Yes No
~		6 11 1 1 1 1 1				
		ere any of the organization's gaming licenses re			ear?	Yes No
α	П.,	Yes," explain:				

Sch	nedule G (Form 990 or 990-EZ) 2019 ACCION EAST, INC. 1	1-3317	7234	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed] X aa	
10	to administer charitable gaming? Indicate the percentage of gaming activity conducted in:		Yes	└── No
13		13a	.1	%
	a The organization's facility o An outside facility			%
14			<u> </u>	70
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?] Yes	🗌 No
	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶\$			
(c If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 💲			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	······································			
â	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		1.	
	retain the state gaming license?] Yes	No No
t	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie		
Pa	organization's own exempt activities during the tax year s art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); an	d Dart III. li	nos 9	96 106
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		1163 0,	55, 105,

Part IV Supplemental information	(continued)		

SC	HEDULE J Compensation Information	OMB No.	1545-004	.7
(Fo	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest	20	10	
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	ZU	19	
Dena	rtment of the Treasury	Open te	o Publi	ic
	► Go to www.irs.gov/Form990 for instructions and the latest information.	•	ection	
Nam		mployer identificati		nber
	ACCION EAST, INC.	11-331723	4	
Ра	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99	Ю,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for persona			
	Travel for companions	lence		
	Tax indemnification and gross-up payments			
	Discretionary spending account	chet)		
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	<u>1b</u>		
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?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
0	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.	10		
	Compensation committee Written employment contract			
	Independent compensation consultant IX Compensation survey or study			
	Independent compensation consultant Image: State of Stat	nmittee		
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:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			X
с	Participate in, or receive payment from, an equity-based compensation arrangement?			X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 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:			
а	The organization?			<u>X</u>
	Any related organization?			Х
	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:			
а	The organization?	6a		<u>X</u>
b	Any related organization?	6b		Х
	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		X	
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			X
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 (For	m 990)	2019

Schedule J (Form 990) 2019 ACCIC	N	ACCION EAST, INC.			11-3317234	234		Pade 2
s, Trustee	oldm	yees, and Highest C	compensated Emple	oyees. Use duplica	te 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.	orm 9	oorted on Schedule J 390, Part VII.	l, report compensati	on from the organiz	ation on row (i) and fro	n related organizations	, described in the instr	uctions, on row (ii).
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	oni be	lividual must equal th	ie total amount of Fo	orm 990, Part VII, Se	ection A, line 1a, applic	able column (D) and (E) amounts for that indiv	idual.
		(B) Breakdown of \	(B) Breakdown of W/2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	ouner delerred compensation	peneirs	(n)-(1)(a)	In countin (b) reported as deferred on prior Form 990
(1) PAUL OUINTERO	9	281.535.	0.	0	0	26.745.	308.280.	0.
		-	.0	.0		`	-	.0
(2) WILLIAM POPELESKI	Ξ	137,290.	0.	.0		18,855.	156,145.	.0
C00	(•0	.0	•0	.0	.0	• 0	.0
	Ξ							
	€ (
	•							
	9							
	Ξ							
	€							
	Ξ							
	(ii)							
	(i)							
	≘							
	Ξ							
	Ξ [
	9							
	: 🗉							
	(1)							
	(ii)							
	Ξ							
	(ii)							
							Schedu	Schedule J (Form 990) 2019

932112 10-21-19

Schedule J (Form 990) 2019 ACCION EAST, INC.	11-3317234	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	this part for any additional information.	
	Schedule J (Form 990) 2019	990) 2019

SCHEDULE O	
(Form 990 or 990-E	Z)

Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

2019 Open to Public Inspection Employer identification number 11-3317234

OMB No. 1545-0047

ACCION EAST, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EDUCATION. WITH ECONOMIC OPPORTUNITY, THESE ENTREPRENEURS, OFTEN

MINORITIES AND WOMEN, CAN BUILD ASSETS, BETTER PROVIDE FOR THEIR

FAMILIES, CREATE EMPLOYMENT AND STRENGTHEN THEIR COMMUNITIES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMMUNITIES.

FORM 990, PART VI, SECTION A, LINE 3:

THE ORGANIZATION DELEGATED CONTROL OVER MANAGEMENT DUTIES CUSTOMARILY

PERFORMED BY OR UNDER THE DIRECT SUPERVISION OF TOP FINANCIAL OFFICER TO

BURCHMAN, TERRIO, GEBHARDT AND QUIST LLC ("BTQ"). BTQ PROVIDES FINANCIAL

MANAGEMENT AND ACCOUNTING SERVICES. THE ORGANIZATION COMPENSATED BTQ

\$256,667 FOR THEIR SERVICES. SEAN BERRY, CONTRACTED CFO, IS EMPLOYED BY

BTQ.

FORM 990, PART VI, SECTION B, LINE 11B:

THE RETURN IS PREPARED BY THE OUTSOURCED ACCOUNTANT, AND IS REVIEWED BY THE FINANCE & AUDIT COMMITTEE IN DETAIL AND THEN SEND TO THE BOARD PRIOR TO ITS

FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

A CONFLICT OF INTEREST POLICY IS CURRENTLY IN PLACE AND IS MONITORED

ANNUALLY. EACH YEAR EVERY MEMBER OF THE GOVERNING BODY COMPLETES AND SIGNS

A CONFLICT OF INTEREST QUESTIONNAIRE IN WHICH THEY DISCLOSE ANY POSSIBLE

CONFLICTS OF INTEREST TO THE ORGANIZATION.

Name of the organization

ACCION EAST, INC.

FORM 990, PART VI, SECTION B, LINE 15A:

IN 2018, THE CEO'S SALARY WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS USING THREE SOURCES OF COMPENSATION ANALYSIS, INCLUDING NATIONAL REPORT FROM GUIDESTAR ON COMPENSATION LEVELS FOR NONPROFIT CEOS BY TYPE OF NONPROFIT, SIZE AND GEOGRAPHY, AN ANALYSIS PREPARED BY OUR PROFESSIONAL EMPLOYMENT ORGANIZATION FOR ALL POSITIONS WITHIN THE ORGANIZATION AND AN ANALYSIS BASED ON INDEPENDENT NONPROFIT SALARY GUIDES FOR THE NEW YORK AREA.

IN 2019, ACCION HAD AN EMPLOYMENT MANAGEMENT AGREEMENT WITH A PROFESSIONAL EMPLOYMENT ORGANIZATION ("PEO") WHICH PROVIDES A COMPREHENSIVE PERSONNEL MANAGEMENT SYSTEM ENCOMPASSING A BROAD RANGE OF SERVICES, INCLUDING BENEFITS AND PAYROLL ADMINISTRATION, HEALTH AND WORKER'S COMPENSATION INSURANCE PROGRAMS, PERSONNEL RECORDS MANAGEMENT, EMPLOYER LIABILITY MANAGEMENT, ETC. EMPLOYEES ARE CONSIDERED CO-EMPLOYEES OF ACCION AND THE PEO. EMPLOYEES ARE INCLUDED IN A FORM W-3, TRANSMITTAL OF WAGE AND TAX STATEMENTS ISSUED DIRECTLY BY THE PEO. ACCION DID NOT ISSUE A SEPARATE FORM W-3 OR FORM W-2.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R (Form 990) Department of the Tressury	Compl	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Complete if the organization answered "Yes" on Form 990.	ions and Unrelated Pa ered "Yes" on Form 990, Part IV, I ► Attach to Form 990.	therships ine 33, 34, 35b, 3 tirformation	6, or 37.		OMB No. 1545-0047 2019 Open to Public Instruction
ation	ACCION EAST, I	INC.				Employer identificatio 11-3317234	Employer identification number 11-3317234
Part I Identification of Disregarded Entities. Complete if the organization	Entities. Complet	if the organization answered "Yes"	answered "Yes" on Form 990, Part IV, line 33				
(a) Name, address, and EIN (ff applicable) of disregarded entity	licable)	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	me End-of-year assets		(f) Direct controlling entity
Part II Identification of Related Tax-Ex Part II organizations during the tax year.	Exempt Organiza t ar.	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.	Inswered "Yes" on Form 990	, Part IV, line 34, I	oecause it had one	or more related tax-e)	(empt
(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	1212
ACCION EAST, INC 04-3219159 80 MAIDEN LANE SUITE 903 NEW YORK, NY 10038		PROVIDING MICROLOANS AND SUPPORT TO ENTREPRENEURS	MASSACHUSETTS	501(C)(3)	LINE 12A, I	ACCION EAST, INC	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	se the Instructions	s for Form 990.				Schedule	Schedule R (Form 990) 2019

932161 09-10-19 LHA

11-3317234 Page 2 Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	(e) (f) (g) (h) (i) (i) <th>Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related</th> <th>(c)(d)(d)(e)(f)(g)(h)(i)Legal domicileDirect controllingType of entityShare of totalShare ofPercentageState/ical(state or foreign country)entity(C corp, S corp, incomeShare of totalShare of end-of-yearPercentageState/ical(state or foreign country)entity(C corp, S corp, incomeend-of-yearownershipentity?(state or foreign country)or trust)or trust)assetsYesNo</th> <th></th> <th></th>	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related	(c)(d)(d)(e)(f)(g)(h)(i)Legal domicileDirect controllingType of entityShare of totalShare ofPercentageState/ical(state or foreign country)entity(C corp, S corp, incomeShare of totalShare of end-of-yearPercentageState/ical(state or foreign country)entity(C corp, S corp, incomeend-of-yearownershipentity?(state or foreign country)or trust)or trust)assetsYesNo		
	(d) Direct controlling	or Trust.	(b) Primary activity		
ACCION EAST, INC. ated Organizations Taxable as a as a partnership during the tax y	Primary activity	rganizations Taxable as a	EIN		
Schedule R (Form 990) 2019 ACCION EAST, INC. Part III Identification of Related Organizations Taxable as a Partnership.	(a) Name, address, and EIN of related organization	Part IV Identification of Related Organizations Taxable as a Corporation Part IV Identifications treated as a corporation or trust during the tax year.	(a) Name, address, and EIN of related organization		

Schedule R (Form 990) 2019 ACCION EAST, INC.

11-3317234 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 in listed in Dorte II. II. or IV of this schedule				ŕ		
During the tax year, did the organization engage in any of the following transactions	s with one or more re	ie. transactions with one or more related organizations listed in Parts II-IV?	n Parts II-IV?		B	
a Receipt of (i) interest. (ii) annuities. (iii) rovalties. or (iv) rent from a controlled entity				1a		×
b Gift. arant. or capital contribution to related organization(s)				đ		×
				10	×	
				77		×
				2 4		×
				2		
f Dividends from related organization(s)				ŧ		×
6				1g		×
				ŧ		×
i Exchange of assets with related organization(s)				÷		×
j Lease of facilities, equipment, or other assets to related organization(s)				÷		×
				;		>
K Lease of facilities, equiprifent, of other assets from related organization(s)				¥	t	
I Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			÷		×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m		X
	on(s)			1n	X	
				÷	×	
				2	4	
b Reimbursement paid to related organization(s) for expenses				đ	×	
				-1a		×
r Other transfer of cash or property to related organization(s)				1r		X
s Other transfer of cash or property from related organization(s)				1s		X
2 If the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for information on the above is "Yes," see the instructions for the above is "Yes," see t	ho must complete th	s line, including covered r	mation 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	lved		
(1) ACCION EAST, INC	υ	51,496.	CASH			
(2)						
(5)						
(4)						
(5)						
0						
332163 09-10-19			Schedule R (Form 990) 2019	(Form	; (066	2019

Schedule R (Form 990) 2019 ACCIO	ACCION EAST, INC.							11-331	-3317234	Page 4
Part VI Unrelated Organizations Taxable as a Partnership. Complete if the Provide the following information for each entity taxed as a partnership through	ble as a Partnership. Cor antity taxed as a partnershi	nplete if the organ p through which th	le organization answered "Yes" on Form 990, Part IV, line 37. which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)	s" on Form Icted more	990, Part IV, line than five percent	37. of its activities (me	asured by	total assets or ç	gross rev	(enue)
Inter was not a related organization. See instructions regarding exclusion or certain investment partnersinps. (a) (b) (c) (d) Name, address, and EIN Primary activity Legal domicile Predominant income (relating unclatified, unrelating, of entity) of entity of entity country) sections 512-514)	tructoris regarding excus (b) Primary activity	Legal domicile (state or foreign country)	<u> </u>	(e) Are all 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	Dispropor- tionate allocations?	(i) Code V-UBI amount in box 20 r form 1065)	(j) General or managing partner?	(k) Percentage ownership
							3	~	3	
								Schedule	B (Forn	Schedule R (Form 990) 2019

ACCION EAST, INC.

 Schedule R (Form 990) 2019
 ACCI

 Part VII
 Supplemental Information

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

Form 990-T	Exempt Organization B			ax Return	F	OMB No. 1545-0047
	(and proxy tax u	Inder se	ection 6033(e))			2040
			, and ending		_ ·	2019
Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990T f ► Do not enter SSN numbers on this form as it					pen to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed	Name of organization (Check box if na	me change	d and see instructions.)		D Employ (Employ instruct	ver identification number yees' trust, see tions.)
B Exempt under section	Print ACCION EAST, INC.					-3317234
X 501(C)(3)	or Number, street, and room or suite no. If a P.C.		nstructions.			ed business activity code structions.)
408(θ) 220(θ)	OU MAIDEN LANE, NU.					
408A530(a) 529(a)	City or town, state or province, country, and Z NEW YORK, NY 10038	ZIP or foreig	gn postal code			
C Book value of all assets at end of year	F Group exemption number (See instructions	, .				
<u> </u>	28. G Check organization type 🕨 🕱 501(c)			40 1(a)		Other trust
				the only (or first) un		
trade or business here	ank space at the end of the previous sentence, comple	to Darte La		complete Parts I-V.		
business, then complete		le Paris I ai	iu ii, complete a Scheuule		ai ii aue i	I
/	the corporation a subsidiary in an affiliated group or a	parent-subs	sidiary controlled group?		Yes	No
	nd identifying number of the parent corporation.		,			
	► WILLIAM POPELESKI (CO	0)	Teleph	one number 🕨 6	46-8	33-4514
Part I Unrelated	Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1 a Gross receipts or sale						
b Less returns and allow						
	chedule A, line 7)					
	line 2 from line 1c e (attach Schedule D)					
	4797, Part II, line 17) (attach Form 4797)					
	for trusts					
	partnership or an S corporation (attach statement)					
6 Rent income (Schedu						
7 Unrelated debt-finance	ed income (Schedule E)	7				
8 Interest, annuities, roy	alties, and rents from a controlled organization (Schedu	le F) 8				
	a section 501(c)(7), (9), or (17) organization (Schedul					
	ity income (Schedule I)					
	chedule J)					
Υ.	tructions; attach schedule) 3 through 12	12	0.			
Part II Deductio	ns Not Taken Elsewhere (See instruction					
	must be directly connected with the unrelated b					
14 Compensation of off	cers, directors, and trustees (Schedule K)				14	
15 Salaries and wages					15	
	ance				16	
					17	
	dule) (see instructions)				18	
	Lorm 4560)				19	
	Form 4562) imed on Schedule A and elsewhere on return				21b	
					22	
• • • • • • • • • • • • • • • • • • • •	rred compensation plans				23	
24 Employee benefit pro					24	
25 Excess exempt exper	ises (Schedule I)				25	
26 Excess readership co	sts (Schedule J)				26	
	ach schedule)				27	
	Id lines 14 through 27				28	0.
	axable income before net operating loss deduction. Sul				29	0.
	erating loss arising in tax years beginning on or after J				30	0.
31 Unrelated business t	axable income. Subtract line 30 from line 29				30	0.
						DOD T (00.10)

		ACCION EAST, INC.	bla lucama				1	.1-3317	234	Page 2
Part		Fotal Unrelated Business Taxa						. [
32		unrelated business taxable income compute	· · · · · · · · · · · · · · · · · · ·	•	,					0.
33							33			
34		ble contributions (see instructions for limitati								0.
35		related business taxable income before pre-2					3			
36		on for net operating loss arising in tax years								
37		unrelated business taxable income before sp							1 0	
38		e deduction (Generally \$1,000, but see line 38					38	8	1,00	00.
39		ed business taxable income. Subtract line 3	38 from line 37. If line 38 is greater than lir	ne 37,						^
Dave		e smaller of zero or line 37 Fax Computation					39	9		0.
40		ations Taxable as Corporations. Multiply lin				▶	► <u>40</u>)		0.
41		faxable at Trust Rates. See instructions for	•					.		
		ax rate schedule or Schedule D (Forr	,							
42	•						► <u>4</u> 2			
43	Alternat	ive minimum tax (trusts only)					43			
44	Tax on	Noncompliant Facility Income. See instruct	ions				44			
45	Total. A	dd lines 42, 43, and 44 to line 40 or 41, whic	chever applies			<u></u>	4	5		0.
		Fax and Payments			-					
		tax credit (corporations attach Form 1118; tr			_					
b					_					
C										
d		or prior year minimum tax (attach Form 8801								
e		edits. Add lines 46a through 46d					46	e		
47	Subtrac	t line 46e from line 45					47	7		0.
48] Form 8611 Form 8697 For			(attach schedule)		8		
49	Total ta	x. Add lines 47 and 48 (see instructions)					49	9		0.
50		et 965 tax liability paid from Form 965-A or F								0.
51 a	Paymer	its: A 2018 overpayment credited to 2019		<u>51a</u>		210				
						3,301	•			
C	Tax dep	osited with Form 8868		51c						
d	Foreign	organizations: Tax paid or withheld at source	e (see instructions)	51d						
e	Backup	withholding (see instructions)		51e						
f		or small employer health insurance premium	s (attach Form 8941)	<u>51f</u>						
g	Other c		Form 2439							
	E Fo	orm 4136 (Other Total	► 51g						
52	Total pa	ayments. Add lines 51a through 51g					52	2	3,5:	<u>11.</u>
53	Estimat	ed tax penalty (see instructions). Check if For	rm 2220 is attached 🕨 🛄				53	3		
54		e. If line 52 is less than the total of lines 49, 5	, , ,				► <u>5</u> 4			
55	Overpa	yment. If line 52 is larger than the total of lin	es 49, 50, and 53, enter amount overpaid			🕨	► <u>5</u>		3,5:	
56		e amount of line 55 you want: Credited to 20				funded 🕨 🕨	► 56	3	3,5:	<u>11.</u>
Part		Statements Regarding Certain	Activities and Other Informa	ation (s	ee instru	ctions)				
57		ime during the 2019 calendar year, did the o							Yes	No
		inancial account (bank, securities, or other) i								
	Fincen	Form 114, Report of Foreign Bank and Finan	cial Accounts. If "Yes," enter the name of t	he foreign a	ountry					
	here	►								_X_
58	During	the tax year, did the organization receive a di	stribution from, or was it the grantor of, or	r transferor	to, a forei	gn trust?				X
	lf "Yes,"	see instructions for other forms the organization	ation may have to file.							
59		e amount of tax-exempt interest received or								
0:	Ur	nder penalties of perjury, I declare that I have examine rrect, and complete. Declaration of preparer (other the	d this return, including accompanying schedules an an taxpayer) is based on all information of which pro	nd statements eparer has an	s, and to the v knowledge	best of my know e.	/ledge a	nd belief, it is true) ,	
Sign						Г		e IRS discuss this		/ith
Here			CEO				-	oarer shown belov	w (see	
		Signature or ornicer	Date Title				instruct	ions)? X Ye	s	No
		Print/Type preparer's name	Preparer's signature	Date		Check	if I	PTIN		
Paid		MAGDALENA M.	MAGDALENA M.			self- employe				
	barer	CZERNIAWSKI	CZERNIAWSKI	06/18	3/20			P00535		
-	Only	Firm's name MARKS PANETH				Firm's EIN		11-351	884	2
			AVENUE							
		Firm's address NEW YORK .	NY 10017			Phone no.	212	-503-8	800	

(Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	r Name of exempt organization or other filer, see instru	ctions.		Тахрауе	r identification nu	mber (TIN)
print	ACCION EAST, INC.				11-33172	234
File by th due date filing you return. Se instructio	Number, street, and room or suite no. If a P.O. box, s 80 MAIDEN LANE, NO. 903					<u> </u>
Enter t	he Return Code for the return that this application is for (file	e a separat	e application for each return)			01
Applic		Return	Application			Return
ls For		Code	Is For			Code
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 4	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
Tele If th If th box 1 1 1 2 1	request an automatic 6-month extension of time until he organization named above. The extension is for the organization named above. The extension of time until ▶ X calendar year 2019 or ▶ tax year beginning f the tax year entered in line 1 is for less than 12 months, c Change in accounting period	s in the Uni Group Exe and atta NOVE! anization's , an heck reasc	Fax No. ►	f this is fo all memb	r the whole group ers the extension npt organization re	is for.
	f this application is for Forms 990-BL, 990-PF, 990-T, 4720, any nonrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less	3a	\$	0.
-	f this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter anv	refundable credits and		- -	
	estimated tax payments made. Include any prior year overp			3b	\$	0.
-	Balance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System). See	•		3c	\$	Ο.
Cautio instruc	n: If you are going to make an electronic funds withdrawal tions.	(direct det	oit) with this Form 8868, see Form 84	153-EO an	d Form 8879-EO	for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

(Rev. January 2020)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

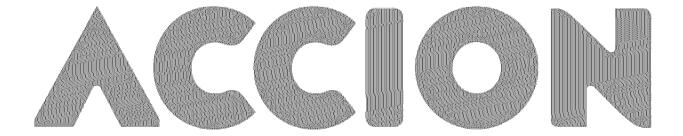
All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре с	r Name of exempt organization or other filer, see instru	ictions.		Тахрауе	identificati	on number (TIN)
print	ACCION EAST, INC.				11-33	17234
File by th due date filing you return. So instruction	Number, street, and room or suite no. If a P.O. box, s 80 MAIDEN LANE, NO. 903					
Enter t	he Return Code for the return that this application is for (fil	e a separat	e application for each return)			0 7
Applic	ation	Return	Application			Return
ls For		Code	Is For			Code
Form §	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form §	90-BL	02	Form 1041-A			08
Form 4	720 (individual)	03	Form 4720 (other than individual)			09
Form §	90-PF	04	Form 5227			10
Form §	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form §	90-T (trust other than above) WILLIAM POPELE	06	Form 8870			12
 If th If th box 1 <l< th=""><th>request an automatic 6-month extension of time until he organization named above. The extension is for the org ▶ X calendar year 2019 or</th><th>Group Exe and atta NOVEM anization's , an</th><th>mption Number (GEN) I ch a list with the names and TINs of <u>IBER 16, 2020</u>, to file return for: d ending</th><th>f this is fo all memb</th><th>r the whole ers the exte npt organize</th><th>group, check this nsion is for.</th></l<>	request an automatic 6-month extension of time until he organization named above. The extension is for the org ▶ X calendar year 2019 or	Group Exe and atta NOVEM anization's , an	mption Number (GEN) I ch a list with the names and TINs of <u>IBER 16, 2020</u> , to file return for: d ending	f this is fo all memb	r the whole ers the exte npt organize	group, check this nsion is for.
	t this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069, e	enter the tentative tax, less			
-	iny nonrefundable credits. See instructions.			3a	\$	0.
	this application is for Forms 990-PF, 990-T, 4720, or 6069					2 E11
-	estimated tax payments made. Include any prior year overp	-		3b	\$	3,511.
	Balance due. Subtract line 3b from line 3a. Include your pa	,		_		0.
	Ising EFTPS (Electronic Federal Tax Payment System). See n: If you are going to make an electronic funds withdrawal tions.			3c 153-EO an	∣ ⊅ d Form 887	

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

ACCION East, Inc.



Consolidated Financial Statements and Supplementary Information (Together with Independent Auditors' Report)

Years Ended December 31, 2019 and 2018

MARKS PANETH

ACCOUNTANTS & ADVISORS

ACCION East, Inc. CONSOLIDATED FINANCIAL STATEMENTS (Together with Independent Auditors' Report)

YEARS ENDED DECEMBER 31, 2019 AND 2018

CONTENTS

<u>Page</u>

Independent Auditors' Report	1-2
Consolidated Financial Statements:	
Consolidated Statements of Financial Position	3
Consolidated Statements of Activities	4
Consolidated Statements of Functional Expenses	5-6
Consolidated Statements of Cash Flows	7
Notes to Consolidated Financial Statements	.8-17
Supplementary Information:	
Consolidating Statements of Financial Position1	8-19
Consolidating Statements of Activities	20-21
Consolidating Statements of Functional Expenses2	22-23

Marks Paneth LLP 685 Third Avenue New York, NY 10017 P 212.503.8800 F 212.370.3759 markspaneth.com

INDEPENDENT AUDITORS' REPORT

The Board of Directors ACCION East, Inc.

We have audited the accompanying consolidated financial statements of ACCION East, Inc. ("ACCION"), which comprise the consolidated statements of financial position as of December 31, 2019 and 2018, and the related consolidated statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of ACCION East, Inc. as of December 31, 2019 and 2018, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.



Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating supplementary information (shown on pages 16-21) is presented for the purpose of additional analysis of the consolidated financial statements rather than to present the financial position, the changes in net assets, and cash flows of the individual entities, and is not a required part of the consolidated financial statements. The supplementary information has been subjected to the auditing procedures applied in the audits of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary information is fairly stated in all material respects when considered in relation to the consolidated financial statements taken as a whole.

Marks Panesh UP

New York, NY June 19, 2020



ACCION East, Inc. CONSOLIDATED STATEMENTS OF FINANCIAL POSITION AS OF DECEMBER 31, 2019 AND 2018

ASSETS	 2019	 2018
Cash and cash equivalents (Notes 2C and 9)	\$ 1,453,589	\$ 2,278,032
Restricted cash for loan funds (Note 2D)	1,100,657	4,383,157
Contributions and grants receivable (Note 2E and 2N)	1,448,360	1,827,568
Interest on loans receivable (Note 2F)	439,315	410,756
Loans receivable, net (Notes 2F, 2G and 4)	17,769,369	14,824,691
Prepaid expenses and other assets	213,623	161,658
Property and equipment, net (Notes 2H and 5)	 216,333	 345,932
TOTAL ASSETS	\$ 22,641,246	\$ 24,231,794
LIABILITIES		
Accounts payable and accrued expenses (Note 11)	\$ 576,546	\$ 583,139
Other liabilities	55,196	294,497
Deferred rent (Note 7)	107,286	121,966
Notes and recoverable grants payable (Note 6)	14,784,675	15,189,596
Subordinated debt (Note 6)	 1,500,000	 500,000
TOTAL LIABILITIES	 17,023,703	 16,689,198
COMMITMENTS AND CONTINGENCIES (Note 7)		
NET ASSETS (Note 2B)		
Without donor restrictions	4,929,452	5,942,994
With donor restrictions (Note 8)	 688,091	 1,599,602
TOTAL NET ASSETS	 5,617,543	 7,542,596
TOTAL LIABILITIES AND NET ASSETS	\$ 22,641,246	\$ 24,231,794

The accompanying notes are an integral part of these consolidated financial statements.

ACCION East, Inc.	CONSOLIDATED STATEMENTS OF ACTIVITIES	FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018
-------------------	---------------------------------------	--

	Ye	Year Ended December 31, 2019	mber 31, 20	19				Year Ended De	Year Ended December 31, 2018	8
	Without Donor Restrictions	With Rest	With Donor Restrictions		Total	×	Without Donor Restrictions	With Restri	With Donor Restrictions	Total
SUPPORT AND REVENUE:										
Contributions and grants (Notes 2E, 2I and 2N) Special events revenue (net of direct evenees of \$36 782 and	\$ 2,095,886	\$	1,714,240	¢	3,810,126	¢	1,593,711	\$ 2,9	2,979,150 \$	4,572,861
\$26,785 in 2019 and 2018, respectively) (Note 2K)	135,343				135,343		117,825			117,825
Total contributions and grant revenue	2,231,229	1,	1,714,240		3,945,469		1,711,536	2,9	2,979,150	4,690,686
Revenue:										
Interest on loans (Note 2F)	1,897,315				1,897,315		1,632,208			1,632,208
Program fees	1,239,062				1,239,062		939,502		,	939,502
Interest income	17,624				17,624		5,126		ı	5,126
Other revenue (Note 2F)	104,779		1		104,779		92,224		-	92,224
Total Revenue	3,258,780				3,258,780		2,669,060		 	2,669,060
Net assets released from restrictions (Note 8)	2,625,751	(2,	(2,625,751)		'		4,101,293	(4,1	(4,101,293)	'
TOTAL SUPPORT AND REVENUE	8,115,760		(911,511)		7,204,249		8,481,889	(1,1	(1,122,143)	7,359,746
EXPENSES:										
Program services: Lending/development services	6,455,844				6,455,844		6,629,134			6,629,134
Community advantage	1,016,494				1,016,494		518,653			518,653
Total program services	7,472,338		•		7,472,338		7,147,787			7,147,787
Supporting services: Management and general	840,549		,		840,549		1,028,179		,	1,028,179
Fundraising	816,415				816,415		572,090			572,090
Total supporting services	1,656,964		•		1,656,964		1,600,269		•	1,600,269
TOTAL EXPENSES	9,129,302				9,129,302		8,748,056			8,748,056
CHANGE IN NET ASSETS	(1,013,542)	Ŭ	(911,511)		(1,925,053)		(266,167)	(1,1	(1,122,143)	(1,388,310)
Net assets - beginning of year	5,942,994	-	1,599,602		7,542,596		6,209,161	2,7	2,721,745	8,930,906
NET ASSETS - END OF YEAR	\$ 4,929,452	φ	688,091	φ	5,617,543	φ	5,942,994	\$ 1,5	1,599,602 \$	7,542,596

- 4 -

ACCION East, Inc. CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2019 (With Comparative Totals for 2018)

	ļ															
		•	rogran	Program Services				S	upportii	Supporting Services						
		Lending/				Total						Total				
		Development		Community		Program		Management				Supporting		Total		Total
		Services		Advantage		Services		and General	Ē	Fundraising		Services		2019		2018
Personnel costs (Note 10)	÷	3,051,412	ŝ	527,698	Ś	3,579,110	ŝ	358,525	÷	635,279	ŝ	993,804	ŝ	4,572,914	\$ 4,7	1,734,231
Professional fees and marketing (Note 2I)		313,831		108,424		422,255		389,195		73,095		462,290		884,545	ິ	913,204
Office and occupancy (Note 7)		435,380		58,344		493,724		50,952		74,002		124,954		618,678	ŋ	581,308
Travel and conferences		123,542		15,666		139,208		14,458		20,998		35,456		174,664	-	198,416
Interest and fees (Note 6)		582,294		105,181		687,475		ı						687,475	ŋ	550,959
Depreciation and amortization (Note 5)		114,341		15,321		129,662		13,380		19,433		32,813		162,475	~	106,120
Loan loss provision (Note 4)		1,498,795		169,784		1,668,579								1,668,579	1,2	,283,524
Other expenses		336,249		16,076		352,325		14,039		20,390		34,429		386,754	4	407,079
Subtotal before costs of direct benefits to donors		6,455,844		1,016,494		7,472,338		840,549		843,197		1,683,746		9,156,084	8,7	8,774,841
Less: costs of direct benefits to donors				1		ı		ı		(26,782)		(26,782)		(26,782)	Ŭ	(26,785)
TOTAL EXPENSES	φ	6,455,844	φ	\$ 1,016,494	φ	\$ 7,472,338	φ	840,549	φ	816,415	φ	1,656,964	φ	9,129,302	\$ 8,7	\$ 8,748,056

The accompanying notes are an integral part of these consolidated financial statements.

ACCION East, Inc. CONSOLIDATED STATEMENTS OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2018 Year Ended December 31, 2018

		P	ogran	Program Services				oddng	Supporting Services				
		Lending/			Total						Total		
		Development		Community	Program		Management				Supporting		
		Services		Advantage	Services		and General		Fundraising		Services		Total
Personnel costs (Note 10)	ф	3,501,613	φ	235,376	\$ 3,736,989	ф	570,474	φ	426,768	Ф	997,242	θ	4,734,231
Professional fees and marketing (Note 2I)		328,679		149,348	478,027		346,928		88,249		435,177		913,204
Office and occupancy (Note 7)		464,304		15,813	480,117		57,593		43,598		101,191		581,308
Travel and conferences		158,479		5,398	163,877		19,658		14,881		34,539		198,416
Interest and fees (Note 6)		506,747		44,212	550,959		·		ı				550,959
Depreciation and amortization (Note 5)		84,764		2,887	87,651		10,512		7,957		18,469		106,120
Loan loss provision (Note 4)		1,222,813		60,711	1,283,524		ı		ı		ı		1,283,524
Other expenses		361,735		4,908	366,643		23,014		17,422		40,436		407,079
Subtotal before costs of direct benefits to donors		6,629,134		518,653	7,147,787		1,028,179		598,875		1,627,054		8,774,841
Less: costs of direct benefits to donors		ı			'				(26,785)		(26,785)		(26,785)
TOTAL EXPENSES	φ	6,629,134	φ	518,653	\$ 7,147,787	ф	1,028,179	ф	572,090	ф	1,600,269	ф	8,748,056

ACCION East, Inc. CONSOLIDATED STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2019 AND 2018

CASH FLOWS FROM OPERATING ACTIVITIES:	2019	2018
Change in net assets	\$ (1,925,053)	\$ (1,388,310)
Adjustments to reconcile change in net assets to		
net cash used in operating activities:		
Provision for loan losses	1,668,579	1,283,524
Depreciation and amortization	162,475	106,120
Loss on disposal of property and equipment	636	<u> </u>
Subtotal	(93,363)	1,334
Changes in assets and liabilities:		
Contributions and grants receivable	379,208	(31,827)
Interest on loans receivable	(28,559)	(218,284)
Prepaid expenses and other assets	(51,965)	89,927
Accounts payable and accrued expenses	(6,593)	2,498
Other liabilities	(239,301)	61,031
Deferred rent	(14,680)	(8,416)
Net Cash Used in Operating Activities	(55,253)	(103,737)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Disbursements under loan programs	(15,609,126)	(11,939,222)
Collections under loan programs	10,995,869	8,261,672
Purchases of property and equipment	(33,512)	(348,916)
Net Cash Used in Investing Activities	(4,646,769)	(4,026,466)
CASH FLOWS FROM FINANCING ACTIVITIES:		
Proceeds from notes payable and subordinated debt	1,411,355	5,503,975
Repayments of notes payable	(816,276)	(5,002,195)
Net Cash Provided by Financing Activities	595,079	501,780
NET DECREASE IN CASH AND RESTRICTED CASH	(4,106,943)	(3,628,423)
Cash and restricted cash - beginning of year	6,661,189	10,289,612
CASH AND RESTRICTED CASH - END OF YEAR	<u>\$2,554,246</u>	<u>\$6,661,189</u>
Supplementary Disclosure of Cash Flow Information:		
Cash paid during the year for interest	<u>\$ 408,925</u>	<u>\$ 300,101</u>

NOTE 1 - ORGANIZATION AND NATURE OF ACTIVITIES

The mission of ACCION East, Inc. ("ACCION") is to empower low-to-moderate income business owners through access to capital and financial education. Through its loans and services, ACCION helps micro-entrepreneurs strengthen their businesses, stabilize and increase their incomes, create additional employment and contribute to the economic revitalization of their communities.

ACCION East, Inc. (a New York non-profit corporation) ("ACCION-NY") is the sole member of Accion East, Inc. (a Massachusetts non-profit corporation) ("ACCION-MA"). These entities are nonprofit charitable and civic organizations exempt from income tax under Section 501(c)(3) of the Internal Revenue Code. The consolidated financial statements reflect the consolidated results of both entities and are referred to as "ACCION" for the purpose of these consolidated financial statements. All intercompany transactions have been eliminated.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- A. ACCION's consolidated financial statements have been prepared on the accrual basis of accounting using accounting principles generally accepted in the United States of America ("U.S. GAAP").
- B. ACCION reports grants, gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the consolidated statement of activities as net assets released from restrictions. Net assets without donor restrictions represent net assets not subject to donor-imposed restrictions.
- C. Cash and cash equivalents consist of highly liquid debt instruments purchased with original maturities of three months or less when acquired, except for those amounts held for long-term investment purposes, which are included in investments. The following table provides a reconciliation of cash and restricted cash reported within the consolidated statements of financial position that sum to the total of the same such amounts shown in the consolidated statements of cash flows.

,	<u>Dece</u>	mber 31, 2019	<u>Dece</u>	mber 31, 2018	<u>Jan</u>	<u>uary 1, 2018</u>
Cash and cash equivalents Cash restricted for loan funds	\$	1,453,589 1,100,657	\$	2,278,032 4,383,157	\$	6,475,940 <u>3,813,672</u>
Total	<u>\$</u>	2,554,246	\$	6,661,189	\$	10,289,612

- D. Restricted cash consists of amounts for which the use has been restricted by lenders for specific loan programs.
- E. Contributions and grants receivable are recorded as revenue when the pledge is made and are considered implicitly time restricted. Management evaluates the need for an allowance for doubtful accounts applicable to its contributions and grants receivable based on various factors, including an assessment of the credit worthiness of its donors, aging of the amount due and historical experience. As of December 31, 2019 and 2018, management determined that an allowance for doubtful accounts was not necessary for contributions and grants receivable. Contributions and grants receivable due in more than one year are recorded at the present value of their estimated future cash flows, determined using risk-adjusted interest rates applicable to the years in which the promises are made. As of December 31, 2019 and 2018, all contributions and grants receivable were due within one year.
- F. Management considers a loan to be impaired when it is probable that ACCION will be unable to collect all amounts due according to the contractual terms of the loan agreement. Management evaluates loans for impairment based on delinquency information, and an assessment of the borrower's financial condition. Impaired loans are written off when payments are past due 120 days or in some cases earlier.

The allowance for loan losses reflects loan impairment and is calculated using impairment rates approved by the Board of Directors and is calculated based on the aging of impaired loans and historical write-off trends.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

At December 31, 2019 and 2018, ACCION's loan loss reserve includes approximately \$230,000 and \$61,000, respectively, for the Small Business Administration 7(a) Community Advantage ("SBA CA") Program. ACCION is in compliance with the loan loss reserve requirements for the SBA CA Program.

Interest income on loans is recognized based on the principal amount outstanding and the related rate of interest. The accrual of interest on loans is calculated using the same impairment classifications used for allowance for loan losses.

Under certain circumstances, ACCION will provide borrowers relief through loan restructuring. A restructuring of debt constitutes a troubled debt restructuring ("TDR") if ACCION, for economic or legal reasons related to the borrower's financial difficulties, grants a concession to the borrower that it would not otherwise consider. TDR concessions can include reduction of interest rates, extension of maturity dates, forgiveness of principal and/or interest due, or acceptance of other assets in full or partial satisfaction of the debt. ACCION considers all aspects of the restructuring to determine whether it has granted a concession to the borrower. An insignificant delay in payment resulting from a restructuring is not deemed to be a concession and would not be considered to be a TDR.

ACCION has concluded that the impairment impact of TDR on its loan portfolio (generally lower balance loans having original maturities of 60 months or less) is insignificant to the consolidated financial statements. As such, these impairments are individually tracked in the loan portfolio and are adequately included in the loss allowance provided for the loan portfolio.

ACCION collected previously written off loan receivables of approximately \$42,000 and \$36,000 during 2019 and 2018, respectively.

- G. U.S. GAAP requires that when a not-for-profit organization receives or makes loans of cash that carry interest rates below the prevailing market rate, the imputed interest be recorded as contributions received or paid, respectively. ACCION both receives and makes loans with stated rates of interest that vary from the prevailing market rates for commercial loans. However, ACCION considers its market to be the Community Development Financial Institution ("CDFI") industry as opposed to the financial institutions industry in general. Consequently, ACCION believes there is no material difference between community development finance market rates and the stated rates of loans in their portfolios. ACCION accounts for these loans at the stated rates.
- H. Property and equipment is stated at cost less accumulated depreciation and amortization. These amounts do not purport to represent replacement or realizable values. ACCION capitalizes all property and equipment having a useful life of greater than one year and a cost of \$500 or more. Expenses for maintenance and repairs are charged to operations as incurred. When assets are retired or otherwise disposed of, the cost and related accumulated depreciation is removed from the accounts, with any net gain or loss reflected in the consolidated statement of activities for the period. Leasehold improvements are amortized over the lesser of their estimated useful lives or the term of the lease. Depreciation is computed using the straight-line method over the estimated useful lives of the assets. In addition to tangible assets, ACCION also capitalizes the internal and external costs incurred to develop in-house computer software during the application development stage. This includes the cost to develop or obtain software that allows for access or conversion of old data by new systems. Capitalized software is amortized over its estimated useful life.
- I. Donated services are recognized in the consolidated financial statements if the services enhance or create nonfinancial assets or require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased, if not provided by donation. ACCION received contributed legal services that are valued at the standard market rates that would have been incurred by ACCION to obtain such services. Contributed services are reported as revenue and expense in the accompanying consolidated statements of activities, because they meet the criteria for recognition. ACCION received contributed services of approximately \$133,000 and \$90,000 during 2019 and 2018, respectively.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

- J. The costs of providing ACCION's program and supporting services have been summarized on a functional basis in the accompanying consolidated statements of activities and functional expenses. Accordingly, certain costs have been allocated on a reasonable and consistent basis between program and supporting services based on an analysis of estimated time and effort. The expenses that are allocated include salaries, payroll taxes and employee benefits, professional fees, occupancy, communications, insurance, supplies, equipment, and other miscellaneous office expenses. Other costs are directly applied based on their explicit nature, including interest expense, provision for loan losses, outreach and similar as direct programmatic costs, and professional fees for audit, accounting, and development as costs for supporting services.
- K. ACCION conducts a special event in which a portion of the gross proceeds paid by the participant represents payment for the direct cost of the benefits received by the participant at the event. All proceeds received are recorded as special event revenue in the accompanying consolidated statements of activities.
- L. The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reported period. Actual results could differ from those estimates.
- M. In November 2016, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2016-18, Statement of Cash Flows (Topic 230): Restricted Cash, to address diversity in practice that exists in the classification and presentation of changes in restricted cash on the statement of cash flows. The ASU requires restricted cash or restricted cash equivalents to be included in the beginning-of-period and end-of-period total amounts on the statements of cash flows. ACCION adopted the new guidance retrospectively as of January 1, 2018. As a result, the beginning-of-period amount reported on the consolidated statement of cash flows increased by \$3,813,672 to include amounts previously reported as restricted cash for loan funds. The adoption of this ASU did not affect net assets as previously reported.
- N. The Financial Accounting Standards Board ("FASB") issued Accounting Standards Update (ASU) 2018-08, "Clarifying the Scope and Accounting Guidance for Contributions Received and Contributions Made (Topic 858)". The core guidance in ASU 2018-08 is to assist entities in evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions) or as exchange (reciprocal) transactions and determining whether a contribution is conditional. ACCION adopted the new guidance as of January 1, 2019 and as a result, this changed the timing of recognition for the \$674,000 CDFI grant awarded in September 2019 to fiscal year 2020. In prior years, the CDFI grant would have been recognized in the year of the award.

NOTE 3 – LIQUIDITY AND AVAILABILITY

Cash account balances, net of outstanding checks, for the operations and lending accounts are reviewed daily by accounting and finance staff, and weekly with management. Management reviews weekly, a cashflow trend analysis and forecast of upcoming cash needs in order to determine when and if ACCION's lines of credit will be drawn or repaid, or if lending or vendor payments must be constricted.

As of December 31, 2019, ACCION had working capital of approximately \$4.9 million and a current ratio of 1.72. At year end, cash and cash equivalents of approximately \$1.5 million represented 79 days of cash on hand based on the 2020 budget, inclusive of operating expenses and lending forecasts, but excluding depreciation and provision expenses. ACCION additionally had short-term receivables of approximately \$8.6 million.

NOTE 3 – LIQUIDITY AND AVAILABILITY (Continued)

As of December 31, 2019, the following table shows the total financial assets held and the amounts of those financial assets that could readily be made available within one year of the consolidated statement of financial position date to meet general expenditures:

Cash and cash equivalents Contributions and grants receivable Interest on loans receivable Loans receivable, net	\$ 1,453,589 1,448,360 439,315 17,769,369
Total financial assets at year-end	21,110,633
Less: Loans receivable due in over one year Total financial assets at year-end available for general expenditures	(9,156,716) \$ 11,953,917

For purposes of analyzing resources available to meet general expenditures over a 12-month period, ACCION considers all expenditures related to its ongoing activities of programs as well as the conduct of services undertaken to support those activities to be general expenditures. Donor restricted funds for various programs are considered available for the general expenditures to conduct those programs.

NOTE 4 – LOANS RECEIVABLE

Loans receivable consists of microloans (loans under \$35,000), small business loans (loans \$35,000 and over) and SBA CA loans. Loans receivable as of December 31, 2019 and 2018, include the following:

December 31, 2019

	Micro loans	Small business Loans	SBA CA Loans	Total
Loans receivable Less allowance for uncollectible loans	\$ 16,704,712 (1,340,318)	\$	\$ 2,132,446 (230,494)	\$ 19,398,520 (1,629,151)
Loans receivable, net	\$ <u>15,364,394</u>	\$ <u>503,023</u>	\$ <u>1,901,952</u>	\$ <u>17,769,369</u>
	<u>Decen</u>	nber 31, 2018		
		Small business		
	Micro loans	Loans	SBA CA Loans	Total
Loans receivable Less allowance for uncollectible loans	\$ 13,968,167 _ <u>(1,173,714)</u>	\$ 790,065 (77,818)	\$ 1,378,702 (60,711)	\$ 16,136,934 (1,312,243)
Loans receivable, net	\$ <u>12,794,453</u>	\$ <u>712,247</u>	\$ <u> </u>	\$ <u>14,824,691</u>

NOTE 4 – LOANS RECEIVABLE (Continued)

	30	<u>– 90 Days</u>	 Over 90 Days	Т	otal Past Due	Current	Total
Micro loans Small business loans SBA CA loans	\$	361,745 38,173 -	\$ 163,573 - <u>46,142</u>	\$	525,318 38,173 46,142	\$ 16,179,394 523,189 <u>2,086,304</u>	\$ 16,704,712 561,362
Loans receivable	\$	<u>399,918</u>	\$ 209,715	\$	609,633	\$ 18,788,887	\$ <u>19,398,520</u>

An aged analysis of loans segregated by loan program as of December 31, 2019 follows:

An aged analysis of loans segregated by loan program as of December 31, 2018 follows:

	<u> 30 </u>	<u>– 90 Days</u>	 Over 90 Days	Т	otal Past Due	<u>Current</u>	Total
Micro loans Small business loans SBA CA loans	\$	300,773 26,020 -	\$ 189,761 - <u>46,887</u>	\$	490,534 26,020 46,887	\$ 13,477,633 764,045 <u>1,331,815</u>	\$ 13,968,167 790,065 <u>1,378,702</u>
Loans receivable	\$	326,793	\$ 236,648	\$	563,441	<u>\$ 15,573,493</u>	\$ <u>16,136,934</u>

The loans receivable include restructured loans as of December 31 as follows:

	 2019	 2018
Restructured loans receivable Less allowance for uncollectible loans	\$ 173,832 <u>(87,751</u>)	\$ 368,306 <u>(187,919</u>)
	\$ 86,081	\$ 180,387

An analysis of the loan loss allowance for the years ended December 31 follows:

	2019	2018
Balance beginning of year Provision for loan losses Loans written-off	\$ 1,312,243 1,668,579 <u>(1,351,671</u>)	\$ 1,337,715 1,283,524 <u>(1,308,996</u>)
	\$ <u>1,629,151</u>	\$ <u>1,312,243</u>

The liquidity of the loan portfolio (net) for the years ended December 31 is as follows:

		2019	 2018
Due less than one year Due over one year	\$	8,612,653 9.156.716	\$ 7,190,877 7,633,814
Due over one year	- \$_	<u>17,769,369</u>	 <u>14,824,691</u>

The SBA allows the sale of the guaranteed portion of the CA loan on the secondary market. During 2019 and 2018, ACCION sold participating interests of the guaranteed portion of loans with a carrying value at the time of sale of \$2,044,512 and \$1,922,771, respectively, for \$2,205,940 and \$2,063,999, respectively, resulting in a gain on the sale of the participated interest of \$161,428 and \$141,228, respectively, and is included in program fees in the accompanying consolidated statements of activities.

NOTE 5 – PROPERTY AND EQUIPMENT, NET

Property and equipment consist of the following as of December 31:

	 2019	 2018	Estimated <u>Useful Lives</u>
Leasehold improvements Capitalized hardware and software Furniture, fixtures and equipment Total cost Less: accumulated depreciation and amortization	\$ 31,385 769,362 <u>175,266</u> 976,013 (759,680)	\$ 31,385 755,859 <u>171,881</u> 959,125 (613,193)	5 - 10 years 3 - 5 years 3 - 5 years
Net book value	\$ 216,333	\$ 345,932	

Depreciation and amortization expense amounted to \$162,475 and \$106,120 for the years ended December 31, 2019 and 2018, respectively. During the year ended December 31, 2019, equipment with a cost of \$16,624 and accumulated depreciation of \$15,988 was written off. During the year ended December 31, 2018, ACCION wrote off fully depreciated fixed assets of \$41,280.

NOTE 6 - NOTES AND RECOVERABLE GRANTS PAYABLE AND SUBORDINATED DEBT

The following is a summary of ACCION's credit agreements with various banks and other lenders to fund its operating and microlending activities at December 31:

	2019	2018
<u>Notes payable – secured</u> Secured borrowing consisting of federal loan funds secured by program-funded loans receivable	\$ 3,088,869	\$ 3,751,122
<u>Notes payable – unsecured</u> Maturity terms range from one to ten years, fixed interest rates ranging from 0% to 4% and floating interest rates ranging from the Federal Funds Rate to LIBOR plus 1% per annum (0.58% at December 31, 2019 and 2018).	<u> </u>	<u>11,438,474</u>
	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Total notes and recoverable grants payable	<u>\$ 14,784,675</u>	<u>\$ 15,189,596</u>
	2019	2018
Subordinated debt – EQ2 Loans – unsecured		
The equity equivalent investment, commonly referred to in the community development financing industry as an "EQ2 Loan", is a capital product designed by lenders to increase available funding and investments to economically disadvantaged communities. EQ2 loans		
are subordinated to ACCION's other loan agreements.	<u>\$ </u>	<u>\$ </u>

Maturity terms range from one to ten years with fixed interest rates ranging from 0% to 4%. No principal payments are required until maturity.

NOTE 6 - NOTES AND RECOVERABLE GRANTS PAYABLE AND SUBORDINATED DEBT (Continued)

Future annual principal payments due are as follows:

Years ending on December 31:	Amount
2020	\$ 6,142,349
2021	1,134,875
2022	1,219,314
2023	3,400,000
2024	200,000
Thereafter	4,188,137
Total	<u>\$ 16,284,675</u>

Included in amounts due during 2020, 2022, 2023, and 2024 is a revolving line of credit balance of \$5,500,000, of which \$5,500,000 was outstanding as of June 19, 2020. The line of credit is renewable annually after 2020. Included in amounts due thereafter (due in 2027) is a line of credit of \$500,000 of which \$500,000 was outstanding as of June 19, 2020. The line of credit is payable in thirty consecutive monthly installments commencing January 25, 2025.

Interest expense was \$408,925 and \$300,245 for the years ended December 31, 2019 and 2018, respectively.

NOTE 7 – COMMITMENTS AND CONTINGENCIES

A. ACCION leased space in New York, Boston, Orlando and Miami during the year ended December 31, 2019. The leases range in maturity from month-to-month to year 2023 and include rent increases, which are amortized on a straight-line basis. Deferred rent was \$107,286 and \$121,966 as of December 31, 2019 and 2018, respectively, and is included in the accompanying consolidated statements of financial position. The estimated annual amortization of deferred rent for the year following December 31, 2019 is \$14,910.

Future minimum lease payments are due as follows for the years ending after December 31, 2019:

2020	\$ 292,240
2021	279,796
2022	271,718
2023	161,991
	<u>\$ 1,005,745</u>

Rent expense of \$347,359 and \$351,780 was included in office and occupancy expenses in the accompanying consolidated statements of functional expenses for the years ended December 31, 2019 and 2018, respectively.

B. ACCION believes it has no uncertain tax positions as of December 31, 2019 and 2018 in accordance with ASC Topic 740, Income Taxes, which provides standards for establishing and classifying any tax provisions for uncertain tax positions.

NOTE 8 - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions as of December 31 are available for the following purposes:

		2019		2018
Private Grants: New York General Support Microlending and Financial Education for Women and Entrepreneurs or Color Childcare Provider Initiative & Financial Education in New York Microlending in the Northeast Microlending to Women in New York, Massachusetts, and Florida Microlending and Financial Education to Women in New York	\$	150,000 134,740 100,000 75,000 75,000 50,000	\$	- 668,183 25,000 150,000 - 75,000
New York Microlending and Financial Education Program Microlending in Lowell, Massachusetts Lending and financial education in Jacksonville Microlending and Financial Education in New York Massachusetts and Technical Assistance in Massachusetts 2019 Event Sponsorship		60,000 20,000 16,667 - - -		- - 143,333 36,850 15,000
<u>Loan Fund Grants:</u> Upper Manhattan microloan capital (New York)		-		486,236
<u>Public Grants:</u> Technical Assistance to New York Small Business Loan Applicants		6,684		
Total	<u>\$</u>	688,091	<u>\$</u>	<u>1,599,602</u>

Net assets with donor restrictions of \$2,625,751 and \$4,101,293 for the years December 31, 2019 and 2018, respectively, were released from donor restrictions by incurring expenses satisfying the restricted purposes specified by the donors or the passage of time.

NOTE 9 – CONCENTRATION

Cash and cash equivalents that potentially subject ACCION to a concentration of credit risk include cash accounts with two banks that exceed the Federal Deposit Insurance Corporation ("FDIC") insurance limits. As of December 31, 2019 and 2018, there were approximately \$1,866,000 and \$6,146,000, respectively, of cash and cash equivalents held by banks that exceeded FDIC limits.

NOTE 10 - RETIREMENT PLAN

ACCION participates in a retirement savings plan covering all employees who meet the minimum service requirements. ACCION has the option to match its employees' contributions up to 5% of employee salaries. ACCION made no matching contributions for the years ended December 31, 2019 and 2018.

NOTE 11 - RELATED-PARTY TRANSACTIONS

Effective December 31, 2008, ACCION entered into a shared services agreement with ACCION International for the use of shared office space and equipment, administrative support and information technology support. The agreement does not have a maturity date, but can be terminated by either party in writing with ninety (90) days advance notice. In each of the years ended December 31, 2019 and 2018, amounts paid to ACCION International were \$61,237 and \$93,819, respectively. Approximately \$15,000 and \$63,000 was due to ACCION International at December 31, 2019 and 2018, respectively, relating to this shared services agreement. On April 1, 2020, ACCION terminated the shared services agreement.

NOTE 11 - RELATED-PARTY TRANSACTIONS (Continued)

ACCION entered into a trademark sublicense agreement with ACCION, The U.S. Network (the "Network) that was effective December 31, 2011 and had an initial three-year term. It is automatically renewed every three years. The agreement provides for the legal use of the "ACCION" brand by ACCION. In addition, ACCION entered into a membership dues agreement with the Network that sets forth the membership fee owed to the Network and the minimum performance standards required for membership. In connection with these agreements, ACCION East, Inc. paid \$15,000 and \$20,000 to the Network for the years ended December 31, 2019 and 2018, respectively. The Network (n/k/a ACCION Opportunity Fund, Inc.) combined with Opportunity Fund on February 28, 2020. As a result of the combination, the trademark sublicense agreement was terminated with immediate effect. A roll-off period through December 31, 2020 was provided for continued use of the trademark.

ACCION entered into a Managed Service Provider ("MSP") agreement with the Network in 2018, allowing ACCION to use the Network's technology platform, and for which the Network provides ongoing support. ACCION East, Inc. paid \$191,900 and \$171,638 under the MSP agreement and for related costs in 2019 and 2018, respectively, to the Network. The MSP agreement expired on January 24, 2020.

In addition, ACCION reimbursed the Network for certain consultant costs relating to the buildout of the technology platform. ACCION East, Inc. paid \$14,573 and \$281,320 in 2019 and 2018, respectively, to the Network to cover these costs. In anticipation of the expiration of aforementioned MSP agreement, ACCION and the Network entered into an IP Transfer agreement that conferred and transferred full rights to the jointly developed technology platform and all of ACCION's data warehouse by the Network on November 21, 2019.

NOTE 12 – SUBSEQUENT EVENTS

Management has evaluated, for potential recognition and disclosure, events subsequent to the date of the consolidated statement of financial position through June 19, 2020, the date the consolidated financial statements were available to be issued.

In March 2020, the World Health Organization declared the outbreak of a novel coronavirus ("COVID-19") as a pandemic, which continues to spread throughout the United States. ACCION could be materially and adversely affected by the risks, or the public perception of the risks, related to an epidemic, pandemic, outbreak, or other public health crisis, such as the recent outbreak of COVID-19. The ultimate extent of the impact of any epidemic, pandemic or other health crisis on the ACCION's mission, financial condition and results of operations will depend on future developments, which are highly uncertain and cannot be predicted, including new information that may emerge concerning the severity of such epidemic, pandemic or other health crisis and actions taken to contain or prevent their further spread, among others. Accordingly, we cannot predict the extent to which the ACCION's financial condition and results of operations will be affected.

On March 27, 2020, in response to COVID-19, the federal government passed the Coronavirus Aid, Relief, and Economic Stability Act ("CARES Act"). Among many other provisions, to help businesses retain employees, the CARES Act provides relief to qualifying businesses through a program called the Paycheck Protection Program ("PPP"). Participating in the PPP enables the business to obtain a loan from the Small Business Administration sector of the government. The maximum loan amount is equal to the lesser of (a) 2.5 times the entity's average monthly payroll costs, as defined and incurred during the one-year period before the date on which the loan is made; or (b) \$10 million. The term of the loan is two years and bears interest at a fixed rate of 1% per annum. If the proceeds from the loan are used for specified purposes, some or all of the loan can be forgiven, based on how much is spent in the eight week period immediately following funding of the loan times a forgiveness factor that is based on employee headcount and amounts paid to ACCION's employees. ACCION applied for this loan through an SBA authorized lender and received approximately \$828,000 in May 2020.

Due to the impact of COVID-19 on its borrowers, ACCION initiated a payment deferment program in mid-March 2020 and through April 2020 for its microloan borrowers, which has affected approximately 50% of its portfolio. Deferments were initially for three months, but are expected to be extended another three months given the measured re-opening across the regions served.

NOTE 12 – SUBSEQUENT EVENTS (Continued)

In order to participate in the second round of the SBA PPP to support its borrowers' needs, ACCION raised \$5.9 million in new credit facilities during April and May 2020, and has drawn down \$4.4 million from these facilities. The new facilities include a \$900,000 increase in its existing line of credit with TD Bank, at the same rate and maturity as the existing line; a new \$2.0 million revolving loan with Banco Santander, of which \$500,000 has been drawn, and matures May 2024 and bears a fixed annual rate of 3.875%; and, a \$3.0 million term loan with New York State Urban Development Corporation, which is fully-drawn, and matures January 1, 2023 and bears a fixed annual rate of 0.25%. SBA authorization for the PPP program expires June 30, 2020 and until the SBA determines what lending authorization remains under the current fiscal year appropriation, it has instructed all SBA Community Advantage lenders, including ACCION, to temporarily suspend all new SBA Community Advantage loan originations.

ACCION East, Inc. CONSOLIDATING STATEMENT OF FINANCIAL POSITION AS OF DECEMBER 31, 2019

ASSETS		ACCION-NY		ACCION-MA		Total		Consolidating Eliminations		Consolidated Total
	•	4 450 500	•		•	4 450 500	•		•	4 450 500
Cash and cash equivalents Restricted cash for loan funds	\$	1,453,589	\$	-	\$	1,453,589	\$	-	\$	1,453,589
		1,100,657		-		1,100,657		-		1,100,657 1,448,360
Contributions and grants receivable Interest on loans receivable		1,448,360		-		1,448,360		-		
Loans receivable, net		439,315 17,769,369		-		439,315 17,769,369		-		439,315 17,769,369
		211,605						-		213,623
Prepaid expenses and other assets		,		2,018		213,623		-		,
Property and equipment, net		216,333		-		216,333		-		216,333
TOTAL ASSETS	\$	22,639,228	<u>\$</u>	2,018	\$	22,641,246	\$		<u>\$</u>	22,641,246
LIABILITIES										
Accounts payable and accrued expenses	\$	576,546	\$	-	\$	576,546	\$	-	\$	576,546
Other liabilities		45,225		9,971		55,196		-		55,196
Deferred rent		107,286		-		107,286		-		107,286
Notes and recoverable grants payable		14,784,675		-		14,784,675		-		14,784,675
Subordinated debt		1,500,000		-		1,500,000				1,500,000
TOTAL LIABILITIES		17,013,732		9,971		17,023,703				17,023,703
NET ASSETS (DEFICIT)										
Without donor restrictions		4,937,405		(7,953)		4,929,452		-		4,929,452
With donor restrictions		688,091		-		688,091				688,091
TOTAL NET ASSETS (DEFICIT)		5,625,496		(7,953)		5,617,543				5,617,543
TOTAL LIABILITIES AND NET ASSETS (DEFICIT	\$	22,639,228	\$	2,018	\$	22,641,246	\$		\$	22,641,246

ACCION East, Inc. CONSOLIDATING STATEMENT OF FINANCIAL POSITION AS OF DECEMBER 31, 2018

ASSETS		ACCION-NY		ACCION-MA		Total		Consolidating Eliminations		Consolidated Total
Cash and cash equivalents	\$	2,278,032	\$	_	\$	2,278,032	\$	_	\$	2,278,032
Restricted cash for loan funds	Ψ	4,383,157	Ψ	-	Ψ	4,383,157	Ψ	-	Ψ	4,383,157
Contributions and grants receivable		1,775,293		52,275		1,827,568		-		1,827,568
Interest on loans receivable		410,756		,		410,756		-		410,756
Loans receivable, net		14,824,691		-		14,824,691		-		14,824,691
Prepaid expenses and other assets		159,638		2,020		161,658		-		161,658
Property and equipment, net		345,932		-		345,932		-		345,932
TOTAL ASSETS	\$	24,177,499	\$	54,295	\$	24,231,794	\$		<u>\$</u>	24,231,794
LIABILITIES										
Accounts payable and accrued expenses	\$	583,139	\$	-	\$	583,139	\$	-	\$	583,139
Other liabilities		283,745		10,752		294,497		-		294,497
Deferred rent		121,966		-		121,966		-		121,966
Notes and recoverable grants payable		15,189,596		-		15,189,596		-		15,189,596
Subordinated debt		500,000		-		500,000		-		500,000
TOTAL LIABILITIES		16,678,446		10,752		16,689,198				16,689,198
NET ASSETS										
Without donor restrictions		5,936,301		6,693		5,942,994		-		5,942,994
With donor restrictions		1,562,752		36,850		1,599,602		-		1,599,602
TOTAL NET ASSETS		7,499,053		43,543		7,542,596				7,542,596
TOTAL LIABILITIES AND NET ASSETS	\$	24,177,499	\$	54,295	\$	24,231,794	\$	-	\$	24,231,794

ACCION East, Inc. CONSOLIDATING STATEMENT OF ACTIVITES FOR THE YEAR ENDED DECEMBER 31, 2019

	ACCION-NY	٨	ACCION-NY			ACCION-MA	MA	ACCION-MA					Consolidated Total		
	Without Donor Restrictions	lor Ins	With Donor Restrictions		Total ACCION	Without Donor Restrictions	nor ins	With Donor Restrictions	Total ACCION-MA	Consolidating Eliminations		Without Donor Restrictions	With Donor Restrictions	nor ons	Total
SUPPORT AND REVENUE:															
Contributions and grants Special events revenue (net of direct expenses of \$26,782)	\$ 2,095,886 135.343	386 \$ 343	1,714,240	ຕັ ຜ	3,810,126 \$ 135.343	69	\$		· ·	۰ . ج	ŝ	2,095,886 135.343	\$ 1,714,240 -	240 \$ -	3,810,126 135.343
Total contributions and grant revenue	2,231,229	53	1,714,240	0	3,945,469		 .					2,231,229	1,714,240	240	3,945,469
Revenue:															
Interest on loans	1,897,315	115	•	-	1,897,315	•			•			1,897,315			1,897,315
Program fees	1,239,062)62		-	1,239,062	•			•	•		1,239,062			1,239,062
Interest income	17,624	22			17,624			•	•	•		17,624			17,624
Other revenue	104,	<u></u>			104,7/9		 					104,7/9			104,7/9
Total Revenue	3,258,780	³⁸		e.	3,258,780		 					3,258,780		 	3,258,780
Net assets released from restrictions	2,588,901	<u>آ</u>	(2,588,901)		. .	36,850	350	(36,850)				2,625,751	(2,625,751)	751)	
TOTAL SUPPORT AND REVENUE	8,078,910	10	(874,661)	7	7,204,249	36,850	350	(36,850)	.			8,115,760	(911	(911,511)	7,204,249
EX PENSES:															
Program services:															
Lending/Development Services	6,404,348	348		9	6,404,348	51,496	196		51,496			6,455,844			6,455,844
Community Advantage	1,016,434	5	•		1,016,494		 		•	'		1,016,494		 	1,016,494
Total program services	7,420,842	342		2	7,420,842	51,496	196	-	51,496			7,472,338			7,472,338
Supporting services: Mannowment and connect	040 540	q			040 640							010 540			010 540
Fundraisina	816.415	9			816.415							816.415			816.415
Total supporting services	1,656,964	≩ 			656,964		 ,		.			1,656,964		 .	1,656,964
TOTAL EXPENSES	9,077,806	90		6	9'077,806	51,496	961		51,496			9,129,302		 	9,129,302
CHANGE IN NET ASSETS	(968'866)	(96)	(874,661)	Ð	(1,873,557)	(14,646)	346)	(36,850)	(51,496)			(1,013,542)	(911	(911,511)	(1,925,053)
Net assets - beginning of year	5,936,301	ğ	1,562,752	7	7,499,053	6,6	6,693	36,850	43,543			5,942,994	1,599,602	602	7,542,596
NET ASSETS (DEFICIT) - END OF YEAR	\$ 4,937,405	t02 \$	688,091	ي م	5,625,496	\$ (7,9	(7,953) \$	-	\$ (7,953)	ج	ω	4,929,452	\$ 688,091	091 \$	5,617,543

ACCION East, Inc. CONSOLIDATING STATEMENT OF ACTIVITIES FOR THE YEAR ENDED DECEMBER 31, 2018

	ACCION-NY	ACCION-NY			ACCION-MA	ACCION-MA				Consolidated Total	
	Without Donor Restrictions	With Donor Restrictions	ACC	Total 1	Without Donor Restrictions	With Donor Restrictions	Total ACCION-MA	Consolidating Eliminations	Without Donor Restrictions	With Donor Restrictions	Total
SUPPORT AND REVENUE:											
Contributions and grants Special events revenue (net of direct expenses of \$26,795)	\$ 1,593,711 117,825	\$ 2,899,450 -	\$ 4,493,161 117,825	493,161 \$ 117.825		\$ 79,700 -	\$ 79,700 -	ч ц	\$ 1,593,711 117.825	\$ 2,979,150 -	\$ 4,572,861 117,825
Total contributions and grant revenue	1,711,536	2,899,450	4,610,986	986		79,700	79,700	-	1,711,536	2,979,150	4,690,686
Revenue:											
Interest on loans	1,632,208		1,632,208	,208					1,632,208		1,632,208
Program fees	939,502		936	939,502					939,502		939,502
Interest income Other revenue	5,126 97 774		n 6	5,126 97 774	- 774 972		- 7.74.972	-	5,126 92.224		5,126 92 224
	72,227		70		7101117		710 - 11 - 17	(210, 11, 2)	177 70		177'70
Total Revenue	2,669,060		2,669,060	090	2,774,972		2,774,972	(2,774,972)	2,669,060		2,669,060
Net assets released from restrictions	4,058,443	(4,058,443)			42,850	(42,850)			4,101,293	(4,101,293)	•
TOTAL SUPPORT AND REVENUE	8,439,039	(1,158,993)	7,280,046	046	2,817,822	36,850	2,854,672	(2,774,972)	8,481,889	(1,122,143)	7,359,746
EXPENSES: Program services:											
Lending/Development Services	8,801,283	•	8,801,283	283	42,873		42,873	(2,215,022)	6,629,134	•	6,629,134
Community Advantage	595,552		286	595,552	•		•	(76,899)	518,653		518,653
Total program services	9,396,835		9,396,835	835	42,873		42,873	(2,291,921)	7,147,787		7,147,787
Supporting services:											
Management and general	1,303,107	•	1,303,107	107		•	•	(274,928)	1,028,179	•	1,028,179
Fundraising	/80,213		IR/	/80,213	•			(208,123)	9/2/080		9/2/080
Total supporting services	2,083,320		2,083,320	320				(483,051)	1,600,269		1,600,269
TOTAL EXPENSES	11,480,155	•	11,480,155	155	42,873		42,873	(2,774,972)	8,748,056		8,748,056
CHANGE IN NET ASSETS	(3,041,116)	(1,158,993)	(4,200,109)	,109)	2,774,949	36,850	2,811,799		(266,167)	(1,122,143)	(1,388,310)
Net assets (deficit) - beginning of year	8,977,417	2,721,745	11,699,162	162	(2,768,256)		(2,768,256)		6,209,161	2,721,745	8,930,906
NET ASSETS - END OF YEAR	\$ 5,936,301	\$ 1,562,752	\$ 7,499,053	053 \$	6,693	36,850	\$ 43,543	ج	\$ 5,942,994	\$ 1,599,602	\$ 7,542,596

See Independent Auditors' Report.

ACCION East, Inc. CONSOLIDATING STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2019

					ACCION - NY					ACCIONMA						ACCION	ACCION East, Inc.			
		ā	Program Services			Supporting Services	sə		Prograr	Program Services			Ŧ	Program Services	ces		0	Supporting Services	ŝ	
		Lending/		Total			Total			Lending/			Lending/			Total			Total	
	<u> </u>	Development Services	Lommunity Advantage	Services	management and General	Fundraising	Services	Total		Levelopment Services	Total		Levelopment Services	Community Advantage	tage	Services	and General	Fundraising	Services	Consolidated
Personnel costs	\$9	3,051,412 \$	527,698	\$ 3,579,110) \$ 358,525	\$ 635,279	\$ 993,804	\$ 4,572,914	\$	÷		69	3,051,412 \$: 527	527,698 \$	3,579,110	\$ 358,525	\$ 635,279	\$ 993,804	\$ 4,572,914
Professional fees and marketing		313,831	108,424	422,255	389,195	73,095	462,290	884,545	2		1		313,831	108	108,424	422,255	389,195	73,095	462,290	884,545
Office and occupancy		435,380	58,344	493,724	50,952	74,002	124,954	618,678	00				435,380	58	58,344	493,724	50,952	74,002	124,954	618,678
Travel and conferences		123,542	15,666	139,208	14,458	20,998	35,456	174,664	~		1		123,542	15	15,666	139,208	14,458	20,998	35,456	174,664
Interest and fees		582,294	105,181	687,475				687,475	5				582,294	105	105,181	687,475				687,475
Depreciation and amortization		114,341	15,321	129,662	2 13,380	19,433	32,813	162,475	5				114,341	15	15,321	129,662	13,380	19,433	32,813	162,475
Loan loss provision		1,498,795	169,784	1,668,579				1,668,579			1		1,498,795	169	169,784	1,668,579				1,668,579
Other expenses		284,753	16,076	300,829	14,039	20,390	34,429	335,258	0.1	51,496	51,496	-	336,249	16	16,076	352,325	14,039	20,390	34,429	386,754
Subtotal before costs of direct benefits to donors		6,404,348	1,016,494	7,420,842	840,549	843,197	1,683,746	9,104,588	~	51,496	51,496		6,455,844	1,016,494	494	7,472,338	840,549	843,197	1,683,746	9,156,084
Less: costs of direct benefits to donors			1		-	(26,782)	(26,782)	13,636,262	5							1	·	(26,782)	(26,782)	(26,782)
TOTAL EXPENSES	ŵ	6,404,348	1,016,494	\$ 7,420,842	\$ 840,549	\$ 816,415	\$ 1,656,964	\$ 22,740,850		51,496 \$	51,496	<u>به</u>	6,455,844	1,016,494	,494 \$	7,472,338	\$ 840,549	\$ 816,415	\$ 1,656,964	\$ 9,129,302

ACCION East, Inc. CONSOLIDATING STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2018

			AC	ACCION - NY					AC	ACCION-MA				Consolidating Eliminations	nations				ACCION East, Inc	ast, Inc.			
		Program Services		tis.	Supporting Services		-	Program Services	Sup	Supporting Services			Program Services	r	Supporti	Supporting Services		Program Services		ddns	Supporting Services		
	Lending		Total			Total		L ending/			Total		Lending/	ž			Lending		Total				
	Development Services	Community Advantage	Program Services	Management and General	Fundraising	Supporting Services	Total	Development Services	Management and General	Fundraising	Services	Total	Development Services	at Community s Advantage	/ Management s and General	Fundraising	Development Services	Community Advantage	Program Services	Management and General	Fundraising	Supporting	Consolidated Total
Personnel costs	\$ 3,501,613	\$ 235,376	837,36,969	\$ 570,474	\$ 426,768 \$	· 967,242 \$	4,734,231 \$		•		• \$		•		•	•	\$ 3,501,613	\$ 235,376 \$	3,736,989	\$ 570,474 \$	426,768 \$	997,242 \$	4,734,231
Professional fees and marketing	328,679	149,348	478,027	346,928	88,249	435,177	913,204										328,679	149,348	478,027	346,928	88, 249	435,177	913,204
Office and occupancy	464,304	15,813	480,117	57,593	43,598	101,191	581,308								•	•	484,304	15,813	480,117	51,593	43,598	101,191	581,308
Travel and conferences	158,479	5, 388	163,877	19,658	14,881	34,639	198,416								•	•	158,479	6,398	163,877	19,668	14,001	34,539	198,416
Interest and fees	506,747	44,212	550,959				650,959								•	•	508,747	44,212	650,959				650,959
Depreciation and amontization	84,741	2,887	81,628	10,612	1,957	18,469	106,097	8				53			•	•	84,764	2,887	87,651	10,512	1,967	18,469	106,120
Loan loss provision	1,222,813	60,711	1,283,524				1,283,524								•	•	1,222,813	60,711	1,283,524				1,283,524
Other expenses	2,533,907	81,807	2,615,714	297,942	225,545	523,487	3,138,201	42,850	•		•	42,850	(2,215,022	22 (16,893)	Ø <u>274,928</u>	(208,123)	361,735	4,908	306,643	23,014	17,422	40,435	407,079
Subtotal before costs of direct benefits to donors	8,801,283	595,552	8,396,835	1,303,107	806, 938	2,110,105	11,506,940	42,873				42,873	(2,215,022	12) (76,893)	0214,920	(208,123)	6,629,134	518,653	7,147,787	1,028,179	538,875	1,627,054	8,774,841
Less: costs of direct benefits to donors			•	1	(26,785)	(26,785)	(26,785)		1		1	•			-	•	•			1	(26,785)	(36,785)	(26,785)
TOTAL EXPENSES	\$ 8,801,283	\$ 395,552	\$ 9,396,835	\$ 1,303,107	\$ 780,213 \$	5 2,083,320 5	11,480,155	42,873	-	1	. 3	\$ 42,873	\$ (2,215,022	12 S (76,893)	3 5 274,928	9 5 (208,123)	\$ 6,629,134	\$ 518,653 \$	7,147,787	\$ 1,028,179 \$	572,080 \$	1,600,269	8,748,056

- 23-