Form **8879-EO** 

# IRS e-file Signature Authorization for an Exempt Organization

or calendar year 2018, or fiscal year beginning	, 2018, and ending	, 20

Department of the Treasury	No not and				
	· ·	nd to the IRS. Keep for your			2018
nternal Revenue Service		ov/Form8879EO for the late	est information.	Facilia 11 m	
Name of exempt organization	ı			Employer identi	ification number
	TNC			   17 1171	1140
EDREPORTS . ORG	, INC			47-1171	LI49
Name and title of officer					
ERIC HIRSCH EXECUTIVE DIF	FCTOR				
	Return and Return Information	)n (Whole Dollars Only)			
	urn for which you are using this Form 8		able amount if any from	m the veture If	vou chook the how
whichever is applicable, than one line in Part I.  Ia Form 990 check here Ia Form 990-EZ check has Ia Form 990-PF check has Ia Form 8868 check here Ia Form 8868 check here Ia Declara Under penalties of perjuncelectronic return and acc	ere b b Total revenue, in k here b b Total tax (Fowere b Tax based on in	y (Form 990, Part VIII, column f any (Form 990-EZ, line 9) orm 1120-POL, line 22) nvestment income (Form 99 8868, line 3c) tion of Officer	er -0- on the applicable  n (A), line 12)  0-PF, Part VI, line 5)  nave examined a copy or	line below. Do  1b 2b 3b 5b of the organization true, correct, aurn. I consent to	ion's 2018 and complete. I o allow my
ntermediate service prov (a) an acknowledgement the date of any refund. If debit) entry to the financi return, and the financial in	ider, transmitter, or electronic return or of receipt or reason for rejection of the applicable, I authorize the U.S. Treasur al institution account indicated in the ta nstitution to debit the entry to this acco	transmission, <b>(b)</b> the reason y and its designated Financia ax preparation software for pa bunt. To revoke a payment, I	of for any delay in processal Agent to initiate an elayment of the organizat must contact the U.S. 1	ssing the return ectronic funds ion's federal ta Freasury Financ	or refund, and <b>(c)</b> withdrawal (direct xes owed on this ial Agent at
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Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)

## EXTENDED TO NOVEMBER 15, 2019

**Return of Organization Exempt From Income Tax** 

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

AF	or tne	2018 calendar year, or tax year beginning and	enaing								
<b>B</b> C	heck if oplicable:	C Name of organization		D Employer identific	cation number						
	Address	EDREPORTS.ORG, INC									
	Name change	Doing business as		47-1171149							
X	Initial return Final	,	Room/suite								
	return/ termin-	P.O. BOX 51099			512-2396						
	ated Amende	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	15,266,184.							
	return Applica	DURHAM, NC 2//1/		H(a) Is this a group return							
	tion pending	F Name and address of principal officer: EKIC HIKSCH		for subordinates							
SAME AS C ABOVE H(b) Are all subordinates included? Yes No											
	I Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions)										
		E: ► HTTPS: //WWW.EDREPORTS.ORG/		H(c) Group exemptio							
		organization: X Corporation Trust Association Other	<b>L</b> Year	of formation: 2014 N	M State of legal domicile: NC						
Pa		Summary									
•	1 E	Briefly describe the organization's mission or most significant activities: $\overline{ t EDREI}$	PORTS	WILL INCREAS	SE THE						
Governance	9	CAPACITY OF TEACHERS, ADMINISTRATORS, AND	LEADI	ERS TO SEEK,	IDENTIFY						
rna	2 (	Check this box $lacktriangle$ $$ $$ if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	sets.						
)Ve	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	12						
Ğ	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	12						
S)		otal number of individuals employed in calendar year 2018 (Part V, line 2a)			29						
itie		otal number of volunteers (estimate if necessary)			0						
Activities &		otal unrelated business revenue from Part VIII, column (C), line 12			0.						
Ā		Net unrelated business taxable income from Form 990-T, line 38			0.						
		•		Prior Year	Current Year						
	8 (	Contributions and grants (Part VIII, line 1h)			15,105,054.						
υne		Program service revenue (Part VIII, line 2g)			161,130.						
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			0.						
Re		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.						
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			15,266,184.						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0.						
					0.						
	4E C	Benefits paid to or for members (Part IX, column (A), line 4)  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			2,845,398.						
ses	160	Professional fundraising fees (Part IX, column (A), line 11e)			0.						
Expenses	10a r	26.24			0.						
Εχp	47 (				1,870,675.						
	'''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			4,716,073.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			10,550,111.						
_ s	<b>19</b> F	Revenue less expenses. Subtract line 18 from line 12		-ii of Ourset Vacs	· · · · · ·						
Net Assets or Fund Balances	00 7	Tabal assists (Dark V. Hars 40)	Ве	ginning of Current Year	End of Year 10,700,973.						
sse Bala	20 7	Fotal assets (Part X, line 16)			150,862.						
let /	21 7	Total liabilities (Part X, line 26)			10,550,111.						
Z∷ Do	22 N	Net assets or fund balances. Subtract line 21 from line 20			10,330,111.						
		-			. Imposite days and halist it is						
	-	ties of perjury, I declare that I have examined this return, including accompanying schedules			/ knowledge and beller, it is						
true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	nas any knowledge.							
		Signature of officer		I Date							
Sigr 	1	, -		Dαισ							
Her	e	ERIC HIRSCH, EXECUTIVE DIRECTOR  Type or print name and title									
				Date Check	PTIN						
		Print/Type preparer's name  Preparer's signature		l if							
Paid -		MELISA BEAUCHAMP, EA MELISA BEAUCHAME	, EA 1								
Prep		Firm's name APRIO, LLP		Firm's EIN ▶	57-1157523						
Use Only   Firm's address   5 CONCOURSE PARKWAY, SUITE 1000											
		ATLANTA, GA 30328		Phone no. (4	04) 892-9651						
Мау	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No						

Form 990 (2018)

# Form 990 (2018) EDREPORTS ORG , 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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
•	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	<u> </u>		
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	-		1
10		10		x
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		- 25
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ا مدا		x
	Part VI	11a		
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	l		- 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			7.7
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
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?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
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		X
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		<u> </u>
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		<u> </u>
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? If "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		X
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		X
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		X

832003 12-31-18

# Form 990 (2018) EDREPORTS . ORG , INC Part IV Checklist of Required Schedules (continued)

22 X  23 Dd the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Tex", complete Schedule I, Part I and III    24 Dd the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, tustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IV and the standard principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, "The "Yes" or lone are acrow account other than a returning secrow at any time during the year to defease any lax exempt bonds of tax exempt bonds beyond a temporary period exception?  24 Dd the organization mixed any proceeds of tax exempt bonds outstanding at any time during the year?  24 Dd the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any lax exempt bonds?  25 Defeate (Fig. 1) And SOF(19(3) organizations. Did the organization engage in an excess benefit transaction with a dequalitied person during the year?  25 Defeate (Fig. 1) And SOF(19(3) organizations. Did the organization engage in an excess benefit transaction with a dequalitied person during the year?  26 Defeate organization area that it engaged in an excess benefit transaction with a discussified person of the organization with a discussified person of the organization area of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organization with a discussified person of the year of the organizatio				Yes	No
24 Define 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? "Yes," complete Schedule I, Part IV instructions for applicable in part or other assistance to an artificial experimental and supplies the organization have a tax exempt bond issue with an outstanding principal mount of more than \$100,000 as of the list day of the year, that was issued after Decomber \$1.0002? If "Yes," answer lines 2d through 2d and complete Schedule IV. If "Yes," to line 25 and the compensated employees? If yes, "complete Schedule IV. If "Yes," to line 25 and the compensation manufaction manufaction and escows account other than a returnding escows at any time during the year to defease any tax exempt bonds?  d Did the organization and as an "on oberial" of issuer for bonds outstanding at any time during the year to defease any tax exempt bonds?  d Did the organization and as an "on oberial" of issuer for bonds outstanding at any time during the year?  d Did the organization and as a "on oberial" of issuer for bonds outstanding at any time during the year to defease any tax exempt bonds?  d Did the organization and the analysis of the second outstanding at any time during the year?  d Did the organization and the analysis of the organizations. Did the organization and the time transaction has not been reported on any of the organization prior Forms 900 or 900 E27 if "Yes," complete Schedule I, Part II be 18 the organization and the time transaction has not been reported on any of the organizations prior Forms 900 or 900 E27 if "Yes," complete Schedule II, Part II interest or informer officer, director, trustee, key employees, or disqualified personns? if "Yes," complete Schedule II, Part II interest or employee thereof, a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule II, Part IV instructions for applicable Schedule II, Part I	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directors, fustlesse, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part II  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No," go to line 25s.  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d Did the organization minetal any accord and according to the significant of the organization and significant of the significant of the significant of the organization engage in an excess benefit transaction with a disqualified period unit of the organization with a disqualified period of the significant of the organization with a disqualified period of 90 Polic 2* If "Yes," complete Schedule L, Part I  5b Ib the organization expended on any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustesses, key employees, bighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, a grant assiection own three employees, or of significant entity of remaining the significant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee threating, a grant assiection own three employees ("Yes," complete Schedule L, Part IV  25b Was the organization related to a business transaction with one of the following parties (see Schedule L, Part IV  26b Was the organization related to a business transaction with one		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule / Late day of the year, that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a.  b Did the organization maintain an escrive account other than a refunding secrow at any time during the year to defease any tax exempt borneds and the art of the organization maintain an escrive account other than a refunding secrow at any time during the year to defease any tax exempt borneds?  d Did the organization maintain an escrive account other than a refunding secrow at any time during the year to defease any tax exempt borneds?  d Did the organization act as an "on behalf of "issuer for bornds outstanding at any time during the year?  d Did the organization act as an "on behalf of "issuer for bornds outstanding at any time during the year?  d Did the organization act as an "on behalf of "issuer for bornds outstanding at any time during the year?  d Did the organization access benefit transaction between the secret secret transaction has not been reported on any of the organization spot on Forms 980 or 980-E27 // "Yes," complete Schedule L, Part I   25a   X    5 Did the organization are port any amount on Part X, line 5, 6, or 22 for receivables from or pasables to any current or former offices, directors, tustees, key employees, highest compensated employees, or disqualified person?" // "Yes," complete Schedule L, Part I   25b   X   X    25 Did the organization provide a grant or other assistance to an officer, director, tustee, key employees, or disqualified person?" // "Yes," complete Schedule L, Part IV   X   X   X   X   X   X   X   X   X	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Dd 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 Docember 31, 2002? If "Yes," arrower lines 24b through 24d and complete Schedule K. If "No," go to line 25a		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year. It all was issued after December 31, 2002? If ""Yes," answer lines 24b through 24d and complete Schedule K, If "No." you to line 25s.  b Did the organization market any proceeds of tax exempt bonds beyond a temporary period exception?  c Did the organization market any proceeds of tax exempt bonds beyond a temporary period exception?  24d Did the organization market are served account other than a refunding secree at any time during the year to defease any tax exempt bonds?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I was a served account of the properties of the organization area that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction was 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 organizations prior forms 800 or 990E27 If "Yes," complete Schedule L, Part II was a served or the served of the serve		Schedule J	23	Х	
Schedule K. If "No.", go to line 25a.  Schedule K. If "No.", go to line 25a.  B Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?  d Did the organization and as an "on behalf of" issuer for bonds cutstanding at any time during the year?  24d.  25a Section 501(c/8), 501(c/8), and 501(c/29) organizations. Did the organization engage in an excess benefit transaction with a disqualided person during the year?  25a Interpretation of the section 501(c/8), 501(c/8), and 501(c/29) organizations. Did the organization engage in an excess benefit transaction with a disqualided person of the government of the organization of the organization and the section of the organization provide a goal or on the cognitions prior forms 900 or 990(EZ? If "Yes," complete Schedule I, Part I and that the transaction has not been reported on any of the organizations prior forms 900 or 990(EZ? If "Yes," complete Schedule I, Part I and I are section or payables to any current or forms officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part II and I are section or payables to any current or forms officers, director, trustee, in the section of any of the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 5% controlled entity or family member of any or these persons? If "Yes," complete Schedule I, Part IV instructions for applicable limpt interebolds, conditions, and exceptions;  a A current or former officer, director, trustee, rely employee? If "Yes," complete Schedule I, Part IV instructions for applicable limpt interebolds, conditions, and exceptions;  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV instructions for applicable limpt interebolds, conditions, and exceptions;  b A fami	24a				
b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  d Did the organization and at as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b   2b   2b   2b   2b   2b   2b   2b			24a		X
any tax-exempt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24d   25a Section 501(c/3), 501(c/3), 501(c/3), 501(c/3) 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    25b   Is the organization aware that it engaged in an excess benefit ansaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   25a   X    25b   X   25c   X   25c	b		24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  255 Section 501(2)(3), 501(4)(4), and 501(4)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25 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 Former 950 or 950 E27. If "Yes," complete Schedule L, Part I  25 Did 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 Former 950 or 950 E27. If "Yes," complete Schedule L, Part II  26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes, complete Schedule L, Part III Institutions or applicable ling threshots, conditions, and exceptions):  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 ling threshots, conditions, and exceptions):  28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 280 X  29 Did the organization receive contributions of art, historiations of If "Yes," complete Schedule L, Part IV 280 X  29 Did the organization receive contributions of art, historiat treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X  29 Did the organization receive contributions of art, historiat treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line I 30 Did	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  255 Section 501(2)(3), 501(4)(4), and 501(4)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25 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 Former 950 or 950 E27. If "Yes," complete Schedule L, Part I  25 Did 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 Former 950 or 950 E27. If "Yes," complete Schedule L, Part II  26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes, complete Schedule L, Part III Institutions or applicable ling threshots, conditions, and exceptions):  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 ling threshots, conditions, and exceptions):  28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 280 X  29 Did the organization receive contributions of art, historiations of If "Yes," complete Schedule L, Part IV 280 X  29 Did the organization receive contributions of art, historiat treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 29 X  29 Did the organization receive contributions of art, historiat treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line I 30 Did		any tax-exempt bonds?	24c		
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 sport person \$900 or \$900-EZ* /it "Yea," complete Schedule I., Part I	d		24d		
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-E27   "Yes," complete Schedule L, Part I   256   X   26   27   26   27   27   27   28   28   28   28   28	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
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  25 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions;  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X  Did the organization receive womer than 82s.50 00 in non-cash contributions? If "Yes," complete Schedule M 29 X  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II 31 X  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-28 nf "Yes," complete Schedule R, Part I, III, and III, or IV, and Part V, line 2 35 A  Did the organization own 100% of an entity disregarded as separate from the organization with a controlle		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If 'Yes," complete Schedule L, Part IV.  28a	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualfied persons? If "Yes," complete Schedule I, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 Instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X X X Y X Y X X X Y X Y X X X Y X Y X		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part II  31 Did the organization osel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 Did the organization one sel, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization or and 1070-37 If "Yes," complete Schedule R, Part V, line 2  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  16 Yes 'to line 35a, did the organization receive any payment from or engage in any transaction with		Schedule L, Part I	25b		X
complete Schedule L, Part II  17 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28c X  29 Did the organization cereive more than \$25,000 in non-ast contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  31 X  32 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I II, III, or IV, and Part V, Iine 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V Iine 2  35 Section 501(c)(3) organization by a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V Iine 2  36 Section 501(c)(3) organization one than 5% of its activities through	26				
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 28 X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 28 X C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 29 X X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule IM 30 X X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 30 1.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 33 X X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Did the organization organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Did the organization c		former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 228b X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 228b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 228b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X c Part IV 29b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I 31 X did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 X did the organization one 100% of an entity disregarded as separate from the organization under Regulations selections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Jack Description of the organization name than the organization make any transfers to an exempt non-charitable related organization?  If		complete Schedule L, Part II	26		X
of any of these persons? // "Yes," complete Schedule L, Part III  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? // "Yes," complete Schedule L, Part IV  28	27				
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28a					
instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28c X  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive once than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization inquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  31 A X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301-7701-2 and 301-7701-3? If "Yes," complete Schedule R, Part I II  32 A Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, IInn 1  33 Did the organization have a controlled entity within the meaning of section 512(0)(13)?  b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(0)(13)? If "Yes," complete Schedule R, Part V, IInne 2  36 Section 501c(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, IInne 2  36 Section 501c(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			27		X
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Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  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 V!  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  Note. All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V  10 In Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  11 In	34				
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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V  Yes No  1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 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 X	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Check if Schedule O contains a response or note to any line in this Part V  The second of the number reported in Box 3 of Form 1096. Enter -0- if not applicable  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?  The second of the sec	Da	Note. All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
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1a     Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable     1a     210       b     Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable     1b     0       c     Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?     1c     X		Oneon it somedule o contains a response of flote to any line in this part v			<u> </u>
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 X	_	Estable annual annual de Ban 0 of Farm 1000 Fata 0 (fact and fact)		Yes	No
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(gambling) winnings to prize winners?		Enter the frame of Ferme W Lea included in line fall. Enter of infect applicable			
	C		10	x	
	832004				(2018)

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Х **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 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). Х 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. 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 Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Х Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Form **990** (2018)

If "Yes," complete Form 4720, Schedule O.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 12 **1a** Enter the number of voting members of the governing body at the end of the tax year 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 in Schedule O. 12 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe 12c in Schedule O how this was done Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? Х 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request \_\_\_ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 786-512-2396

Form **990** (2018)

P.O. BOX 51099, DURHAM, NC

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

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

(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an					n an	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer	Key employee	Highest compensated snat/ac		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DR MARIA KLAWE	1.00	.,		٠,					0	0
CHAIR TANK	0.70	Х		Х				0.	0.	0.
(2) PETER TANG	0.70	3,7		٦,					0	0
SECRETARY	0.70	Х		Х				0.	0.	0.
(3) MICHAEL HYDE TREASURER	0.70	х		x				0.	0.	0.
(4) K. SUE REDMAN	0.70							•	•	•
AUDIT COMMITTEE CHAIR	0.70	х						0.	0.	0.
(5) DANA NERENBERG	0.50							•	•	
MEMBER	0130	х						0.	0.	0.
(6) KISHA DAVIS-CALDWELL	0.50								•	
MEMBER		Х						0.	0.	0.
(7) DR SONJA SANTELISES	0.50								-	
MEMBER		Х						0.	0.	0.
(8) AUDRA MCPHILLIPS	0.50									
MEMBER		Х						0.	0.	0.
(9) DARREN BURRIS	0.50									
MEMBER		Х						0.	0.	0.
(10) LAUREN STUART	0.50									
MEMBER		Х						0.	0.	0.
(11) KATHLEEN MCGEE	0.70									
MEMBER		Х						0.	0.	0.
(12) LIZ SIMON	0.50									
MEMBER		Х						0.	0.	0.
(13) ERIC HIRSCH	40.00								_	
EXECUTIVE DIRECTOR				X				244,937.	0.	45,397.
(14) DONNIDRA JOHNSON	40.00	-		l					_	
CHIEF OPERATING OFFICER	1000	ļ	_	X	_			165,771.	0.	21,752.
(15) LAUREN WEISSKIRK	40.00	-						156 005		20 010
CHIEF STRATEGY OFFICER				Х				156,295.	0.	30,813.
		-								
	1	1						1		Form <b>990</b> (2018)

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Part VII Section	A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hi	ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
Na	me and title	Average	(do not		Position (do not check more than one				Reportable	Reportable		Es	stimate	ed
		hours per	box	, unle	ss pe	rson i	is both	n an	compensation	compensation	ו ו	an	nount	of
		week		cer an	uad	ii ecto	or/trus	iee)	from	from related			other	
		(list any hours for	Individual trustee or director						the	organizations			pensa	
		related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	<sup>5)</sup>		om the anizati	
		organizations	ruste	Institutional trustee		ee Ge	Highest compensated employee		(***2/1033*****100)			_	d relati	
		below	dualt	ution	-	Key employee	st co	ы					anizatio	
		line)	Indiv	Instit	Officer	Key e	Highe	Former						
-														
							<u> </u>							
							<u> </u>				$\rightarrow$			
							_				$\rightarrow$			
									5.55 0.00		$\rightarrow$			
									567,003.		0.	9	7,9	
	ntinuation sheets to Part VI								0.		0.			0.
	es 1b and 1c)							<u> </u>	567,003.		0.	9	7,9	64.
	of individuals (including but n	ot limited to th	ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable				2
compensation	from the organization												Yes	3
<b>6</b> D. I.I.											ſ		res	No
ū	zation list any former officer,	•			•	•	•							Х
	s," complete Schedule J for si											3		Λ
•	dual listed on line 1a, is the su	•							•	•		4	х	
	ganizations greater than \$150											4	^	
• •	n listed on line 1a receive or a	•				•			· ·			E		Х
Section B. Indeper	e organization? <i>If</i> "Yes," com	plete Schedule	e J f	or st	ich į	oers	on .				<u> l</u>	5		21
	table for your five highest cor	mnensated ind	lene	nde	nt co	ntr	acto	re th	nat received more than ¢	100 000 of comp	ensat	ion fr		
	on. Report compensation for t										Silsat	1011 110	,,,,	
the organization	(A)	ine calcindar ye	Jai C	, i i dii	ig w	1011	JI VVI	<u> </u>	(B)	car.		(0	; <u>)</u>	
	Name and business	address	NO	ONE	3				Description of s	ervices	C		nsatio:	n
		<u> </u>						Ī		T				
2 Total number of	of independent contractors (ir	ncluding but no	ot lir	nited	d to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of co	ompensation from the organiz	zation 🕨				(	)							
											1	Form	990 (2	2018)

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Check if Schedule O contains a response or note to any line in this Part VIII    Co	
b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f: \$  15,105,054.  Business Code 900099 161,130. 161,130.	(D) /enue excluded om tax under sections 512 - 514
g Total. Add lines 2a-2f 161,130.	
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties	
(i) Real (ii) Personal  b Less: rental expenses c Rental income or (loss)	
d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory b Less: cost or other basis	
and sales expenses  c Gain or (loss)  d Net gain or (loss)  8 a Gross income from fundraising events (not	
including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b	
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b	
c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold b	
C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a	
b c d All other revenue e Total. Add lines 11a-11d	

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 567,003. 476,283. 73,710. 17,010. trustees, and key employees ..... Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,637,356. 1,378,536. 207,765. 51,055. Other salaries and wages 7 Pension plan accruals and contributions (include 120,692. 101,618. 15,607. 3,467. section 401(k) and 403(b) employer contributions) 298,751. 354,826. 45,883. 10,192. Other employee benefits 9 165,521. 142,395. 19,133. 3,993. 10 Payroll taxes Fees for services (non-employees): Management 10,475. 10,475. Legal 35,819. 35,819. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 46,580. 740,062. 693,482. column (A) amount, list line 11g expenses on Sch O.) 43,263. 43,263. Advertising and promotion 12 76,156. 75,988. 168. Office expenses 13 294,528. 293,900. 628. Information technology 14 15 Royalties 4,831. 4,831. 16 Occupancy 96,553. 96,506. 47. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 81,376. 315. 81,691. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 11,651. 11,651. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 285,830. 285,830. EDUCATIONAL TRAINING CONTENT DEVELOPMENT 184,566. 184,566. 4,528. 4,528. FINANCIAL SERVICE CHARG d MISCELLANEOUS EXPENSE 722. 720. e All other expenses 4,716,073. 4,157,327. 472,354. 86,392. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

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Par	t X	Balance Sheet				
		Check if Schedule O contains a response or no	te to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1	4,441,046.
	2	Savings and temporary cash investments			2	10,474.
	3	Pledges and grants receivable, net			3	6,147,974.
	4	Accounts receivable, net			4	101,479
	5	Loans and other receivables from current and f				
		trustees, key employees, and highest compens	ated employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqual				
		section 4958(f)(1)), persons described in section	· · ·			
		employers and sponsoring organizations of sec				
,,		employees' beneficiary organizations (see instr)	·		6	
) šet	7	Notes and loans receivable, net	F		7	
Assets	8	Inventories for sale or use			8	
	9	Donat del como con con del defense del de conce			9	
		Land, buildings, and equipment: cost or other	······			
	iva	basis. Complete Part VI of Schedule D	102			
	h				10c	
					11	
	11	Investments - publicly traded securities				
	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	10 700 072
+	16	Total assets. Add lines 1 through 15 (must equ		0.	16	10,700,973
	17	Accounts payable and accrued expenses			17	150,002
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete			21	
es	22	Loans and other payables to current and forme				
≣		key employees, highest compensated employe				
Liabilities		Complete Part II of Schedule L			22	
-	23	Secured mortgages and notes payable to unrel			23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on line	s 17-24). Complete Part X of			
					25	150.060
4	26	Total liabilities. Add lines 17 through 25		0.	26	150,862.
		Organizations that follow SFAS 117 (ASC 956				
es		complete lines 27 through 29, and lines 33 ar				4 600 741
Net Assets or Fund Balances	27	Unrestricted net assets			27	4,623,741.
3a16	28	Temporarily restricted net assets			28	5,926,370.
<u> </u>	29				29	
፰		Organizations that do not follow SFAS 117 (A	ASC 958), check here ▶ 📖 │			
٥ ا		and complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		30		
4ss	31	Paid-in or capital surplus, or land, building, or e			31	
et'	32	Retained earnings, endowment, accumulated in			32	40 == 0 111
z	33	Total net assets or fund balances		0.	33	10,550,111.
	34	Total liabilities and net assets/fund balances		0.	34	10,700,973.

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Pa	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		<u>, 26 (</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u>73.</u>	
3	Revenue less expenses. Subtract line 2 from line 1	3	<u> 10</u>	<u>, 55</u> (	), <u>1</u>	<u> 11.</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				0.	
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	10	,55(	),1	11.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			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 O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u> </u>	
	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?			2b	X		
	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:						
	X Separate basis 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?			2c	X	$ldsymbol{ld}}}}}}}}}$	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.					
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?			За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b			
				Form	990	(2018)	

#### SCHEDULE A

Department of the Treasury

(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 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization EDREPORTS . ORG, 47-1171149 INC Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18

Schedule A (Form 990 or 990-EZ) 2018

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")					15105054.	15105054.
2	Tax revenues levied for the organ-						
	ization'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					15105054.	15105054.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						15105054.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	(,	(2) = 2 : 2	(3)	(-,	15105054.	15105054.
8	Gross income from interest,						
•	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						15105054.
	Gross receipts from related activities,	etc (see instruction	nne)			12	161,130.
	First five years. If the Form 990 is for	•	,	rd fourth or fifth to			
10	organization, check this box and stop						
Se	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2018 (li	ne 6. column (f) di	ivided by line 11. d	column (f))		14	100.00 %
	Public support percentage from 2017					15	%
	33 1/3% support test - 2018. If the o						
	stop here. The organization qualifies						
r	33 1/3% support test - 2017. If the o						
_	and <b>stop here.</b> The organization quali	•		•		•	
17:	10% -facts-and-circumstances test						
.,,	and if the organization meets the "fac	-	-				
	meets the "facts-and-circumstances"		•	-	•	•	
L	10% -facts-and-circumstances test						
Ĺ	more, and if the organization meets the	-	-				
	organization meets the "facts-and-circ				-		<b>▶</b> □
10	•		•	•			
10	Private foundation. If the organization	n did not check a	DUX UIT III IE TO, TO	na, 100, 17a, 01 1/1		and see instruction	

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

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

Se	ction A. Public Support										
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(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	Gross receipts from activities that										
	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										
78	Amounts included on lines 1, 2, and										
	3 received from disqualified persons										
k	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										
(	Add lines 7a and 7b										
	Public support. (Subtract line 7c from line 6.)										
	ction B. Total Support		I		T	T					
	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	(d) 2017	(e) 2018	(f) Total				
	Amounts from line 6										
108	Gross income from interest, dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources						_				
r	Unrelated business taxable income										
	(less section 511 taxes) from businesses acquired after June 30, 1975										
							<del>                                     </del>				
	Add lines 10a and 10b  Net income from unrelated business										
••	activities not included in line 10b,										
	whether or not the business is										
12	regularly carried on Other income. Do not include gain										
-	or loss from the sale of capital										
12	assets (Explain in Part VI.)										
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.) <b>First five years.</b> If the Form 990 is for	the organization's	first second thir	tourth or fifth to	l v voar as a soction	1 501(c)(3) organiz	ation				
'7	check this box and stop here	ŭ		•	•		. —				
Se	ction C. Computation of Publi	c Support Per	centage								
	Public support percentage for 2018 (I			column (f))		15	%				
	Public support percentage from 2017					16	%				
Se	ction D. Computation of Inves	tment Income									
17	Investment income percentage for 20	entage for <b>2018</b> (line 10c, column (f), divided by line 13, column (f))									
18											
198	9a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not										
	more than 33 1/3%, check this box ar										
k	33 1/3% support tests - 2017. If the						and				
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	orted organization	▶□				
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions					

## 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.)

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11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of an supported organization?  b A family member of a person described in (a) above? If 'Yes' to a.b. or c. provide detail in Part VI.  11b C	Pal	Supporting Organizations (Continued)			
a 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?  b A family member of a person described in (a) above?  c A 59% controlled with or a special person described in (a) a for (a) bove?  if Yes' to a, b, or c, provide detail in Pert VI.  11b				Yes	No
below, the governing body of a supported organization?  1 A family member of a person described in (a) above?  2. AS\$6 controlled entity of a person described in (a) or (b) above?  3. AS\$6 controlled entity of a person described in (a) or (b) above?  4. Yes 1 to a. b. or c. provide detail in Pert VI.  11b  11c  Section B. Type I Supporting Organizations  1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year? If 'No,' observible. If the organization directors or trustees at all times during the tax year? If 'No,' observible. 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 organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization and what conditions or restrictors, if any, applied to supple powers during the tax year  2. Did the organization operate for the benefit of any supported organization other than the supported organization and what conditions or estrictors, if any, applied to supple powers during the tax year in Part VI how providing such benefit carried out the purposes of the supported organization of the than the supported organization and the supported organizations and the supported organizations of the supported organization of the supported organization or trustees of each of the organization and provided during the supported organization or trustees of each of the organization and provided organization or trustees described in the supported organization or the supported organization or the supported organization or the suppo	11	Has the organization accepted a gift or contribution from any of the following persons?			
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Section C. Type II Supporting Organizations  Yes No  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? "It "No," "describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).  Section D. All Type III Supporting Organizations  Yes No  1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization's officers, directors, or trustees either (i) appointed organization's proported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization of the relationship described in (2), did the organization's supported organization have a significant voice in the organization's investment policies and in directing the use of the organization's supported organization's supported organization's proported organization's provide describes din constitute activitie			2		
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trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		3a		
	h		- Ju		
	~		3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	) Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must cor			
Sect	on 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	on 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	on 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-functionally	/ integrat	ed Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

Par	<sup>ব</sup> V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations <sub>(continued)</sub>	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive		
	(provide details in <b>Part VI</b> ). See instructions.	•		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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 B

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

Department of the Treasury Internal Revenue Service

Organization type (check one):

**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

2018

Filers of:		Section:			
Form 990	or 990-EZ	X 501(c)( 3 ) (enter number) organization			
		4947(a)(1) nonexempt charitable trust <b>not</b> 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			
		covered by the <b>General Rule</b> or a <b>Special Rule.</b> 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 I	Rules				
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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-EZ, line 1. Complete Parts I and II.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year				
but it mu	st answer "No" on I	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).			

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization Employer identification number

# 47-1171149 EDREPORTS.ORG, INC

Parti	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BILL & MELINDA GATES FOUNDATION  PO BOX 23350  SEATTLE, WA 98102	\$ <u>1,500,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	OVERDECK FAMILY FOUNDATION  100 AVENUE OF THE AMERICAS, 16TH FLOOR  NEW YORK, NY 10013	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WILLIAM & FLORA HEWLETT FOUNDATION  2121 SAND HILL ROAD  MENLO PARK, CA 94025	\$ <u>1,383,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# EDREPORTS.ORG, INC

47-1171149

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** EDREPORTS.ORG, 47-1171149 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

EDREPORTS.ORG, INC

**Employer identification number** 47-1171149

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, line 6.							
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in v	_						
	are the organization's property, subject to the organization's e							
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	used only					
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	· — —					
Da								
Par			Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization							
	Preservation of land for public use (e.g., recreation or ed		torically important land area					
	Protection of natural habitat	Preservation of a cer	tified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form						
	day of the tax year.		Held at the End of the Tax Year					
a	Total number of conservation easements		1 1					
b	, , , , , , , , , , , , , , , , , , , ,							
С	Number of conservation easements on a certified historic stru							
d	Number of conservation easements included in (c) acquired a							
•	listed in the National Register		2d					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax					
4	year ▶ Number of states where property subject to conservation eas	ament is leasted						
5	Does the organization have a written policy regarding the peri	· · · · · · · · · · · · · · · · · · ·						
3	violations, and enforcement of the conservation easements it		Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting, I							
Ū	b	mandaning of violations, and officioning cont	servation deserments during the year					
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements during the year					
-	<b>▶</b> \$	g or moranorio, and ornoronig concerna	mon casements adming and year					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)					
	and section 170(h)(4)(B)(ii)?							
9	In Part XIII, describe how the organization reports conservation							
	include, if applicable, the text of the footnote to the organizati							
	conservation easements.							
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	ther Similar Assets.					
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.						
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue staten	nent and balance sheet works of art,					
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public service, provide, in Part XIII,					
	the text of the footnote to its financial statements that describ	oes these items.						
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical					
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pul	blic service, provide the following amounts					
	relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$					
			<b>L</b> .					
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	ıl gain, provide					
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items:						
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$					
b	Assets included in Form 990, Part X							

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

Schedule D (Form 990) 2018

Secrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    Is if "Yes," explain the arrangement in Part XIII and complete the following table:		t III Organizations Maintaining Co	llections of Art	t, Histo	orical Tre	asures, o	r Other	Simila	Assets	contin	ued)	<u> </u>
a	3	Using the organization's acquisition, accession	n, and other records	s, check	any of the	following tha	t are a sig	nificant u	se of its o	collection	items	
b Scholarly research e Other  □ Preservation for future generations  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization sollection? ▼ Yes No Part XY Scrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XZ Scrow and Part XIII and complete the following table:  □ Beginning balance □ Beginning the year □ 1g □ 1d		(check all that apply):										
b Scholarly research e	а	Public exhibition	d	— <u>—</u> і	_oan or exc	hange progr	ams					
c	b	Scholarly research	е									
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5. During the year, did the organization solicitor receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XX, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XX, line 21.  1b If "Yes," explain the arrangement in Part XIII and complete the following table:  C. Beginning balance  C. Beginning balance  I. Distributions during the year  1 Ending balance  2 Distributions during the year  1 Ending balance  3 Distributions during the year  1 Ending balance  Amount  1 Fresh, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance  1b Contributions  1c Net investment earnings, gains, and losses of Grant organization answered "Yes" on Form 990, Part IV, line 10.  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ 96  C Temporarily restricted endowment ▶ 96  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment £ most not in the possession of the organization that are held and administered for the organization or year and programs.  Complete if the organizations selected as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answerd Yes' on Form 99												
5 During the year, did the organization solicit or receive donations of art, instorrical treasures, or other similar assets to be sold to raise funds arther than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    Part IV	4		ections and explain	how the	ev further th	ne organizatio	on's exem	not purpos	se in Part	XIII.		
to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b if "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  1c	5											
Secrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part Xy, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XY										Yes		No
reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XP.  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance  d Additions during the year  e Distributions during the year  f Ending balance 2D Idt the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance  1b Contributions  C Net investment earnings, gains, and losses  d Grants or scholarships  c Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative or presented percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative expenses  g Find of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative expenses  g Find of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative expenses  g Find of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as:  a Board designated or quasisendowment   M Separative expenses  g Find of year balance  2 Provide the estimated percentage of the c	Par									line 9, or		
on Form 990, Part X?  b if "Yes," explain the arrangement in Part XIII and complete the following table:    Amount					_							
b   I* Yes, "explain the arrangement in Part XIII and complete the following table:    Complete	1a	Is the organization an agent, trustee, custodiar	n or other intermed	iary for c	ontribution	s or other as	sets not ir	ncluded				
b   I* Yes, "explain the arrangement in Part XIII and complete the following table:    Complete		on Form 990, Part X?								Yes		No
c Beginning balance d Additions during the year 1 Enting balance 2 Distributions during the year 1 Ending balance 2 Distributions 2 Distributions 3 Distributions 4 Distributions 5 Distributions 6 Distributions 6 Distributions 7 Distributions 7 Distributions 8 Distributions 8 Distributions 9 Dist	b											
d Additions during the year    Distributions during the year   Ending balance   It   It   It   It   It   It   It   I										Amount		
e Distributions during the year   1 te   1	С	Beginning balance						1c				
e Distributions during the year   1 te   1	d	Additions during the year						1d				
f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?    Yes   No   If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII	е											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	f	Ending balance						1f				
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	2a									Yes		No
Calculation												
1a Beginning of year balance	Par	t V   Endowment Funds. Complete if t	the organization an	swered '	'Yes" on Fo	rm 990, Par	t IV, line 1	0.		1		
b Contributions			(a) Current year	<b>(b)</b> P	rior year	(c) Two year	ars back	<b>(d)</b> Three <u>y</u>	ears back	(e) Four	years	back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a											
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	b	Contributions										
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С											
and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	d	Grants or scholarships										
g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶	е	Other expenditures for facilities										
g End of year balance												
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶	f	Administrative expenses										
Board designated or quasi-endowment	g	• • • • • • • • • • • • • • • • • • • •										
b Permanent endowment	2			e (line 1g	, column (a	)) held as:						
c Temporarily restricted endowment ▶	а			_%								
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other		• • • • • • • • • • • • • • • • • • • •										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements d Equipment e Other  Other	С											
Second   S		, ,	•									
(ii) unrelated organizations (iii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  b Buildings  c Leasehold improvements  d Equipment e Other  Other	за		sion of the organiza	tion that	are held ar	nd administe	red for the	e organiza	ition	Г	. 1	
(ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  basis (other)  basis (other)		•									Yes	NO
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  b Buildings  c Leasehold improvements  d Equipment  e Other		feet										
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation  1a Land (b) Buildings (c) Leasehold improvements (c) Leasehold improvements (d) Equipment (e) Other (d) Description of property (d) Book value	<b>L</b>											
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation	4									(JD)		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  Description of property  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  basis (investment)  b Buildings  c Leasehold improvements  d Equipment  e Other	Par			willelit it	irius.							
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Book value  (f) Book value  (f) Book value  (f) Cost or other basis (other)  (f) Accumulated depreciation  (f) Book value				Part IV	line 11a S	See Form 990	) Part X I	ine 10				
basis (investment) basis (other) depreciation  1a Land b Buildings c Leasehold improvements d Equipment e Other									hd	(d) Book	. value	
1a Land   b Buildings   c Leasehold improvements   d Equipment   e Other		bescription of property	1 ' '				1 ' '			( <b>a)</b> Book	value	-
b Buildings		Land	`			. ,						
c Leasehold improvements d Equipment e Other	_											
d Equipment												
e Other												
TO SUBTING A BITCO TO BITCO TO TO TOUR HILL THUS LEGICAL FORTH 990. PARL A. COLUMN IDD. HILLE TUC.)				X. colum	<u>n (B).</u> line 1	0c.)			<b>•</b>			0.

Schedule D (Form 990) 2018

Schedul	e D (Form 990) 2018 EDREPORTS •	ORG, INC		47-1171149 Page
Part \		-		
	Complete if the organization answered "Ye		e 11b. See Form 990, Part X, line 12	
(a) Des	cription of security or category (including name of security	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Fina	ncial derivatives			
	ely-held equity interests			
(3) Othe	er			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
	ol. (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>		
Part	/III Investments - Program Related.			
	Complete if the organization answered "Ye		te 11c. See Form 990, Part X, line 13	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)				
(2)				
(3)				
<u>(4)</u>				
(5)			+	
<u>(6)</u>			+	
(7)			+	
(8)				
(9)	ol (h) must squal Form 000 Port V sol (P) line 12			
Part I	ol. (b) must equal Form 990, Part X, col. (B) line 13.) X Other Assets.			
1 0.1 0 1	Complete if the organization answered "Ye	s" on Form 990 Part IV lin	ue 11d. See Form 990. Part X. line 15	
		(a) Description	10 11d. 000 1 0111 000, 1 dit X, iii 0 10	(b) Book value
(1)		(,,		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total.	Column (b) must equal Form 990. Part X. col. (B)	line 15.)		▶
Part >	Other Liabilities.	,		
	Complete if the organization answered "Ye	es" on Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X,	line 25.
<u>1.                                    </u>	(a) Description of liability		(b) Book value	
(1)	Federal income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

(9)

Schedule D (Form 990) 2018

## SCHEDULE J (Form 990)

**Compensation Information** 

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

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

OMB No. 1545-0047
2018

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

EDREPORTS.ORG, INC

 $\begin{array}{c} \textbf{Employer identification number} \\ 47-1171149 \end{array}$ 

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </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 filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<u>X</u>
С		4c		Х
	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:	_		v
a	The organization?	5a		X
a	Any related organization?	5b		
_	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:	60		х
	The organization?	6a		X
D	Any related organization?	6b		42
7	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	7		х
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	o		х
0	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		42
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		
		. 5		1

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ERIC HIRSCH	(i)	215,000.	28,225.	1,712.	0.	45,397.	290,334.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DONNIDRA JOHNSON	(i)	155,142.	9,750.	879.	0.	21,752.	187,523.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LAUREN WEISSKIRK	(i)	153,519.	2,059.	717.	0.	30,813.	187,108.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						<u> </u>	1 1/5 000) 0040

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.

#### **SCHEDULE 0**

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Inspection

Name of the organization

EDREPORTS.ORG, INC

**Employer identification number** 47-1171149

· · · · · · · · · · · · · · · · · · ·
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND DEMAND THE HIGHEST QUALITY INSTRUCTIONAL MATERIALS. DRAWING UPON
EXPERT EDUCATORS, EDREPORTS' EVIDENCE-BASED REVIEWS OF INSTRUCTIONAL
MATERIALS AND SUPPORT FOR SMART DEMAND WILL EQUIP TEACHERS WITH
EXCELLENT MATERIALS NATIONWIDE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EQUIP TEACHERS WITH EXCELLENT MATERIALS NATIONWIDE.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 WILL BE MADE AVAILABLE TO THE BOARD OF DIRECTORS BEFORE THE RETURN
IS FILED WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 15:
EXECUTIVE COMPENSATION IS REVIEWED BY THE BOARD OF DIRECTORS ANNUALLY. THE
BOARD APPROVES ALL EXECUTIVE COMPENSATION AND USES COMPARABLE NONPROFITS TO
DETERMINE IF THAT COMPENSATION IS REASONABLE.
FORM 990, PART VI, SECTION C, LINE 19:
FINANCIAL DOCUMENTS AND TAX RETURNS WILL BE MADE AVAILABLE UPON REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:
PAYROLL SERVICES:
PROGRAM SERVICE EXPENSES 29,304.
MANAGEMENT AND GENERAL EXPENSES 31,580.
FUNDRAISING EXPENSES 0.
LHA For Panerwork Reduction Act Notice see the Instructions for Form 990 or 990-F7 Schedule O (Form 990 or 990-F7) (2015

832211 10-10-18

Name of the organization  EDREPORTS.ORG, INC	Employer identification number 47-1171149
TOTAL EXPENSES	60,884.
COMMUNICATION CONSULTING:	
PROGRAM SERVICE EXPENSES	
MANAGEMENT AND GENERAL EXPENSES	•
FUNDRAISING EXPENSES	
TOTAL EXPENSES	
EDUCATION AND CONTENT CONSULTING:	
PROGRAM SERVICE EXPENSES	486,360.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	486,360.
GENERAL CONSULTING:	
PROGRAM SERVICE EXPENSES	85,187.
MANAGEMENT AND GENERAL EXPENSES	15,000.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	100,187.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	740,062.
FORM 990, PART XII, LINE 2C	
NO PROCEDURAL CHANGES WERE MADE FROM PREVIOUS YEARS.	
FORM 990, INITIAL RETURN	
EDREPORTS.ORG INC OPERATED UNDER A FISCAL SPONSORSHIP WITH	THE
ROCKEFFELER PHILANTHOPY ADVISORS. 2018 IS THE FIRST YEAR T	HE dule O (Form 990 or 990-EZ) (2018)

### Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-1709

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 <a href="https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits">www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits</a>.

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

All corpo	rations required to file an income tax return other than F	orm 990-T	(including 1120-C filers), partnership	ps, REMICs	s, and trusts			
must use	Form 7004 to request an extension of time to file incom	ne tax retur	ms.	Enter file	ar'e identifyin	a number		
Type or	Name of exempt organization or other filer, see instru		Enter filer's identifying number  Employer identification number (EIN) or					
print	Hame of exempt organization of earlier man, eee metre	.01.01.0.		Limpleyo	i idontinodiloi	riambor (Ent) or		
•	EDREPORTS.ORG, INC		47-1171149					
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	Social security number (SSN)						
filing your return. See	P.O. BOX 51099		•	,				
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  DURHAM, NC 27717							
Enter the	Return Code for the return that this application is for (fil	e a separa	te application for each return)			0 1		
Applicat	ion	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 990	)-BL	02	Form 1041-A			08		
Form 472	20 (individual)	03	Form 4720 (other than individual)			09		
Form 990	)-PF	04	Form 5227	10				
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T (trust other than above)			Form 8870			12		
• If the	prone No. $\blacktriangleright$ $786-512-2396$ organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box $\blacktriangleright$	Group Exe		If this is fo	r the whole gr	oup, check this		
1 I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ X calendar year 2018 or  ▶ tax year beginning , and ending .  2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period								
	nis application is for Forms 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions.	, or 6069,	enter the tentative tax, less	3a	\$	0.		
_	nis application is for Forms 990-PF, 990-T, 4720, or 6069	), enter an	y refundable credits and		·			
estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$						0.		
c Ba	lance due. Subtract line 3b from line 3a. Include your pa	ayment wit	h this form, if required, by					
using EFTPS (Electronic Federal Tax Payment System). See instructions.					0.			
Caution:	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO an	d Form 8879-	EO for payment		

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

Form 8868 (Rev. 1-2019)