

| 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. |

2012 ECONOMIC CENSUS
Building Finishing Contractors

| Report Online <br> Go to:$\quad$ It's fast and secure! |
| :---: | :---: | :---: | :---: | :---: |
| econhelp.census.gov |$\quad$ - OR - $\quad$| Mail your |
| :--- |
| completed |
| form to: |$\quad$| 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:

$\times 0123456789$

The reporting unit for this form is a construction establishment. A construction establishment is generally a permanent office, payroll office, or other place where business activities related to construction are conducted. A construction establishment manages one or more projects or jobs and is usually maintained on a continuing basis. For examples and further clarification, see information sheet(s).
(1) 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?
$0021 \square$ Yes - Go to $20022 \quad \square$ No - Enter current EIN (9 digits) $\longrightarrow 0025$ $\square$
(2) PHYSICAL LOCATION
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.)

0031Yes - Go to line $B$
0032

0035 Number and street

| 0036 City, town, village, etc. | 0037 State | 0038 ZIP Code |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |  |  |

B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?
(Mark "X" only ONE box.)

```
0 0 4 1
 Yes 0042 }\square\mathrm{ No
0043
```

```No legal boundaries
C. In what type of municipality is this establishment physically located?
(Mark "X" only ONE box.)
\(0046 \quad\) City, village, \(0047 \quad \square\) Town or township \(0048 \quad \square\) Other \(\quad \square\) Do not know or borough

3 OPERATIONAL STATUS
Which ONE of the following best describes this establishment's operational status at the end of 2012?
(Mark "X" only ONE box.)
\(0011 \square\) In operation
\(0013 \quad \square\) Temporarily or seasonally inactive
\(0014 \quad \square\) Ceased operation - Give date at right

\(0015 \quad \square\) Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer Identification Number (EIN) below
\begin{tabular}{|l|l|l|l|l|}
\hline 0060 Name of new owner or operator & 0061 EIN (9 digits) \\
\hline & & - & \\
\hline
\end{tabular}

0062 Mailing address (Number and street, P.O. Box, etc.)


0016 Other - Specify \(\longrightarrow\)
(4) MONTHS IN OPERATION

Number of months in operation during 2012 (If none, mark "X" and go to 30.)

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

HOW TO
REPORT
DOLLAR
FIGURES

Dollar figures should be rounded to thousands of dollars.

If a figure is \(\mathbf{\$ 2 , 0 3 5 , 6 2 8 . 7 9}\) :

If a value is " 0 " (or less than \(\$ 500.00\) ):
\begin{tabular}{|c|c|c|c|c|}
\hline \multirow[t]{3}{*}{Report \(\longrightarrow \square\)} & \multicolumn{4}{|c|}{2012} \\
\hline & \$ Bil. & Mil. & \multicolumn{2}{|l|}{Thou.} \\
\hline & & 2 & 03 & 36 \\
\hline Report \(\longrightarrow\) X & \multicolumn{4}{|c|}{EXAMPIE} \\
\hline
\end{tabular}
(Construction work includes new construction and remodeling as well as maintenance and repair work. The activities of prime and trade contractors are considered to be construction. Some trades, not traditionally thought of as construction are included, such as land subdivision, excavation, building demolition, painting, carpetlaying, water well drilling, plumbing and electrical work.)

\section*{Include:}
- Receipts (or billings) derived from contract construction work done for others.
- Sales of houses and other buildings you built and sold.
- Construction management and design-build contracts.
- Site preparation, such as land clearing, laying roads, installing utilities, and subdividing land into lots.

\section*{Exclude:}
- Cost of land other than site preparation.
- Cost of manufacturing and production machinery, furniture, etc. (any item installed that is not part of a building structure).
B. Receipts for all other business activities done by this establishment


\section*{Include:}
- Architectural services, except the design portion of integrated design-build contracts.
- Engineering services.
- Manufacturing.
- Mining.
- Rental or lease of properties.
- Real estate commissions and property management fees.
- Rental of construction machinery or equipment to others, without an operator.
- Transportation.
- Retail trade.
- Wholesale trade.
- Other business activities.
C. TOTAL(Add lines A and B)

\section*{(7) EMPLOYMENT AND PAYROLL}
A. Number of employees

\section*{Include:}
- Full- and part-time employees 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).
- If legal form of organization for this business is a corporation, reporting of other employees and other payroll is required. If payroll and employment for this EIN are zero, please indicate if EIN is a joint venture in the remarks section of form.

\section*{Exclude:}
- Full- or part-time leased employees whose payroll was filed under a Professional Employer Organization's EIN.
- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering or accounting services.

For further clarification, see information sheet(s).
Number of construction workers includes:
- Apprentices.
- Working foremen.
- Equipment operators and mechanics.
- Journeymen.
- Job-site record keepers.
- Craftsmen.
- Laborers.
- Truck drivers and helpers.
- Others engaged directly in construction.

Number of other employees includes:
- Supervisors above working foremen.
- Office staff.
- Executives.
- Architects.
- Personnel staff.
- Engineers.
- Accounting staff.
- Purchasing agents.
- Others engaged in nonconstruction activities.
1. Number of construction workers
\begin{tabular}{|c|c|c|c|}
\hline \multicolumn{4}{|c|}{Number of employees for pay periods including the 12th of -} \\
\hline March 2012 & June 2012 & September 2012 & December 2012 \\
\hline (4) & (5) & (6) & (7) \\
\hline & \[
\mid
\] &  & \\
\hline &  & & \\
\hline &  & & \\
\hline
\end{tabular}
B. Payroll before deductions (Exclude employer's cost for fringe benefits.)
1. Annual payroll
a. Construction workers 0301
b. Other employees 0302
c. TOTAL (Add lines B1a and B1b) 0300
2. First quarter payroll (January-March 2012) 0310


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

7 EMPLOYMENT AND PAYROLL - Continued
C. Employer's cost for fringe benefits
1. Legally required fringe benefits (Include employer payments for Social Security, Medicare, unemployment compensation, workmen's compensation, and State disability programs, if required.)
\begin{tabular}{c|c|c|c|}
\hline \multicolumn{3}{c|}{\begin{tabular}{l} 
Mark "X" \\
if None
\end{tabular}} & \multicolumn{3}{|c|}{2012} \\
\cline { 2 - 4 } & \$ Bil. & Mil. & Thou. \\
\cline { 2 - 4 } & & & \\
\(\square\) & & & \\
\hline
\end{tabular}
2. Voluntarily provided fringe benefits (Include such items as payments for life insurance, medical insurance, pensions, welfare benefits, and union-negotiated benefits.)
3. TOTAL (Add lines C1 and C2)


\section*{8 HOURS WORKED}

Report hours worked by construction workers reported in \(\mathbf{7}\), line A1.
Number of hours worked by construction workers for quarterly periods including:
A. March 12
\begin{tabular}{c|c} 
Mark "X" \\
if None
\end{tabular}\(\quad\)\begin{tabular}{c} 
Hours \\
\cline { 2 - 3 } \\
\\
\(\square\)
\end{tabular}
B. June 12
C. September 12 0213
D. December 12 0214
E. TOTAL (Add lines A through D) 0210

(9) VALUE OF INVENTORIES

Report inventories for materials and supplies, regardless of where held, owned by this establishment as of December 31. (Exclude work-in-progress and finished units.)

Report inventories using current cost (if using LIFO method of evaluation, adjust to obtain FIFO or current cost)
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline \multirow[t]{2}{*}{\begin{tabular}{l}
Mark "X" \\
if None
\end{tabular}} & \multicolumn{3}{|c|}{End of 2012} & \multirow[t]{2}{*}{\begin{tabular}{l}
Mark " "" \(^{\prime}\) \\
if None
\end{tabular}} & \multicolumn{3}{|c|}{End of 2011} \\
\hline & \$ Bil. & Mil. & Thou. & & \$ Bil. & Mil. & Thou. \\
\hline \(\square\) & & & & \(\square\) & & & \\
\hline 0462 & & & & 0472 & & & \\
\hline
\end{tabular}

10-12 Not Applicable.

13 ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION
(Do not include land. See information sheet(s) for additional information.)
A. Gross value of depreciable assets (usually original cost) at the beginning of the year ar
B. Capital expenditures for (new and used) depreciable assets . 0520
C. Gross value of depreciable assets sold, retired, scrapped, destroyed, etc.
. 0510
D. Gross value of depreciable assets (usually original cost) at the end of the year (Add lines \(A\) and \(B\) minus C)
. . . . . . . . . . . . 0505
E. Normal depreciation charges for all tangible assets including buildings, machinery and equipment
ngible assets including \(\qquad\) . 0540


14 RENTAL PAYMENTS
(Exclude capital leases (leases with a contract to own at the end of the lease).)
A. Rental or lease of buildings, job-site trailers, and other structures (Include land.).
\begin{tabular}{l|c|c|c|}
\hline \multirow{3}{*}{\begin{tabular}{c} 
Mark "X" \\
if None
\end{tabular}} & \multicolumn{3}{|c|}{2012} \\
\cline { 3 - 4 } & \$ Bil. & Mil. & Thou. \\
\cline { 3 - 5 } & & & \\
\hline\(\square\) & & & \(\square\) \\
\hline\(\square\) & & & \(\square\) \\
\hline
\end{tabular}

15 Not Applicable.

\section*{If not shown, please enter your 11-digit Census File} Number (CFN) from the mailing address.
16 SELECTED EXPENSES
(See information sheet(s) for additional information.)
A. Cost of materials, subcontract work, fuels, and electricity (Include current account expenses normally considered as cost of work performed or job-specific costs.)
1. Cost of materials, parts, and supplies

Include:
- All job-site, office, and construction materials and supplies.
- Cost of materials purchased by this establishment for subcontractors.

\section*{Exclude:}
- Cost of manufacturing and production machinery, furniture, etc. (any item installed that is not part of a building structure).
2. Cost of construction work subcontracted out to others (Exclude the cost of materials purchased by this establishment for subcontractors.)

3. Cost of fuels for heat, power, lubricants
a. Natural gas and manufactured gas (propane) 0431
b. Gasoline and diesel fuel - ON highway (not at site) 0432
c. Gasoline and diesel fuel - OFF highway (at site) 0433
d. All other fuels and lubricants, including heating oils, lubricating oils, and greases . . \(\qquad\) . . . . . . \(\qquad\) 0434
4. Cost of electricity \(\qquad\)
\begin{tabular}{|l|l|l|l|l|l|l|l|l|l|}
\hline & & & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & & \\
\hline & & & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline
\end{tabular}
B. Other operating expenses (Exclude expenses reported elsewhere.)
1. Temporary staff and leased employee expense - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. (Include all charges for payroll, benefits, and services.)
2. Expensed equipment - Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors). (Report packaged software on line B3. Report leased and rented equipment in (14, line B.)
3. Expensed purchases of software - Purchases of prepackaged, custom coded or vendor customized software. (Include software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.)
4. Data processing and other purchased computer services (Include computer facilities management services, computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training. Exclude expensed integrated systems, repair and maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone).)
5. Purchased communication services - Telephone, cellular, and fax services; computer-related communications (e.g., Internet, connectivity, online) and other wired and wireless communication services
6. Purchased repairs and maintenance to buildings and/or machinery and equipment (Exclude materials, parts, and supplies used for repairs and maintenance performed by this firm's employees.)
7. Water, sewer, refuse removal, and other utility payments (Include the costs of hazardous waste removal. If the cost of these utilities is included in a lease or rental payment, report in (14, line A.)
8. Purchased advertising and promotional services (Include marketing and public relations services.) 0405
9. Purchased professional and technical services (Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other professional services. Exclude salaries paid to your own employees for these services.)
10. Governmental taxes and license fees - Payments to government agencies for taxes and licenses. (Include business and property taxes. Exclude income taxes.) 0396
11. All other operating expenses not reported elsewhere. (Exclude purchases of merchandise for resale and nonoperating expenses.) - Specify

0897
12. TOTAL (Add lines B1 through B11).







If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.
17-21 Not Applicable.


2012

If figure is \(\mathbf{3 8 . 7 6 \%}\) of total sales: Report
39


Detail of Sales, Shipments, Receipts, or Revenue

Kind of Business Example:
A. Construction work activities

Building construction on land you own or control, for sale
6001
Other kinds of construction - Specify \(マ\)

0712
B. Other business activity

Rental or lease of properties

Other business activities - Specify

0712

\section*{Private Landscaping}
C. TOTAL (Percentages reported in A and B should equal 100\%)

8005
2012

\section*{Laying Asphalt}

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE
Kind of business
Percent of the total reported in \(\mathbf{5}\), line \(C\) due to -

\section*{A. Construction work activities}

Acoustical contractor

Drywall contractor
8311

Insulation contractor (except boiler, pipe, or duct work)
8312

Fireproofing for other foundation, structure, and building exterior contractor
8314

Fireproof flooring contractor
8315


22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

\section*{A. Construction work activities - Continued}


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

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued



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

TYPE OF CONSTRUCTION - Continued



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

SPECIAL INQUIRIES
A. OWNERSHIP OF CONSTRUCTION PROJECTS

Percent of the construction work reported in (5), line A on projects owned by the following:
1. Private businesses and individuals
2. State and local governments
3. Federal government
4. TOTAL(Percentages reported in lines A1 through A3 should equal 100\%.)

B. CONSTRUCTION WORK DONE AS A SUBCONTRACTOR

Percent of the amount you reported in (5, line A which represents work you did for other contractors or builders
(Enter "0" if you did not subcontract work from other contractors or builders.)

26 SPECIAL INQUIRIES - Continued
C. CONSTRUCTION WORK DONE BY STATE

Percent of the construction work reported in © , line A which occurred in each state (The sum of the percentages reported should equal 100\%.)


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

SPECIAL INQUIRIES - Continued
D. FRANCHISE
1. Was this establishment operating under any trademark(s) or brand name(s) authorized by a franchisor in 2012? (Mark "X" only ONE box.)
\(0237 \quad\) Yes - franchisee-owned establishment
\(0238 \quad \square\) Yes - franchisor-owned establishment
\(0239 \quad \square\) No
2. If yes, provide the trademark(s) or brand name(s) below. 7

0235
27-29 Not Applicable.
REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

\begin{tabular}{|c|c|c|c|c|c|}
\hline \multicolumn{6}{|l|}{Name of person to contact regarding this report} \\
\hline & Area code & & Num & & Extensi \\
\hline Telephone & & - & - & - & \\
\hline \multicolumn{6}{|l|}{E-mail address} \\
\hline
\end{tabular}```

