

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

2011

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2011 or other tax year beginning 10/1, 2011, and ending 9/30, 2011. See separate instructions.

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) Auburn University Number, street, and room or suite no. If a P.O. box, see instructions. 211 Ingram Hall - Financial Reporting City or town, state, and ZIP code Auburn University, Alabama 36849-5161	D Employer identification number (Employees' trust, see instructions.) 6306000724
		E Unrelated business activity codes (See instructions.) See Attached
C Book value of all assets at end of year 1,241,577,442	F Group exemption number (See instructions.)	G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust

H Describe the organization's primary unrelated business activity. **Bookstore, Web Sales, Airport**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **Marcie Smith** Telephone number **334 844-5588**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales	3,449,720			
b Less returns and allowances				
c Balance		1c 3,449,720		
2 Cost of goods sold (Schedule A, line 7)		2 1,820,771		
3 Gross profit. Subtract line 2 from line 1c		3 1,628,949		1,628,949
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnerships and S corporations (attach statement)		5 (190,737)		(190,737)
6 Rent income (Schedule C)		6 218,999	144,163	74,836
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule.)		12 21,097		21,097
13 Total. Combine lines 3 through 12		13 1,678,308	144,163	1,534,145

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)		14		
15 Salaries and wages		15	687,712	
16 Repairs and maintenance		16	37,516	
17 Bad debts		17	12	
18 Interest (attach schedule)		18		
19 Taxes and licenses		19		
20 Charitable contributions (See instructions for limitation rules.)		20		
21 Depreciation (attach Form 4562)		21	40,954	
22 Less depreciation claimed on Schedule A and elsewhere on return		22a		22b 40,954
23 Depletion		23		
24 Contributions to deferred compensation plans		24		
25 Employee benefit programs		25		
26 Excess exempt expenses (Schedule I)		26		
27 Excess readership costs (Schedule J)		27		
28 Other deductions (attach schedule)		28	385,213	
29 Total deductions. Add lines 14 through 28		29	1,151,407	
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	382,738	
31 Net operating loss deduction (limited to the amount on line 30)		31	(382,738)	
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30		32	-0-	
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions.)		33		
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.		34	-0-	

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and:			
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____			
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____			
c Income tax on the amount on line 34			35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)			36
37 Proxy tax. See instructions			37
38 Alternative minimum tax			38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies			39

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40a			
b Other credits (see instructions)	40b			
c General business credit. Attach Form 3800 (see instructions)	40c			
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d			
e Total credits. Add lines 40a through 40d				40e
41 Subtract line 40e from line 39				41
42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)				42
43 Total tax. Add lines 41 and 42				43
44a Payments: A 2010 overpayment credited to 2011	44a			
b 2011 estimated tax payments	44b			
c Tax deposited with Form 8868	44c			
d Foreign organizations: Tax paid or withheld at source (see instructions)	44d			
e Backup withholding (see instructions)	44e			
f Credit for small employer health insurance premiums (Attach Form 8941)	44f			
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	44g			
45 Total payments. Add lines 44a through 44g				45
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>				46
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed				47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid				48
49 Enter the amount of line 48 you want: Credited to 2012 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>				49

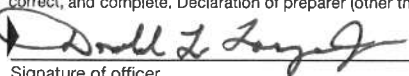
Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2011 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year	1			6 Inventory at end of year	6		
2 Purchases	2	1,828,612		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	1,828,612	
3 Cost of labor	3			8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No	
4a Additional section 263A costs (attach schedule)	4a						
b Other costs (attach schedule)	4b						
5 Total. Add lines 1 through 4b	5						

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here  **Executive VP, CFO**
 Signature of officer Date Title

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Firm's EIN		Phone no.	
Firm's address				

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

- (1) **Jule Collins Smith Museum**
- (2) **Aq Heritage Park Barn**
- (3) **Student Center**
- (4) **Auburn Arena**

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)	44,805	4,052
(2)	12,374	3,080
(3)	135,105	121,157
(4)	26,715	15,874
Total	Total 218,999	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **218,999**

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) **144,163**

Schedule E—Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (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)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		

Totals ▶

Enter here and on page 1, Part I, line 7, column (A). Enter here and on page 1, Part I, line 7, column (B).

Total dividends-received deductions included in column 8 ▶

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals ▶

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 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, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

Schedule J—Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))						

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)						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5)		Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).			Enter here and on page 1, Part II, line 27.

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

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

AUBURN UNIVERSITY

EIN: 63-6000724

Form 990-T (2011) Schedule Attachment

Page 1

Box E

Unrelated Business Bookstore	Activity Codes
Aviation	451211
Off Campus Communication	480000
Pharmaceutical Care Center	517000
Rehabilitation Center	621990
Credit Card - Commissions	624310
Rental Income	561499
	900002

Part I, line 1a, b and c

	Bookstore and Website	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Museum Gift Shop	AUM Events & Conferences	Total
Gross receipts or sales	\$1,634,503	\$1,399,966	\$88,819	\$18,092	\$128,536	\$38,314	\$141,490	\$3,449,720
Less returns and allowances	0	0	0	0	0	0	0	0
Balance	\$1,634,503	\$1,399,966	\$88,819	\$18,092	\$128,536	\$38,314	\$141,490	\$3,449,720

Part I, line 2

Schedule A-Cost Of Goods Sold	Bookstore	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Museum Gift Shop	AUM Events & Conferences	Total
2. Purchases/Cost Of Goods Sold	\$1,064,277	\$729,218		\$12,210		\$15,066		\$1,820,771

Part 1, line 5

	EIN	UBIT
Natural Gas Partners VIII, LP	20-3701566	(49,606)
Natural Gas Partners IX, LP	26-0632609	(23,432)
Lexington Capital Partners VI-A, LP	34-2047994	(10,588)
BayNorth Realty Fund VII, LP	20-5943631	(86,872)
Walton Street Real Estate Fund V,LP	20-3719884	(20,508)
Oaktree Opportunities Fund VIII AIF	51-0627157	269
Total		\$ (190,737)

Part 1, line 12

Other Income:	
Credit Card Sales - Commissions	21,097
Total Other Income	\$21,097

Part II, line 15

	Bookstore	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Credit Card Commission	Museum Gift Shop	AUM Events & Conferences	Total
Salaries And Wages	\$113,876	\$393,367	\$24,719	\$1,498	\$86,253	\$14,515	\$1,575	\$51,909	\$687,712

Part II, line 16

	Bookstore	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Credit Card Commission	Museum Gift Shop	AUM Events & Conferences	Total
Repairs And Maintenance		\$22,114	\$3,054		\$5,165	\$3,221	\$1,050	\$2,912	\$37,516

Part II, line 17

	Bookstore	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Credit Card Commission	Museum Gift Shop	AUM Events & Conferences	Total
Bad Debt	\$12								\$12

Part II, line 28

	Bookstore	Aviation	Off Campus Communication	Pharmaceutical Care Center	Rehabilitation Center	Credit Card Commission	Museum Gift Shop	AUM Events & Conferences	Total
Accounting, Legal, & Admin.	\$12,525	\$45,897	\$4,982		\$24,728	\$1,740	\$5,725	\$13,232	\$108,829
Bank Fees	47,042	18,805			62	1,754		1,496	69,159
Freight	6,925	4,140					32		11,118
Insurance	510	22,794			101	187			23,592
Marketing & Advertising	2,416	2,760				14			9,373
Membership Dues & Training	155	1,692			218	85			2,150
Other	9,324	22,446	7,736		14,581	949	466	5,953	61,455
Postage, Printing & Copying	540	449			123	181	622	2,600	4,515
Professional Services	691	290				21		72	1,074
Rental	107	3,017				202		5,037	8,599
Supplies	14,281	10,497			5,551	1,255	682		35,128
Telephone	2,269	7,944				1,121		591	12,279
Travel & Entertainment	264	1,652					851		2,767
Uniforms		1,396							1,396
Utilities		28,956	4,823						33,779
Total	\$97,049	\$172,735	\$20,417	\$576	\$45,364	\$7,530	\$8,378	\$33,164	\$385,213

Auburn University
63-6000724
Form 990-T, Part II, Line 31
Net Operating Loss deduction
For the Year ended September 30, 2011

	Loss		
Loss Year Ending	Original Loss	Previously Used	Loss Available
9/30/2002	798,660	763,498	35,162
9/30/2005	41,401	-	41,401
9/30/2006	227,851	-	227,851
9/30/2008	136,772	-	136,772
9/30/2009	144,295	-	144,295
Net Operating Loss Available			585,481
Taxable Income 9/30/11			382,738
Net Operating Loss Deduction (Limited to Taxable Income)			(382,738)
Net Operating Loss Available			202,743

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return Auburn University	Business or activity to which this form relates 451211, 480000, 517000, 621990, 624310, 561499, 900002	Identifying number 636000724
---	---	---------------------------------

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	40,775
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		4,287	5yrs	MM	S/L	89
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	90
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	40,954
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No				24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) .							25	
26 Property used more than 50% in a qualified business use:								
See Attached		%					90	
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%			S/L -			
		%			S/L -			
		%			S/L -			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 .							28	90
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 .								29

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles) .												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions):					
43 Amortization of costs that began before your 2011 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

AUBURN UNIVERSITY
EIN: 63-6000724
Form 4562 Schedule Attachment
2011

Part V, Line 26

a	b	c	d	e	f	g
Type Of Property	Date Placed in Service	Business Use Percentage	Basis	Recovery Period	Method Convention	Depreciation Deduction
2010 Ford Cargo Van	2/18/2010	100	3,738	5	S/L MM	90
						<u>90</u>

990 T (11)
Form 4562

Activity	Type	Percentage Unrelated	Original Basis	Original Depreciation	Type Of Property	Date Placed in Service	Business Use Percentage	Basis	Recovery Period	Method Convention	Depreciation Deduction
Aviation	11 GDS	0.60	7,145	149	5-year property			4,287			89
								<u>4,287</u>			<u>89</u>
Bookstore	Line 17	0.024		3,231							78
Aviation	Line 17	0.60		11,090							6,654
Tiger Card	Line 17	0.0705		51,287							3,616
Off Campus Communications	Line 17	1.00		7,988							7,988
JCS Museum	Line 17	0.07		320,563							22,439
											<u>40,775</u>
Bookstore	Listed	0.024		3,738	2010 Ford Cargo Van E-150	2/18/2010	100	0	5	SL-MM	90
											<u>90</u>

Check Figure 40,954

