



U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU
FORM
SBO-1 (08/21/2012)

2012 SURVEY OF BUSINESS OWNERS AND SELF-EMPLOYED PERSONS

OMB No. 0607-xxxx: Approval Expires xx/xx/xxxx

70 In 2012, in which language(s) did this business conduct transactions with its customers? **Mark X all that apply.**

- | | | |
|--|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> English | <input type="checkbox"/> German | <input type="checkbox"/> Portuguese |
| <input type="checkbox"/> African language(s) | <input type="checkbox"/> Hindi/Urdu | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Italian | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Japanese | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> French | <input type="checkbox"/> Korean | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> French Creole | <input type="checkbox"/> Polish | <input type="checkbox"/> Other |

71 In 2012, which of the following types of workers were used by this business? **Mark X all that apply.**

- Full-time paid employees
- Part-time paid employees
- Paid day laborers
- Temporary staffing obtained from a temporary help service
- Leased employees from a leasing service or a professional employer organization
- Contractors, subcontractors, independent contractors, or outside consultants
- None of the above

72 In 2012, which of the following employee benefits were paid totally or partly by this business? **Mark X all that apply.**

- Health insurance
- Contributions to retirement plans, including 401(k), Keogh, etc.
- Profit sharing and/or stock options
- Paid holidays, vacation, and/or sick leave
- Tuition assistance and/or reimbursement
- None of the above

73 In 2012, did this business have a website?

- Yes No

74 A. In 2012, did this business have any e-commerce sales? (E-commerce sales are sales of goods and/or services where an order is placed by the buyer or price and terms of the sale are negotiated over the Internet, extranet, EDI network, electronic mail, or other online system. Payment may or may not be made online.)

- Yes No → Go to **75**.

B. In 2012, what percent of this business's total sales of goods and/or services were e-commerce sales?

- | | |
|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Less than 1% | <input type="checkbox"/> 20% – 49% |
| <input type="checkbox"/> 1% – 4% | <input type="checkbox"/> 50% – 99% |
| <input type="checkbox"/> 5% – 9% | <input type="checkbox"/> 100% |
| <input type="checkbox"/> 10% – 19% | <input type="checkbox"/> Don't know |

75 In 2012, did this business operate primarily from somebody's home?

- Yes No

76 In 2012, did this business own one or more of the following? **Mark X all that apply.**

- Copyright Patent (granted) None
- Trademark Patent (pending)

77 In 2012, did any of the following characteristics describe the activity of this business? **Mark X all that apply.**

- Operated less than 40 hours per week on average
- Operated less than 12 months
- Seasonal business (for example, fireworks sales or tax preparer)
- Operated occasionally (for example, event organizer or guest speaker)
- None of the above

78 A. Is this business currently operating?

- Yes No

B. (If No) Did the operations cease for any of the following reasons? **Mark X all that apply.**

- | | |
|--|--|
| <input type="checkbox"/> Owner's military deployment | <input type="checkbox"/> Lack of business loans/credit |
| <input type="checkbox"/> Owner's illness or injury | <input type="checkbox"/> Lack of personal loans/credit |
| <input type="checkbox"/> Owner(s) retired | <input type="checkbox"/> Started another business |
| <input type="checkbox"/> Owner(s) deceased | <input type="checkbox"/> Sold this business |
| <input type="checkbox"/> Operated for a specific or one-time event | <input type="checkbox"/> Other |
| <input type="checkbox"/> Inadequate cash flow or low sales | |

Thank you for participating in the Survey of Business Owners and Self-Employed Persons.

Please return the completed original questionnaire in the postage-paid envelope. Make sure the barcode above your address shows in the window of the envelope. Please make a photocopy of this form for your records. If the envelope has been misplaced, please mail the form to:

**U.S. Census Bureau
1201 East 10th Street
Jeffersonville, IN 47132-0001**

Remarks

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

COMPLETE THIS SURVEY ONLINE

- Go to: econhelp.census.gov/sbo
- Log in using the ID and password listed above.

Or mail your completed form to:

U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47132-0001

Why did I receive this survey?

We are surveying small and large companies, self-employed people, and people working for others as nonemployees or independent contractors. Your responses will help us produce reliable information about the U.S. economy.

Am I self-employed?

Yes, if you earned income working for yourself or for someone else as a nonemployee during 2012.

Need help or have questions?

- Visit econhelp.census.gov/sbo
- Call 1-888-824-9954, between 8 a.m. and 6 p.m., Eastern time, Monday through Friday.

¿Necesita ayuda?

Si usted habla español y necesita ayuda para completar su cuestionario, llame sin cargo alguno al 1-888-824-9954, entre las 8 a.m. y 6 p.m., hora del este, de lunes y viernes.

INSTRUCTIONS

Please read the enclosed insert before answering the questions.

- Use blue or black ink.
- Place an "X" inside the box.
- Center numbers in boxes.

7	0
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- Do not put slashes through 0 or 7.

1 Please **PRINT** the first and last name of the person who is filling out this form.

Contact Name

Include today's date and a telephone number so we can contact you if there is a question.

MM	DD	YYYY

Area code	Number

Extension



Please answer the following questions for the person(s) or business named in the mailing label. Answer even if the business has been sold, reorganized, or ceased operation.

You may use estimates if this form requests information that is not available in your business records.

2 On December 31, 2012, how many people owned this business?

- Include yourself if you were a sole proprietor or worked as a consultant or an independent contractor.
Do not combine two or more owners to create one owner.
Count spouses and partners as separate owners.

1 person, 2-4 people, 5-10 people, 11 or more people, Business is owned by a parent company, estate, trust, or other entity, Don't know. Go to 5, Go to 3.

3 On December 31, 2012, was this business owned by a government or tribal entity?

Yes No

4 On December 31, 2012, did any one person own 10% or more of this business?

Yes No - Go to 62 on page 7 ONLY if no person owned 10% or more of this business.

5 For the person(s) owning the largest percentage(s) in this business as of December 31, 2012, please list the percentage owned by each person and his or her position title.

- Do not report percentages owned by parent companies, estates, trusts, or other entities.
If more than 4 people owned this business equally, select any 4 people.
Round percentages to whole numbers. For example, report 1/3 ownership as 33.0%.

Percentage Owned (Estimates are acceptable) Position Title (Example: sole owner, co-owner, shareholder, president, vice president, etc.)
Owner 1: .0%
Owner 2: .0%
Owner 3: .0%
Owner 4: .0%

NOTE: Do not list more than 4 owners.

6 A. In 2012, did two or more members of one family own the majority of this business? (Family refers to spouses, parents/guardians, children, siblings, or close relatives.)

Yes No -> Go to 7.

B. (If Yes) Did spouses jointly own this business?

Yes No -> Go to 7.

C. (If Yes) Was this business operated equally by both spouses?

Yes, equally operated by spouses
No, primarily operated by Owner 1
No, primarily operated by Owner 2

Business

62 In what year was this business originally established or self-employment activity begun?

Year input fields and Don't know checkbox.

63 In 2012, did all or part of this business operate as a franchise?

Yes No

64 A. For the owners listed in 5, what was the source(s) of capital used to start or initially acquire this business? (If you did not list owners in 5, go to 65.) Mark X all that apply.

- Personal/family savings of owner(s)
Personal/family assets other than savings of owner(s)
Personal/family home equity loan
Personal credit card(s) carrying balances
Business credit card(s) carrying balances
Government-guaranteed business loan from a bank or financial institution, including SBA-guaranteed loans
Business loan from a bank or financial institution
Business loan from federal, state, or local government
Business loan/investment from family/friend(s)
Investment by venture capitalist(s)
Grants
Other source(s) of capital
Don't know
None needed -> Go to 65.

B. For the owners listed in 5, what was the total amount of capital used to start or initially acquire this business? (Capital includes savings, other assets, and borrowed funds of owner(s).)

Less than \$5,000, \$5,000 - \$9,999, \$10,000 - \$24,999, \$25,000 - \$49,999, \$50,000 - \$99,999, \$100,000 - \$249,999, \$250,000 - \$999,999, \$1,000,000 - \$2,999,999, \$3,000,000 or more, Don't know

65 In 2012, were any of the following sources of capital used to finance expansion or capital improvement(s) for this business? Mark X all that apply.

- Personal/family savings of owner(s)
Personal/family assets other than savings of owner(s)
Personal/family home equity loan
Personal credit card(s) carrying balances
Business credit card(s) carrying balances
Government-guaranteed business loan from a bank or financial institution, including SBA-guaranteed loans
Business loan from a bank or financial institution
Business loan from federal, state, or local government
Business loan/investment from family/friend(s)
Investment by venture capitalist(s)
Business profits and/or assets
Grants
Other source(s) of capital
Don't know
Wanted to expand or make capital improvement(s), but could not obtain funding
Did not expand or make capital improvement(s)

66 In 2012, which of the following types of customers accounted for 10% or more of this business's total sales of goods and/or services? Mark X all that apply.

- Federal government
State and local government, including school districts, transportation authorities, etc.
Other businesses and/or organizations, including distributors of your product(s)
Individuals

67 In 2012, what percent of this business's total sales of goods and/or services consisted of exports outside the United States?

Percent input fields and None Don't know checkboxes.

68 In 2012, did this business have operations outside the United States?

Yes No

69 In 2012, did this business outsource or transfer any business function and/or service to another company outside the United States?

Yes No

Please turn to the next page to continue.



Owner 4

Please answer the following questions about Owner 4 listed in 5 on Page 2.

49 How did Owner 4 initially acquire ownership of this business? Mark X all that apply.

- Founded or started
- Inherited
- Purchased
- Received transfer of ownership or gift

50 In what year did Owner 4 initially acquire ownership of this business?

Don't know

51 In 2012, which of the following were Owner 4's function(s) in this business? Mark X all that apply.

- Managing day-to-day operations
- Financial control with the authority to sign loans, leases, and contracts
- Providing services and/or producing goods
- None of these functions

52 In 2012, what was the average number of hours per week that Owner 4 spent managing or working in this business?

- None
- 20 - 39 hours
- 41 - 59 hours
- Less than 20 hours
- 40 hours
- 60 hours or more

53 In 2012, did this business provide Owner 4's primary source of personal income?

- Yes
- No

54 Prior to establishing, purchasing, or acquiring this business, had Owner 4 ever owned a business or been self-employed?

- Yes
- No

55 What was the highest degree or level of school Owner 4 completed prior to establishing, purchasing, or acquiring this business? Mark X ONE box only.

- Less than high school graduate
- Associate Degree
- High school graduate - Diploma or GED
- Bachelor's Degree
- Technical, trade, or vocational school
- Master's, Doctorate, or Professional Degree
- Some college, but no degree

56 What is the sex of Owner 4?

- Male
- Female

57 What was the age of Owner 4 as of December 31, 2012?

- Under 25
- 45 - 54
- 25 - 34
- 55 - 64
- 35 - 44
- 65 or over

58 Was Owner 4 born a citizen of the United States?

- Yes
- No

NOTE: Please answer BOTH Question 59 about Hispanic origin and Question 60 about race. For this survey, Hispanic origins are not races.

59 Is Owner 4 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.

60 What is Owner 4's race? Mark X all that apply.

- White
- Black, African Am., or Negro
- American Indian or Alaska Native - Print name of enrolled or principal tribe.
- Asian Indian
- Japanese
- Native Hawaiian
- Chinese
- Korean
- Guamanian or Chamorro
- Filipino
- Vietnamese
- Samoan
- Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.
- Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on.

Some other race - Print race

61 A. Has Owner 4 ever served in any branch of the U.S. Armed Forces, including the Coast Guard, the National Guard, or a Reserve component of any service branch?

- Yes
- No → Go to 62.

B. (If Yes) Do any of the following characteristics describe Owner 4's military service? Mark X all that apply.

- Served on active duty military service, not including training for the Reserves or National Guard
- Disabled as the result of illness or injury incurred or aggravated during military service
- Served on active duty military service after September 11, 2001
- Served on active duty military service in 2012
- Served in the National Guard or as a reservist of any branch of the U.S. Armed Forces in 2012
- None of the above

Owner 1

Please answer the following questions about Owner 1 listed in 5 on Page 2.

7 How did Owner 1 initially acquire ownership of this business? Mark X all that apply.

- Founded or started
- Inherited
- Purchased
- Received transfer of ownership or gift

8 In what year did Owner 1 initially acquire ownership of this business?

Don't know

9 In 2012, which of the following were Owner 1's function(s) in this business? Mark X all that apply.

- Managing day-to-day operations
- Financial control with the authority to sign loans, leases, and contracts
- Providing services and/or producing goods
- None of these functions

10 In 2012, what was the average number of hours per week that Owner 1 spent managing or working in this business?

- None
- 20 - 39 hours
- 41 - 59 hours
- Less than 20 hours
- 40 hours
- 60 hours or more

11 In 2012, did this business provide Owner 1's primary source of personal income?

- Yes
- No

12 Prior to establishing, purchasing, or acquiring this business, had Owner 1 ever owned a business or been self-employed?

- Yes
- No

13 What was the highest degree or level of school Owner 1 completed prior to establishing, purchasing, or acquiring this business? Mark X ONE box only.

- Less than high school graduate
- Associate Degree
- High school graduate - Diploma or GED
- Bachelor's Degree
- Technical, trade, or vocational school
- Master's, Doctorate, or Professional Degree
- Some college, but no degree

14 What is the sex of Owner 1?

- Male
- Female

15 What was the age of Owner 1 as of December 31, 2012?

- Under 25
- 45 - 54
- 25 - 34
- 55 - 64
- 35 - 44
- 65 or over

16 Was Owner 1 born a citizen of the United States?

- Yes
- No

NOTE: Please answer BOTH Question 17 about Hispanic origin and Question 18 about race. For this survey, Hispanic origins are not races.

17 Is Owner 1 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.

18 What is Owner 1's race? Mark X all that apply.

- White
- Black, African Am., or Negro
- American Indian or Alaska Native - Print name of enrolled or principal tribe.
- Asian Indian
- Japanese
- Native Hawaiian
- Chinese
- Korean
- Guamanian or Chamorro
- Filipino
- Vietnamese
- Samoan
- Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.
- Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on.

Some other race - Print race

19 A. Has Owner 1 ever served in any branch of the U.S. Armed Forces, including the Coast Guard, the National Guard, or a Reserve component of any service branch?

- Yes
- No → Go to 20.

B. (If Yes) Do any of the following characteristics describe Owner 1's military service? Mark X all that apply.

- Served on active duty military service, not including training for the Reserves or National Guard
- Disabled as the result of illness or injury incurred or aggravated during military service
- Served on active duty military service after September 11, 2001
- Served on active duty military service in 2012
- Served in the National Guard or as a reservist of any branch of the U.S. Armed Forces in 2012
- None of the above

20 Was more than 1 owner listed in 5 on Page 2?

- Yes
- No → Go to 62 on Page 7.



Owner 2

Please answer the following questions about Owner 2 listed in 5 on Page 2.

21 How did Owner 2 initially acquire ownership of this business? Mark X all that apply.

- Founded or started
- Inherited
- Purchased
- Received transfer of ownership or gift

22 In what year did Owner 2 initially acquire ownership of this business?

Don't know

23 In 2012, which of the following were Owner 2's function(s) in this business? Mark X all that apply.

- Managing day-to-day operations
- Financial control with the authority to sign loans, leases, and contracts
- Providing services and/or producing goods
- None of these functions

24 In 2012, what was the average number of hours per week that Owner 2 spent managing or working in this business?

- None
- 20 - 39 hours
- 41 - 59 hours
- Less than 20 hours
- 40 hours
- 60 hours or more

25 In 2012, did this business provide Owner 2's primary source of personal income?

- Yes
- No

26 Prior to establishing, purchasing, or acquiring this business, had Owner 2 ever owned a business or been self-employed?

- Yes
- No

27 What was the highest degree or level of school Owner 2 completed prior to establishing, purchasing, or acquiring this business? Mark X ONE box only.

- Less than high school graduate
- Associate Degree
- High school graduate - Diploma or GED
- Bachelor's Degree
- Technical, trade, or vocational school
- Master's, Doctorate, or Professional Degree
- Some college, but no degree

28 What is the sex of Owner 2?

- Male
- Female

29 What was the age of Owner 2 as of December 31, 2012?

- Under 25
- 45 - 54
- 25 - 34
- 55 - 64
- 35 - 44
- 65 or over

30 Was Owner 2 born a citizen of the United States?

- Yes
- No

NOTE: Please answer BOTH Question 31 about Hispanic origin and Question 32 about race. For this survey, Hispanic origins are not races.

31 Is Owner 2 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.

32 What is Owner 2's race? Mark X all that apply.

- White
- Black, African Am., or Negro
- American Indian or Alaska Native - Print name of enrolled or principal tribe.
- Asian Indian
- Japanese
- Native Hawaiian
- Chinese
- Korean
- Guamanian or Chamorro
- Filipino
- Vietnamese
- Samoan
- Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.
- Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on.

33 A. Has Owner 2 ever served in any branch of the U.S. Armed Forces, including the Coast Guard, the National Guard, or a Reserve component of any service branch?

- Yes
- No → Go to 34.

B. (If Yes) Do any of the following characteristics describe Owner 2's military service? Mark X all that apply.

- Served on active duty military service, not including training for the Reserves or National Guard
- Disabled as the result of illness or injury incurred or aggravated during military service
- Served on active duty military service after September 11, 2001
- Served on active duty military service in 2012
- Served in the National Guard or as a reservist of any branch of the U.S. Armed Forces in 2012
- None of the above

34 Were more than 2 owners listed in 5 on Page 2?

- Yes
- No → Go to 62 on Page 7.

Owner 3

Please answer the following questions about Owner 3 listed in 5 on Page 2.

35 How did Owner 3 initially acquire ownership of this business? Mark X all that apply.

- Founded or started
- Inherited
- Purchased
- Received transfer of ownership or gift

36 In what year did Owner 3 initially acquire ownership of this business?

Don't know

37 In 2012, which of the following were Owner 3's function(s) in this business? Mark X all that apply.

- Managing day-to-day operations
- Financial control with the authority to sign loans, leases, and contracts
- Providing services and/or producing goods
- None of these functions

38 In 2012, what was the average number of hours per week that Owner 3 spent managing or working in this business?

- None
- 20 - 39 hours
- 41 - 59 hours
- Less than 20 hours
- 40 hours
- 60 hours or more

39 In 2012, did this business provide Owner 3's primary source of personal income?

- Yes
- No

40 Prior to establishing, purchasing, or acquiring this business, had Owner 3 ever owned a business or been self-employed?

- Yes
- No

41 What was the highest degree or level of school Owner 3 completed prior to establishing, purchasing, or acquiring this business? Mark X ONE box only.

- Less than high school graduate
- Associate Degree
- High school graduate - Diploma or GED
- Bachelor's Degree
- Technical, trade, or vocational school
- Master's, Doctorate, or Professional Degree
- Some college, but no degree

42 What is the sex of Owner 3?

- Male
- Female

43 What was the age of Owner 3 as of December 31, 2012?

- Under 25
- 45 - 54
- 25 - 34
- 55 - 64
- 35 - 44
- 65 or over

44 Was Owner 3 born a citizen of the United States?

- Yes
- No

NOTE: Please answer BOTH Question 45 about Hispanic origin and Question 46 about race. For this survey, Hispanic origins are not races.

45 Is Owner 3 of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican Am., Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin - Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.

46 What is Owner 3's race? Mark X all that apply.

- White
- Black, African Am., or Negro
- American Indian or Alaska Native - Print name of enrolled or principal tribe.
- Asian Indian
- Japanese
- Native Hawaiian
- Chinese
- Korean
- Guamanian or Chamorro
- Filipino
- Vietnamese
- Samoan
- Other Asian - Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.
- Other Pacific Islander - Print race, for example, Fijian, Tongan, and so on.

47 A. Has Owner 3 ever served in any branch of the U.S. Armed Forces, including the Coast Guard, the National Guard, or a Reserve component of any service branch?

- Yes
- No → Go to 48.

B. (If Yes) Do any of the following characteristics describe Owner 3's military service? Mark X all that apply.

- Served on active duty military service, not including training for the Reserves or National Guard
- Disabled as the result of illness or injury incurred or aggravated during military service
- Served on active duty military service after September 11, 2001
- Served on active duty military service in 2012
- Served in the National Guard or as a reservist of any branch of the U.S. Armed Forces in 2012
- None of the above

48 Were more than 3 owners listed in 5 on Page 2?

- Yes
- No → Go to 62 on Page 7.

