| Form | 990-T | E | empt Organization (and proxy tax | | siness Income der section 6033(| | 'n | OMB No 1545-0687 | | |
|----------------------|---------------------------------------|--|---|----------|--|--|------------------|--|--|--|
| • | | For calendar year 2016 or other tax year beginning $01/01$, 2016, and ending $12/31$, 20 1 | | | | | | 201 6 | | |
| Depar | tment of the Treasury | ► Int | formation about Form 990-T and | 90t. | | | | | | |
| Interna | al Revenue Service | Do Do | not enter SSN numbers on this form | :)(3). | Open to Public Inspection for 501(c)(3) Organizations Only | | | | | |
| A | Check box if address changed | | Name of organization (Check b | ox if na | me changed and see instruction | s) | | loyer identification number loyees' trust, see instructions) | | |
| | |] |] | | | | , , , . | -,, | | |
| | empt under section | Daims | THE GEORGE LUCAS EL | | | | | | | |
| X | 501(C)(3) | Print | Number, street, and room or suite no | | 065687 | | | | | |
| | 408(e) 220(e) | Type | D 0 D0W 2404 | | lated business activity codes natructions) | | | | | |
| <u> </u> | 408A530(a) |) | P.O. BOX 3494 | | | | | | | |
| | 529(a) | - | City or town, state or province, countr | • | ZIP or foreign postal code | Ţ | E111 | 20 | | |
| | ok value of all assets and of year | F C | SAN RAFAEL, CA 9491 | | | | 2111 | 511120 | | |
| | 4 095 120 | | up exemption number (See instruct | | | | 1.044 | | | |
| | | | ck organization type X 501 | | | | 401(a) | trust Other trust | | |
| | | | rimary unrelated business activity | | | | | Yes X No | | |
| | | | corporation a subsidiary in an affil | | • | controlled group? | · · · · · | Yes X No | | |
| | res, enter the name books are in car | | identifying number of the parent co | rporati | | e number ▶ 41 | 5-662 | _1614 | | |
| | | | or Business Income | | | | | | | |
| | | | | 1 | (A) Income | (B) Expen | ses | (C) Net | | |
| 1a | Gross receipts or | | C Balance ▶ | ۱., | | , | * | | | |
| ь 2 | Less returns and allows | | | | | | -, | | | |
| 3 | | | ule A, line 7) | _ | | | * | | | |
| 4 a | | | ttach Schedule D) | 4a | | ٠ بـ سون | | | | |
| b | | | Part II, line 17) (attach Form 4797) | 4b | | <u> </u> | 1 . F | RECEIVED | | |
| c | | | rusts | 4c | | | | S | | |
| 5 | | | os and S corporations (attach statement) | | | * | 8 | SEP 1 3 2017 9 | | |
| 6 | | | | 6 | | | <u> </u> | 3 - 1 - 1 - 1 - 1 - 1 - 1 | | |
| 7 | | | come (Schedule E) | 7 | | | | | | |
| 8 | | | its from controlled organizations (Schedule F) | 8 | , | | | GDEN, UL | | |
| 9 | | | 1(c)(7), (9), or (17) organization (Schedule G) | | | | | | | |
| 10 | Exploited exempt | activity in | ncome (Schedule I) | 10 | | | | | | |
| 11 | | | ule J) | 11 | 638,602. | 37 | 4,427 | . 264,175. | | |
| 12 | Other income (Se | e instruc | tions, attach schedule) | 12 | | | | | | |
| 13 | | | ough 12 | 13 | 638,602. | | 4,427 | | | |
| Par | | | Taken Elsewhere (See insti | | | | xcept f | for contributions, | | |
| | deduction | is must | be directly connected with t | he ur | related business inco | me) | | | | |
| 14 | Compensation of | officers, | directors, and trustees (Schedule K) | | | | . 14 | | | |
| 15 | Salaries and wage | es | | | • • • • • • • • • • • • • | | . 15 | | | |
| 16 | = | | | | | | | | | |
| 17 | | | | | | | · | | | |
| કોલ્મજારા <u>ન્ય</u> | | | | | | | | | | |
| (19 (2) | | | | | | | | | | |
| 20 | | - | See instructions for limitation rules) | | 1 1 | | . 20 | | | |
| (2) | Depreciation (atta | acn Form | 4562) | | 21 | | | | | |
| ij | | | on Schedule A and elsewhere on re | | | | 22b | | | |
| 23 224 | | | | | | | | | | |
| 724 T25 | | | compensation plans | | | | | | | |
| 26 26 | | | Schedule I). | | | | | | | |
| ±40 £27 | | | | | | | | 264,175. | | |
| <u>√</u> 28 | | | chedule J) | | | | | † | | |
| | | | s 14 through 28 | | | | | 264,175. | | |
| 30 | | | le income before net operating | | | | | | | |
| 31 | | | on (limited to the amount on line 30 | | | | | | | |
| 32 | | | e income before specific deduction | | | | | | | |
| 33 | | | ally \$1,000, but see line 33 instruc | | | | | | | |
| 34 | | | ble income. Subtract line 33 from | | | | | | | |
| | | | line 32 | | • | | · | 0. | | |
| F D | | | otico see instructions | | | | | 000 7 | | |

For Paperwork Reduction Act Notice, see instructions.

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Form 990-T (2016)

PAGE

| Form 990-T (2016) | | · | | | | | | | F | age 3 |
|--|---|----------------|----------------|---|--|---|---|-------------------------------|---------------|--------------|
| Schedule A - Cost of G | oods Sold. E | nter metho | d of invent | ory valuation | > | _ _ | | | | |
| 1 Inventory at beginning of y | rear . 1 | | | 6 Inventory | at end of ye | ar | 6 | | | |
| 2 Purchases 2 | | | 7 Cost of | goods so | old. Subtract line | | | | | |
| 3 Cost of labor | 3 Cost of labor | | | 6 from | line 5 Er | nter here and in | | | | |
| 4a Additional section 263A costs | | | | Part I, line 2 | | | | | | |
| (attach schedule) 4a | | | | | | | | | | No |
| b Other costs (attach schedu | property produced or acquired for resale) apply | | | | | | | | | |
| 5 Total. Add lines 1 through | | | | to the org | anization?. | <u> </u> | | <u> </u> | | X |
| Schedule C - Rent Income (see instructions) | (From Real F | Property a | nd Perso | nal Property | Leased V | With Real Prope | rty) | | | |
| _ `` | | | | | | | | | | |
| 1. Description of property | | | | | | | | | | |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | _ | |
| (4) | | | | | | | | | | |
| | 2. Rent rece | ived or accru | ed | | | | | | | |
| (a) From personal property (if the for personal property is more the more than 50%) | an 10% but not | percent | age of rent fo | d personal property (if the or personal property exceeds in columns 2(a) and 2(b) (all saled on profit or income) | | | | | me | |
| (1) | | - | | | | | | | | |
| (2) | | | | | | | | . , . , | | |
| (3) | | } | | | | | | | | |
| (4) | | | | | | | | | | |
| Total | | Total | ······ | | | | | | | |
| (c) Total income. Add totals of co | dumns 2(a) and 2 | | | | | (b) Total deduction | | | | |
| here and on page 1, Part I, line 6 | ` ' | ` ' | | | | Enter here and or Part I, line 6, colu | | | | |
| Schedule E - Unrelated De | | | e instructi | ons) | | 1 | | <u> </u> | | |
| | | | Ţ | income from or | 3 Deductions directly connected with or allocable to | | | | | |
| 1. Description of deb | t-financed property | | 1 | allocable to debt-financed | (a) Straigl | debt-finani ht line depreciation | (b) Other deductions | | ione | |
| | | | property | | (attach schedule) | | (attach schedule) | | | |
| (1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | | | 4 | . Column divided column 5 7. Gross income reportable (column 2 x column 6) | | | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) | | ns | |
| (1) | | | | % | | | | | | |
| (2) | | | | % | | | | | | |
| (3) | | | | % | | | | | | |
| (4) | | | | % | | | | | | |
| | | | | | | e and on page 1, e 7, column (A) | | here and on , line 7, colu | | |
| Totals | ons included in c | | | · · · · · · · · · | | | | Form 990 | 0-T (: | 2016) |

| Schedule F - Interest, Annui . 1 Name of controlled organization (1) (2) (3) (4) Nonexempt Controlled Organization | 2. Employer identification numb | E | xempt Co | | ganızatı 4 Total | ons of specified | 5. Part o | f column 4 th | at is | 6. Deductions directly | |
|--|---|-----------------------------|---|---|--|--|--|----------------------------------|--|--|--|
| organization (1) (2) (3) (4) | identification numb | | 3. Net unrei | ated income | 4 Total | of specified | ľ | | | 1 | |
| (2) (3) (4) | | | | | rganizations 4 Total of specified payments made | | 5. Part of column 4 that is included in the controlling organization's gross incom | | _ | connected with income | |
| (2) (3) (4) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| (4) | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | L | | L | | | | |
| 7 Taxable Income (loss) (see instructions) | | | Total of specified payments made | | | 10 Part of column 9 the included in the control organization's gross included. | | ntrolling | | Deductions directly innected with income in column 10 | |
| (1) | | | 1 | | | | | | | | |
| (2) | | | \ | | | | | | | | |
| (3) | | | ļ | | | | | | | | |
| (4) | | | | | | | | | | | |
| Totals | come of a Sec | | 01(c)(7). | (9), or (17 | ▶) Orga | Enter h Part I, | elere and on line 8, colu | page 1, mn (A) | Ent | id columns 6 and 11 er here and on page 1, rt I, line 8, column (B) | |
| 1 Description of income | | | 3 Deductions | | | 4, Se | t-asides schedule) | | 5. Total deductions and set-asides (col 3 plus col 4) | | |
| (1) | | | | | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| (4) | | | | | | | | | | | |
| | Enter here and Part I, line 9, c | | | | | .+ | ·, | * | , | Enter here and on page 1 Part I, line 9, column (B) | |
| Totals ▶ Schedule I - Exploited Exer | mpt Activity In | come, | Other Th | an Adverti | sing In | come (s | ee instru | ctions) | | | |
| Description of exploited activity | 2. Gross unrelated business income from trade or business | dı conne prodi uni | penses rectly cted with uction of elated ss income | 4. Net inconfrom unrelat or business 2 minus collif a gain, colois 5 thro | ed tradé (column umn 3) ompute | 5. Gross from act is not ui business | ivity that rrelated | ne 6 Expenses at attributable to | | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) | |
| (1) | | | | | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | <u> </u> | | | | | | | |
| (4) | | | | | | | | | | | |
| | Enter here and on page 1, Part I, line 10, col (A) | page | ere and on 1, Part I,), col (B) | | | - | | | | Enter here and on page 1, Part II, line 26 | |
| Totals ▶ Schedule J - Advertising Inc | como (nos instri | uctions\ | | <u> </u> | | | | | | 1 | |
| | | | Consol | idated Bac | | | | | | | |
| Part I Income From Perio | odicais Report | eu on a | Consoi | idated bas | SIS | | | | | | |
| 1 Name of periodical | 2. Gross advertising income | | Direct sing costs | 4. Advert gain or (los 2 minus co a gain, cor cols 5 thro | s) (col ol 3) if npute | 5. Circulation 6. Readership income costs | | | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) | | |
| (1) | | | | 1 | | | | | _ | | |
| (2) | | | | 1 | | | | | | 7 | |
| (3) | | | | 1 | | | | | | 7 . | |
| (4) | | | | 1 | | | | | | 7 | |
| ··· | | | | | | | | | | | |
| Totals (carry to Part II, line (5)) | | | | | | | | | | Form 990-T (2016 | |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-----------------------------|--|--|---|-----------------------|------------------------|---|
| (1) EDUTOPIA ONLINE | 638,602. | 374,427. | 264,175. | | 7,278,583. | 264,175. |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | | | | | | |
| | Enter here and on page 1, Part I, line 11, col (A) | Enter here and on page 1, Part I, inne 11, col (B) | | | | Enter here and on page 1, Part II, line 27 |
| Totals, Part II (lines 1-5) | 638,602. | 374,427. | | : | • | 264,175. |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | Percent of time devoted to business | Compensation attributable to unrelated business |
|--|----------|---|--|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1. Part II, line 14. | | | |

Form 990-T (2016)