

## 2007 ECONOMIC CENSUS Finance and Insurance Sector Consolidated Report Forms

### INFORMATION SHEET

This 2007 Economic Census information sheet covers companies engaged in the following areas of economic activity:

- Direct insurance carriers — initially underwriting life, accident, health, fire, marine, casualty and/or surety insurance
- Reinsurance carriers — assuming all or part of the risk associated with existing insurance policies originally underwritten by other insurance carriers

This report form requests data for activities conducted in the United States during 2007.

If the consolidated report form does **NOT** seem to apply to the activity engaged in by this company, **DESCRIBE** the business or activity in item **19 AND COMPLETE** the report form. Complete items **28A** and **28B** as accurately as possible. In many cases this will satisfy Census Bureau requirements.

#### DEFINITION OF A CONSOLIDATED REPORTING UNIT

A **consolidated reporting unit** is the grouping of all the domestic establishments of a company that operate in a specified industry (major activity) into a single reporting unit. The consolidated reporting unit applies to networked industries where the production of goods or services cannot be attributed to a single establishment. An establishment is generally a single physical location. This consolidated report form should include data for all networked establishments (locations) operated by this company during 2007.

#### GENERAL INSTRUCTIONS

- Complete the report form for all locations operating in the industry printed in the mailing address section on the first page of the consolidated report form, for the United States, including the fifty states and the District of Columbia. Do not include United States possessions or territories.
- The report form should cover calendar year 2007. If book figures are not available, **estimates are acceptable**. However, if the accounting fiscal year is different from the calendar year, fiscal year figures will be acceptable for all items except payroll (calendar year figures for payroll, for each location, should be available from Internal Revenue Service (IRS) Form 941, Employer's Quarterly Federal Tax Return, or Form 944, Employer's Annual Federal Tax Return). Indicate in item **30** the exact dates covered.

- If an establishment listed in item **28A** stopped operating in the major activity/industry printed before January 1, 2007, indicate action and date in column **(c)** of the Pre-identified Locations of Operation supplement (item **28A**).
- If an establishment listed in item **28A** was closed, sold, or leased to another company or organization during 2007, complete column **(b)** for the portion of 2007 that the location operated in the major activity/industry printed. Indicate action and date in column **(c)** of the Pre-identified Locations of Operation supplement (item **28A**).
- Revenue and payroll data should be rounded to the nearest thousand dollars as illustrated on the report form.
- If there are any questions or if any communications regarding this report form is necessary, reference the 11-digit Census File Number (CFN) printed in the mailing address section on the first page of the consolidated report form.
- Please photocopy each report form for your records and return the originals.
- Public reporting burden for this collection of information is estimated to vary from 12 minutes to 4 hours and 30 minutes per response, with an average of 1 hour and 18 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0931, U.S. Census Bureau, 4600 Silver Hill Road, AMSD - 3K138, Washington, DC 20233. You may e-mail comments to [Paperwork@census.gov](mailto:Paperwork@census.gov); use "Paperwork Project 0607-0931" as the subject.
- Response to this collection of information is not required unless it displays a valid approval number from the Office of Management and Budget (OMB). The OMB eight-digit number appears in the upper right corner of the report form.

#### INSTRUCTIONS FOR SELECTED ITEMS

##### 5. SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Report total revenue for the company's United States locations operating in the industry printed in the mailing address section on the first page of the consolidated report form. Revenue should be reported in thousands of dollars.

For companies which generate no revenue, report zero and explain in the remarks section, if available, at the end of the report form.

**Include:**

- Interest, dividends, royalties, and net realized capital gains (losses).
- Commissions and fees received from all sources, including fees earned for exchanging currencies, selling money orders, and cashing checks.
- Net gains (losses) from the sale of real property owned for investment, rent, or lease (**NOT** gross sales).
- Gross sales (**NOT** net gains (losses)) of real property developed or buildings built for sale.
- Gross rents from real property leased to others.
- The consolidated reporting unit's share of revenue from departments, concessions, and vending and amusement machines operated by others.
- Revenue from the rental and leasing of vehicles, equipment, instruments, tools, video tapes, etc. Interest earned from financing leases should be included with interest.

**Exclude:**

- Revenue or other taxes (including Hawaii's General Excise Tax) collected directly from customers and paid directly to a state, local, or federal tax agency.
- Revenue of departments or concessions operated by others.

## 7. EMPLOYMENT AND PAYROLL

Definitions are the same as those used on the Internal Revenue Service (IRS) Forms 941 and 944, and as described in Circular E, Employer's Tax Guide.

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

### A. Employment

**Include:**

- All full- and part-time employees on the payroll during the pay period including March 12, 2007.
- Salaried officers and executives of a corporation.
- Salaried members of a professional service organization or association (operating under state professional corporation statutes and filing a corporate federal income tax return).

- Employees on paid sick leave, paid vacations, and paid holidays.
- Agents considered employees of the firm (e.g., full-time life insurance agents) as reported on IRS Form 941 or 944.

**Exclude:**

- Proprietors or partners of an unincorporated company.
- Employees of departments or concessions operated by others.
- Full- and part-time leased employees whose payroll was filed under an employee leasing company's Employer Identification Number (EIN).
- Temporary staffing obtained from a staffing service.
- Agents **not** considered employees of the firm on IRS Form 941 or 944 (e.g., independent insurance agents).

### B. Payroll

**Include:**

- Wages, salaries, tips, vacation allowances, bonuses, commissions, and other compensation paid to employees during 2007 and reported on IRS Forms 941 or 944 as taxable Medicare Wages and tips (even if not subject to income or FICA tax).
- Salaries of officers and executives of a corporation.
- Salaries of members of a professional service organization or association (operating under state professional corporation statutes and filing a corporate federal income tax return).
- Employee contributions to qualified pension plans.
- The spread on stock options that is taxable to employees as income.
- Compensation paid to sales agents as reported on IRS Form 941 or 944 (**exclude** if reported on IRS Form 1099 - MISC - Statement for Recipients of Miscellaneous Income).

**Exclude:**

- Payments to or withdrawals by proprietors or partners of an unincorporated company.
- Annuities or supplemental unemployment compensation benefits, even if income tax was withheld.
- Payrolls of departments or concessions operated by others.
- Compensation paid to agents **not** considered employees of the firm on IRS Form 941 or 944 (e.g., independent insurance agents).

## 19. KIND OF BUSINESS

Choose the **one** kind of business that best describes the primary business activity of this consolidated reporting unit in 2007. If none of the provided selections seem appropriate, mark (X) the box next to "Other kind of business or activity" and provide a specific description of the primary business activity.

## 22. DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

- Report either in thousands of dollars OR as a whole percent of total revenue as illustrated on the report form. It is not necessary to report both dollars and percentages. Percentages are preferable.
- **Report losses by including a dash prior to the dollar amount.**
- **Estimates are acceptable**, but please **do not** combine data for two or more lines.
- If revenue was received from a source(s) not listed, report this revenue on the "Other products" line at the end of the list and describe the revenue source(s) in the space provided.
- The sum of revenue lines reported should equal 100 percent (or the amount reported in item 5 if the lines are reported in dollars).

## 28. LOCATIONS OF OPERATION

### A. Pre-identified Locations of Operation

We prelisted physical locations of your company that are part of this consolidated reporting unit based on Census records. Please bring this list up to date as follows:

- **Column (a)** — Please correct any errors or omissions in the prelisted information. If the major activity listed is not the major activity of the location, correct the major activity and do not include this location in the count, item 28C.
- **Column (b), 2007 Employment and Payroll** — Report the number of employees and payroll for each establishment. Do not combine data for locations.
- **Column (c), Operational Status** — Mark (X) the **one** box that best describes the operational status of the establishment at the end of 2007.
  - **In operation** — The establishment was open and actively conducting business on December 31, 2007.
  - **Temporarily or seasonally inactive** — Although not conducting business at the end of 2007, the establishment will eventually reopen and conduct business under the same Employer Identification Number (EIN). Examples include businesses in resort areas that close during the "off-season" or establishments that temporarily close for remodeling.

- **Ceased operation** — The establishment has gone out of business or closed and does not plan to reopen. Provide the **month, day, and year** that the establishment ceased operation. Complete all items for the portion of 2007 during which the establishment was in operation.
- **Sold or leased to another operator** — The establishment was sold or leased to another company or organization. Provide the **month, day, and year** that the change occurred and indicate the name and address of the new owner or operator. Complete all items for the portion of 2007 prior to the change in operator.
- **Other** — The establishment's operational status at the end of 2007 is not accurately described above. Please specify a description of the establishment's operational status in the space provided.

### B. Additional Locations of Operation

Provide additional establishments not prelisted in item 28A that operate in the industry printed in the mailing address section on the first page of the consolidated report form.

- If your company operates at locations for which you received separate establishment report form(s), do not add them, but rather complete the other report forms.
- If additional space is needed to add locations, please photocopy the blank page of item 28B and provide the additional locations.
- **Column (a)** — List separately any locations of your company and its subsidiaries that were not included in item 28A, but were in operation and engaged in the industry printed in the mailing address section on the first page of the consolidated report form.
- **Columns (b), 2007 Employment and Payroll** — Report the number of employees and payroll for each establishment. Do not combine data for locations.
- **Column (c1)** — Enter the two digit code from the MAJOR ACTIVITY CODES list that best describes the major activity of each location. Please specify the principal products or services.
- **Column (c2)** — Provide the name and address of previous owner and date of purchase for each acquired establishment listed.

### C. Number of Locations

Provide a summation of all establishments prelisted in item 28A that are in operation or temporarily inactive, minus the establishments closed or sold, plus the establishments added in item 28B.