U.S. DEPARTMENT OF Economics and Statistics A U.S. CENSUS BUREAU FORM FI-52101	Administration 2002 FCONOMIC CFN	NSUS OMB No. 0607-0882: Approval Expires 07/31/2004
DUE DATE FEBRUARY 12, 2003		
<i>Mail</i> your completed form to: U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001	FI-52101	T COPY
Please read the accompanying information sheet(s) before answering the questions. Need help or have questions about filling out this form?	INFORMATI DO NOT USE	TO REPORT
<i>Visit</i> our Web site at www.census.gov/econhelp <i>Call</i> 1-800-233-6136, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.	DO NOT USE	
- OR - Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.	(Please correct any error	rs in this mailing address.)
that receive this questionn law, YOUR CENSUS REP	QUIRED BY LAW. Title 13, United States Code, naire to answer the questions and return the report PORT IS CONFIDENTIAL. It may be seen only by tion and may be used only for statistical purposes al process.	t to the U.S. Census Bureau. By the same y persons sworn to uphold the confidentiality
	 Please center numbers in their respective boxes. Do not put slashes through 0 or 7. 	. Examples:
The reporting unit for this where business is conduct information sheet(s).	form is an establishment. An establishment is g ted or where services or industrial operations are	generally a single physical location performed. For further clarification, see
MONTHS IN OPERATION Number of months in ope	ration during 2002 (If none, mark "X" and go to $oldsymbol{3}$	Mark "X" 2002 if None Number of months 0.) 0.02 0.02
2 EMPLOYER IDENTIFICATIOn Is the Employer Identificat establishment on its latest	ON NUMBER ion Number (EIN) shown in the mailing address th t 2002 Internal Revenue Service Form 941, Employ	he same as the one used for this /er's Quarterly Federal Tax Return?
0021 Yes 0022	No - Enter current EIN (9 digits)	→ 0025 -
 3 PHYSICAL LOCATION A. Is this establishment's (P.O. box and rural rou 0031 Yes 0032 No - Enter physic location 	physical location the same as shown in the mailir ite addresses are not physical locations.)	ng address?
₀₀₃₁ Yes	0035 Number and street	
0032 D No - Enter physic	cal 0036 City, town, village, etc.	0037 State 0038 ZIP Code
location		
B. Is this establishment p	hysically located inside the legal boundaries of the	e city, town, village, etc.?
0041 Yes 0042	No 0043 No legal boundaries	0044 Do not know
 Type of municipality w 	here this establishment is physically located	

								Mark ">	<u>/"</u>		2002	2
HOW TO			r figures sho sands of do	ould be roun ollars.	ded to			if None		Mil.		Thou.
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VEASED EMPLOYMENT AND PAYROLL A Dist this establishment have any full- or part-time leased employees whose payroll was filed under an employee line of the stabilishment have any full- or part-time leased employees whose payroll was filed under an employee for the stability of the stability	Number	r (CFN) from	the r	er your 11-digit Census File mailing address.				
Leasing company's EIN? Exclude: • Exclude: • Contractors, subcontractors, or independent contractors. • Purchased or managed services, such as janitorial, guard, or landscape services. • 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. • Employees already reported in O . For further clarification, see information sheet(s). • Wark *X* 2002 • No - Go to line B • No - Go to O • No - Go to O • No - Go to O • Mark *X* 2002 • If Nome • No - Go to O • Mark *X* 2002 • No - Go to O • No - Go to O • Number • Not - Go to O • • • • • • • • • • • • • • • • • • •	7 LEA	SED EMPLO	YMEN	T AND PAYROLL				
 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. Employees already reported in O. For further clarification, see information sheet(s). Yes - Go to line B Yes - Go to O Mark *X[*] 2002 No - Go to O Mark *X[*] 2002 If None Number of leased employees for pay period including March 12	A .	Did this estat leasing comp	olishm any's	ent have any full- or part-time leased employees wh EIN?	iose payroll wa	as filed u	under an	employee
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• Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services. • Employees already reported in O . For further clarification, see information sheet(s). Outline • Yes - Go to line B 0221 • Yes - Go to O 0222 • No - Go to O 8. Number of leased employees for pay period including March 12. 0230 • Payroll for leased employees for pay period including March 12. 1. Annual payroll for leased employees 2002 <i>fi None</i> 2002 <i>finge benefits.</i> 1. Annual payroll for leased employees (<i>January-March, 2002</i>) <i>Mark</i> 'X' 2002 <i>fi None fi Non</i>		 Contracto 	rs, sul	contractors, or independent contractors.				
<pre>programming, engineering, or accounting services. • Employees already reported in 0. For further clarification, see information sheet(s). out of the set of t</pre>		• Purchased	l or m	anaged services, such as janitorial, guard, or landsc	ape services.			
For further clarification, see information sheet(s). 0211 Yes - Go to line B 0222 No - Go to © 8. Number of leased employees for pay period including March 12. 0200 6. Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.) 2002 1. Annual payroll for leased employees . 0000 2. First quarter payroll for leased employees (January-March, 2002) 0000 3. WIND OF BUSINESS Still. Principal kind of business in 2002 (Mark *X* only ONE box.) 2002 0000 522 298 60 27 U.S. Central Credit Union 522 298 60 27 U.S. Central Credit Union 522 298 60 27 52 200 00 15 Other kind of business or activity - Specify 7		 Profession programm 	nal or ning, e	technical services purchased from another firm, suc angineering, or accounting services.	h as software o	consultiı	ng, comp	uter
0311 Yes - Go to line B 0322 No - Go to © 8. Number of leased employees for pay period including March 12. 0370 • Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.) 2002 • Annual payroll for leased employees . 0350 • First quarter payroll for leased employees (January-March, 2002) Mark "X" • Oro • Mill. • Nor & Applicable. • Mark "X" • Nor & Applicable. • Mill Nore • Nincipal kind of business in 2002 (Mark "X" only ONE box.) • Sector and reserve depository institution • 522 298 60 27 U.S. Central Reserve bank or branch • 522 298 60 27 U.S. Central Credit Union • 522 110 10 16 Bank primarily engaged in full service commercial banking - national charter • 75 000 01 5 Other kind of business or activity - Specify 7		 Employee 	s alrea	ady reported in 3 .				
0222 No - Go to ① Mark "X" 2002 if None B. Number of leased employees for pay period including March 12. 0202 C. Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.) 2002 1. Annual payroll for leased employees . 0350 2002 \$ Mil. Thou. 1. Annual payroll for leased employees (January-March, 2002) 0350 3 - ① Not Applicable. Mill of business in 2002 (Mark "X" only ONE box.) 0700 521 110 00 10 Federal Reserve bank or branch 522 298 60 27 522 110 10 16 Bank primarily engaged in full service commercial banking - national charter 775 000 00 15 Other kind of business or activity - Specify 7	1	For further cl	arifica	tion, see information sheet(s).				
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		775 000 00 15		Other kind of business or activity - Specify $$				
19-21 Not Applicable.	0701							
	M _ M	Not Applica	ble.					

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						Foti	mate	2002	ntable		
	HOW TO REPORT							es are acce ollars OR p			
	PERCENTS				\$ Bil.	Mil	•	Thou.	Dol.	Per	cer
		If figure is 38.76% of total sales:	Report whole perc	ents			1				3
22		SHIPMENTS, RECEIPTS, OR R							_	•	
	(Report sources of (reported in 4). Se combine data for tw	revenue for this establishmen ee HOW TO REPORT DOLLAR wo or more lines.)	t, either as a dollar figuro FIGURES on page 2 and	e or as HOW	s a who TO RE	le per PORT	cent PER	of total re CENTS ab	evenu love.	e Do n	ot
	Line 1 - Loan incor Include interest ear	me includes interest received, ned on federal funds loaned to	origination and other fee o other financial institution	es rece ons.	eived, a	nd rev	enu	e from sa	les of	loan	s.
	for interchange of e government benefit transactions). Line using ACHs. Line 2	rovided by computer-based club electronic debits and credits and t checks, and payment of bills 2a - Services that allow account 2b - Services that allow account g ACHs. Line 2c - All other set	nong financial institutior (such as consumer-type int holders automated do nt holders automatic with	ns, incl paym eposit ndrawa	ludes d ents ar of payı als of b	irect d nd busi roll an ill pav	epo ines d otl mer	sit of payı s-to-busin her credits nts and otl	oll ar ess s to a	nd ccour	nts
	Line 3 - Other proc	ducts supporting financial serv	ices not elsewhere class	ified.							
				Cen- sus				2002 es are acce ollars OR p			
	Descriptio	on of sales, shipments, receipts, or	revenue	use	\$ Bil.	Mil		Thou.	Dol.	s. Per	cer
0723				0720	0721					0722]
1.	Loans to financial b	ousinesses					1				
	a. Interest income			55011			-				
	b. Origination fees			55012							
	c. Other fees			55013							
	d. Sum lines 1a t	hrough 1c		55010							
2.	Automated clearing	ghouse (ACH) products					1				
	a. ACH payroll dep	posit fees		57610							
	b. ACH bill and uti	lity payment fees		57620							
	c. Other ACH fees			57630			1				
3.	Other products sup	porting financial services - fee	s - Specify 7								
				57810			1				
4.	TOTAL (Should eq	ual 🕘 if reporting in dollars.)		59990			1			1	0
23-	-25 Not Applicable	9.									
26	SPECIAL INQUIRIES										
	INTEREST EXPE	INSE			Mark	"X"		200)2		
					if No		Bil.	Mil.	Th	ou.	D
	Interest paid on	deposit accounts		• • 50	050		1				
27-	-28 Not Applicable										

Form FI-52101 If not shown, please enter your 11-digit Censu	s File				Р				
Number (CFN) from the mailing address.									
29 OPERATIONAL STATUS									
Activity that best describes this establishment' (Mark "X" only ONE box.)	s status at the end	d of 2002							
			00	18 Month Da	v Year				
	d operation - <i>Give</i>	-			iy ieai				
seasonally inactive - Give	Temporarily or seasonally inactive 0015 Sold or leased to another operator - Give date at right AND enter new name and mailing address below								
0060 Name of new owner or operator	00	061 Employer Ide	entification Num	nber					
		Enter EIN o		-					
0062 Mailing address (number and street, P.O	Box etc.)	owner (9 d	$g(ts) \rightarrow$						
⁰⁰⁶³ City, town, village, etc.			0064 State 006	5 7IP Code					
					-				
30 CERTIFICATION - This report is substantially a	ccurate and was p	prepared in acc	ordance with	the instruction	ns.				
Is the time period covered by this report a calendar	vear?		No. au						
		Month OM	Year	TO	nth Year				
	:overed>	0070		0071					
⁰⁰⁷² Name of person to contact regarding this report	0073	Title							
Area code Number	Extension		Area co	ode N	Number				
Telephone -		Fax	0075		-				
0074 0076 Internet e-mail address				Month Da	iy Year				
			Date completed						
-				069					
Thank you for complet	ing your 200	U2 Econor	nic Censu	is form.					
PLEASE PHOTOCOPY THIS FORI	I FOR YOUR RE	CORDS AND	RETURN TH	E ORIGINAL.					