U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

2012 ECONOMIC CENSUS

OMB No. 0607-0938: Approval Expires 12/31/2013

(05-31-2012)

(Please correct any errors in this mailing address.)

DUE DATE FEBRUARY 12, 2013

Need help or have questions?

- **Read** the accompanying information sheet(s) before answering the questions.
- Visit econhelp.census.gov
- Call 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

MC-31000

INFORMATION COPY DO NOT USE TO REPORT

Report Online - It's fast and secure! Go to: econhelp.census.gov

- OR -

Mail your completed form to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001

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.

- Use blue or black ballpoint pen.
- Do not use pencil or felt-tip pen.
- Do not put slashes through 0 or 7.
- Please center numbers in their respective boxes.
- Place an "X" inside the box.

Examples:

X

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown to the left of the mailing address the same as the one used for this establishment on its latest 2012 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

Yes - Go to 2

No - Enter current EIN (9 digits) -

PHYSICAL LOCATION

31000011

A. Is this establishment's physical location the same as shown in the mailing address? (P.O. Box and rural route addresses are not physical locations.)

Yes - Go to line B

No - Enterphysical location

0035 Number and street

0036 City, town, village, etc.

0037 State 0038

ZIP Code

CONTINUE WITH 2 ON PAGE 2

Do not know	
Do not know	
Day Year	
)	
0 - 0 0 0	
Mark "X" 2012 if None Number	
. 0002	
CONTINUE ON PAGE 3	ŗ

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

	EMPLOYMENT	AND	DAVBOLL
(\mathbf{Z})	EIVIPLOTIVIENT	AND	PATROLL

Include:

• Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown to the left of the mailing address or corrected in ①.

Exclude:

• Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.

	• Temporary staffing obtained from a staffing service.		, ,		
Fo	r further clarification, see information sheet(s).				
A.	Number of employees		_		
	Number of production workers for pay periods including:		Mark "X" if None)12 nber
	a. March 12	DY	325		
	a. March 12 b. June 12 INFORMATION CO INFORMATION CO C. September 12 DO NOT USE TO RE	PO	RT		
	c. September 12 NOT. U.S.F.	0	344		
	d. December 12	0	347		
	2. Add lines A1a through A1d	0	329		
	3. Average annual production workers (Divide line A2 by 4 - omit fraction	o <i>ns.)</i> . 0:	335		
	4. All other employees for pay period including March 12	0	336		
	5. TOTAL (Add lines A3 and A4.)	0:	337		
В.	Payroll before deductions (Exclude employer's cost for fringe benefits.)	_			
	1. Annual payroll	Mark "X" if None	\$ Bil.	2012 Mil.	Thou.
	a. Production workers				
	b. All other employees				
	c. TOTAL (Add lines B1a and B1b.)				
	2. First quarter payroll (January-March 2012)				
C.	Payroll taxes, employer paid insurance premiums (including health insurance and pension plans) and other employer paid benefits				
			Mark "X" if None	Но	012 urs ou.
D.	Number of hours worked by production workers (Annual hours worked by production workers reported on lines A1a through A1d.)	O y 0:	200		

If not show	vn, please enter you	ır 11-digi	t Census	File					, ago o
	FN) from the mailin	g addres	s.						
	oplicable.								
	9 VALUE OF INVENTORIES A. Did this establishment own inventories, regardless of where held, at the end of 2012 and/or 2011?								
0486									
0487	0487 No - Go to 13								
B. Re	B. Report inventories owned by this establishment as of December 31 before Last-in, First-out (LIFO) adjustment (if any).							nent (if any).	
		Mark "X" if None	\$ Bil.	End of 2012 Mil.	Thou.	Mark "X" if None	\$ Bil.	End of 2011 Mil.	Thou.
1.	Finished goods	. 0461				OPY			
2.	Work-in-process	INF	ORI	NATIC USE	O RI	EPO	RT		
3.	Materials, supplies, fuels, etc.	0.462	OT	USE		0472			
4.	Total inventories (Add lines B1 through B3.)								
5.	LIFO reserve (Report	0460				0470			
	LIFO gross in ① , line A.)	0466				0476			
6.	Total inventories after LIFO								
	adjustment (Line B4 minus line B5.)	0490				0492			
10 INVEN	TORIES BY VALUATIO		OD					-	
	t how much of the inv			, line B4, is s	ubject to the	following	valuation	methods.	
	LIFO valuation			End of 2012				End of 2011	
	method before adjustment (Report	if None	\$ Bil.	Mil.	Thou.	if None	\$ Bil.	Mil.	Thou.
	LIFO reserve in 9 , line B5.)								
В.	Any non-LIFO valuation method - Specify method	0465				0475			
0895		0487				0485			
	TOTAL (Add lines A and B. Total should equal 9, line B4.)								
	equal 9 , into 54.,	0510				0508			
1 and	Not Applicable.								

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13	ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION				
	(Refer to the instructions on how to report leasing arrangements.) Mark "X" 2012				
	Report the dollar value of assets, capital expenditures, and depreciation.	if None	\$ Bil.	Mil.	Thou.
	A. Gross value of depreciable assets (acquisition costs) at the beginning of the year				
	B. Capital expenditures for new and used depreciable assets in 2012				
	1. Capital expenditures for new and used buildings and other structures (Exclude land.)				
	2. Capital expenditures for new and used machinery and equipment				
	3. TOTAL (Add lines B1 and B2.) C. Gross value of depreciable asses cold Rtill scrapped, destroyed, etc	PY			
	C. Gross value of depreciable assets tolk, citie Lecrapped, destroyed, etc	PO	KI		
	D. Gross value of depreciable assits at the end of 2012 (Add lines A and B3 minus C.)				
	E. Normal depreciation charges for all tangible assets including buildings, machinery, and equipment				
	F. Breakdown of expenditures for new and used machinery and equipment by type (Reported on line B2.)				
	1. Automobiles, trucks, etc., for highway use				
	2. Computers and peripheral data processing equipment				
	3. All other expenditures for machinery and equipment				
	4. TOTAL (Add lines F1 through F3.)				
14	RENTAL PAYMENTS (Exclude capital leases (leases with a contract to own at the end of the	Mark "X"		2012	
	lease).)	if None	\$ Bil.	Mil.	Thou.
	A. Rental or lease of buildings, job-site trailers, and other structures (Include land.)				
	B. Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles				
	C. TOTAL (Add lines A and B.)				
15	Not Applicable.				

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.				
16 SELECTED EXPENSES				
	Mark "X"		2012	
A. Selected production related costs	if None	\$ Bil.	Mil.	Thou.
1. Cost of materials, parts, containers, packaging, etc. used (Report detail in 12.)	21			
2. Cost of products bought and sold as such without further processing (Report sales in 22.)	26			
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity	30			
4. Cost of purchased electricity (Report quantity on line B1.)	OPY			
4. Cost of purchased electricity (Report quantity on line B1.)	EPO	RT		
6. TOTAL (Add lines A) cround 5	20			
	Mark "X"		2012	
B. Quantity of Electricity	if None	Bil.	Kilowatt-hou Mil.	rs Thou.
1. Purchased electricity (Quantity comparable to cost reported on line A4.)	36			
2. Generated electricity (Gross less generating station use.) 043	37			
3. Electricity sold or transferred to other establishments (Include on lines B1 or B2.)	38			

GENERAL INSTRUCTIONS

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget (OMB). The OMB 8-digit number appears in the upper right corner of this report form.

Report all value figures in thousands of dollars, total plant hours in thousands of hours, and all electricity quantity figures in thousands of kilowatt-hours for the manufacturing establishment.

When actual book figures cannot be provided without high cost to your company, reasonable amounts of estimating or prorating are acceptable.

If you require an extension of time to complete this report or if there are any other questions regarding this report, please -

- to 6 p.m., Eastern Time, Monday 1 (70)
- Visit our website at econhab.eensus.gov, or

Call 1-800-233-6136 for toll-free assistar

• Write to the U.S. Census Bureau, 1.00 Tenth Screet, Jeffersonville, IN 47134 (100

Please include the 11-digit Census File Number (CFN) shown to the left of the mailing address of the report form.

DEFINITION OF ESTABLISHMENT AND MANUFACTURING ACTIVITY

An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed. Further clarification is provided in the General Instructions.

Manufacturing activity involves the mechanical, physical, or chemical transformation of materials, substances, or components into new products. The assembling of component parts of manufactured products is considered manufacturing, except in cases where the activity is appropriately classified in Sector 23, Construction.

Who Should Report

Since data will be published for industries and States, separate reports are required for each manufacturing establishment (plant).

An establishment is a single physical location where manufacturing is performed. If your company operates at different physical locations, even if they are producing the same line of goods, a separate report must be filed for each location.

If your company operates in two or more distinct lines of manufacturing at the same location, file a separate report for each activity.

Manufacturing Activities

Report all activities (manufacturing, fabricating, processing, and assembling) conducted within the establishment.

Include

- Maintenance of plant and equipment
- Receiving and shipping activities
- · Warehousing and storage
- Research
- Recordkeeping
- Health and safety
- Cafeteria and other services unless operated as separate establishments

Sales branches and sales offices
Research laboratori is
Retain three
In in hy activities and general administrative offices

The Manufacturing Sector also includes establishments engaged in the following activities:

- Apparel jobbing and contracting
- Assembling from purchased components
- Commission processing of materials owned by others
- Job casting, stamping, and machining
- Lapidary work
- Machine shops, including those operating on a joborder basis
- · Manufacturing and delivering ready-mixed concrete
- Milk pasteurizing and bottling
- Plating, galvanizing, polishing, etc., of materials owned by others
- · Poultry dressing
- Printing book, periodical, etc.
- Sawmills
- Seafoods, fresh-packaged or frozen
- Wood preserving

Descriptions of some of these activities are provided in the DETAILED INSTRUCTIONS, 22.

WHAT PERIOD SHOULD EACH REPORT COVER?

Each report should cover the calendar year 2012.

If book records are not on a calendar-year basis, carefully prepared estimates are acceptable.

If an establishment began to operate or ceased to operate during 2012, report only the part of the year that the establishment was in operation.

If the operator changed during the year, report only for that part of the year that your company operated the establishment. Report in 3 the appropriate information on changes in **operator** or operational status.

Specify in the certification, ②, the exact period that the report covers.



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