



Mail your completed form to:
U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47132-0001

Need help or have questions
about filling out this form?

Visit our Web site at
www.census.gov/econhelp

- OR -

Write to the address above.
Include your 11-digit Census File
Number (CFN) printed in the
mailing address.

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(Please correct any errors in this mailing address.)

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.

The purpose of this form is to obtain an accurate and up-to-date list of your establishments, i.e., separate business locations that were in operation or new plant(s) under construction during part or all of 2006. This list should include establishments of your company and each of its subsidiaries. To make it easier for you to complete this report, we have prelisted information in 5A that you have previously provided to the U.S. Census Bureau. Please list all other establishments of your organization on 5B. Do not duplicate establishments already prelisted in 5A. Be sure to include items 1 through 4 when returning your completed report form. Before completing this form, please read the enclosed definitions and instructions.

1 COMPANY OWNERSHIP OR CONTROL

A. DOMESTIC OWNERSHIP OR CONTROL

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

0008 Yes - Enter the following information on the owning or controlling company ↴

0009 No - Go to line B

| | | | | |
|--|---|------------|---------------|--|
| 0080 Name of owning or controlling company | 0081 Enter Employer Identification Number (EIN) of owning or controlling company (9 digits) → | | - | |
| 0082 Home office address (Number and street) | | | | |
| 0083 City, town, village, etc. | | 0084 State | 0085 ZIP Code | |
| | | | - | |

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

0027 Less than 50%

0028 50%

0029 More than 50%

1 COMPANY OWNERSHIP OR CONTROL - Continued

B. FOREIGN OWNERSHIP OR CONTROL

Does a foreign entity (company, individual, government, etc.) own directly or indirectly 10 percent or more of the voting stock or other equity rights of your company?

6101 Yes - Enter the following information on the owning entity and go to line C 7

6103 Name of foreign beneficial owner

6104 Home office address (Number and street)

6105 City

6106 Country

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What was the percent ownership (direct and indirect)? (Mark "X" only ONE box.)

6111 10-24%

6113 50%

6115 100%

6112 25-49%

6114 51-99%

6102 No - Go to line C

C. FOREIGN AFFILIATES

Does this company alone, or with its domestic affiliates, own 10 percent or more of the voting stock of an incorporated foreign business enterprise, or an equivalent interest in an unincorporated business enterprise, including ownership of real estate?

6126 Yes

6127 No

2 SERVICES PURCHASED FROM FOREIGN ENTITIES

A. In 2006, did your company or its U.S. affiliates purchase services from any affiliated or unaffiliated foreign entities (i.e., located outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions)? (Include services purchased from foreign entities regardless of where the services were performed. Exclude services purchased from domestic subsidiaries of foreign firms. Exclude services purchased by your company's foreign affiliates.)

0433 Yes - Go to line B

0434 No - Go to 3

B. What was the value of services purchased from foreign entities during 2006?

0449 Less than \$250,000

0450 \$250,000 or more

3 EMPLOYEES FROM A PROFESSIONAL EMPLOYER ORGANIZATION

Did your company lease 50 percent or more of your permanent full- and part-time workforce from a Professional Employer Organization during 2006? (Permanent workforce excludes temporary staffing from a staffing service and contractors.)

0244 Yes

0245 No

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

| | | | | | | | | | |
|---|-----------|--------|---|-----------|----------------|-----------|--------|-----|------|
| Name of person to contact regarding this report | | | | | Title | | | | |
| | | | | | | | | | |
| Telephone | Area code | Number | | Extension | Fax | Area code | Number | | |
| | | | - | | | | | - | |
| Internet e-mail address | | | | | Date completed | | Month | Day | Year |
| | | | | | | | | | |