

POSSIBLE DUPLICATE

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Form 990 header section including: A For the 2017 calendar year, or tax year beginning 08-01, 2017, and ending 07-31, 2018; B Check if applicable; C Name of organization Edison Academics Inc; D Employer identification no. 27-0612152; E Telephone number (941) 702-2465; F Name and address of principal officer Loren Jackson; G Gross receipts 295,162; H(a) Is this a group return for subsidiaries? No; H(b) Are all subsidiaries included? No; H(c) Group exemption number; I Tax-exempt status 501(c)(3); J Website www.edisonacademicschool.com; K Form of organization Corporation; L Year of formation 2009; M State of legal domicile FL

TC 599/069

Part I Summary

Table with 4 columns: Description, Prior Year, Current Year, and Net Assets or Fund Balances. Rows include: 1 Briefly describe the organization's mission...; 2-7a Summary rows; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

SCANNED OCT 20 2021

RECEIVED NOV 20 2020 SBSE FIELD COLLECTION SARASOTA, FL

Part II Signature Block

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

Signature of officer: Loren C Jackson, President

Paid Preparer Use Only section including: Print/Type preparer's name Linda Patterson; Preparer's signature; Date 11-20-2020; Firm's name Linda Patterson CPA PA; Firm's address 2831 Ringling Blvd 114D Sarasota FL 34237; Firm's EIN P00543037; Phone no 941-924-1120

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission.

Provide an educational setting where students of diverse ages and interests can pursue a college preparatory education. Our goal is to supply the guidance necessary to develop in each student the confidence to begin a task, determination to continue and the skills to complete.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

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

4a (Code: ) (Expenses \$ 244,492 including grants of \$ ) (Revenue \$ )

Edison Academics Inc provided a school setting where students of diverse ages, interests and backgrounds pursued their education. We provided the guidance to develop in each student the confidence needed to begin, determination to continue and the skills and drive necessary to successfully complete projects and assignments. We encouraged every student to bring their unique talents to the learning situation.

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

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

4d Other program services (Describe in Schedule O.)

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

4e Total program service expenses 244,492

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Part IV Checklist of Required Schedules

|     |   | Yes | No |
|-----|---|-----|----|
| 1   | Is the organization described in section 501(c)(3) or 527(e)(1) (other than a private foundation) a "lessee" of real property owned by a related organization?  | X   |    |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributions (see instructions)?  |     | X  |
| 3   | Did the organization report any activities on behalf of or in opposition to section 501(c)(3) organizations? Did the organization engage in lobbying activities or more than one of the activities listed in section 501(c)(3) in the tax year? If "yes," complete Schedule C, Part II  |     | X  |
| 4   | Is the organization an employer for the tax year? If "yes," complete Schedule C, Part III   |     | X  |
| 5   | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? If "yes," complete Schedule D, Part I   |     | X  |
| 6   | Did the organization have any of the following for the tax year: (a) a collection of works of art, historical treasures, or other similar assets; (b) a collection of real property; or (c) a collection of other assets? If "yes," complete Schedule D, Part III   |     | X  |
| 7   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a guarantor for another party, or act as a surety, endorser, or guarantor? If "yes," complete Schedule D, Part III  |     | X  |
| 8   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a guarantor for another party, or act as a surety, endorser, or guarantor? If "yes," complete Schedule D, Part III  |     | X  |
| 9   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a guarantor for another party, or act as a surety, endorser, or guarantor? If "yes," complete Schedule D, Part III  |     | X  |
| 10  | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, and IX. (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (d) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? |     | X  |
| 11a | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   | X   |    |
| 11b | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   |     | X  |
| 11c | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   |     | X  |
| 11d | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   |     | X  |
| 11e | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   |     | X  |
| 11f | Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (a) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (b) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year? (c) Did the organization have a contract, agreement, or arrangement with any individual or organization for the tax year?   |     | X  |
| 12a | Was the organization included in consolidated financial statements for the tax year? If "yes," and if the organization answered "No" to line 12b (then completing Schedule D, Parts XI and XII is optional), is the organization a school described in section 170(p)(1)(A)(ii)? If "yes," complete Schedule E  |     | X  |
| 12b | Was the organization included in consolidated financial statements for the tax year? If "yes," and if the organization answered "No" to line 12a (then completing Schedule D, Parts XI and XII is optional), is the organization a school described in section 170(p)(1)(A)(ii)? If "yes," complete Schedule E  |     | X  |
| 13  | Did the organization maintain an office, employees, or agents outside of the United States?   | X   |    |
| 14a | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, scholarship, fellowship, or bursary payments, or other activities outside the United States, or aggregate revenues or expenses of more than \$5,000 from grants or other assistance to or for individuals?   |     | X  |
| 14b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, scholarship, fellowship, or bursary payments, or other activities outside the United States, or aggregate revenues or expenses of more than \$5,000 from grants or other assistance to or for individuals?   |     | X  |
| 15  | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, scholarship, fellowship, or bursary payments, or other activities outside the United States, or aggregate revenues or expenses of more than \$5,000 from grants or other assistance to or for individuals?   |     | X  |
| 16  | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, scholarship, fellowship, or bursary payments, or other activities outside the United States, or aggregate revenues or expenses of more than \$5,000 from grants or other assistance to or for individuals?   |     | X  |
| 17  | Did the organization have more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  |     | X  |
| 18  | Did the organization have more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  |     | X  |
| 19  | Did the organization have more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  |     | X  |

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Part IV Checklist of Required Schedules

|  | Yes | No |
|--|-----|----|
| 20a Did the organization observe one or more possible indications of "Yes," complete Schedule M                        |     | X  |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?         |     | X  |
| 21 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset or                     |     | X  |
| 22 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset or                     |     | X  |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the                 |     | X  |
| 24a Did the organization report more than \$5,000 of proceeds from the sale of any capital asset or                    |     | X  |
| b Did 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 escrow at any time during the year            |     |    |
| d Did the organization report more than \$5,000 of proceeds from the sale of any capital asset or                      |     |    |
| 25a Did the organization report more than \$5,000 of proceeds from the sale of any capital asset or                    |     | X  |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior     |     | X  |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any          |     | X  |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,            |     | X  |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L,           |     |    |
| a A family member of a director or former officer, director, trustee, or key employee                                  |     | X  |
| b A disqualified person  |     | X  |
| c A disqualified person who is a partner, partner, or partner in a partnership   |     | X  |
| 29 Did the organization receive more than \$52,000 in non-cash contributions   |     | X  |
| 30 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset, or qualified          |     | X  |
| 31 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset, or qualified          |     | X  |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets                        |     | X  |
| 33 Was the organization listed on any 1099, 1042-S, or other information return for the organization under Regulations |     | X  |
| 34 Was the organization listed on any 1099, 1042-S, or other information return for the organization under Regulations | X   |    |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?                            |     | X  |
| b If "Yes" to line 35a, did the organization file a separate Form 990 for each controlled entity for the               |     | X  |
| 36 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset, or qualified          |     | X  |
| 37 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset, or qualified          |     | X  |
| 38 Did the organization report more than \$5,000 of proceeds from the sale of any capital asset, or qualified          | X   |    |

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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 1099. Enter -0- if not applicable   |     |    |
| 1b  | 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?   | X   |    |
| 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  |     |    |
| b   | Did the organization file all required federal employment tax returns?   | X   |    |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |     | X  |
| 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)? |     | X  |
| b   | If "Yes," enter the name of the foreign country:<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)   |     |    |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |     | X  |
| 5b  | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   |     | X  |
| 5c  | 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 any contributions that were not tax deductible as charitable contributions?                                    |     | X  |
| 6b  | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  |     |    |
| 7   | Organizations that may receive deductible contributions under section 170(c).  |     |    |
| a   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  |     |    |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  |     |    |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   |     |    |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  |     |    |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |     |    |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   |     |    |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   |     |    |
| 8   | Do the sponsoring organization have excess business holdings at any time during the year?  |     |    |
| 9   | Sponsoring organizations maintaining donor advised funds.  |     |    |
| a   | Did the sponsoring organization make any taxable distributions under section 4966?   |     |    |
| b   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  |     |    |
| 10  | Initiation fees and capital contributions included on Part VIII, line 12   |     |    |
| a   | Gross receipts included on Form 990, Part VIII, line 12, for public use of club facilities   |     |    |
| 11  | Gross income from members or shareholders  |     |    |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources)  |     |    |
| 12a | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |     |    |
| 13  | Section 501(c)(29) qualified nonprofit health insurance issuers.   |     |    |
| a   | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  |     |    |
| b   | Enter the amount of reserves on hand   |     |    |
| 14a | Did the organization receive any new health insurance contracts during the year?   |     |    |
| b   | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  |     |    |

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Part VI Governance, Management, and Disclosure

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



Section A. Governing Body and Management

Table with 4 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, and governance documents.

Section B. Policies

Table with 4 columns: Question, Yes, No. Rows include questions about local chapters, written policies, whistleblower policy, and document retention.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include questions about state filing, public inspection, and records.

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

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

**Section 170(b)(1)(C) Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

organization's tax year. For all of the organization's current officers' directors' trustees (including independent trustees) members of the board of directors' and other persons who received reportable compensation from the organization and any related organizations.

compensation. Enter in columns (D), (E), and (F) if no compensation was paid. For all of the organization's current officers' directors' trustees (including independent trustees) members of the board of directors' and other persons who received reportable compensation from the organization and any related organizations.

For the organization's independent trustees' directors' trustees (including independent trustees) members of the board of directors' and other persons who received reportable compensation from the organization and any related organizations.

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.

\$100,000 of reportable compensation from the organization and any related organizations.

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A)<br>Name and Title             | (B)<br>Average hours per week (Net any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------------------|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|                                   |   | Individual trustee or director   | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (1) Paula Jackson<br>Secretary    | 40.00   |  |                       | X       |              |                              |        | 0  | 0   | 0   |
| (2) Ai-Ja Jackson<br>Director     | 3.00  |  |                       | X       |              |                              |        | 0  | 0   | 0   |
| (3) Loren Jackson<br>Director     | 3.00  |  |                       | X       |              |                              |        | 0  | 0   | 0   |
| (4) Loren C. Jackson<br>President | 40.00   |  |                       | X       |              |                              |        | 0  | 0   | 0   |
| (5) _____                         |   |  |                       |         |              |                              |        |  |   |   |
| (6) _____                         |   |  |                       |         |              |                              |        |  |   |   |
| (7) _____                         |   |  |                       |         |              |                              |        |  |   |   |
| (8) _____                         |   |  |                       |         |              |                              |        |  |   |   |
| (9) _____                         |   |  |                       |         |              |                              |        |  |   |   |
| (10) _____                        |   |  |                       |         |              |                              |        |  |   |   |
| (11) _____                        |   |  |                       |         |              |                              |        |  |   |   |
| (12) _____                        |   |  |                       |         |              |                              |        |  |   |   |
| (13) _____                        |   |  |                       |         |              |                              |        |  |   |   |
| (14) _____                        |   |  |                       |         |              |                              |        |  |   |   |

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Form 990 (2017) **Part VII Compensation of Officers, Directors, Key Employees, Highest Compensated Employees, and Independent Contractors** (continued) **0612152**

| (A)<br>Name and title  | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|  |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
| (15) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (16) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (17) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (18) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (19) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (20) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (21) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (22) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (23) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (24) -----   |  |   |                       |         |              |                              |        |  |   |   |
| (25) -----   |  |   |                       |         |              |                              |        |  |   |   |
| <b>1b Sub-total</b>  |  |   |                       |         |              |                              |        |  |   |   |
| <b>c Total from continuation sheets to Part VII, Section A</b> |  |   |                       |         |              |                              |        |  |   |   |
| <b>d Total (add lines 1b and 1c)</b>                           |  |   |                       |         |              |                              | 0      | 0  | 0   |   |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

|   | Yes | No |
|---|-----|----|
| <b>3</b> Did the organization file any Form 1099-MISC, 1099-NEC, or 1099-B for such individuals?                                | 3   | X  |
| <b>4</b> For any individual listed on line 2, is the sum of reportable compensation and other compensation from the individual? | 4   | X  |
| <b>5</b> Did any individual listed on line 2 receive compensation from any related organization or individual?                  | 5   | X  |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

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Form 990 (2017)

Edison Academics Inc

27-0612152

**Part VIII Statement of Revenue**

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

|  |  |  | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |  |
|--|--|--|----------------------|--|---|--|--|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a   | Federated campaigns  |                      |  |   |  |  |
|  | 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  | Net cash contributions included in lines 1a-1f: \$                             |                      |  |   |  |  |
|  | h  | Net non-cash contributions included in lines 1a-1f: \$                         |                      |  |   |  |  |
| Program Service Revenue                                | 2a   | Education  | 295,162              | 295,162  |   |  |  |
|  | b  |  |                      |  |   |  |  |
|  | c  |  |                      |  |   |  |  |
|  | d  |  |                      |  |   |  |  |
|  | e  |  |                      |  |   |  |  |
|  | f  | All other program service revenue  |                      |  |   |  |  |
|  | g  | Total program service revenue  | 295,162              |  |   |  |  |
| Other Revenue  | 3  | Investment income (including dividends, interest, and other similar amounts)   |                      |  |   |  |  |
|  | 4  | Income from investment of tax-exempt bond proceeds                             |                      |  |   |  |  |
|  | 5  | Royalties  |                      |  |   |  |  |
|  | 6a   | Gross rents  | (i) Real             |  |   |  |  |
|  |  |  | (ii) Personal        |  |   |  |  |
|  |  |  |                      |  |   |  |  |
|  |  |  |                      |  |   |  |  |
|  | b  | Less: rental expenses  |                      |  |   |  |  |
|  | c  | Rental income or (loss)  |                      |  |   |  |  |
|  | d  | Net rental income or (loss)  |                      |  |   |  |  |
|  | 7a   | Gross amount from sales of assets other than inventory                         | (i) Securities       |  |   |  |  |
|  |  |  | (ii) Other           |  |   |  |  |
|  |  |  |                      |  |   |  |  |
|  |  |  |                      |  |   |  |  |
|  | b  | Less: cost or other basis and sales expenses                                   |                      |  |   |  |  |
| c  | Gain or (loss)   |  |                      |  |   |  |  |
| d  | Net gain or (loss)   |  |                      |  |   |  |  |
| 8a   | Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 | a  |                      |  |   |  |  |
|  |  | b  |                      |  |   |  |  |
|  |  | c  |                      |  |   |  |  |
| 9a   | Gross income from gaming activities. See Part IV, line 19  |  |                      |  |   |  |  |
| b  | Less: direct expenses  |  |                      |  |   |  |  |
| c  | Net income or (loss) from gaming activities  |  |                      |  |   |  |  |
| 10a  | Gross sales of inventory, less returns and allowances  | a  |                      |  |   |  |  |
|  |  | b  |                      |  |   |  |  |
|  |  | c  |                      |  |   |  |  |
| Miscellaneous Revenue                                  |  |  |                      |  |   |  |  |
| 11a  |  |  |                      |  |   |  |  |
| b  |  |  |                      |  |   |  |  |
| c  |  |  |                      |  |   |  |  |
| d  | All other revenue  |  |                      |  |   |  |  |
| e  | Total revenue see instructions   |  |                      |  |   |  |  |
| 12   |  |  | 295,162              | 295,162  |   |  |  |

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**Part IX Statement of Functional Expenses**

Do not check this box if Schedule A contains a response or note to any line in this Part IX

|  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21   |                       |                                 |  |                             |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22  |                       |                                 |  |                             |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 16 and 16   |                       |                                 |  |                             |
| 4 Benefits paid to or for members  |                       |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees   |                       |                                 |  |                             |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  |                       |                                 |  |                             |
| 7 Other salaries and wages   | 153,759               | 153,759                         |  |                             |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)   |                       |                                 |  |                             |
| 9 Other employee benefits  |                       |                                 |  |                             |
| 10 Payroll taxes   |                       |                                 |  |                             |
| 11 Fees for services (non-employees):  |                       |                                 |  |                             |
| a Management   |                       |                                 |  |                             |
| b Legal  |                       |                                 |  |                             |
| c Accounting   | 930                   |                                 | 930                                    |                             |
| d Lobbying   |                       |                                 |  |                             |
| e Professional fundraising services. See Part IV, line 17  |                       |                                 |  |                             |
| f Investment management fees   |                       |                                 |  |                             |
| g Other. (If line 11g amount exceeds 10% of line 26, column (A) amount, list line 11g expenses on Schedule O.)   | 9,061                 | 8,202                           | 859                                    |                             |
| 12 Advertising and promotion   | 500                   | 500                             |  |                             |
| 13 Office expenses   | 2,365                 |                                 | 2,365                                  |                             |
| 14 Information technology  | 1,029                 | 1,029                           |  |                             |
| 15 Royalties   |                       |                                 |  |                             |
| 16 Occupancy   | 64,997                | 64,997                          |  |                             |
| 17 Travel  | 213                   | 213                             |  |                             |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials  |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings  |                       |                                 |  |                             |
| 20 Interest  |                       |                                 |  |                             |
| 21 Payments to affiliates  |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization   | 1,993                 |                                 | 1,993                                  |                             |
| 23 Insurance   | 4,540                 |                                 | 4,540                                  |                             |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 26, column (A) amount, list line 24e expenses on Schedule O.) |                       |                                 |  |                             |
| a Educational Supplies & Exp   | 12,803                | 12,803                          |  |                             |
| b Leased Equipment   | 2,989                 | 2,989                           |  |                             |
| c Repairs & Maintenance  | 5,670                 |                                 | 5,670                                  |                             |
| d Website  | 2,831                 |                                 | 2,831                                  |                             |
| e All other expenses   | 7,905                 |                                 | 7,905                                  |                             |
| <b>26 Total costs</b>  | <b>271,585</b>        | <b>244,492</b>                  | <b>27,093</b>                          | <b>0</b>                    |
| 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)        |                       |                                 |  |                             |

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**Part X Balance Sheet**

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

|   |  | (A)               |        | (B)         |        |
|---|--|-------------------|--------|-------------|--------|
|   |  | Beginning of year |        | End of year |        |
| Assets  | 1 Cash - non-interest-bearing  | 20,710            | 1      |             |        |
|   | 2 Savings and temporary cash investments   |                   | 2      |             |        |
|   | 3 Pledges and grants receivable, net   |                   | 3      |             |        |
|   | 4 Accounts receivable, net   |                   | 4      |             |        |
|   | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  |                   | 5      |             |        |
|   | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(8) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L |                   | 6      |             |        |
|   | 7 Notes and loans receivable, net  |                   | 7      |             |        |
|   | 8 Inventories for sale or use  |                   | 8      |             |        |
|   | 9 Prepaid expenses and deferred charges  |                   | 9      |             |        |
|   | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D  | 10a 13,373        |        |             |        |
|   | b Less: accumulated depreciation   | 10b 3,203         | 10,170 | 10c         | 10,170 |
|   | 11 Investments - publicly traded securities  |                   | 11     |             |        |
|   | 12 Investments - other securities See Part IV, line 11   |                   | 12     |             |        |
|   | 13 Investments - program-related. See Part IV, line 11   |                   | 13     |             |        |
|   | 14 Intangible assets   |                   | 14     |             |        |
| 15 Other assets. See Part IV, line 11 (unrelated parties) |  | 15                |        |             |        |
|   |  | 30,880            | 16     | 10,170      |        |
| Liabilities   | 17 Accounts payable and accrued expenses   | 5,946             | 17     |             |        |
|   | 18 Grants payable  |                   | 18     |             |        |
|   | 19 Deferred revenue  |                   | 19     |             |        |
|   | 20 Tax-exempt bond liabilities   |                   | 20     |             |        |
|   | 21 Escrow or custodial account liability. Complete Part IV of Schedule D   |                   | 21     |             |        |
|   | 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  |                   | 22     |             |        |
|   | 23 Secured mortgages and notes payable to unrelated third parties  |                   | 23     |             |        |
|   | 24 Unsecured notes and loans payable to unrelated third parties  |                   | 24     |             |        |
|   | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   |                   | 25     |             |        |
|   | 26   |                   | 5,946  | 26          | 0      |
| Net Assets or Fund Balances                               | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.  |                   |        |             |        |
|   | 27 Unrestricted net assets   | 24,934            | 27     | 10,170      |        |
|   | 28 Temporarily restricted net assets   |                   | 28     |             |        |
|   | 29 Permanently restricted net assets   |                   | 29     |             |        |
|   | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.   |                   |        |             |        |
|   | 30 Capital stock or trust principal, or current funds  |                   | 30     |             |        |
|   | 31 Paid-in or capital surplus, or land, building, or equipment fund  |                   | 31     |             |        |
|   | 32 Retained earnings, endowment, accumulated income, or other funds  |                   | 32     |             |        |
|   | 33 Total net assets or fund balances   | 24,934            | 33     | 10,170      |        |
| 34 Total liabilities and net assets/fund balances         | 30,880   | 34                | 10,170 |             |        |

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**Part XI Reconciliation of Net Assets**

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

|    |  |    |         |
|----|--|----|---------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)  | 1  | 295,162 |
| 2  | Total expenses (must equal Part IX, column (A), line 25)   | 2  | 271,585 |
| 3  | Revenue less expenses Subtract line 2 from line 1  | 3  | 23,577  |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | 4  | 24,934  |
| 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 | 48,511  |

**Part XII Financial Statements and Reporting**

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

|  | Yes | No |
|--|-----|----|
| 1 Accounting method used to prepare the Form 990. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>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?<br>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.<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a  | X  |
| b Were the organization's financial statements audited by an independent accountant?<br>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:<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                            | 2b  | X  |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O   | 2c  |    |
| 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?  | 3a  |    |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits   | 3b  |    |

EEA

SCHEDULE A (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

Employer identification number

Edison Academy, Inc. Public Charity Status (All organizations must complete this part) (see instructions)

Part I

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

- 1 [ ] A school described in section 110(d)(1)(A)(i) (unless checked on Form 990 or 990-EZ)
2 [X] A hospital or a cooperative hospital services organization described in section 110(d)(1)(A)(ii)
3 [ ] A medical research organization operated in conjunction with a hospital described in section 110(d)(1)(A)(iii)
4 [ ] A hospital's name, city, and state:
5 [ ] A research organization (see instructions)
6 [ ] A research organization (see instructions)
7 [ ] A community trust described in section 110(d)(1)(A)(iv) (Complete Part II)
8 [ ] An agricultural research organization described in section 110(d)(1)(A)(v) operated in conjunction with a land-grant college
9 [ ] or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university.
10 [ ] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from businesses (see instructions)
11 [ ] An organization that normally receives more than 33 1/3% of its support from businesses (see instructions)
12 [ ] An organization that normally receives more than 33 1/3% of its support from the business (see instructions)

02

Check the appropriate box(es) if the organization is a supporting organization as described in section 170(b)(1)(C) and 170(b)(1)(D):

- a [ ] Type I - the supported organization is the owner or lessee of a building or other real property, and the supporting organization is the lessor or landlord of the property
b [ ] Type II - the supported organization is the owner or lessee of a building or other real property, and the supporting organization is the lessor or landlord of the property
c [ ] Type III functionally integrated - a supporting organization operated in connection with and functionally integrated with the supported organization (see instructions)
d [ ] Type III non-functionally integrated - a supporting organization operated in connection with the supported organization (see instructions)
e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
f Enter the number of supported organizations

g Provide the following information about the supported organization(s)

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Support (see instructions), (vi) Other support (see instructions). Rows (A) through (E) and Total.

Schedule A (Form 990 or 990-EZ) 2017

Edison Academics Inc

27-0612152

Part II

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

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

Section A. Public Support

Table with 6 columns: (a) 5013, (b) 5014, (c) 5012, (d) 5018, (e) 5011, (f) 1081. Rows 1-6 describe public support sources like gifts, tax revenues, and services.

Section B. Total Support

Table with 6 columns: (a) 5013, (b) 5014, (c) 5012, (d) 5018, (e) 5011, (f) 1081. Rows 7-13 describe total support sources like amounts from line 4, gross income, and net income.

Section C. Computation of Public Support Percentage

Form with lines 14-18 for computing public support percentage. Includes checkboxes for public support tests and instructions for Part VI.

Schedule A (Form 990 or 990-EZ) 2017

Edison Academics Inc

27-0612152

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

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

Section A. Public Support

Table with 7 columns: (a) 5012, (a) 5014, (c) 5012, (a) 5016, (a) 5011, (f) 1099. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total support from public support; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Add lines 7a and 7b.

Section B. Total Support

Table with 6 columns: (a) 5013, (a) 5014, (c) 5012, (a) 5016, (a) 5011, (f) 1099. Rows include: 9 Amounts from line 8; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income Do not include gain or loss from the sale of capital assets; 13 Total support from public support; 14 If the organization checked the box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2016 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage from 2016 Schedule A, Part III, line 15 17 %; Row 18: Investment income percentage from 2017 Schedule A, Part III, line 15 18 %; Row 19a: If the organization did not check the box on line 14, and line 12 is more than 33 1/3% and line 13 is not more than 33 1/3%, check this box and stop here. The organization is a publicly supported organization. 19a ; Row 19b: If the organization did not check a box on line 14, and line 12 is more than 33 1/3% and line 13 is not more than 33 1/3%, check this box and stop here. The organization is a publicly supported organization. 19b ; Row 20: If the organization did not check a box on line 14, or 19a, or 19b, check this box and see instructions. 20

EEA

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

|   | Yes | No |
|---|-----|----|
| 1 General description of the organization's purpose, function, and objectives, to be set forth in the organization's governing documents or bylaws; describe the organization's mission, its history and continuing relationship, existence   |     |    |
| 2 Did the organization (or any supporting organization) that does not have a 501(c)(3) status use any of the organization's assets described in section 203(e)(1) or (3)?<br>Did the organization have a supporting organization described in section 201(c)(4) (e) or (e)5 if "Yes," answer (p) and (c) below  |     |    |
| 3a  |     |    |
| b Did the organization (or any supporting organization) that does not have a 501(c)(3) status use any of the organization's assets described in section 501(c)(6) and (5)(a) and (5)(b) and (5)(c) and (5)(d) and (5)(e) and (5)(f) and (5)(g) and (5)(h) and (5)(i) and (5)(j) and (5)(k) and (5)(l) and (5)(m) and (5)(n) and (5)(o) and (5)(p) and (5)(q) and (5)(r) and (5)(s) and (5)(t) and (5)(u) and (5)(v) and (5)(w) and (5)(x) and (5)(y) and (5)(z) and (5)(aa) and (5)(ab) and (5)(ac) and (5)(ad) and (5)(ae) and (5)(af) and (5)(ag) and (5)(ah) and (5)(ai) and (5)(aj) and (5)(ak) and (5)(al) and (5)(am) and (5)(an) and (5)(ao) and (5)(ap) and (5)(aq) and (5)(ar) and (5)(as) and (5)(at) and (5)(au) and (5)(av) and (5)(aw) and (5)(ax) and (5)(ay) and (5)(az) and (5)(ba) and (5)(bb) and (5)(bc) and (5)(bd) and (5)(be) and (5)(bf) and (5)(bg) and (5)(bh) and (5)(bi) and (5)(bj) and (5)(bk) and (5)(bl) and (5)(bm) and (5)(bn) and (5)(bo) and (5)(bp) and (5)(bq) and (5)(br) and (5)(bs) and (5)(bt) and (5)(bu) and (5)(bv) and (5)(bv) and (5)(bw) and (5)(bx) and (5)(by) and (5)(bz) and (5)(ca) and (5)(cb) and (5)(cc) and (5)(cd) and (5)(ce) and (5)(cf) and (5)(cg) and (5)(ch) and (5)(ci) and (5)(cj) and (5)(ck) and (5)(cl) and (5)(cm) and (5)(cn) and (5)(co) and (5)(cp) and (5)(cq) and (5)(cr) and (5)(cs) and (5)(ct) and (5)(cu) and (5)(cv) and (5)(cw) and (5)(cx) and (5)(cy) and (5)(cz) and (5)(da) and (5)(db) and (5)(dc) and (5)(dd) and (5)(de) and (5)(df) and (5)(dg) and (5)(dh) and (5)(di) and (5)(dj) and (5)(dk) and (5)(dl) and (5)(dm) and (5)(dn) and (5)(do) and (5)(dp) and (5)(dq) and (5)(dr) and (5)(ds) and (5)(dt) and (5)(du) and (5)(dv) and (5)(dw) and (5)(dx) and (5)(dy) and (5)(dz) and (5)(ea) and (5)(eb) and (5)(ec) and (5)(ed) and (5)(ee) and (5)(ef) and (5)(eg) and (5)(eh) and (5)(ei) and (5)(ej) and (5)(ek) and (5)(el) and (5)(em) and (5)(en) and (5)(eo) and (5)(ep) and (5)(eq) and (5)(er) and (5)(es) and (5)(et) and (5)(eu) and (5)(ev) and (5)(ew) and (5)(ex) and (5)(ey) and (5)(ez) and (5)(fa) and (5)(fb) and (5)(fc) and (5)(fd) and (5)(fe) and (5)(ff) and (5)(fg) and (5)(fh) and (5)(fi) and (5)(fj) and (5)(fk) and (5)(fl) and (5)(fm) and (5)(fn) and (5)(fo) and (5)(fp) and (5)(fq) and (5)(fr) and (5)(fs) and (5)(ft) and (5)(fu) and (5)(fv) and (5)(fw) and (5)(fx) and (5)(fy) and (5)(fz) and (5)(ga) and (5)(gb) and (5)(gc) and (5)(gd) and (5)(ge) and (5)(gf) and (5)(gg) and (5)(gh) and (5)(gi) and (5)(gj) and (5)(gk) and (5)(gl) and (5)(gm) and (5)(gn) and (5)(go) and (5)(gp) and (5)(gq) and (5)(gr) and (5)(gs) and (5)(gt) and (5)(gu) and (5)(gv) and (5)(gw) and (5)(gx) and (5)(gy) and (5)(gz) and (5)(ha) and (5)(hb) and (5)(hc) and (5)(hd) and (5)(he) and (5)(hf) and (5)(hg) and (5)(hh) and (5)(hi) and (5)(hj) and (5)(hk) and (5)(hl) and (5)(hm) and (5)(hn) and (5)(ho) and (5)(hp) and (5)(hq) and (5)(hr) and (5)(hs) and (5)(ht) and (5)(hu) and (5)(hv) and (5)(hw) and (5)(hx) and (5)(hy) and (5)(hz) and (5)(ia) and (5)(ib) and (5)(ic) and (5)(id) and (5)(ie) and (5)(if) and (5)(ig) and (5)(ih) and (5)(ii) and (5)(ij) and (5)(ik) and (5)(il) and (5)(im) and (5)(in) and (5)(io) and (5)(ip) and (5)(iq) and (5)(ir) and (5)(is) and (5)(it) and (5)(iu) and (5)(iv) and (5)(iw) and (5)(ix) and (5)(iy) and (5)(iz) and (5)(ja) and (5)(jb) and (5)(jc) and (5)(jd) and (5)(je) and (5)(jf) and (5)(jg) and (5)(jh) and (5)(ji) and (5)(jj) and (5)(jk) and (5)(jl) and (5)(jm) and (5)(jn) and (5)(jo) and (5)(jp) and (5)(jq) and (5)(jr) and (5)(js) and (5)(jt) and (5)(ju) and (5)(jv) and (5)(jw) and (5)(jx) and (5)(jy) and (5)(jz) and (5)(ka) and (5)(kb) and (5)(kc) and (5)(kd) and (5)(ke) and (5)(kf) and (5)(kg) and (5)(kh) and (5)(ki) and (5)(kj) and (5)(kk) and (5)(kl) and (5)(km) and (5)(kn) and (5)(ko) and (5)(kp) and (5)(kq) and (5)(kr) and (5)(ks) and (5)(kt) and (5)(ku) and (5)(kv) and (5)(kw) and (5)(kx) and (5)(ky) and (5)(kz) and (5)(la) and (5)(lb) and (5)(lc) and (5)(ld) and (5)(le) and (5)(lf) and (5)(lg) and 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(5)(oo) and (5)(op) and (5)(oq) and (5)(or) and (5)(os) and (5)(ot) and (5)(ou) and (5)(ov) and (5)(ow) and (5)(ox) and (5)(oy) and (5)(oz) and (5)(pa) and (5)(pb) and (5)(pc) and (5)(pd) and (5)(pe) and (5)(pf) and (5)(pg) and (5)(ph) and (5)(pi) and (5)(pj) and (5)(pk) and (5)(pl) and (5)(pm) and (5)(pn) and (5)(po) and (5)(pp) and (5)(pq) and (5)(pr) and (5)(ps) and (5)(pt) and (5)(pu) and (5)(pv) and (5)(pw) and (5)(px) and (5)(py) and (5)(pz) and (5)(qa) and (5)(qb) and (5)(qc) and (5)(qd) and (5)(qe) and (5)(qf) and (5)(qg) and (5)(qh) and (5)(qi) and (5)(qj) and (5)(qk) and (5)(ql) and (5)(qm) and (5)(qn) and (5)(qo) and (5)(qp) and (5)(qq) and (5)(qr) and (5)(qs) and (5)(qt) and (5)(qu) and (5)(qv) and (5)(qw) and (5)(qx) and (5)(qy) and (5)(qz) and (5)(ra) and (5)(rb) and (5)(rc) and (5)(rd) and (5)(re) and (5)(rf) and (5)(rg) and (5)(rh) and (5)(ri) and (5)(rj) and (5)(rk) and (5)(rl) and (5)(rm) and (5)(rn) and (5)(ro) and (5)(rp) and (5)(rq) and (5)(rr) and (5)(rs) and (5)(rt) and (5)(ru) and (5)(rv) and (5)(rw) and (5)(rx) and (5)(ry) and (5)(rz) and (5)(sa) and (5)(sb) and (5)(sc) and (5)(sd) and (5)(se) and (5)(sf) and (5)(sg) and (5)(sh) and (5)(si) and (5)(sj) and (5)(sk) and (5)(sl) and (5)(sm) and (5)(sn) and (5)(so) and (5)(sp) and (5)(sq) and (5)(sr) and (5)(ss) and (5)(st) and (5)(su) and (5)(sv) and (5)(sw) and (5)(sx) and (5)(sy) and (5)(sz) and (5)(ta) and (5)(tb) and (5)(tc) and (5)(td) and (5)(te) and (5)(tf) and (5)(tg) and (5)(th) and (5)(ti) and (5)(tj) and (5)(tk) and (5)(tl) and (5)(tm) and (5)(tn) and (5)(to) and (5)(tp) and (5)(tq) and (5)(tr) and (5)(ts) and (5)(tt) and (5)(tu) and (5)(tv) and (5)(tw) and (5)(tx) and (5)(ty) and (5)(tz) and (5)(ua) and (5)(ub) and (5)(uc) and (5)(ud) and (5)(ue) and (5)(uf) and (5)(ug) and (5)(uh) and (5)(ui) and (5)(uj) and (5)(uk) and (5)(ul) and (5)(um) and (5)(un) and (5)(uo) and (5)(up) and (5)(uq) and (5)(ur) and (5)(us) and (5)(ut) and (5)(uu) and (5)(uv) and (5)(uw) and (5)(ux) and (5)(uy) and (5)(uz) and (5)(va) and (5)(vb) and (5)(vc) and (5)(vd) and (5)(ve) and (5)(vf) and (5)(vg) and (5)(vh) and (5)(vi) and (5)(vj) and (5)(vk) and (5)(vl) and (5)(vm) and (5)(vn) and (5)(vo) and (5)(vp) and (5)(vq) and (5)(vr) and (5)(vs) and (5)(vt) and (5)(vu) and (5)(vv) and (5)(vw) and (5)(vx) and (5)(vy) and (5)(vz) and (5)(wa) and (5)(wb) and (5)(wc) and (5)(wd) and (5)(we) and (5)(wf) and (5)(wg) and (5)(wh) and (5)(wi) and (5)(wj) and (5)(wk) and (5)(wl) and (5)(wm) and (5)(wn) and (5)(wo) and (5)(wp) and (5)(wq) and (5)(wr) and (5)(ws) and (5)(wt) and (5)(wu) and (5)(wv) and (5)(ww) and (5)(wx) and (5)(wy) and (5)(wz) and (5)(xa) and (5)(xb) and (5)(xc) and (5)(xd) and (5)(xe) and (5)(xf) and (5)(xg) and (5)(xh) and (5)(xi) and (5)(xj) and (5)(xk) and (5)(xl) and (5)(xm) and (5)(xn) and (5)(xo) and (5)(xp) and (5)(xq) and (5)(xr) and (5)(xs) and (5)(xt) and (5)(xu) and (5)(xv) and (5)(xw) and (5)(xx) and (5)(xy) and (5)(xz) and (5)(ya) and (5)(yb) and (5)(yc) and (5)(yd) and (5)(ye) and (5)(yf) and (5)(yg) and (5)(yh) and (5)(yi) and (5)(yj) and (5)(yk) and (5)(yl) and (5)(ym) and (5)(yn) and (5)(yo) and (5)(yp) and (5)(yq) and (5)(yr) and (5)(ys) and (5)(yt) and (5)(yu) and (5)(yv) and (5)(yw) and (5)(yx) and (5)(yy) and (5)(yz) and (5)(za) and (5)(zb) and (5)(zc) and (5)(zd) and (5)(ze) and (5)(zf) and (5)(zg) and (5)(zh) and (5)(zi) and (5)(zj) and (5)(zk) and (5)(zl) and (5)(zm) and (5)(zn) and (5)(zo) and (5)(zp) and (5)(zq) and (5)(zr) and (5)(zs) and (5)(zt) and (5)(zu) and (5)(zv) and (5)(zw) and (5)(zx) and (5)(zy) and (5)(zz) |     |    |
| 3b  |     |    |
| 3c  |     |    |
| 4a  |     |    |
| 4b  |     |    |
| 4c  |     |    |
| 5a  |     |    |
| 5b  |     |    |
| 5c  |     |    |
| 6   |     |    |
| 7   |     |    |
| 8   |     |    |
| 9a  |     |    |
| 9b  |     |    |
| 9c  |     |    |
| 10a   |     |    |
| 10b   |     |    |

Schedule A (Form 990 or 990-EZ) 2017

Edison Academics Inc

27-0612152

**Part V** Type III Non-Functionally Integrated 501(c)(3) Supporting Organization (see instructions. All other Type III non-functionally integrated supporting organizations must complete sections A through E.

1  Instructions. All other Type III non-functionally integrated supporting organizations must complete sections A through E.

| Section A - Adjusted Net Income |  | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1                               | Net short-term capital gain  | 1              |                             |
| 2                               | Recoveries of prior-year distributions   | 2              |                             |
| 3                               | Other gross income (see instructions)  | 3              |                             |
| 4                               | Add lines 1 through 3  | 4              |                             |
| 5                               | Depreciation and depletion   | 5              |                             |
| 6                               | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6              |                             |
| 7                               | Other expenses (see instructions) (see 2' 8 and 1 from line 4)   | 7              |                             |
| 8                               |  | 8              |                             |

| Section B - Minimum Asset Amount |   | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1                                | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): |                |                             |
| a                                | Average monthly value of securities   | 1a             |                             |
| b                                | Average monthly cash balances   | 1b             |                             |
| c                                | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                | Discount allowed for blocks of other assets (explain in detail in Part VI):   | 1d             |                             |
| 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 (see 2' 8)   | 7              |                             |
| 8                                |   | 8              |                             |

| Section C - Distributable Amount |  |   | Current Year |
|----------------------------------|--|---|--------------|
| 1                                | Adjusted net income for prior year (from Section A, line 8, Column A)  | 1 |              |
| 2                                | Enter 85% of line 1  | 2 |              |
| 3                                | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 |              |
| 4                                | Enter greater of line 2 or line 3.                                     | 4 |              |
| 5                                | Emergency temporary reduction (see instructions)                       | 5 |              |
| 6                                | Emergency temporary reduction (see instructions).                      | 6 |              |

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

Schedule A (Form 990 or 990-EZ) 2017 **Part V** Section D - Distributions (see instructions) (continued) 17-9512152

| <b>Part V</b>                    |   | <b>Current Year</b> |
|----------------------------------|---|---------------------|
| <b>Section D - Distributions</b> |   |                     |
| 1                                | Amounts paid to supported organizations to accomplish exempt purposes   |                     |
| 2                                | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity |                     |
| 3                                | Administrative expenses paid to accomplish exempt purposes of supported organizations   |                     |
| 4                                | Amounts paid to acquire exempt-use assets   |                     |
| 5                                | Qualifying distributions (amount (prior 7) or 2017)   |                     |
| 6                                | Line 5 minus line 4   |                     |
| 7                                |   |                     |
| 8                                | Organization's distributable amount to supported organizations to which the organization is responsive                                |                     |
| 9                                | Distributable amount for 2017 from Section C, line 6  |                     |
| 10                               | Line 8 amount divided by Line 9 amount  |                     |

| <b>Section E - Distribution Allocations (see instructions)</b> |  | <b>(i)<br/>Excess Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2017</b> | <b>(iii)<br/>Distributable<br/>Amount for 2017</b> |
|--|--|-------------------------------------|---|--|
| 1  | Distributable amount for 2017 from Section C, line 6   |                                     |   |  |
| 2  | Underdistributions (amount for years prior to 2017 see instructions)   |                                     |   |  |
| 3  | Excess distributions carryover, if any, to 2017  |                                     |   |  |
| a  |  |                                     |   |  |
| b  | From 2013  |                                     |   |  |
| c  | From 2014  |                                     |   |  |
| d  | From 2015  |                                     |   |  |
| e  | From 2016 or prior   |                                     |   |  |
| f  |  |                                     |   |  |
| g  | Applied to underdistributions of prior years   |                                     |   |  |
| h  | Applied to 2017 distributable amount   |                                     |   |  |
| i  | Carryover from 2012 not applied (see instructions)   |                                     |   |  |
| j  | Remainder. Subtract lines 3g, 3h, and 3i from 3f.  |                                     |   |  |
| 4  | Distributions for 2017 from Section D, line 7: \$  |                                     |   |  |
| a  | Applied to underdistributions of prior years   |                                     |   |  |
| b  | Applied to 2017 distributable amount   |                                     |   |  |
| c  | Remainder. Subtract lines 4a and 4b from 4   |                                     |   |  |
| 5  | Remaining underdistributions for years prior to 2017, if any. Subtract lines 4a and 4b from line 3f.   |                                     |   |  |
| 6  | Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 3f. If the result is greater than zero, explain in excess distributions column on 990-EZ |                                     |   |  |
| 7  |  |                                     |   |  |
|  | and 4c.  |                                     |   |  |
| 8  | Breakdown of line 7.   |                                     |   |  |
| a  | Excess from 2013   |                                     |   |  |
| b  | Excess from 2014   |                                     |   |  |
| c  | Excess from 2015   |                                     |   |  |
| d  | Excess from 2016   |                                     |   |  |
| e  | Excess from 2017   |                                     |   |  |

Schedule A (Form 990 or 990-EZ) 2017 **Part VI** **Additional Information** Provide the explanations required by Part II, line 10; Part II, line 12a or 12b; Part

**Part VI**

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.)

Lined area for providing additional information.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Edison ... Employer identification number 27-0612152

Part I

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate value of contributions, grants, and total value.

Part II

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7

Form for Conservation Easements with multiple sections for purpose, monitoring, and expenses.

Part III

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

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

Form for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

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

Schedule D (Form 990) 2017

EEA

**Part III**

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 6 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

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

**Part V Endowment Funds.**

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_ %
  - b Permanent endowment \_\_\_\_\_ %
  - c Temporarily restricted endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) unrelated organizations   | 3a(i)  |    |
| (ii) related organizations  | 3a(ii) |    |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 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 |
|--------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land                  |                                      |                                 |                              |                |
| b Buildings              |                                      |                                 |                              |                |
| c Leasehold improvements |                                      |                                 |                              |                |
| d Equipment              |                                      | 13,373                          | 3,203                        | 10,170         |
| e Other                  |                                      |                                 |                              |                |
|                          |                                      |                                 |                              | 10,170         |

Schedule D (Form 990) 2017

Edison Academics Inc

27-0612152

**Part VII** Investments - Other Securities.

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

| (a) Description of security or category<br>(including name of security) | (b) Book value | (c) Method of valuation<br>Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives   |                |   |
| (2) Closely-held equity interests                                       |                |   |
| (3) Other   |                |   |
| (A)   |                |   |
| (B)   |                |   |
| (C)   |                |   |
| (D)   |                |   |
| (E)   |                |   |
| (F)   |                |   |
| (G)   |                |   |
| (H)   |                |   |

**Part VIII** Investments - Program Related.

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

| (a) Description of investment | (b) Book value | (c) Method of valuation<br>Cost or end-of-year market value |
|-------------------------------|----------------|---|
| (1)                           |                |   |
| (2)                           |                |   |
| (3)                           |                |   |
| (4)                           |                |   |
| (5)                           |                |   |
| (6)                           |                |   |
| (7)                           |                |   |
| (8)                           |                |   |
| (9)                           |                |   |

**Part IX** Other Assets.

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

| (a) Description | (b) Book value |
|-----------------|----------------|
| (1)             |                |
| (2)             |                |
| (3)             |                |
| (4)             |                |
| (5)             |                |
| (6)             |                |
| (7)             |                |
| (8)             |                |
| (9)             |                |

**Part X** Other Liabilities.

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

| 1. (a) Description of liability | (b) Book value |
|---------------------------------|----------------|
| (1) Federal income taxes        |                |
| (2)                             |                |
| (3)                             |                |
| (4)                             |                |
| (5)                             |                |
| (6)                             |                |
| (7)                             |                |
| (8)                             |                |
| (9)                             |                |

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



**SCHEDULE E**  
**(Form 990 or 990-EZ)**

**Schools**

OMB No 1545-0047

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**  
**GO TO PART III OF FORM 990 OR FORM 990-EZ FOR INSTRUCTIONS.**

Name of the organization

Employer identification number

**Edison Academics Inc**

**27-0612152**

**Part I**

|   | YES | NO |
|---|-----|----|
| 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?   | X   |    |
| 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?  | X   |    |
| 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II | X   |    |
| 4 Does the organization maintain the following?   |     |    |
| a Records indicating the racial composition of the student body, faculty, and administrative staff?   | X   |    |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?   | X   |    |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?   | X   |    |
| d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II  | X   |    |
| 5 Does the organization discriminate by race in any way with respect to:  |     |    |
| a Students' rights or privileges?   |     | X  |
| b Admissions policies?  |     | X  |
| c Employment of faculty or administrative staff?  |     | X  |
| d Scholarships or other financial assistance?   |     | X  |
| e Educational policies?   |     | X  |
| f Use of facilities?  |     | X  |
| g Athletic programs?  |     | X  |
| h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.   |     | X  |
| 6a Does the organization receive any financial aid or assistance from a governmental agency?  | X   |    |
| b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II.  |     | X  |
| 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II   | X   |    |

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

Schedule E (Form 990 or 990-EZ) 2017

EEA

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

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

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

Go to [www.irs.gov/form990](http://www.irs.gov/form990) for more information.

OMB No 1545-0047

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

Employer identification number

**Edison Academics Inc**

**27-0612152**

**01. Officer, directors, etc. family relationship (Part VI, line 2)**

Loren Jackson and Paula Jackson are a married couple. Loren C Jackson and Ai-Ja Jackson are their children.

**02. Form 990 governing body review (Part VI, line 11)**

Form 990 was reviewed by members of the Board before it was submitted to the IRS.

**03. Conflict of interest policy compliance (Part VI, line 12c)**

All members of the Board must sign a conflict of interest policy annually.

**04. CEO, executive director, top management comp (Part VI, line 15a)**

Members of the Board and top management are not compensated.

**05. Form 990 availability to public (Part VI, line 18)**

Form 990 is available upon written request.

**06. Governing documents, etc. available to public (Part VI, line 19)**

Documents are available upon written request.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 33, 34, 35b, 36, or 37.

Go to [www.irs.gov/efile](#) for the latest instructions.

OMB No 1545-0047  
**2017**

Open to Public Inspection

Name of the organization: **Edi 500 Sports Foundation of Distinguished Equine** Complete if the organization answered "Yes" on Form 990, Part IV, lines 33, 34, 35b, 36, or 37.  
Employer identification number: **27-0612152**

**Part I**

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity | (b)<br>Primary activity | (c)<br>Legal form (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
| (1)   |                         |  |                     |                           |                                  |
| (2)   |                         |  |                     |                           |                                  |
| (3)   |                         |  |                     |                           |                                  |
| (4)   |                         |  |                     |                           |                                  |
| (5)   |                         |  |                     |                           |                                  |

**Part II**

one or more related tax-exempt organizations during the tax year.

| (a)<br>Name, address, and EIN of related organization  | (b)<br>Primary activity | (c)<br>Legal form (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Sec. 512(b)(13) controlled entity? |    |
|--|-------------------------|--|----------------------------|---|----------------------------------|---|----|
|  |                         |  |                            |   |                                  | Yes                                       | No |
| (1) Sarasota Wave Youth Sports Foundat, 11-3796686<br>3547 53RD AVE W<br>Bradenton, FL 34210 | Sports Training         | FL   | 501(c)(3)                  | 7   | M/A                              |   | X  |
| (2)  |                         |  |                            |   |                                  |   |    |
| (3)  |                         |  |                            |   |                                  |   |    |
| (4)  |                         |  |                            |   |                                  |   |    |
| (5)  |                         |  |                            |   |                                  |   |    |

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

Schedule R (Form 990) 2017

| (1) | (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Predominant income (related, unrelated, excluded from tax under sections 512(b)(13)) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disprop-<br>ortionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>Gen. or managing partner? |    | (k)<br>% ownership |
|-----|---|-------------------------|--|----------------------------------|---|------------------------------|------------------------------------|---|----|--|----------------------------------|----|--------------------|
|     |   |                         |  |                                  |   |                              |                                    | Yes                                       | No |  | Yes                              | No |                    |
| (1) |   |                         |  |                                  |   |                              |                                    |   |    |  |                                  |    |                    |
| (2) |   |                         |  |                                  |   |                              |                                    |   |    |  |                                  |    |                    |
| (3) |   |                         |  |                                  |   |                              |                                    |   |    |  |                                  |    |                    |
| (4) |   |                         |  |                                  |   |                              |                                    |   |    |  |                                  |    |                    |
| (5) |   |                         |  |                                  |   |                              |                                    |   |    |  |                                  |    |                    |

| (1) | (a)<br>Name, address, and EIN of related organization                                   | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Type of entity (C corp, S corp, or trust) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Percentage ownership | (i)<br>Sec. 512(b)(13) controlled entity? |    |
|-----|---|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|---|----|
|     |   |                         |  |                                  |  |                              |                                    |                             | Yes                                       | No |
| (1) | Victory Rock Prep Inc, 46-2830205<br>4156 53rd Ave West Apt 1108<br>Bradenton, FL 34208 | Sports Training         | FL   | N/A                              | S Corp   |                              |                                    |                             |   |    |
| (2) |   |                         |  |                                  |  |                              |                                    |                             |   |    |
| (3) |   |                         |  |                                  |  |                              |                                    |                             |   |    |
| (4) |   |                         |  |                                  |  |                              |                                    |                             |   |    |
| (5) |   |                         |  |                                  |  |                              |                                    |                             |   |    |

