OMB No.: 0607-0449   Approval Expires: 11/30/2016

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

# 2015 Annual Survey of Manufactures

Help Telephone: 1-800-233-6136
(8:00am-4:30pm ET/M-F)

## Welcome to the 2015 Annual Survey of Manufactures (ASM).

This site provides businesses an opportunity to complete the 2015 ASM online.

- Due Date: **February 12, 2016**
- Time Extensions: Please submit your request online, or call 1-800-233-6136, 8:00am-4:30pm ET/M-F.
- Please visit the General Help for reporting instructions and additional information.

**YOUR RESPONSE IS REQUIRED BY LAW.** Title 13, United States Code, Section 131, 182, 224, and 225 requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau.  View public reporting burden.   By Section 9 of the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL** and will be used for statistical purposes only. View survey information to understand why this information is being collected and how this information is being used.  Further, copies retained in respondents' files are immune from legal process.

## 2015 Annual Survey of Manufactures

- Login by entering the appropriate information and press the "Login" button
- User ID and Password are case sensitive

User ID: [            ]

Password: [            ]

[ Login ]

UNITED STATES DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. Census Bureau
OFFICE OF THE DIRECTOR

*Example Example Example*

**A Message from the Director, U.S. Census Bureau:**
This letter is in reference to the 2014 Annual Survey of Manufactures, MA-10000(L).  This survey is **mandatory**, and is **due by February 12, 2015**. Your cooperation in completing this survey is greatly appreciated.

To report, go to the website noted below, click the "Report Now" button, and enter your user ID and password.

Website:
User ID: — User ID
Password: — Password

**Note: Your session will expire if you remain on one screen for 45 minutes without navigating to another screen. To ensure data is saved, navigate to the next screen.**

**Burden Statement**          **Accessibility**          **Privacy**          **Security**

SCREEN NAME
**NAVIGATION TREE LABEL**

**RESPONSE/QUESTION TITLE**
*Skip Pattern,  Notes*

## MAIN MENU (DASHBOARD)

## MAILING ADDRESS  (Help)

### MAILING ADDRESS

The reporting unit for this questionnaire is an **establishment** which is generally a single physical location where business is conducted or where services or industrial operations are performed. Please make updates to the physical location address in the Physical Location Information section.

ATTN CENSUS

Name 1 U.S. CENSUS BUREAU          Store/Plant

Name 2

Street 4700 SILVER HILL ROAD

City SUITLAND          State MD          ZIP Code 207460000

### For Census Bureau Use Only

CFN

BACK

Review

SAVE AND CONTINUE

**EMPLOYER IDENTIFICATION NUMBER (Help)**

## EMPLOYER IDENTIFICATION NUMBER VALIDATION

Is (XX-XXXXXXX) the Employer Identification Number (EIN) used on this establishment's latest 2015 Internal Revenue Service Form 941, Employer's Quarterly Tax Return?

○ Yes

○ No

BACK

Review

SAVE AND CONTINUE

**EMPLOYER IDENTIFICATION NUMBER (Help)**

**EMPLOYER IDENTIFICATION NUMBER**

What is this establishment's 9-digit Employer Identification Number (EIN) used on the latest 2015 Internal Revenue Service Form 941, Employer's Quarterly Tax Return?

EIN

123456789

BACK

Review

SAVE AND CONTINUE

**OWNERSHIP OR CONTROL** (**Help**)

**OWNERSHIP OR CONTROL**

Is your company owned or controlled by another domestic company?

⦿ Yes

⦿ No

BACK

Review

SAVE AND CONTINUE

**OWNERSHIP OR CONTROL (Help)**

**OWNERSHIP OR CONTROL:   MORE THAN ONE LOCATION**

Does your company operate in more than one location?

⦿ Yes

⦿ No

| BACK | Review | SAVE AND CONTINUE |
|------|--------|-------------------|

**OWNERSHIP OR CONTROL (Help)**

**OWNERSHIP OR CONTROL:  VOTING STOCK VALIDATION**

Does another domestic company own more than 50 percent of the voting stock of your company?

○ Yes

○ No

| BACK | Review | SAVE AND CONTINUE |
|------|--------|-------------------|

**OWNERSHIP OR CONTROL** (Help)

**OWNERSHIP OR CONTROL:  MANAGEMENT AND POLICY**

Does another domestic company have the power to control the management and policies of your company?

◉ Yes

◉ No

BACK

Review

SAVE AND CONTINUE

**OWNERSHIP OR CONTROL (Help)**

**OWNERSHIP OR CONTROL:   PERCENT OF VOTING STOCK HELD**

What percent of voting stock was held by the owning or controlling company?
*(Check only ONE box)*

🔘 Less than 50%

🔘 50%

🔘 More than 50%

| BACK | Review | SAVE AND CONTINUE |
|---|---|---|

**OWNERSHIP OR CONTROL** ([Help])

## OWNERSHIP OR CONTROL :  COMPANY INFORMATION

What is the name, address, and 9-digit Employer Identification Number (EIN) of the owning or controlling company?

Name of owning or controlling company:

Home office address (Number and street):

City, town, village, etc:          State          ZIP Code

MD ▼

EIN

**123456789**

BACK                    Review                    SAVE AND CONTINUE

**NUMBER OF ESTABLISHMENTS**   ([Help])

**NUMBER OF ESTABLISHMENTS**

How many establishments operated under EIN (XX-XXXXXXX) at the end of 2015?

Number

`12345`

BACK

Review

SAVE AND CONTINUE

NUMBER OF ESTABLISHMENTS  B
*[NUMBER OF ESTABLISHMENTS A ] > 1*
- Duplicated based on the establishment count value reported in the NUMBER OF ESTABLISHMENTS screen
- Initial add screen is pre-filled with the physical location information,  additional screens are blank

**NUMBER OF ESTABLISHMENTS** (Help)

## ADDED  ESTABLISHMENT INFORMATION

Name

Secondary Name                                          Store/Plant Number

Physical Location (Number and street)

City, town, village, etc.                    State          ZIP Code

MD ▼

Describe kind of business at this location

**2015
Number**

Number of Employees for
Pay Period including March 12     `1234567891`

**For employees that worked at more than one location, report the employment and payroll data for employees at the ONE location where they spent most of their working time.**

**2015**

First Quarter Payroll
(Jan – March)       $ `1234567891`,000.00

Annual Payroll       $ `1234567891`,000.00

Sales, Shipments,
Receipts, or Revenue   $ `1234567891`,000.00

BACK            Review            SAVE AND CONTINUE

- Summary lists all added establishments
- Allows Edit and/or Delete added establishments

## NUMBER OF ESTABLISHMENTS (Help)

**ADDITIONAL ESTABLISHMENTS:**

| # | Name | Address | Store/Plant No. | Edit | Delete |
|---|------|---------|-----------------|------|--------|
| 1. | | | | Edit | Delete |

Add Establishment

Back    Review    Save and Continue

Review

BACK                    SAVE AND CONTINUE

**NUMBER OF ESTABLISHMENTS** (Help)

## ADDITIONAL ESTABLISHMENT INSTRUCTIONS

**Consolidating Data for Added Establishments:**

- The sum value of Sales, Shipments, Receipts or Revenue for all locations of the EIN should also be reported as a consolidated value in the Sales, Shipments, Rcpts/Revenue section, and also in the Details Sales, Shipments, Rcpts/Revenue section that follows.

- The sum of Employment, First Quarter Payroll, and Annual Payroll for all locations of the EIN, should also be reported as consolidated values in the respective areas of the Employment and Payroll section that follows.

Review

| BACK | SAVE AND CONTINUE |
|------|-------------------|

**PHYSICAL LOCATION** (Help)

**PHYSICAL LOCATION VALIDATION**

4700 SILVER HILL ROAD
SUITLAND, MD 20764-0000

Is this establishment's physical location the same as the address shown above?
*P.O. Box and rural route addresses are not physical locations*

◉ Yes

◉ No

BACK

Review

SAVE AND CONTINUE

**PHYSICAL LOCATION** (**Help**)

**PHYSICAL LOCATION INFORMATION**

What is this establishment's physical location?

*(P.O. Box and rural route addresses are not physical locations)*

Number and Street

City, town, village, etc          State          ZIP Code

MD ▼

BACK          Review          SAVE AND CONTINUE

PHYSICAL LOCATION B

## PHYSICAL LOCATION (Help)

## LEGAL BOUNDARY AND MUNICIPALITY:

Is this establishment physically located inside the legal boundaries of the city, town, village, etc?

- ⦿ Yes
- ⦿ No
- ⦿ No legal boundaries
- ⦿ Do not know

In what type of municipality is this establishment physically located?

- ⦿ City, village, or borough
- ⦿ Town or township
- ⦿ Other
- ⦿ Do not know

BACK

Review

SAVE AND CONTINUE

**OPERATIONAL STATUS**   (Help)

**OPERATIONAL STATUS**

Which of the the following best describes this establishment's operational status at the end of 2015?
*(Check only ONE box)*

○ In operation

○ Under construction, development, or exploration

○ Temporarily or seasonally inactive

○ Ceased operation

○ Sold or leased to another operator

BACK

Review

SAVE AND CONTINUE

**OPERATIONAL STATUS** ( Help )

## CEASED OPERATION DATE

When did this establishment cease operation?

MMDDYYYY

`01282015` 📅

BACK          Review          SAVE AND CONTINUE

**OPERATIONAL STATUS**   ( Help )

## SOLD OPERATION DATE AND INFORMATION

When was this establishment sold or leased to another operator?

MMDDYYYY

01282015

What is the name, address, and 9-digit Employer Identification Number (EIN) of this establishment's new owner or operator?

Name of new owner/operator

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

City, town, village, etc.            State      ZIP Code

MD ▼

EIN

123456789

BACK            Review            SAVE AND CONTINUE

**MONTHS IN OPERATION (Help)**

**MONTHS IN OPERATION**

How many months was this establishment in operation during 2015?

Check if None   Number

☑   04 ▼

BACK

Review

SAVE AND CONTINUE

**ADDITIONAL REPORTING GUIDELINES** (Help)

## ADDITIONAL REPORTING GUIDELINES:

**Prior Year Data:** Where available, your establishment's Prior Year data is prelisted in the 2014 column. The figures may differ from those actually reported because of the changes made by the U.S. Census Bureau as a result of correspondence or a comparison of prior data. Check these figures and make any necessary corrections as needed. If 2014 Inventories figures are not prelisted, report these figures in the appropriate sections as instructed.

## How to Report Dollar Figures:

Dollar figures should be rounded to thousands of dollars

| | | | Check if None | 2015 | |
|---|---|---|---|---|---|
| EXAMPLE: | If a dollar figure is $2,036,355.25 | Report → | ☐ | $ 2036 | ,000.00 |
| | If a dollar figure is "0" (or less than $500.00): | Report → | ☑ | $ | ,000.00 |

Review

BACK

SAVE AND CONTINUE

**SALES, SHIPMENTS, RECEIPTS, OR REVENUE (Help)**

**SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

What was the total value of products shipped and other receipts?

*(Report details in the DETAIL SALES, SHIPMENTS, RECEIPTS, OR REVENUE section)*

Exclude:
- Freight charges
- Excise Taxes

| Check if None | 2015 | 2014 |
|---|---|---|
| ✓ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

## SALES, SHIPMENTS, RECEIPTS, OR REVENUE (Help)

**EXPORTS**

## What was the value of products exported?

*(This is a breakout of the ($XXXXXXXXX,000.00) reported in total value of products shipped and other receipts in the SALES, SHIPMENTS, RECEIPTS, OR REVENUE area)*

**Include:**

- Shipments to customers in the Commonwealth of Puerto Rico and U.S. possessions
- Products shipped to exporters or other wholesalers for export
- Products sold to the U.S. Government to be shipped to be shipped to foreign governments

**Exclude:**

- Products shipped for further manufacture, assembly or fabrication in the U.S.

| Check if None | 2015 | 2014 |
|---|---|---|
| ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

## SALES, SHIPMENTS, RECEIPTS, OR REVENUE (Help)

**PRODUCTS SHIPPED FOR FURTHER MANUFACTURE**

What was the market value of products shipped to other domestic plants of your company for further assembly, fabrication, or manufacture?
*(This is a breakout of the ($XXXXXXXXXX,000.00)  reported in total value of products shipped and other receipts in SALES, SHIPMENTS, RECEIPTS, OR REVENUE area)*

| Check if None | 2015 | 2014 |
|---|---|---|
| ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

**E-SHIPMENTS** (Help)

## E-SHIPMENTS

What percent of the *($XXXXXXXXXX,000.00)* reported in total value of products shipped and other receipts, in the SALES, SHIPMENTS, RECEIPTS, OR REVENUE area, were for goods that were ordered or whose movement was controlled or coordinated over electronic networks? *(Report whole percents. Estimates are acceptable.)*

**Electronic networks include:**
- Electronic Data Interchange (EDI)
- E-mail
- Internet
- Extranet
- Other online systems

| 2015 | 2014 |
|------|------|
| 100 .00% | 100 .00% |

BACK

Review

SAVE AND CONTINUE

**EMPLOYMENT AND PAYROLL** (Help)

## EMPLOYMENT

**Include:**

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Tax Return, and filed under EIN (XX-XXXXXXX)
- Spread on stock options that are taxable to the employee wages

**Exclude:**

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN
  (*Report values on line A in the OTHER OPERATING EXPENSES area of the SELECTED EXPENSES section*)
- Temporary staffing obtained from a staffing service.
  (*Report values on line A in the OTHER OPERATING EXPENSES area of the SELECTED EXPENSES section*)
- Purchased professional and technical services.
  (*Report values on line I in the OTHER OPERATING EXPENSES area of the SELECTED EXPENSES section*)

What was the

|  |  | Check if None | **2015 Number** | **2014 Number** |
|---|---|---|---|---|
| A. | Number of production workers for pay periods including |  |  |  |
| 1. | March 12? | ☑ | 1234567891 | 1234567891 |
| 2. | June 12? | ☑ | 1234567891 | 1234567891 |
| 3. | September 12? | ☑ | 1234567891 | 1234567891 |

## EMPLOYMENT AND PAYROLL (Help)

| | Check if None | 2015 Number | 2014 Number |
|---|---|---|---|
| 4. December 12? | ☑ | 1234567891 | 1234567891 |
| **TOTAL** Production Workers *(Add lines A1 through A4)* | ☑ | 1234567891 | 1234567891 |
| **B.** Average annual production workers ? *(Divide TOTAL Production Workers by 4 and round to nearest whole number)* | ☑ | 1234567891 | 1234567891 |
| **C.** All other employees for pay period including March 12? | ☑ | 1234567891 | 1234567891 |
| **TOTAL** *(Add lines B and C)* | ☑ | 1234567891 | 1234567891 |

BACK

Review

SAVE AND CONTINUE

**EMPLOYMENT AND PAYROLL** (Help)

**HOURS WORKED**

What was the annual number of hours worked by the (XXXXXXXXXX)
average annual production workers reported in the EMPLOYMENT area?

| | Check if None | 2015 | 2014 |
|---|---|---|---|
| | ☑ | 1234567891,000 | 1234567891,000 |

BACK

Review

SAVE AND CONTINUE

**EMPLOYMENT AND PAYROLL** ((Help))

**PAYROLL:**

**Exclude:** Employer costs for fringe benefits

What was the annual payroll before deductions for...

| | Check if None | 2015 | 2014 |
|---|---|---|---|
| **A.** Production workers? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **B.** All other employees? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **TOTAL** *(Add lines A and B)* | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

**EMPLOYMENT AND PAYROLL** (Help)

**PAYROLL:**

What was the first quarter payroll before deductions (January-March 2015)?

| | Check if None | 2015 | 2014 |
|---|---|---|---|
| | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

## EMPLOYMENT AND PAYROLL (Help)

### EMPLOYER'S ANNUAL COST FOR FRINGE BENEFITS

*(This is the employer's annual cost for legally required programs and programs not required by law).*

What were the employer's annual costs for...

**A. Health Insurance -** Insurance premiums on hospitals, medical plans, and single service plans such as dental, vision, and prescription drug plans

**Include:**
- Premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs).

**Exclude:**
- Employee contributions
- Disbursement from trusts or funds to satisfy health insurance claims

**B. Pension Plans:**

1. **Defined benefit pension plans -** *Cost for both qualified and nonqualified defined pension plans. Plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include employee's compensation and years of service and are not allocated to specific accounts maintained for employees.*

2. **Defined contribution plans -** *Costs under defined contribution plans. Pension plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount contributed and the results of the account's activity.*
   *Examples:*
   - *Profit sharing plans*
   - *Money purchase (e.g. 401k, 403b)*
   - *Stock bonus plans (e.g., ESOPs)*

**C. Payroll taxes, employer-paid insurance premiums, and other employer-paid benefits**

**Include:**
- Legally required fringe benefits
  *Examples:*
  - *Social Security*
  - *Workers' compensation insurance*
  - *Unemployment tax*
  - *State disability insurance programs*
  - *Medicare*
- Benefits for life insurance
- "Quality of life" benefits
  *Examples:*
  - *Childcare assistance*
  - *Subsidized commuting, etc.*
- Employer contributions to pre-tax benefit accounts (e.g. Health savings account)
- Education assistance
- Other benefits not specified above

**Exclude:**
- Disbursements from trusts or funds to satisfy health insurance claims

**TOTAL** *(Add lines A, B1, B2, and C)*

| Check if None | 2015 | 2014 |
|---|---|---|
| ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |
| ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |
| ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |
| ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |
| ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |

BACK

Review

SAVE AND CONTINUE

**VALUE OF INVENTORIES** (Help)

**INVENTORIES:**

Did this establishment own inventories, regardless of where held, at the end of 2015 and/or 2014?

◉ Yes

◉ No

BACK

Review

SAVE AND CONTINUE

**VALUE OF INVENTORIES** (Help)

**VALUE OF INVENTORIES:**

What were the value of inventories owned by this establishment
as of December 31 before Last-in,

First-out (LIFO) adjustment (if any) for...

| | Check if None | End of 2015 | Check if None | End of 2014 |
|---|---|---|---|---|
| **A.** Finished goods? | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| **B.** Work in progress? | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| **C.** Materials, supplies, fuels, etc.? | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| **TOTAL** *(Add lines A through C)* | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

**INVENTORIES BY NON-LIFO VALUATION METHODS** (Help)

## INVENTORIES BY NON-LIFO VALUATION METHODS:

Of the **($XXXXXXXXXXX,000.00)** reported in total value of inventories owned by this establishment as of December 31,

how much is subject to the following valuation methods...

| | | Check if None | End of 2015 | Check if None | End of 2014 |
|---|---|---|---|---|---|
| **A.** | First-In, First-out (FIFO)? | ☑ | $ 1234567891,000.00 | ☑ | $ 1234567891,000.00 |
| **B.** | Average Cost? | ☑ | $ 1234567891,000.00 | ☑ | $ 1234567891,000.00 |
| **C.** | Standard Cost? | ☑ | $ 1234567891,000.00 | ☑ | $ 1234567891,000.00 |
| **D.** | Other non-LIFO valuation method(s)? *Specify method:* | ☑ | $ 1234567891,000.00 | ☑ | $ 1234567891,000.00 |
| **TOTAL** | *(Add lines A through D)* | ☑ | $ 1234567891,000.00 | ☑ | $ 1234567891,000.00 |

BACK          Review          SAVE AND CONTINUE

**INVENTORIES BY LIFO VALUATION METHOD** (Help)

**LIFO VALUATION METHOD:**

Did this establishment use the Last-in, First-out (LIFO) valuation method?

○ Yes

○ No

BACK

Review

SAVE AND CONTINUE

**INVENTORIES BY LIFO VALUATION METHOD**  (**Help**)

## INVENTORIES BY LIFO VALUATION METHOD:

Of the (**$XXXXXXXXXXX,000.00**) reported in total value of inventories owned by this establishment as of December 31, what was the…

|  | Check if None | End of 2015 | Check if None | End of 2014 |
|---|---|---|---|---|
| **A.** Amount subject to LIFO? (*gross LIFO amount*) | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| **B.** Amount **not** subject to LIFO? (*should equal* (**$XXXXXXXXXXX,000.00**) *TOTAL Inventories by Non-LIFO valuation method*) | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| **TOTAL** (*Add lines A and B*) | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |
| Amount of LIFO reserve? (if any) | ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |

BACK          Review          SAVE AND CONTINUE

**INVENTORIES OUTSIDE THE UNITED STATES**   ( **Help** )

## INVENTORIES OUTSIDE THE UNITED STATES

Of the ($XXXXXXXXXX,000.00) reported in total value inventories,  what was the value of inventories stored or en route OUTSIDE the 50 U.S. states and the District of Columbia for 2015?

**Exclude:**
- Inventory held in Foreign Trade Zones or in bonded warehouses in the U.S.

*For more detailed definitions, please see*
http://enforcement.trade.gov/ftzpage/info/ftzstart.html

| Check if None | End of 2015 | Check if None | End of 2014 |
|:---:|:---:|:---:|:---:|
| ☑ | $ 1234567891 ,000.00 | ☑ | $ 1234567891 ,000.00 |

| BACK | Review | SAVE AND CONTINUE |
|:---:|:---:|:---:|

**CAPITAL EXPENDITURES** (Help)

## CAPITAL EXPENDITURES

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

What were the capital expenditures for new and used depreciable assets spent in 2015 for …

| | Check if None | 2015 | 2014 |
|---|---|---|---|
| **A.** New and used building and other structures? **Exclude:** - Land | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **B.** New and used machinery and equipment? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **TOTAL** *(Add lines A and B)* | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

**CAPITAL EXPENDITURES**  (Help)

## CAPITAL EXPENDITURES:   MACHINERY DETAIL

What is the breakdown of expenditures for new and used machinery and equipment by type?
   *(This is a breakout of the ($XXXXXXXXXX,000.00) reported  in new and used  machinery and equipment  in*
    *the CAPITAL EXPENDITURES area)*

| | Check if None | 2015 | 2014 |
|---|---|---|---|
| **A.** Automobiles, trucks, etc., for highway use? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **B.** Computers and peripheral data processing equipment? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **C.** All other expenditures for machinery and equipment? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **TOTAL**  *(Add lines A, B, and C)* | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

BACK

Review

SAVE AND CONTINUE

**RENTAL PAYMENTS** (Help)

## RENTAL PAYMENTS

**Include:**
- Operating leases

**Exclude:**
- Capital leases
  *(leases with a contract to own at the end of the lease)*

What were the payments for

**A.** Rental or lease of buildings?

**Include:**
- Job-site trailers
- Other structures
- Land

| Check if None | 2015 | 2014 |
|:---:|:---:|:---:|
| ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

**B.** Rental or lease of machinery and equipment?

**Include:**

- Construction equipment
- Tools
- Office equipment
- Furniture

| Check if None | 2015 | 2014 |
|:---:|:---:|:---:|
| ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

**TOTAL**   *(Add lines A and B)*

BACK

Review

SAVE AND CONTINUE

**SELECTED EXPENSES** (Help)

## SELECTED PRODUCTION COSTS AND ELECTRICITY

**A.** What were the selected production related
costs in 2015 for

|  | Check if None | 2015 | 2014 |
|---|---|---|---|
| **1.** Materials, parts, containers, packaging, etc used? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **2.** Products bought and sold without further processing? (*Report sales in code 9998991 in the DETAILS SALES, SHIPMENTS, REVENUE, RECEIPTS section*) | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **3.** Purchased fuels consumed for heat, power, or the generation of electricity? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **4.** Purchased electricity? (*Report comparable quantity on line B1*) | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **5.** Work done by you or others on your materials? | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |
| **TOTAL** (*Add lines A1 through A5*) | ☑ | $ 1234567891 ,000.00 | $ 1234567891 ,000.00 |

SELECTED EXPENSES A con't

**SELECTED EXPENSES** (Help)

**SELECTED PRODUCTION COSTS AND ELECTRICITY**

**B.** What was the quantity of...

|  | Check if None | 2015 Kilowatt Hours | 2014 Kilowatt Hours |
|---|---|---|---|
| **1.** Purchased electricity? *(Quantity comparable to cost reported in line A4)* | ☑ | 1234567891,000 | 1234567891,000 |
| **2.** Generated electricity? *(Gross less generating station use)* | ☑ | 1234567891,000 | 1234567891,000 |
| **3.** Electricity sold and transferred to other establishments? *(Also include on lines B1 or B2)* | ☑ | 1234567891,000 | 1234567891,000 |

BACK

Review

SAVE AND CONTINUE

## SELECTED EXPENSES B

This item may undergo some changes and be broken up across multiple screens.

**SELECTED EXPENSES** (Help)

### OTHER OPERATING EXPENSES

What were the other operating expenses paid by this establishment in 2015 for

| | Check if None | 2015 | 2014 |
|---|---|---|---|

**A.** Temporary staff and leased employees?

*(Professional Employer Organizations and staffing agencies for personnel )*

**Include all charges for:** *Payroll, benefits, services*

☑ $ 1234567891 ,000.00    $ 1234567891 ,000.00

**B.** Expensed equipment?

*(Expensed computer hardware and other equipment)*

**Include:**

- Copiers
- Fax machines
- Telephones
- Shop and lab equipment
- CPUs
- Monitors

(Report packaged software in line C)

☑ $ 1234567891 ,000.00    $ 1234567891 ,000.00

**C.** 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
- Maintenance fees related to software upgrades
- and alterations

☑ $ 1234567891 ,000.00    $ 1234567891 ,000.00

**D.** Data processing and other purchased computer services?

**Include:**

- Facilities management services
- Computer input preparation
- Data Storage
- Computer time rental
- Optical scanning services
- 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
- Expenses for telecommunication services,
- (e.g., internet, connectivity, telephone.)

☑ $ 1234567891 ,000.00    $ 1234567891 ,000.00

**E.** Purchased communication service?

**Include:**

- Telephone, cellular, and fax services,
- Computer-related communications
- (e.g., Internet, connectivity, online)
- Other wired and wireless communication services

☑ $ 1234567891 ,000.00    $ 1234567891 ,000.00

## SELECTED EXPENSES B con't

**SELECTED EXPENSES** (Help)

| | Check if None | 2015 | 2014 |
|---|---|---|---|

**OTHER OPERATING EXPENSES**

**F.** 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.

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**G.** Water, sewer, refuse removal, and other non-electric utility payments?
  **Include:**
  • Cost of hazardous waste removal
  (Report electric utility payments in line A4 in the SELECTED PRODUCTION COSTS AND ELECTRICITY area of the SELECTED EXPENSES section)

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**H.** Purchased advertising and promotional services?
  **Include:**
  • Marketing and public relations services

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**I.** Purchased professional and technical services?
  **Include:**
  • Management consulting
  • Accounting
  • Auditing
  • Bookkeeping
  • Legal
  • Actuarial
  • Payroll processing
  • Architectural
  • Engineering
  • Other professional services
  **Exclude:**
  • Salaries paid to your own employees for these services

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**J.** Governmental taxes and license fees?
  (*Payments to government agencies for taxes and licenses*)
  **Include:**
  • Business and property taxes
  **Exclude:**
  • Income taxes

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**K.** All other operating expenses not reported elsewhere?
  **Exclude:**
  • Purchases of merchandise for resale
  • Nonoperating expenses

  Specify: _____

☑  $ 1234567891 ,000.00      $ 1234567891 ,000.00

**SELECTED EXPENSES** (Help)

## OTHER OPERATING EXPENSES

|  | Check if None | 2015 | 2014 |
|---|---|---|---|
| **TOTAL** *(Add lines A through K)* | ☑ | $ 1234567891,000.00 | $ 1234567891,000.00 |

BACK

Review

SAVE AND CONTINUE

## DETAILS OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

- Autofill of the sales, receipts, or revenue will be added.    Will function as Item 22 in 2014 ASM DIR does unless there is time to make any improvements.

### DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE (Help)

**DETAILS OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE:**

What are the Details of Sales, Shipments, Receipts, or Revenue in 2015?

(This is a breakout of the ($XXXXXXXXXX,000.00) reported in total value of products shipped and other receipts in the SALES, SHIPMENTS, RECEIPTS, OR REVENUE area)

Value of products and services listed below:

- Reflect those generally made in your industry
  (If you made products that are not listed below, please add these products via the 'Add Additional Products' button below).
- Should NOT BE COMBINED with other product lines
- Should reflect the net selling value, f.o.b. plant to customer
  (i.e. after discounts, and allowances, and exclusive of freight charges and excise taxes)
- Should include value of products exports and interplant transfers
  (Exports and Interplant transfers are also reported in the SALES, SHIPMENTS, RECEIPTS OR REVENUE Section)
- For Contract Work Code 9998992:
  o Should include the amount received for 'commission or contract receipts' of products made from materials owned by others
  o Should not include the amount of products made by others for you from their own materials
    (These amounts should be reported on the specific products codes listed below as if they were made in this establishment)
- For Resales Code 9998991:
  o Should include the value of products bought and sold or transferred from other establishments of your company and sold without further manufacture. (These values should not be reported in any other specific product code).
  o A corresponding cost should be reported in line A2 of the SELECTED PRODUCTION COSTS AND ELECTRICITY area of the SELECTED EXPENSES section)

| Code | Description | 2015 Value | 2014 Value | Delete |
|------|-------------|-----------|-----------|--------|
| 3211131 | Hardwood lumber, made in sawmills | $ 321 ,000.00 | $ 777 ,000.00 | |
| 3211133 | Softwood lumber, made in sawmills | $ 3541 ,000.00 | $ 8 ,000.00 | |
| 3211135 | Wood chips, excluding field chips | $ 5556 ,000.00 | $ 65 ,000.00 | |
| 3211137 | Wood ties, siding, shingles, and shakes, and contract sawing of logs owned by others | $ 78 ,000.00 | $ 65 ,000.00 | |
| 3119426 | Flavoring extracts, emulsions, and other liquid flavors and food colorings [excluding synthetic] | $ 67 ,000.00 | $ 565 ,000.00 | X |
| 3219182 | Wood moldings | $ 56 ,000.00 | $ 77 ,000.00 | X |
| | dfsdjn;lkjmf;ljkgpfkkgp[ o[kikk,||||||||||gjdffkdm;glm ;fm;lgmfdhgfbgf | $ 65410 ,000.00 | $ 555 ,000.00 | X |
| | | $ 4454 ,000.00 | $ 65 ,000.00 | X |
| | | $ 165 ,000.00 | $ 677 ,000.00 | X |
| 9998992 | Contract work - Receipts for work done for others on their materials | $ 345 ,000.00 | $ 55 ,000.00 | |
| 9998991 | Resales - Sales of products bought and sold without further manufacture, processing, or assem | $ 334 ,000.00 | $ 56 ,000.00 | |
| 9998999 | Miscellaneous receipts [including receipts for repair work, scrap, refuse, etc.] | $ 666 ,000.00 | $ 7 ,000.00 | |
| 7700000 | **TOTAL** | $ 80993 ,000.00 | $ ,000.00 | |

Add Additional Products

**Right navigation menu:**
Main Menu | Mailing Address | Employer Identification Number (EIN) | Ownership or Control | Number of Establishments | Physical Location | Operational Status | Months in Operation | Additional Reporting Guidelines | Sales, Shipments, Rcpts/Revenue (SSRR) | E-Shipments | Employment, Payroll | Value of Inventories (INV) | INV by nonLIFO Valuation Methods | INV by LIFO Valuation Method | INV Outside the U.S. | Capital Expenditures | Rental Payments | Selected Expenses | Details of SSRR | Remarks

BACK | Review | SAVE AND CONTINUE

L43

**REMARKS**

(Please use this space for any explanations that may be essential in understanding your reported data.)

BACK

Review

SAVE AND CONTINUE

**Main Menu**

### Review Your Responses (Help)

Please use the links below to review and correct any questions having warnings and errors. You will not be able to submit your data to the Census Bureau with errors.

| Title | Status |
|---|---|
| Mailing Address | OK |
| Employer Identification Number (EIN) | OK |
| Ownership or Control | OK |
| Number of Establishments | OK |
| Physical Location | OK |
| Operational Status | OK |
| Months in Operation | OK |
| Sales, Shipments, Rcpts/Revenue (SSRR) | OK |
| E-Shipments | OK |
| Employment, Payroll | Item Contains Error(s) |
| Value of Inventories (INV) | OK |
| INV by nonLIFO Valuation Methods | OK |
| INV by LIFO Valuation Method | OK |
| INV Outside the U.S. | OK |
| Capital Expenditures | Item Contains Warning(s) |
| Rental Payments | OK |
| Selected Expenses | OK |
| Details of SSRR | OK |
| Remarks | OK |

BACK

SAVE AND CONTINUE

**CERTIFICATION**

## CALENDAR YEAR  TIME PERIOD

Is the time period covered by this report a calendar year?

⦿  Yes

⦿  No

BACK

SAVE AND CONTINUE

*[CERTIFICATION A1] = NO*

**CERTIFICATION**

**TIME PERIOD COVERED**

What time period does this report cover?

| | Month | Year | | Month | Year |
|---|---|---|---|---|---|
| From: | 04 | 2015 | To: | 11 | 2015 |

BACK

SAVE AND CONTINUE

L47

**CERTIFICATION**

## CERTIFICATION

I certify that this report is substantially accurate and was prepared in accordance with the instructions

Name of person to contact regarding this report

Title

Phone Number

Fax Number

E-mail address

Date Completed:   MMDDYYYY

01282015

BACK

SUBMIT

## SUBMISSION CONFIRMATION



**SUBMISSION CONFIRMATION**

Thank You for completing the 2015 Annual Survey of Manufactures.
Please print or save this page for your records.

**ID:** XXXXXXXXXX
**Submission Date:** Thu Aug 28 12:51:23 2016

**Company Information:**

U.S. CENSUS BUREAU
4700 SILVER HILL ROAD
SUITLAND, MD 20764-0000

**Company Contact Person:**

Phone:

Your filing status will update in 2-3 business days. To check your filing status:

- Go to econhelp.census.gov/cos
- Click "Self-Service Log in"
- Enter your User ID and Password
- Click "Log in"
- Click "Filing Status"

**Return to Main Menu**    **Logout**