

## 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.

MI-21352

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same Iaw, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ballpoint pen. • Please center numbers in their respective boxes. Examples:
- Do not use pencil or felt-tip pen. - Do not put slashes through 0 or 7.
- Place an "X" inside the box.

The reporting unit for this form is a mineral service establishment. A mineral service establishment represents all nationwide mineral support activities performed for operators of mineral properties under your current Employer Identification Number (EIN) on a fee or contract basis.

Mineral service activities include exploration and other mining and quarrying support services.
For more examples and further clarification, see information sheet(s).

## (1)-4 <br> Not Applicable.

| HOW TO REPORT DOLLAR FIGURES | Dollar figures should be rounded to thousands of dollars. <br> If a figure is $\mathbf{\$ 1 , 0 2 5 , 6 2 8}$. $\mathbf{7 9}$ : | Mark "X" if None |  | 2007 |  |  |
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|  |  | $\begin{aligned} & \text { Report } \longrightarrow \square \\ & \text { Report } \longrightarrow \square \end{aligned}$ |  |  | 1 | 026 |
|  | If a value is " 0 " (or less than \$500.00): |  |  |  |  |  |

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE
Exclude nonoperating income such as royalties, interest, dividends, or the sale of fixed assets.
A. Total value of products shipped and other receipts (Report detail in 22.) . . . 0100
B. Value of products exported (This is a breakout of the value reported on line A.)
Report the value of products shipped for export. Include shipments to customers in the Panama Canal Zone, the Commonwealth of Puerto Rico, and U.S. possessions, as well as the value of products shipped to exporters or other wholesalers for export. Also, include the value of products sold to the U.S. Government to be shipped to foreign governments. $\qquad$

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Not Applicable.

## If not shown, please enter your 11-digit Census File

 Number (CFN) from the mailing address.EMPLOYMENT AND PAYROLL

## Include:

- Full- and part-time employees for this reporting unit whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return.


## Exclude:

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Temporary staffing obtained from a staffing service.
- Subcontractors and their employees.

For further clarification, see information sheet(s).
A. Number of employees

1. Number of production, development, and exploration workers for pay period including March 12
. . . . . . . . . . 0325

| Mark " $X$ " |  |
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| if None | 2007 |
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2. Number of other employees for pay period including March 12 $\qquad$
3. TOTAL (Add lines A1 and A2) 0320


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2. First quarter payroll (January-March, 2007) . . . . . . . . . . . . . . . 0310

C. Number of hours worked by production, development, and exploration workers (Annual hours worked by production, development, and exploration workers reported on line A1.)
D. Employer's cost for fringe benefits - Employer's cost for legally required programs and programs not required by law.
3. Health insurance - Insurance premiums on hospitals, medical plans, and single service plans such as dental, vision, and prescription drug plans. Include premium equivalents for self-insured plans and fees paid to third party administrators (TPAs). Do not include employee contributions. $\qquad$
4. Pension plans
a. 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 employee's compensation and years of service and are not allocated to specific accounts maintained for employees.
b. 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 contributed and the results of the account's activity. Examples include profit sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)
5. Other - Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare)
6. TOTAL (Add lines D1 through D3) 0220

| Mark "X if None | 2007 |  |  |
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Not Applicable.

## INVENTORIES

Report inventories at cost or market using generally accepted accounting practices.
A. Did this establishment own inventories, regardless of where held, at the end of 2007 and/or 2006 ?
$0486 \quad \square$ Yes - Go to line B
$0487 \quad \square \quad$ No - Go to 13
B. Report inventories for products owned by this establishment as of December 31.

1. Total inventories before Lastin, First-out (LIFO) adjustment (if any)


Mark "
if None
2. LIFO reserve (if any) . . . . . . . 0466
3. Total inventories after LIFO adjustment value (Line B1 minus line B2) $0468 \quad \square$


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## INVENTORIES BY VALUATION METHOD

Report how much of the inventory reported in © , line B1 is subject to the following valuation methods.
A. LIFO valuation method before adjustment

| Mark "X" if None | End of 2007 |  |  |
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| $0465 \square$ |  |  |  |
|  |  |  |  |
| $0487 \quad \square$ |  |  |  |
| . $0510 \square$ |  | 1 |  |

B. Any non-LIFO valuation method Specify method 7

0895 $\qquad$ 0487
C. TOTAL (Add lines A and B. Total should equal $\boldsymbol{9}$, line B1.)

Not Applicable.
and 12
ASSETS, CAPITAL EXPENDITURES, RETIREMENTS, AND DEPRECIATION
See information sheet(s) on how to report leasing arrangements.
A. Gross value of depreciable assets (acquistion cost) at the beginning of the year

0500

B. Capital expenditures for new and used buildings, structures, machinery, and equipment depreciable assets (Exclude land.)

0520
C. Total retirements and disposition of depreciable assets for the year (Gross value of assets sold, retired, scrapped, destroyed, etc.)

0510
D. Gross value of depreciable assets at the end of the year (Add lines $A$ and $B$ minus C)
E. Depreciation charges for the year 0540

| Mark "X if None | 2007 |  |  |
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## RENTAL PAYMENTS

A. Rental payments for buildings and other structures (Include land.). 0551
B. Rental payments for machinery and equipment 0552
C. TOTAL (Add lines A and B) 0550

| Mark "X if None | 2007 |  |  |
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Not Applicable.

## SELECTED EXPENSES

Include costs incurred in mining process such as supplies, resales, contract work, fuels, and electricity.
A. Selected production related costs

1. Cost of supplies used, minerals received for preparation and purchased machinery installed (Report detail in (17.)

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\text { . . . . . . . . . . . . . . . . . } 0421
$$

| Mark "X" <br> if None |  |  |  |  |
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2. Cost of products bought and sold as such without further processing (Report sales in ${ }^{2}$ 2.) 0426
3. Cost of purchased fuels consumed for heat, power, or the generation of electricity (Report detail in (18.)
4. Cost of purchased electricity (Report quantity on line B1.) . . . . . . . . . 0425
5. Cost of work done for you by others on your materials 0424
6. TOTAL (Add lines A1 through A5)
. . . . . . . . . . . . . . . . . . . 0420$\square$

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B. Quantity of Electricity

1. Purchased electricity (Quantity comparable to cost reported on line A4.) . . 0436
2. Generated electricity (Gross less generating station use.)

0437


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## SELECTED EXPENSES - Continued

C. Other operating expenses paid by this establishment

1. Temporary staff and leased employee expense - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel (Include all charges for payroll, benefits and services.) $\qquad$
$\qquad$
2. Expensed equipment - Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors) (Report packaged software on line C3.)
3. Expensed purchases of software - Purchases of prepackaged, custom coded or vendor customized software (Include 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.) 0188
4. Data processing and other purchased computer services (Include computer facilities management services, computer input preparation, data storage, computer time rental, optical scanning services, and other computer-related advice and services, including training. Exclude expensed integrated systems, repair and maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone).) . 0198
5. Purchased communication services - Telephone, cellular, and fax services; computer-related communications (e.g., Internet, connectivity, online) and other wired and wireless communication services
6. Purchased repairs and maintenance to buildings and/or machinery and equipment (Exclude materials, parts, and supplies used for repairs and maintenance performed by this firm's employees.) . 0394
7. Water, sewer, refuse removal, and other utility payments (Include the costs of hazardous waste removal.) 0407
8. Purchased advertising and promotional services (Include marketing and public relations services.).
9. Purchased professional and technical services (Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering, and other professional services. Exclude salaries paid to your own employees for these services.) . . . . . 0216
10. Governmental taxes and license fees - Payments to government agencies for taxes and licenses (Include business and property taxes. Exclude income taxes.) 0396
11. All other operating expenses - All other operating expenses not reported elsewhere (Exclude purchases of merchandise for resale and nonoperating expenses.)-Specify

12. TOTAL (Add lines C1 through C11) . 0449

## DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES

## Report:

Delivered cost of individual items listed below. Delivered cost is the amount paid or payable after discounts and including freight and other direct charges incurred by the establishment in acquiring the materials. The figures reported should represent the total purchase cost of supplies, minerals received for preparation, machinery installed, etc., actually used or processed during 2007. Include purchases, interplant transfers, and withdrawals from inventories. If the data are not available from your records, reasonable estimates are acceptable.

## Include:

Items listed below whether charged to current or capital accounts.
Cost of items for which less than $\$ 25,000$ worth was used in "All other supplies," line 6.
Supplies purchased by this establishment for use by companies performing subcontract work for this establishment.
Exclude:
Associated labor costs of the kind reported in 7 and 16, line A5.
Payments made for subcontract services performed, including payments for supplies and equipment furnished by the contractor incidental to this work.


## FUELS USED

Kind of fuel (Report total delivered cost, not cost per unit. Fuels received from other establishments of your company should be included at estimated market value.)

|  |  |
| :--- | :--- |
|  | 0643 |
| $\mathbf{1}$ | Coal (bituminous, subbituminous, lignite, and anthracite). |


| Census fuel code | Unit of measure for quantities |
| :---: | :---: |
| 0640 | 0645 |
| 21211003 | short tons |

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FUELS USED - Continued

and 21 Not Applicable.
DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

## Include:

Separately, total amounts received or due for all types of mineral services performed for others during 2007.
Receipts for supplies and equipment furnished by you incidental to the contract work.
Coal or other minerals mined during the year for the account of others, but not delivered during 2007.
Work done in 2007, but not billed in 2007.
The estimated market value of services rendered, if payment for work was not made in cash.
Exclude receipts for work performed prior to 2007.

DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued


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DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued


Not Applicable.

## LOCATIONS OF OPERATION

A. Complete the Pre-identified Locations of Operation supplement (See attached pages for ${ }^{68}$ A.)
B. Complete the Additional Locations of Operation supplement (See attached pages for $\sqrt{28}$ B.)
C. Number of locations

Include:

- All locations in operation or temporarily inactive in 38 A.
- All locations added in 98 B.


## Exclude:

- All locations that have ceased operation or were sold.

| Mark "X" | 2007 |
| :---: | :---: |
| if None | Number |

Total number of locations currently in operation
6070
Not Applicable.
REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

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


