

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

FI-52301 (01/03/2007)

## **2007 ECONOMIC CENSUS**

**Securities and Commodity Exchanges** 

OMB No. 0607-0931: Approval Expires 12/31/2008

## DUE DATE FEBRUARY 12, 2008

Mail your completed form to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001

**Please read** the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

Visit www.census.gov/econhelp

**Call** 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

OR -

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

FI-52301

## INFORMATION COPY DO NOT USE TO REPORT

Number (CFN) printed in the mailing address.	(Please correct any errors	s in this mailing address.)
that receive this questions law, <b>YOUR CENSUS RE</b>	QUIRED BY LAW. Title 13, United States Code, repaire to answer the questions and return the report PORT IS CONFIDENTIAL. It may be seen only by the seen only by the seen by the seen only for statistical purposes, all process.	t to the U.S. Census Bureau. By the same y persons sworn to uphold the confidentiality
• Use blue or black ballpoint po	·	oxes. Examples:
<ul><li>Do not use pencil or felt-tip p</li><li>Place an "X" inside the box.</li></ul>	en. • Do not put slashes through 0 or 7.	□ 0 1 2 3 4 5 6 7 8 9
	form is an establishment. An <b>establishment</b> is g ted or where services or industrial operations are p	
1 EMPLOYER IDENTIFICATI Is the Employer Identifica establishment on its lates	ON NUMBER tion Number (EIN) shown in the mailing address th t 2007 Internal Revenue Service Form 941, Employ	ne same as the one used for this er's Quarterly Federal Tax Return?
0021 Yes - Go to 2	No - Enter current EIN (9 digits)	0025
PHYSICAL LOCATION  A. Is this establishment's  (P.O. Box and rural ro	physical location the same as shown in the mailin ute addresses are not physical locations.)	ıg address?
0031 🗌 Yes - Go to line	В	
	0035 Number and street	
0032 No - Enter —— physical	<b>—</b>	
location	0036 City, town, village, etc.	0037 State 0038 ZIP Code
<b>B.</b> Is this establishment p (Mark "X" only ONE b	physically located inside the legal boundaries of the $ox$ .)	e city, town, village, etc.?
0041 Yes 0042	☐ No 0043 ☐ No legal boundaries	0044 Do not know
C. In what type of munic	ipality is this establishment physically located? (Ma	ark "X" only ONE box.)

<sub>0047</sub> Town or township

0046 City, village, or borough

<sub>0024</sub> Do not know

0048 Other

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## OPERATIONAL STATUS Which ONC of the following best describes this establishment's operational status at the end of 2007? (Mark 'X' only ONE box.)    Cett		11020	O 1 (0 1/0 3/200 /)											r age z
Cosed operation - <i>Give date at right</i> Sold or leased to another operator - <i>Give date at right</i> AND arter name and address of new owner or operator and Employer Identification Number (EIN) below?    2007		Which O	NE of the foll	owing best de	scribes this es	tablishment's	operational s	tatus	at the	end c	of 2007	?		
Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer identification Number (EIN) below?    2002 Name of new owner or operator   100 Not Statu   100 Not Not Not Applicable.   2007   2007 Not Applicable.   2007 Not		0011	In operation			0013	Temporarily	or se	asona	lly ina	ctive			
Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer Identification Number (EIN) below?    Sost Name of new owner or operator		0014	Ceased opera	ation - <i>Give da</i>	te at right _					<b></b>	Month	Day	Yea	ar
acc Mailing address (Number and street, P.O. Box, etc.)    0865 City, town, village, etc.   0864 State   0865 ZIP Code		0015	AND enter no	ame and addre	ess of new ow	ner or operat	or			0018				
OSSS City, town, village, etc.  OSSS Silla Salid. Mill. Thou. Dol.  Mark 'X' 2007			0060 Name of	new owner or c	perator					0061 E	IN (9 di	gits)		
OSSS City, town, village, etc.  OSSS Silla Salid. Mill. Thou. Dol.  Mark 'X' 2007			14 :11:	/N /N	D.C	\ B \ \ \					-			
4 MONTHS IN OPERATION    Mark "X"   2007			0062 Mailing a	idaress (Numbe	r and street, P.C	o. Box, etc.)	<u></u>							
MONTHS IN OPERATION    Mark "X"   2007			0063 City, tow	n, village, etc.				0064	State	0065 Z	IP Code			
MONTHS IN OPERATION  Mark 'X' 2007  If None  Number of months in operation during 2007 (If none, mark "X" and go to ⑤).  Dollar figures should be rounded to thousands of dollars.  If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00):  Report  If None  SALES. SHIPMENTS. RECEIPTS. OR REVENUE  Mark 'X' 2007  If None  SALES. SHIPMENTS ARECEIPTS. OR REVENUE  Mark 'X' 2007  If None  SPILE and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in ⑥.  Exclude:  Temporary staffing obtained from a staffing service.  Contractors, subcontractors, or independent contractors.  Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.  Purchased or managed services, such as janitorial, guard, or landscape services.  Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.  A. Number of employees for pay period including March 12.  1. Annual payroll before deductions (Exclude employer's cost for fringe benefits.)														
Number of months in operation during 2007 (If none, mark "X" and go to ①.)    Comparison of Mark "X"   2007   1		0016	Other - Spec	ify —	£15 ▶									
HOW TO REPORT DOLLAR FIGURES  If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00):  SALES, SHIPMENTS, RECEIPTS, OR REVENUE  Mark "X 2007 If None \$BII. Mil. Thou. Dol. Report   1 None \$BII. Mil. Thou. Dol. Revenue   1 None \$BII. Mil. Thou. Dol. Revenue \$BII. Mil. Thou. Dol. Revenue \$BII. Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in \$\frac{0}{2}\$.  Exclude:   Temporary staffing obtained from a staffing service.   Contractors, subcontractors, or independent contractors.   Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.   Purchased or managed services, such as janitorial, guard, or landscape services.   Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.   Mark "X 2007   Number   Numbe	4	MONTHS	S IN OPERATI	ON									Mark "X" if None	
Dollar figures should be rounded to thousands of dollars.  If a figure is \$1,025,628.79: If a value is "0" (or less than \$500.00):  Report    Favorable   Favorabl		Number	of months in	operation duri	ng 2007 <i>(If no</i>	ne, mark "X"	and go to <b>ூ</b> .)			_				
If a figure is \$1,025,628.79:   Report			)	Dollar figures thousands of	should be <b>rou</b> dollars	<b>nded</b> to					I. N			Dol.
SALES, SHIPMENTS, RECEIPTS, OR REVENUE    Mark "X"   2007		DOLLAR		If a figure is \$	1,025,628.79	<b>)</b> :	Report	<b></b>				1	0 2 6	
Revenue		TIGOTILE		lf a value is "0	" (or less than	\$500.00):	Report —	<b></b>	X			' 	1 1	
Revenue	5	SALES, S	SHIPMENTS, I	RECEIPTS, OR	REVENUE			۸	∕lark "X	.,,		200	7	
Temperary staffing obtained from a staffing service.  • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.  • Furchased or managed services, such as janitorial, guard, or landscape services.  • Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.  • A. Number of employees for pay period including March 12											I. <b>N</b>	1il.	Thou.	Dol.
## PAYROLL    Include:   • Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in ●.    Exclude:   • Temporary staffing obtained from a staffing service.   • Contractors, subcontractors, or independent contractors.   • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.   • Purchased or managed services, such as janitorial, guard, or landscape services.   • Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.    For further clarification, see information sheet(s).   A. Number of employees for pay period including March 12		Revenue						0100				L		
Include:  • Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in ●.  Exclude:  • Temporary staffing obtained from a staffing service.  • Contractors, subcontractors, or independent contractors.  • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.  • Purchased or managed services, such as janitorial, guard, or landscape services.  • Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.  For further clarification, see information sheet(s).  A. Number of employees for pay period including March 12	6	Not Appl	licable.											
Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in .  Exclude:  • Temporary staffing obtained from a staffing service. • Contractors, subcontractors, or independent contractors. • Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN. • Purchased or managed services, such as janitorial, guard, or landscape services. • Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.  For further clarification, see information sheet(s).  A. Number of employees for pay period including March 12	7			AYROLL										
<ul> <li>Temporary staffing obtained from a staffing service.</li> <li>Contractors, subcontractors, or independent contractors.</li> <li>Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.</li> <li>Purchased or managed services, such as janitorial, guard, or landscape services.</li> <li>Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.</li> <li>For further clarification, see information sheet(s).</li> <li>A. Number of employees for pay period including March 12.</li> <li>B. Payroll before deductions (Exclude employer's cost for fringe benefits.)</li> <li>Mark "X" 2007 if None Number</li> <li>Mark "X" 2007 if None \$Bil. Mil. Thou. Dol.</li> <li>1. Annual payroll</li></ul>		Ser	vice Form 941	l, Employer's (	Quarterly Fede	ral Tax Retui	nt whose payr n, and filed un	roll wa nder t	as rep he Em	orted ploye	on Inte r Identi	rnal F ficatio	Revenue on Numbe	er
<ul> <li>Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.</li> <li>Purchased or managed services, such as janitorial, guard, or landscape services.</li> <li>Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.</li> <li>Mark "X" 2007</li> <li>For further clarification, see information sheet(s).</li> <li>A. Number of employees for pay period including March 12</li></ul>				ng obtained fro	om a staffing s	service.								
Purchased or managed services, such as janitorial, guard, or landscape services.  Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.  Mark "X" 2007  For further clarification, see information sheet(s).  A. Number of employees for pay period including March 12							ed under an en	nolov	ee lea	sina c	ompan	v's El	N.	
consulting, computer programming, engineering, or accounting services.  Mark "X" 2007  For further clarification, see information sheet(s).  A. Number of employees for pay period including March 12		• Pur	chased or ma	naged services	s, such as jani	torial, guard,	or landscape	servic	es.	J	,	,		
For further clarification, see information sheet(s).  A. Number of employees for pay period including March 12									arc		Ml. // X	,,	2007	
B. Payroll before deductions (Exclude employer's cost for fringe benefits.)  1. Annual payroll		For furth	ner clarificatio	n, see informa	tion sheet(s).									
B. Payroll before deductions (Exclude employer's cost for fringe benefits.)  \$ Bil. Mil. Thou. Dol.  1. Annual payroll		A. Numb	ber of employ	ees for pay pe	riod including	March 12 .				0320				
		<b>B.</b> Payro	oll before ded	uctions ( <i>Exclud</i>	de employer's	cost for fring	e benefits.)				I. M			Dol.
2. First quarter payroll (January-March, 2007)		<b>1.</b> Ar	nnual payroll					0300						
		<b>2.</b> Fi	rst quarter pa	yroll <i>(January</i> -	March, 2007)			0310				1		

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If no Nun	ot shown, please nber (CFN) from 1	ente he n	er your 11-digit Census Fil nailing address.	е							
8-	-18 Not Applicab	le.									
19	KIND OF BUSINES										
	(Mark "X" only ON		owing best describes this est ox.)	ablishment's principal k	kind o	f busin	ess in 200	7?			
0700	523 210 00 1		Securities exchange								
	523 210 00 2		Commodities exchange								
	523 999 00 2		Securities/commodities exc	hange clearinghouse							
	775 000 00 1		Other kind of business or a	ctivity - <i>Specify</i>							
0701	1										
20	and 21 Not Appl	icab	le.								
								2007			
	ноw то							es are acce ollars OR p			
	REPORT PERCENTS					\$ Bil.	Mil.	Thou.	Dol.		cent
			If figure is <b>38.76%</b> of total sales:	Report whole perce	nts						3 9
	(reported in <b>5</b> ). S combine data for	See F two	enue for this establishment, HOW TO REPORT DOLLAR Fl or more lines.) n services that provide an inf	GURES on page 2 and .	HOW	TO RE	PORT PER	CENTS ab	ove.	Do r	ot
	Descript	ion o	f sales, shipments, receipts, or r	evenue	Cen- sus use			es are acce ollars OR p	-		
0723	·		, , , , , ,		0720	\$ Bil.	Mil.	Thou.	Dol.	Per	cent
1.	Management of fi	nanc	ial market and clearing prod	ucts							
	a. Payment clear	ng a	nd settlement products - fee	S	57511			' '			,
	<b>b.</b> Security and consettlement pro	omm ducts	nodity contract trade executions - fees	on, clearing and	57512		1 1				
	c. Access to secu		and commodity contract trad oducts - fees	e execution and	57513		1 1				
	<b>d.</b> Security and coproducts - fees		nodity contract exchange and		57514						
	e. Other manage	ment	t of financial markets and cle	aring products	57515						
	f. Sum lines 1a	thro	ough 1e		57510						
2.	Regulation of secu	ıritie	s markets		58260		' '	' '			
3.	Other products su	ppor	ting financial services - fees	- Specify 7							
					57810						
4.	TOTAL (Should e	qual	f if reporting in dollars.)		59990					1	0 0
23	and 24 Not Appl	icabl	le.								

EXPORTED SI	ERVICES										
NOTE - An ex	ported service is a se	ervice performed	for a cust	omer or o	client (	individua	l, goveri	nment, l	busin	ess	
Commonweal	t, etc.) located <b>outsid</b> Ith Territories, or U.S.	possessions). S	ervices pe	rformed	for una	affiliated	and affil	iated fo	reign	firms	
(i.e., foreign p foreign firms	arent firms, subsidiar	ries, branches, etc	c.) are inci	luded. Se	ervices	provide	d to dom	nestic su	ıbsid	iaries of	
ioreign iirins	are excluded.										
<b>A.</b> Did the red	ceipts or revenue (rep	orted in <b>⑤</b> ) inclu	de any an	nounts fo	r expo	rted serv	ices?				
$\Box$ ,	, , , , , , , , , , , , , , , , , , ,										
0911	es - Go to line B									2007	
0912	No							\$ 1	// il.	Thou.	Dol
										1 1	
<b>B.</b> Amount o	f receipts or revenue f	for exported serv	ices				0914	<u> </u>			
6- <b>29</b> Not Appl	icable.										
	use this space for any	1			, .						
the time period c	N - This report is sub	a calendar year?			d in ac	cordance	e with th	e instru TO	ction		əar
the time period c	overed by this report	a calendar year? me period covere		-ROM			e with th		1		ear
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the time period c	overed by this report  No - Enter tire contact regarding this	a calendar year? me period covere		FROM Title		Year	e with th	то	Mont		ear
the time period c	overed by this report  No - Enter tire contact regarding this	a calendar year? me period covere report	ed →	FROM Title		Year		то	Mont	th Yo	ear
the time period c  Yes  Name of person t  Telephone	overed by this report  No - Enter tire or contact regarding this  Area code	a calendar year? me period covere report	ed →	FROM Title	Month	Year		ТО	Mont	umber	
the time period c  Yes  Name of person t	overed by this report  No - Enter tire or contact regarding this  Area code	a calendar year? me period covere report	ed →	FROM Title	Month	Year		то	Mont	umber	ear

Thank you for completing your 2007 ECONOMIC CENSUS form.

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.