

FORM **NC-99530**
(10-26-2005)

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

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

2005 OWNERSHIP OR CONTROL

A. Is your company owned or controlled by another domestic company
OR
does your company operate at more than one physical location?

- Yes - Complete lines B and C and return this form with your completed 2005 Annual Survey of Manufactures form.
- No - Discard this form (NC-99530) and return your completed 2005 Annual Survey of Manufactures form.

B. Ownership or control

1. Does another domestic company own more than 50 percent of the voting stock of your company **or** have the power to control the management and policies of your company?

- Yes - Enter the following information on the owning or controlling company ↴
- No - Go to line C

Name of owning or controlling company	Enter Employer Identification Number (EIN) of owning or controlling company (9 digits) →
Home office address (Number and street)	
City, town, village, etc.	State ZIP Code

INFORMATION COPY
DO NOT USE TO REPORT

2. What percent of voting stock was held by your own or controlling company? (Mark "X" only ONE box.)

- Less than 50%
- 50%
- More than 50%

2005
Number

C. Number of establishments operated at the end of 2005 under the EIN shown in the mailing address or as corrected in **2** on the first page of the 2005 Annual Survey of Manufactures form

If more than one establishment:

- Provide the physical location address and other information requested on the back of this form for each location.
- Provide the headquarter's location first, followed by all other locations.
- The sum of all sales, shipments, receipts, or revenue and employment and payroll for all locations should equal the amounts reported in **4** and **6** of the 2005 Annual Survey of Manufactures form.
- For employees that worked at more than one location, report the employment and payroll data for the employees at the ONE location where they spent most of their working time.

C. Number of establishments operated at the end of 2005 under the EIN shown in the mailing address or as corrected in **2** on the first page of the 2005 Annual Survey of Manufactures form - Continued

BEFORE YOU BEGIN: If this EIN had more than 3 physical locations at the end of 2005, copy this page and provide the requested data for all of your locations.

1	Name				2005		
					Estimates are acceptable		
					\$ Mil.	Thou.	
	Number and street (P.O. box and rural route addresses are not physical locations.)		Sales, shipments, receipts, or revenue				
	City, town, village, etc.		Number of employees for pay period including March 12		2005		
					Estimates are acceptable		
				Number			
State		ZIP Code					
				\$Bil.	Mil.	Thou.	
Describe kind of business at this location		First quarter payroll (Jan-Mar, 2005)					
		Annual payroll					
		INFORMATION COPY DO NOT USE TO REPORT					
2	Name				2005		
					Estimates are acceptable		
					\$ Mil.	Thou.	
	Number and street (P.O. box and rural route addresses are not physical locations.)		Sales, shipments, receipts, or revenue				
	City, town, village, etc.		Number of employees for pay period including March 12		2005		
					Estimates are acceptable		
				Number			
State		ZIP Code					
				\$Bil.	Mil.	Thou.	
Describe kind of business at this location		First quarter payroll (Jan-Mar, 2005)					
		Annual payroll					
		INFORMATION COPY DO NOT USE TO REPORT					
3	Name				2005		
					Estimates are acceptable		
					\$ Mil.	Thou.	
	Number and street (P.O. box and rural route addresses are not physical locations.)		Sales, shipments, receipts, or revenue				
	City, town, village, etc.		Number of employees for pay period including March 12		2005		
					Estimates are acceptable		
				Number			
State		ZIP Code					
				\$Bil.	Mil.	Thou.	
Describe kind of business at this location		First quarter payroll (Jan-Mar, 2005)					
		Annual payroll					

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