



DUE DATE
FEBRUARY 12, 2013

(Please correct any errors in this mailing address.)

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

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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:

0 1 2 3 4 5 6 7 8 9

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).

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 Yes - Go to **2** 0022 No - Enter current EIN (9 digits) → 0025

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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.)

0031 Yes - Go to line B

0032 No - Enter physical location →

0035 Number and street																			
0036 City, town, village, etc.						0037 State			0038 ZIP Code										

CONTINUE WITH **2** ON PAGE 2

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2 PHYSICAL LOCATION - Continued

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

- 0041 Yes
- 0042 No
- 0043 No legal boundaries
- 0040 Do not know

C. In what type of municipality is this establishment physically located?
(Mark "X" only ONE box.)

- 0046 City, village, or borough
- 0047 Town or township
- 0048 Other
- 0024 Do not know

3 OPERATIONAL STATUS

Which of the following best describes this establishment's operational status at the end of 2012?
(Mark "X" only ONE box.)

- 0011 In operation
- 0016 Under construction, development, or expansion
- 0013 Temporarily or seasonally inactive
- 0014 Ceased operation - Give date at right
- 0015 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

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Month	Day	Year
<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

0060 Name of new owner or operator	0061 EIN (9 digits)	
	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	
0062 Mailing address (Number and street, P.O. Box, etc.)		
0063 City, town, village, etc.	0064 State	0065 ZIP Code
	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> - <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>

4 MONTHS IN OPERATION

Mark "X" if None

Number of months in operation during 2012 (If none, mark "X" and go to 30.) 0002

<input type="checkbox"/>	2012 Number <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
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31000029



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 **\$2,035,628.79**:

Report →

If a value is "0" (or less than \$500.00):

Report →

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.
<input type="text"/>	<input type="text"/> 2 <input type="text"/>	<input type="text"/> 036 <input type="text"/>
EXAMPLE		

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.
<input type="text"/>	<input type="text"/>	<input type="text"/>

A. Total value of products shipped and other receipts (Report detail in **22**.) 0100

B. Value of products exported (This is a breakout of the value reported on line A.)

Report the value of products shipped for export. Include shipments to customers in the Commonwealth of Puerto Rico, and U.S. possessions, as well as the value of products shipped to exporters or other wholesalers for export. Also, include the value of products sold to the U.S. Government to be shipped to foreign governments. Exclude products shipped for further manufacture, assembly, or fabrication in the United States. 0130

<input type="text"/>	<input type="text"/>	<input type="text"/>
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6 E-SHIPMENTS

A. Did this plant use any electronic network to control or coordinate the flow of any of the shipments of goods reported in **5**, line A? Or, were the orders for any of the shipments reported in **5**, line A, received over an electronic network?

Electronic networks include:

- Electronic Data Interchange (EDI)
- E-mail
- Internet
- Extranet
- Other online systems

0181 Yes - Go to line B

0182 No - Go to **7**

B. Percent of total reported in **5**, line A, that were ordered, or whose movement was controlled or coordinated over electronic networks (Report whole percents. Estimates are acceptable.) 0109

2012	
Percent	
<input type="text"/>	%

31000037



7 EMPLOYMENT AND PAYROLL

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.

For further clarification, see information sheet(s).

A. Number of employees

1. Number of production workers for pay periods including:

- a. March 12 0325
- b. June 12 0329
- c. September 12 0344
- d. December 12 0347

2. Add lines A1a through A1d 0329

3. Average annual production workers (Divide line A2 by 4 - omit fractions.) 0335

4. All other employees for pay period including March 12 0336

5. TOTAL (Add lines A3 and A4.) 0337

		2012			
		Number			
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				
	<input type="checkbox"/>				

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B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

1. Annual payroll

- a. Production workers 0304
- b. All other employees 0305
- c. **TOTAL (Add lines B1a and B1b.) 0300**

2. First quarter payroll (January-March 2012) 0310

	Mark "X" if None	2012		
		\$ Bil.	Mil.	Thou.
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

C. Payroll taxes, employer paid insurance premiums (including health insurance and pension plans) and other employer paid benefits 0220

	Mark "X" if None	2012
		Hours
		Thou.
<input type="checkbox"/>		

D. Number of hours worked by production workers (Annual hours worked by production workers reported on lines A1a through A1d.) 0200

31000045



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

8 Not Applicable.

9 VALUE OF INVENTORIES

A. Did this establishment own inventories, regardless of where held, at the end of 2012 and/or 2011?

0486 Yes - Go to line B

0487 No - Go to **13**

B. Report inventories owned by this establishment as of December 31 before Last-in, First-out (LIFO) adjustment (if any).

	Mark "X" if None	End of 2012			Mark "X" if None	End of 2011		
		\$ Bil.	Mil.	Thou.		\$ Bil.	Mil.	Thou.
1. Finished goods	<input type="checkbox"/>				<input type="checkbox"/>			
	0461				0471			
2. Work-in-process	<input type="checkbox"/>				<input type="checkbox"/>			
	0463				0473			
3. Materials, supplies, fuels, etc.	<input type="checkbox"/>				<input type="checkbox"/>			
	0462				0472			
4. Total inventories (Add lines B1 through B3.)	<input type="checkbox"/>				<input type="checkbox"/>			
	0460				0470			
5. LIFO reserve (Report LIFO gross in 10 , line A.)	<input type="checkbox"/>				<input type="checkbox"/>			
	0466				0476			
6. Total inventories after LIFO adjustment (Line B4 minus line B5.)	<input type="checkbox"/>				<input type="checkbox"/>			
	0490				0492			

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10 INVENTORIES BY VALUATION METHOD

Report how much of the inventory reported in **9**, line B4, is subject to the following valuation methods.

	Mark "X" if None	End of 2012			Mark "X" if None	End of 2011		
		\$ Bil.	Mil.	Thou.		\$ Bil.	Mil.	Thou.
A. LIFO valuation method before adjustment (Report LIFO reserve in 9 , line B5.)	<input type="checkbox"/>				<input type="checkbox"/>			
	0465				0475			
B. Any non-LIFO valuation method - Specify method ∇								
0895 <input style="width: 150px; height: 20px;" type="text"/>	<input type="checkbox"/>				<input type="checkbox"/>			
	0487				0485			
C. TOTAL (Add lines A and B. Total should equal 9 , line B4.)	<input type="checkbox"/>				<input type="checkbox"/>			
	0510				0508			

11 and 12 Not Applicable.

31000052



13 ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION

(Refer to the instructions on how to report leasing arrangements.)

Report the dollar value of assets, capital expenditures, and depreciation.

Mark "X" if None

		2012		
		\$ Bil.	Mil.	Thou.
A.	Gross value of depreciable assets (acquisition costs) at the beginning of the year 0500	<input type="checkbox"/>		
B.	Capital expenditures for new and used depreciable assets in 2012			
1.	Capital expenditures for new and used buildings and other structures (Exclude land.) 0525	<input type="checkbox"/>		
2.	Capital expenditures for new and used machinery and equipment 0530	<input type="checkbox"/>		
3. TOTAL	(Add lines B1 and B2.) 052	<input type="checkbox"/>		
C.	Gross value of depreciable assets sold, retired, scrapped, destroyed, etc. 051	<input type="checkbox"/>		
D.	Gross value of depreciable assets at the end of 2012 (Add lines A and B3 minus C.) 0505	<input type="checkbox"/>		
E.	Normal depreciation charges for all tangible assets including buildings, machinery, and equipment 0540	<input type="checkbox"/>		
F.	Breakdown of expenditures for new and used machinery and equipment by type (Reported on line B2.)			
1.	Automobiles, trucks, etc., for highway use 0522	<input type="checkbox"/>		
2.	Computers and peripheral data processing equipment 0523	<input type="checkbox"/>		
3.	All other expenditures for machinery and equipment 0524	<input type="checkbox"/>		
4. TOTAL	(Add lines F1 through F3.) 0529	<input type="checkbox"/>		

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14 RENTAL PAYMENTS

(Exclude capital leases (leases with a contract to own at the end of the lease).)

Mark "X" if None

		2012		
		\$ Bil.	Mil.	Thou.
A.	Rental or lease of buildings, job-site trailers, and other structures (Include land.) 0551	<input type="checkbox"/>		
B.	Rental or lease of construction equipment and tools, machinery, office equipment, furniture, and vehicles 0552	<input type="checkbox"/>		
C. TOTAL	(Add lines A and B.) 0550	<input type="checkbox"/>		

15 Not Applicable.

31000060



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16 SELECTED EXPENSES

A. Selected production related costs

- 1. Cost of materials, parts, containers, packaging, etc. used (Report detail in 17.) 0421
- 2. Cost of products bought and sold as such without further processing (Report sales in 22.) 0426
- 3. Cost of purchased fuels consumed for heat, power, or the generation of electricity 0430
- 4. Cost of purchased electricity (Report quantity on line B1.) 0425
- 5. Cost of work done for you by others on your materials 0424
- 6. TOTAL (Add lines A1 through A5.) 0420

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.

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B. Quantity of Electricity

- 1. Purchased electricity (Quantity comparable to cost reported on line A4.) 0436
- 2. Generated electricity (Gross less generating station use.) 0437
- 3. Electricity sold or transferred to other establishments (Include on lines B1 or B2.) 0438

Mark "X" if None

2012		
Kilowatt-hours		
Bil.	Mil.	Thou.

31000078



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 -

- Call 1-800-233-6136 for toll-free assistance: 9 a.m. to 6 p.m., Eastern Time, Monday through Friday, or
- Visit our website at econhelp.census.gov, or
- Write to the U.S. Census Bureau, 1120 Tenth Street, Jeffersonville, IN 47134-0000

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

Exclude

- Sales branches and sales offices
- Research laboratories
- Retail stores
- Mining 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 job-order 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, 30, the exact period that the report covers.

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