# **2007 Annual Services Report Service Annual Survey**

## Radio Networks



**FORM** 

**SA-5151** 

138 SAS\_I

515111

**REPORT DUE** 

Any questions call **1-800-772-7851** M-F, 8:30 a.m. to 5:00 p.m. EST.

Visit our web site: www.census.gov/econhelp/sas

Please correct any error in the name, address, or ZIP Code.

### YOUR RESPONSE IS REQUIRED BY LAW

Title 13, U.S. Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau.

### YOUR RESPONSE IS CONFIDENTIAL BY LAW

Title 13, U.S. Code, requires that your response may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. The law also provides that copies retained in your files are **immune from legal process.** 

## YOUR RESPONSE IS IMPORTANT

The services industries account for nearly 70 percent of all economic activity. We conduct this survey to obtain timely, comprehensive and consistent measures needed by policy-makers, businesses, and the public to accurately assess domestic economic performance.

2007

## **Annual Services Report**

- This report should be completed and returned on or before the due date in the preaddressed envelope provided.
- If filing within the required time frame will cause an undue burden and you would like an extension, or if you have any questions, please write to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001

or call a Census Bureau Representative at 1-800-772-7851, weekdays from 8:30 a.m. to 5:00 p.m., Eastern Standard Time.

## 1 Report Coverage

This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in broadcasting audio signals. These establishments operate radio broadcasting studios and facilities for the transmission of aural programming by radio to the public, to affiliates, or to subscribers. The radio programs may include entertainment, news, talk shows, business data, or religious services.

|          | Does the above covera                                         | ge describe this firm's business activity?                                                    |   |
|----------|---------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---|
| 0001 1 2 | <ul><li>Yes – Go to </li><li>No – Specify the firm'</li></ul> | s business activity and complete the report where applicable beginning with $lacksquare$ . —— | K |
|          | 0002                                                          |                                                                                               |   |

# 2 Report Periods

What periods of time will this data represent?

- Report data for the 2007 calendar year if possible.
- For locations that were sold or acquired during the year, only report for the periods that this firm operated the locations.

|      |                                                                       | 0007 | Month | Day | Year |
|------|-----------------------------------------------------------------------|------|-------|-----|------|
|      |                                                                       | 0007 |       |     |      |
| 0006 | 1 ☐ 2007 calendar year – Go to 3                                      | From |       |     |      |
|      | 2 Other than calendar year – Enter the periods this report will cover |      |       |     |      |
|      | (e.g., fiscal years, periods with less than a full calendar           | 8000 |       |     |      |
|      | year).                                                                | То   |       |     |      |
|      |                                                                       |      |       |     |      |

| 3 | Operating | Revenue   |
|---|-----------|-----------|
|   | Operaning | 110101140 |

Report the total operating revenue for this firm's locations defined in 1 for the following categories.

- Enter "0" where applicable.Estimates are acceptable.

## Include:

· Allowances for cash or other discounts.

Exclude:
• Transfers made within the company.

|           |                                                                                                                                                                                                                                                                                     |      | 2007 | Operati | ng Rever | nue  |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|---------|----------|------|
| Air       | Time                                                                                                                                                                                                                                                                                | 6251 | Bil. | Mil.    | Thou.    | Dol. |
| 1.        | National/regional air time – Providing air time for broadcasting advertising content and program content (e.g., commercials, real estate listings, infomercials, and sponsorship)                                                                                                   |      | \$   |         |          |      |
| 2.        | <b>Local air time</b> – Providing air time for broadcasting advertising content and program content (e.g., commercials, real estate listings, infomercials, and sponsorships)                                                                                                       | 6252 | \$   |         |          |      |
| Oth       | er Operating Revenue                                                                                                                                                                                                                                                                |      |      |         |          |      |
|           | Network compensation – Compensation paid by the networks for carrying commercial network programs. Network owned and operated stations, exclude intracompany transfers.                                                                                                             | 6253 | \$   |         |          |      |
| 4.        | Public and non-commercial programming services – The provision of television and                                                                                                                                                                                                    |      |      |         |          |      |
|           | radio broadcasts, generally without the insertion of advertising messages, for the benefit of the public at large. The broadcasting of these programs is largely financed by grants, gifts, subsidies, membership dues, underwriting, contracts, fundraising, royalties, and sales. | 6254 | \$   |         |          |      |
| <b>5.</b> | All other operating revenue – Revenue not reported in lines 1–4. If this item is greater than 20% of the total operating revenue, specify the primary source of the revenue here $_{\not\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!\!$                   | 1799 |      |         |          |      |
| 1300      |                                                                                                                                                                                                                                                                                     |      | \$   |         |          |      |
| 6.        | TOTAL OPERATING REVENUE – Sum of lines 1–5                                                                                                                                                                                                                                          | 1800 | \$   |         |          |      |

Not Applicable

# **Operating Expenses**

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
  Estimates are acceptable.
  Do not combine data of two or more detail lines.

### Exclude:

- Transfers made within the companyCapitalized expenses

- InterestBad debt

| •    | Income tax Impairment                                                                                                                                                                                                                                                                                                              |      |      |           |          |      |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|-----------|----------|------|
| Doro | sonnel Costs                                                                                                                                                                                                                                                                                                                       |      | 200  | 7 Operati | na Expei | nses |
| reis | Soffiler Costs                                                                                                                                                                                                                                                                                                                     |      | Bil. | Mil.      | Thou.    | Dol. |
| 1.   | <b>Gross annual payroll</b> – Total annual Medicare salaries and wages for all employees as reported on your firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period.                                                                                   | 1821 | \$   | IVIII.    | mou.     | DOI. |
| 2.   | Employer's cost for fringe benefits – Employer's cost for legally required programs and programs not required by law:                                                                                                                                                                                                              |      |      |           |          |      |
|      | a. Health insurance – Insurance premiums on hospital plans, medical plans, and single service plans such as dental, vision, prescription drugs plan. Include premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs). Exclude employee contributions.                                        | 1841 | \$   |           |          |      |
|      | b. Pension plans:                                                                                                                                                                                                                                                                                                                  |      |      |           |          |      |
|      | 1. Defined benefit pension plans – Costs for both qualified and unqualified defined pension plans. Pension 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 the | 1842 |      |           |          |      |
|      | employee's compensation and years of service and are not allocated to specific accounts maintained for employees.                                                                                                                                                                                                                  |      | \$   |           |          |      |
|      | <ol> <li>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</li> </ol>                                                                         | 1843 |      |           |          |      |
|      | contributed and the results of the account's activity. Examples include profits sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)                                                                                                                                                               |      | \$   |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |
|      | c. Other – Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare).                                                                                                                                               | 1844 | \$   |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |
| 3.   | <b>Temporary staff and leased employee expense</b> – Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. <b>Include</b> all charges for payroll, benefits and services.                                                                                                            | 1823 | \$   |           |          |      |
| Ехр  | ensed Materials, Parts and Supplies (not for resale)                                                                                                                                                                                                                                                                               |      |      |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |
| 1    | Expensed equipment – Expensed computer hardware and other equipment (e.g., copiers,                                                                                                                                                                                                                                                | 1824 |      |           |          |      |
| ٦.   | fax machines, telephones, shop and lab equipment, CPUs, and monitors). Report packaged software in line <b>6.</b> Report leased and rented equipment in line <b>14.</b>                                                                                                                                                            |      | \$   |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |
| 5.   | Expensed purchases of other materials, parts, and supplies – Materials and supplies used in providing services to others; materials and parts used in repairs; office and janitorial supplies; small tools; containers and other packaging materials; and motor fuels                                                              | 1825 | \$   |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |
|      | ensed Purchased Services                                                                                                                                                                                                                                                                                                           |      |      |           |          |      |
| 6.   | <b>Expensed purchases of software</b> – Purchases of prepackaged, custom coded, or vendor                                                                                                                                                                                                                                          | 1826 |      |           |          |      |
|      | customized software. <b>Include</b> software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.                                                                                                  |      | \$   |           |          |      |
|      |                                                                                                                                                                                                                                                                                                                                    |      |      |           |          |      |

# Operating Expenses – (Continued)

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
  Estimates are acceptable.
  Do not combine data of two or more detail lines.

#### Exclude:

- Transfers made within the company
- Capitalized expenses
- Impairment
- Interest
- Bad debt
- Income tax

## **Expensed Purchased Services (Continued)**

| 7.  | Data processing and other purchased computer services – Include web hosting,                       |      | 2007 | Oporati | na Evnon |      |
|-----|----------------------------------------------------------------------------------------------------|------|------|---------|----------|------|
|     | computer facilities management services, computer input preparation, data storage,                 |      |      |         | ng Exper |      |
|     | computer time rental, optical scanning services, and other computer-related advice                 | 4045 | Bil. | Mil.    | Thou.    | Dol. |
|     | and services, including training. <b>Exclude</b> expensed integrated systems, repair               | 1845 |      |         |          |      |
|     | and maintenance of computer equipment, payroll processing and credit card transaction              |      | \$   |         |          |      |
|     | fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone)        |      | Ψ    |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 8.  | Purchased communication services – Telephone, cellular, and fax services; computer-                | 1846 |      |         |          |      |
|     | related communications (e.g., Internet, connectivity, online), and other wired and wireless        |      |      |         |          |      |
|     | communication services                                                                             |      | \$   |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 9.  | Purchased repairs and maintenance to machinery and equipment – Expensed repair                     |      |      |         |          |      |
|     | and maintenance services to machinery, vehicles, equipment, and computer hardware.                 | 1848 |      |         |          |      |
|     | <b>Exclude</b> materials, parts, and supplies used for repairs and maintenance performed by this   |      | l .  |         |          |      |
|     | firm's employees.                                                                                  |      | [\$  |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 40  |                                                                                                    |      |      |         |          |      |
| 10. | Purchased repairs and maintenance to buildings, structures, and offices – Include                  | 1849 |      |         |          |      |
|     | repair and maintenance to integral parts of buildings (e.g., elevators, heating systems).          | 1049 |      |         |          |      |
|     | <b>Exclude</b> materials, parts, and supplies used for repairs and maintenance performed by        |      | \$   |         |          |      |
|     | this firm's employees. Report janitorial and grounds maintenance services in line 22               |      | ĮΨ   |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
|     |                                                                                                    | 1850 |      |         |          |      |
| 11  | Purchased electricity - If the cost of electricity is included in lease or rental payments,        | 1000 |      |         |          |      |
|     | report in line 15.                                                                                 |      | \$   |         |          |      |
|     | report in line 10.                                                                                 |      |      |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 12. | <b>Purchased fuels (except motor fuels)</b> – Fuel for heating, power or generating electricity    | 1851 |      |         |          |      |
|     | (e.g., natural gas, propane, oil, coal). If the costs are included in lease or rental payments,    |      |      |         |          |      |
|     | report in line 15.                                                                                 |      | \$   |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 13. | Water, sewer, refuse removal, and other utility payments – Include the cost of hazardous           | 1852 |      |         |          |      |
|     | waste removal. If the costs of these utilities are included in a lease or rental payment, report   |      | φ.   |         |          |      |
|     | in line <b>15</b>                                                                                  |      | \$   |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 14  | Lease and rental payments for machinery, equipment, and other tangible items –                     | 1853 |      |         |          |      |
| 17. | <b>Include</b> lease and rental of transportation equipment without operators; and penalties       | 1000 |      |         |          |      |
|     | incurred for broken leases. <b>Exclude</b> capital and financing lease agreements and              |      | \$   |         |          |      |
|     | licensing/leasing of software                                                                      |      |      |         |          |      |
|     | moortaining/roadsing of continuous.                                                                |      |      |         |          |      |
|     |                                                                                                    | 1854 |      |         |          |      |
| 15. | Lease and rental payments for land, buildings, structures, store spaces, and offices -             |      | _    |         |          |      |
|     | Include penalties incurred for broken leases                                                       |      | 1\$  |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
|     |                                                                                                    | 1830 |      |         |          |      |
| 16. | Purchased advertising and promotional services – Include marketing and public relations            |      |      |         |          |      |
|     | services.                                                                                          |      | \$   |         |          |      |
|     |                                                                                                    |      |      |         |          |      |
| 17. | Purchased professional and technical services - Include management consulting, accounting,         | 1855 |      |         |          |      |
|     | auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other |      |      |         |          |      |
|     | professional services. <b>Exclude</b> salaries paid to your own employees for these services       |      | \$   |         |          |      |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |      |         | Pa       | ge 6 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|---------|----------|------|
| 5 Operating Expenses – (Continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |      |         |          |      |
| Report operating expenses for this firm's locations as defined in 1 for the following cate  Enter "0" where applicable.  Estimates are acceptable.  Do not combine data of two or more detail lines.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | gorie | es.  |         |          |      |
| Exclude:  Transfers made within the company Capitalized expenses Impairment Interest Bad debt Income tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |      |         |          |      |
| Other Operating Expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       | 2007 | Operati | na Exper | ises |
| The state of the s |       | Bil. | Mil.    | Thou.    | Dol. |
| 18. Broadcast rights and music license fees – The cost of broadcast rights to feature films, syndicated programming, sports events, and other programming. Exclude capitalized costs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6255  | \$   |         |          |      |
| 19. Network compensation fees (networks only) – The cost of programming time purchased from affiliated and independent stations. Exclude the cost of programming time purchased from stations owned by your company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 6256  | \$   |         |          |      |
| 20. Depreciation and amortization charges – Include depreciation charges taken against tangible assets owned and used by your firm, tangible assets and improvements owned by your firm within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). Exclude impairment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1831  | \$   |         |          |      |
| 21. Governmental taxes and license fees – Payments to government agencies for taxes and licenses. Include business and property taxes. Exclude income taxes, and sales and excise taxes collected from customers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1832  | \$   |         |          |      |
| 22. All other operating expenses – All other operating expenses not reported above, unless specifically excluded in the general instructions at the top of the page. Include office postage and package delivery. Exclude purchases of merchandise for resale and non-operating expenses.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1859  | \$   |         |          |      |
| 23. TOTAL OPERATING EXPENSES – Sum of lines 1–22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1900  | \$   |         |          |      |
| 6 Not Applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |      |         |          |      |

| 7    | Not Applicable                                                                                                                                                                                                                                                                            |                     |                       |                      |                       |                        |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------|----------------------|-----------------------|------------------------|
|      |                                                                                                                                                                                                                                                                                           |                     |                       |                      |                       |                        |
| 8    | E-Commerce Revenue                                                                                                                                                                                                                                                                        |                     |                       |                      |                       |                        |
|      | E-commerce includes sales, receipts, and contributions from any transaction completed over network, electronic mail or other online system. Transactions are agreements between buyer ownership of, or rights to use, goods or services. Payment for these goods and services may online. | ers and             | sellers               | to tran              | sfer                  |                        |
|      | Did the revenue reported in 2 include any                                                                                                                                                                                                                                                 |                     | 2007                  | E-Comm               | erce Rev              | /enue                  |
|      | Did the revenue reported in 3 include any e-commerce revenue?                                                                                                                                                                                                                             | 2000 [              | Bil.                  | Mil.                 | Thou.                 | Dol.                   |
|      | 1 ☐ Yes – What was this firm's e-commerce revenue?                                                                                                                                                                                                                                        |                     | \$                    |                      |                       |                        |
| 0011 | ₂ No – Go to ᠑                                                                                                                                                                                                                                                                            |                     |                       |                      |                       |                        |
| 9    | Export Revenue                                                                                                                                                                                                                                                                            |                     |                       |                      |                       |                        |
|      | An exported service is a service performed for a customer or client (individual, government outside the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwe Include:                                                                                          | , busin<br>ealth Te | ess est<br>erritorie: | tablishn<br>s, or U. | nent, etc<br>S. posse | c.) locate<br>essions) |
|      | • Services performed for unaffiliated and affiliated foreign firms (i.e., foreign parent firms,                                                                                                                                                                                           | subsidi             | aries, b              | ranche               | s, etc.).             |                        |
|      | Exclude:                                                                                                                                                                                                                                                                                  |                     |                       |                      |                       |                        |
|      | Services provided to domestic subsidiaries of foreign firms.                                                                                                                                                                                                                              |                     |                       |                      |                       |                        |
|      |                                                                                                                                                                                                                                                                                           |                     |                       |                      |                       |                        |
|      |                                                                                                                                                                                                                                                                                           |                     | 20                    | 07 Expo              | rt Reven              | ue                     |
|      | Did the revenue reported in include any revenue from exports?                                                                                                                                                                                                                             | <b>2100</b> F       | Bil.                  | Mil.                 | Thou.                 | Dol.                   |
|      | 1 ☐ Yes – What was this firm's revenue from exports?                                                                                                                                                                                                                                      |                     | \$                    |                      |                       |                        |
| 0009 | 2 □ No – Go to iii                                                                                                                                                                                                                                                                        |                     |                       |                      |                       |                        |

10 Not Applicable

| Did you have an Employer Identification Number (EIN) change in 2007?    Ves - Enter the new EIN.   EIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| Was there a change in ownership or control?    Ves - Provide the date of the change and the firm's information. (for multiple mergers, provide each firm's information as an attachment to this report)   Name of company acquired or merged with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |
| Was there a change in ownership or control?    Was there a change in ownership or control?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |        |
| Was there a change in ownership or control?    Ves - Provide the date of the change and the firm's information   Control of the firm's information as an attachment to this report)   No - Go to   2   No - Go to   2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| Specify the nature of this change here   Specify the nature of c   |        |
| Yes - Provide the date of the change and the firm's information.   (for multiple mergers, provide each firm's information as an attachment to this report)   Name of company acquired or merged with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Year   |
| (for multiple mergers, provide each firm's information as an attachment to this report)  0017  Name of company acquired or merged with  Street address  City, State, ZIP Code  0019  EIN  Specify the nature of this change here  Specify the nature of this change here  For any separate correspondence pertaining to this report, please include the identification nur address label area at the top of the first page.  3 Certification — This report is substantially accurate and has been prepared in accordance with the instruction Name of person completing this report — Please print  Name of person completing this report — Please print  O024  Address (Street address, City, State, ZIP Code)  0022 Telephone number  0023 Fax number  0026 E-mail address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |        |
| Name of company acquired or merged with    Street address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |        |
| Specify the nature of this change here  Specify the nature of this change here  Please provide an explanation for any inconsistent or incomplete data that would aid in under For any separate correspondence pertaining to this report, please include the identification nur address label area at the top of the first page.  Certification — This report is substantially accurate and has been prepared in accordance with the instruction was prepared in accordance with the instruction of the first page.  Mame of person completing this report — Please print    Output  Address (Street address, City, State, ZIP Code)  Output  O |        |
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| curn Completed form to: Public reporting burden for this collection of information is estimated to average 5.5 hours per response, inc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | tions. |

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