# Form **990-T**

## **Exempt Organization Business Income Tax Return** (and proxy tax under section 6033(e))

For calendar year 2009 or other tax year beginning 7/01

2009

OMB No. 1545-0687

and ending 6/30, 2010

Open to Public Inspection for

	al Revenue Service (77)		► See sepa	arate i	nstructions.					501(c)(3) Org	anizations Only
	Check box if address changed Exempt under section  X 501( C )( 3 )	Print or	CSU FULLERTON AUXILIARY SERVICES CORP. 2600 NUTWOOD AVENUE #275 FULLERTON, CA 92831						D Employer identification number (Employees' trust, see instructions for Block D.) 952081258		
	408(e) 220(e) 408A 530(a)	Туре	FULLERION, CA 92831	E	E Unrelated business activity codes (See instructions for Block E.) 722320						
2	Book value of all assets at end of year F Group exemption number (See instructions for Block F.)										
	77,004,720.	G Check	k organization type ► X	501(c)	corporation	501	(c) trust	401	(a)	trust	Other trust
Describe the organization's primary unrelated business activity.  CATERING, OFF CAMPUS  During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group.										<b>.</b> .	[ <del>V]</del> ,,
						subsidi	ary controlled of	group	o∦	. ► ∐Y€	es XNo
			fying number of the parent corp	ooratio	ח ▶						
<u> </u>	The books are in care of					Т	elephone numb	oer►	65	7-278-	4140
<sup>o</sup> ar	t I Unrelated Tra	ade or E	Business Income		(A) Incom	е	(B) Exper	ises		(C	C) Net
1:	a Gross receipts or sales	5	181,614.								
-	b Less returns and allowances.		c Balance ►	1 c	181,	614.					
			line 7)	2		689.					
	,	,	1 line 1c	3	132,		<del> </del>				132,925.
	,			-	152,	<i>J</i> 2 <i>J</i> .					102,020.
			Schedule D)	4a			1				
1	<b>b</b> Net gain (loss) (Form 4797, F	Part II, line 1	7) (attach Form 4797)	4b							
				4 c							
5	Income (loss) from par	tnerships	and S corporations	5							
_	,			6			 		3300000	<b> </b>	
					<u> </u>						
			(Schedule E)	7						<b></b>	
8	Interest, annuities, roy		d rents from controlled	8							
9	•	•	, (9), or (17) organization (Sch G)	9							
_				10							
10		-	e (Schedule I)	11							
		-		11					300000		
12	Other income (See ins	tructions;	attach schedule.)								
				12							100 005
			12	13	132,				0.		<u>132,925.</u>
	(Except for c	ontributi	en Elsewhere (See instru ons, deductions must be	direc	tly connected	d with	the unrelate	ed b	usi	ness inc	ome.)
14	Compensation of office	ers, directo	ors, and trustees (Schedule K).					. L	14		
15	Salaries and wages								15		127,281.
16	Repairs and maintenar	nce							16		2,981.
17	•								17		6.
18								-	18		
19	·	-							19		313.
20			structions for limitation rules.).						20		
21		•			1		3,534				
			chedule A and elsewhere on ret				3,33		22b		3,534.
22	•								23		
23								-			
24		•	nsation plans					-	24	<del> </del>	
25									25		
26		,	dule I)						26		
27	Excess readership cos	ts (Schedi	ule J)						27		
28			ıle)						28		90,680.
29			hrough 28					-	29		224,795.
30			me before net operating loss de						30		<u>-91,870.</u>
31		,	nited to the amount on line 30).					-	31		
32	Unrelated business tax	able incor	me before specific deduction. S	ubtrad	ct line 31 from lii	ne 30.			32		-91,870.
33	•	-	,000, but see line 33 instruction						33		
34			ome. Subtract line 33 from line						34		-91,870.

Pan	III Tax Computation				-				
35	Organizations Taxable as Corporations. S	see instructions for tax computation							
	Controlled group members (sections 1561								
а	Enter your share of the \$50,000, \$25,000,	and \$9,925,000 taxable income bra	ackets (in that order)						
	(1)  \$ (2)  \$	(3)  \$							
b	Enter organization's share of: (1) Additiona								
	(2) Additional 3% tax (not more than \$100,								
С	Income tax on the amount on line 34			► 35 c	0.				
36	Trusts Taxable at Trust Rates. See instruc								
	on line 34 from: Tax rate schedule of	or Schedule D (Form 1041).	*****	▶ 36					
37	Proxy tax. See instructions			▶ 37					
38	Alternative minimum tax								
39	Total. Add lines 37 and 38 to line 35c or 36	6, whichever applies		39	0.				
Parl	IV Tax and Payments								
	Foreign tax credit (corporations attach Foreign tax credit (corporations)	m 1118; trusts attach Form 1116)	40a						
	Other credits (see instructions)								
	General business credit. Attach Form 3800								
	Credit for prior year minimum tax (attach F								
	Total credits. Add lines 40a through 40d			40€	0.				
	Subtract line 40e from line 39				0.				
42	Other taxes. Check if from: Form 425	5 Form 8611. Form 8697	7 Form 8866						
1.70	Other (attach schedule)								
43	Total tax. Add lines 41 and 42				0.				
	Payments: A 2008 overpayment credited								
	2009 estimated tax payments								
	Tax deposited with Form 8868								
	Foreign organizations: Tax paid or withheld								
	Backup withholding (see instructions)								
		orm 2439							
	Form 4136 Ot	therTotal	▶ 44f						
15	Total payments. Add lines 44a through 44f			45	0.				
	Estimated tax penalty (see instructions). C								
46				_					
		7 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed							
48	O 1 16 1: 4F : 1	1-1-1-41: 12 16 1	nak ayrama atal	<b>►</b> 40					
	Overpayment. If line 45 is larger than the			o an an an an					
49	<b>Overpayment.</b> If line 45 is larger than the Enter the amount of line 48 you want: <b>Cree</b>			248 Refunded ► 49					
49	Enter the amount of line 48 you want: Cree	dited to 2010 estimated tax ▶	F	Refunded ► 49					
49 Parl	Enter the amount of line 48 you want: Cred  V Statements Regarding Certain	dited to 2010 estimated tax ► in Activities and Other Infor	mation (see instruc	Refunded ► 49 etions.)					
49 Parl	Enter the amount of line 48 you want: Cred  V Statements Regarding Certa  At any time during the 2009 calendar year,	in Activities and Other Infor, did the organization have an inter	mation (see instruction est in or a signature	Refunded ► 49 ctions.) or other authority					
49 Parl	Enter the amount of line 48 you want: Cred  V Statements Regarding Certain At any time during the 2009 calendar year, financial account (bank, securities, or other	in Activities and Other Information, did the organization have an interery in a foreign country? If YES, the	mation (see instruction or a signature organization may ha	Refunded ► 49 ctions.) or other authority	D F 90-22.1				
49 Parl	Enter the amount of line 48 you want: Cred  V Statements Regarding Certa  At any time during the 2009 calendar year,	in Activities and Other Information, did the organization have an interery in a foreign country? If YES, the	mation (see instruction or a signature organization may ha	Refunded ► 49 ctions.) or other authority	D F 90-22.1				
49 Part 1	Enter the amount of line 48 you want: Cred  V Statements Regarding Certain At any time during the 2009 calendar year, financial account (bank, securities, or other	in Activities and Other Inform, did the organization have an interer) in a foreign country? If YES, the lif YES, enter the name of the foreign	mation (see instruction and instruction) (see instruction or a signature organization may had country here	etions.)  or other authority ave to file Form T	D F 90-22.1				
49 Part 1	Enter the amount of line 48 you want: Cree  V Statements Regarding Certal  At any time during the 2009 calendar year, financial account (bank, securities, or othe Report of Foreign Bank and Financial Accounts.	in Activities and Other Infor, did the organization have an interer, in a foreign country? If YES, the If YES, enter the name of the foreign eceive a distribution from, or was it	mation (see instruction or a signature organization may has country herethe grantor of, or tra	etions.)  or other authority ave to file Form T	D F 90-22.1				
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9 Parl 1 2 3	Enter the amount of line 48 you want: Creative Statements Regarding Certal At any time during the 2009 calendar year, financial account (bank, securities, or othe Report of Foreign Bank and Financial Accounts. During the tax year, did the organization relif YES, see the instructions for other forms Enter the amount of tax-exempt interest religious.	in Activities and Other Inform, did the organization have an interer) in a foreign country? If YES, the leceive a distribution from, or was it to the organization may have to file, eccived or accrued during the tax years.	mation (see instruction or a signature organization may ha country herethe grantor of, or traction are \$\$\$	etions.) or other authority ave to file Form T  ansferor to, a fore  0.	D F 90-22.1. X				
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9 Part 1 2 3 Sch 1	Enter the amount of line 48 you want: Create  Statements Regarding Certal  At any time during the 2009 calendar year, financial account (bank, securities, or othe Report of Foreign Bank and Financial Accounts. During the tax year, did the organization relif YES, see the instructions for other forms Enter the amount of tax-exempt interest reledule A — Cost of Goods Sold. Enter Inventory at beginning of year	in Activities and Other Information, did the organization have an interest in a foreign country? If YES, the If YES, enter the name of the foreign eceive a distribution from, or was it is the organization may have to file. Eceived or accrued during the tax year method of inventory valuation to the country of the country of the country valuation to the country of t	mation (see instruction or a signature organization may has country here the grantor of, or tracear ►\$  RETAIL INV	etions.) or other authority ave to file Form T  ansferor to, a fore  0.  ENTORY METHORY 6	D F 90-22.1. X				
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9 Part 1 2 3 Sch 1 2 3 4 a	At any time during the 2009 calendar year, financial account (bank, securities, or othe Report of Foreign Bank and Financial Accounts. During the tax year, did the organization relif YES, see the instructions for other forms Enter the amount of tax-exempt interest reledule A — Cost of Goods Sold. Ent Inventory at beginning of year.  Purchases  Cost of labor  Additional section 263A costs (attach schedule)	in Activities and Other Information, did the organization have an intereral in a foreign country? If YES, the If YES, enter the name of the foreign eceive a distribution from, or was it is the organization may have to file, eceived or accrued during the tax year method of inventory valuation to the inventory valuatio	mation (see instruction of a signature organization may has country here	ctions.) or other authority ave to file Form T  ansferor to, a fore  0.  ENTORY METHEM ear. 6  Subtract other here 7  on 263A (with researcquired for research)	TD F 90-22.1 X eign trust?. X HOD 1,163. 48,689. Yes No				
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49 Part 1 2 3 Sch 1 2 3 4a b 5	Statements Regarding Certal At any time during the 2009 calendar year, financial account (bank, securities, or othe Report of Foreign Bank and Financial Accounts. During the tax year, did the organization relif YES, see the instructions for other forms Enter the amount of tax-exempt interest reledule A — Cost of Goods Sold. Ent Inventory at beginning of year.  Purchases.  Cost of labor.  Additional section 263A costs (attach schedule)  Other costs (attach sch) — Total. Add lines 1 through 4b.  Under penalties of perjury 1 declare that I have correct, and complete. Declaration of preparer (correct, and correct)	in Activities and Other Information, did the organization have an intereral in a foreign country? If YES, the If YES, enter the name of the foreign eceive a distribution from, or was it is the organization may have to file. If YES, the organization may have to file. If YES, enter the name of the foreign eceive a distribution from, or was it is the organization may have to file. If YES, the organization may ha	mation (see instruction or a signature organization may has country here	ctions.) or other authority ave to file Form T  ansferor to, a force  O.  ENTORY METHE ear. 6 Subtract titer here 7  on 263A (with rese acquired for rese acquired for rese and to the best of my k knowledge.	eign trust?.  All All All All All All All All All Al				
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Schedule C - Rent Income	(From Real Prop	erty and Pers	sonal Pro	perty Leased	With	Real Propert	(See in	nstructions)	
1 Description of property						•			
	.,,,,								
(1)									
(2)									
(4)									
(4)	2 Rent received	d or accrued	***************************************						
(a) From personal pr			eal and pe	rsonal property	,	<b>3(a)</b> De	ductions	directly connected	
(a) From personal pr (if the percentage of rent property is more than not more than 50	for personal 10% but )%)	real and personal property percentage of rent for property exceeds 50% or s based on profit or income)			with the income in columns 2(a) and 2(b) (attach schedule)				
(1)									
(2)									
(3)									
<b>(4)</b> Total	  T	 otal							
(c) Total income. Add totals of here and on page 1, Part I, line	columns 2(a) and 2	2(b). Enter				(b) Total deduction here and on page 1, line 6, column (	1. Part	•	
Schedule E - Unrelated			e instructio	ins)		, ,			
	ebt-financed prope		2 Gross	income from	3 De	ductions direct debt	ly conne financec	cted with or allocable to I property	
			debt-fina	anced property	depre	(a) Straight line reciation (attach sch)		(b) Other deductions (attach schedule)	
(1)									
(2)									
(3)									
4 Amount of overego	E Average edi	usted basis of	60	Saluman A	-	Cross incom		• Allegable deductions	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable to	debt-financed di		olumn 4 ided by iumn 5 (co		<b>7</b> Gross income reportable (column 2 x column 6)		8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)				용					
(2)				%					
(3)				왕					
_(4)				왕					
Totals Total dividends-received dedu					Part I,	line 7, column	n (A).  Pa	nter here and on page 1, art I, line 7, column (B).	
Schedule F – Interest, A	Marine	*						ructions)	
		Exempt Cont							
1 Name of Controlled Organization	1 Name of Controlled 2 Employer 3 New Supering S		t unrelated # Total of specifi payments made nstructions)		ecified nade	sified 5 Part of column that is included in the controllin organization's gross income		6 Deductions directly connected with income in column 5	
(1)									
(2)									
(3)									
Nonexempt Controlled Organiza	ations							<u> </u>	
Nonexempt Controlled Organizations  7 Taxable Income  8 Net unrelated income (loss) paymen (see instructions)		its'made included in th		in the			11 Deductions directly connected with income in column 10		
(1)				-					
(2)									
(3)									
(4)	MANUTE			Add column here and on 8, column (A	page	1 10. Enter 1, Part I, line	Add co here ar 8, colui	lumns 6 and 11. Enter nd on page 1, part I, line	
Totals	, , , , , , , , , , , , , , , , , , , ,			, ooiami (r	Α,		, solui	····· \□/·	

Schedule G - Investment Inc	ome of a Sectio	n 501	(c)(7), (9	3), or (17) Orga	anization (see i	nstructi	ons)	
1 Description of income	2 Amount of inc	ome	direc	Deductions tly connected ach schedule)	<b>4</b> Set-aside (attach sched		e) 5 Total deductions and set-asides (column 3 plus column 4)	
(1)			, , , , , , , , , , , , , , , , , , , ,					
(2)								
(3)								
(4)								
	Enter here and on	page 1,					Enter he	re and on page 1,
	Part I, line 9, colur	nn (A).					Part I, II	ne 9, column (B).
Totals			<u> </u>		-			
Schedule I — Exploited Exem		1			·			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly with pro unrelate	connected oduction of d business come	4 Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute columns 5 through 7.	5 Gross income from activity that is not unrelated business income	attribu	penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals	Enter here and on page 1, Part I, line 10, column (A)	on p Part I	here and page 1, , line 10, mn (B).					Enter here and on page 1, Part II, line 26.
Schedule J - Advertising Inc	ome (See instruction	ons.)		I				· · · · · · · · · · · · · · · · · · ·
Part I Income From Period			Consoli	dated Basis				
1 Name of periodical	<b>2</b> Gross advertising income	adve	Direct ertising osts	4 Advertising gain or (loss) (column 2 minus column 3). If a gain, compute columns 5 through 7.	<b>5</b> Circulation income		ndership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals (carry to Part II, line (5))	<b>&gt;</b>							
Part II Income From Period through 7 on a line-by-line	basis.)		•	·	•	in Part	ll, fill in c	
<b>1</b> Name of periodical	<b>2</b> Gross advertising income	adve	Direct ertising osts	4 Advertising gain or (loss) (column 2 minus column 3). If a gain, compute columns 5 through 7.	<b>5</b> Circulation income		dership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
(5)Totals from Part I								
<b>Totals,</b> Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, column (A).	Enter I on p Part I, colur	here and age 1, line 11, nn (B).					Enter here and on page 1, Part II, line 27.
Schedule K – Compensation	of Officers, Dire	ctors.	and Tru	<b>Istees</b> (see instr	uctions)			<u> </u>
<b>1</b> Name				<b>2</b> Title	3 Percent of time devote to busines:	ed   4		ation attributable ted business
***************************************						왕		
						8		
						8		
						૪		
Total. Enter here and on page 1, Part	II, line 14					<b>&gt;</b>		

21	<b>7</b> /	ገር
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## **FEDERAL STATEMENTS**

PAGE 1

**CSU FULLERTON AUXILIARY SERVICES CORP.** 

952081258

### STATEMENT 1 FORM 990-T, PART II, LINE 28 OTHER DEDUCTIONS

ADMIN FEE ALOCATION CATERING ADMIN FEE ALOCATION PATIO COMM.	\$	28,166. 9,115.
		4,616.
DANK GUADGEG		22.
COMMICCION EVDENCE		938.
GUICEODIAL GERUITGES		7,763.
CUSTODIAL SERVICES		284.
DUES AND SUBCRIPTIONS.		88.
EDUCATION AND TRAINING.		14.
EQUIPMENT RENTAL.		988.
INSURANCE		1,353.
MAINTENANCE CONTRACTS		4,398.
MERCHANT SUPPLIES		16,304.
OFFICE SUPPLIES		376.
OTHER DIRECT COST		587.
PEST CONTROL		438.
POSTAGE		64.
PRINTING		222.
PUBLIC RELATIONS		220.
RECRUITMENT		9,135.
RENT		78.
SAFETY/ SECURITY		120.
TELEPHONE		$1,\overline{119}.$
TRAVEL		67.
TRUCK EXPENSES		229.
UTILITIES		3,976.
TOTAL	. <del>s</del>	90,680.
10 1111	• -	

### STATEMENT 2 FORM 990-T, PART II, LINE 31 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	C	RIGINAL LOSS	PRE'	LOSS VIOUSLY USED		LOSS AILABLE
6/30/95	\$	21,965.	\$	0.	\$	21,965.
6/30/96		3,326.		0.		3,326.
6/30/97		1,948.		0.		1,948.
6/30/99		105,032.		0.		105,032.
6/30/00		21,720.		0.		21,720.
6/30/01		24,388.		0.		24,388.
6/30/02		178,651.		0.		178,651.
6/30/03		9,379.		1,091.		8,288.
6/30/04		11,223.		0.		11,223.
6/30/06		71.		0.		71.
6/30/07		14,307.		0.		14,307.
6/30/08		44,503.		Ö.		44,503.
6/30/09		16,487.		ő.		16,487.
-,	AVAILABLE	±0, ±07.		0.	•	\$ 451,909.
TAXABLE INCOME	11417111111111					\$ -91,870.
	DEDUCTTON	/ITMITTED TO T	AVADTE TN	COME		رم علام رم م
NET OPERATING LOSS	DEDOCITON	(LIMITED TO T	AXABLE IN			<u>۷.</u>