

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

TW-48360 (12/27/2006)

2007 ECONOMIC CENSUS

Water Transportation

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.

TW-48360

INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations
that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same
law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persons sworn to uphold the confidentiality
of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents'
files are immune from legal process.
e blue or black ballpoint pen. • Please center numbers in their respective boxes. Examples:

•	• Do not put slashes through 0 or 7.	×	0	1			6		

The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

0		NUMBER Number (EIN) shown in the mailing address the 7 Internal Revenue Service Form 941, Employer	
	0021 Yes - Go to 2 0022	□ No - Enter current EIN (9 digits) —	0025
2		sical location the same as shown in the mailing ddresses are not physical locations.)	address?
	0031 ☐ Yes - Go to line B		
		0035 Number and street	
	No - Enter → physical		
	location	0036 City, town, village, etc.	0037 State 0038 ZIP Code
	B. Is this establishment physic (Mark "X" only ONE box.)	cally located inside the legal boundaries of the c	ity, town, village, etc.?
	0041 Yes 0042	No 0043 No legal boundaries	0044 Do not know

₀₀₄₇ Town or township

C. In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046 City, village, or borough

☐ Do not know

0024

0048 Other

L	۸,	J
(`	١
()
(Ξ)
c	•	כ
()
C	χ)
7	Ì	t

		300 (12/27/20	,,,,,												1 age 2
3	Which O	IONAL STATIONE of the formula of the	ollowing	best des	scribes t	this estal	blishment's	s operational s	status	at the	e end c	of 2007	?		
	0011	In operation	n				0013	Temporarily	ors	easona	ally ina	ıctive			
	0014	Ceased ope	eration -	Give da	te at rig	ıht						Month	Day	, Y	ear
	0015	Sold or lea AND enter and Emplo	name a	nd addre	ess of ne	ew owne	er or opera				0018				
		0060 Name	of new o	wneroro	perator						0061 E	IN (9 di	gits)		
												-			
		0062 Mailing	g address	s (Numbei	r and stre	eet, P.O. E	Box, etc.)								
		0063 City, to	own, villa	ge, etc.					0064	State	0065 Z	IP Code			1 1
														-	
	0016	Other - Spe	ecify —	08	315 →										
4	MONTHS	S IN OPERA	TION											Mark "X" if None	2007 Number
	Number	of months i	n opera	tion duri	ng 2007	(If none	e, mark "X"	and go to 📆.			_				
	HOW TO		Dollar thou s	figures : sands of	should l dollars.	be roun e	ded to			Mark ") if Non		1. N	200 lil.	Thou.	Dol.
	REPORT DOLLAR FIGURES		lf a fiç	gure is \$	1,025,6	328.79:		Report —	-				1	0 2	6
			lf a va	lue is "0	" (or les	s than \$	500.00):	Report —		X				1 1	
5	SALES, S	SHIPMENTS	, RECEII	PTS, OR	REVENU	JE				Mark "2	x "		200)7	
										if Non		I. N	lil.	Thou.	Dol.
	Operatin	g revenue							0100						
6	Not App	licable.													
0	EMPLOY Include:	MENT AND :	PAYRO	LL											
	• Fuli Ser	l- and part-ti	941, Emp	olover's (Quarterl	y Federa	ıl Tax Retu	ent whose pay rn, and filed u	roll v nder	vas rep the En	oorted nploye	on Inte r Identi	rnal l ficatio	Revenue on Numl	per
	Exclude • Ten	e: mporary stat	ffina oh:	tained fro	om a sta	affina sei	rvice								
	• Cor	ntractors, su	bcontra	ctors, or	indeper	ndent coi	ntractors.		,	,			, ,	18.1	
	• Pur	chased or n	nanaged	l services	s, such a	as janitoi	rial, guard,	ed under an ei or landscape	servi	ices.	asıng c	ompan	y s E	IIV.	
	• Pro con	fessional or sulting, con	technic nputer p	al service programn	es purch ning, en	nased fro ngineerin	om anothei ig, or accoi	r firm, such as unting service:	softı s.	ware					
	For furth	ner clarificati	ion, see	informat	tion she	et(s).						Mark "X if None		2007 Numbe	r
							/larch 12 .				. 0320			1 1	1 1
	B. Payro	oll before de	eduction	s (Exclud	de empl	oyer's cc	ost for fring	ge benefits.)		Mark ") if Non		1. N	200 1il.	7 Thou.	Dol.
	1. A	nnual payro	Ш						0300						
	2. Fi	rst quarter p	payroll (January-	March,	2007) .			. 0310						

If not shown, please Number (CFN) from t	ente he n	er your 11-digit Census File nailing address.
8-18 Not Applicab	le.	
(Mark "X" only ON	follo	owing best describes this establishment's principal kind of business in 2007? ox.)
Water transpo	tatio	on of freight
⁰⁷⁰⁰ 483 111 00 1		Deep sea of cargo to or from foreign ports
483 113 00 1		Coastal, intercoastal transportation
483 113 00 4		Great Lakes - St. Lawrence Seaway transportation
483 211 10 1		Inland waterways, excluding towing service for barges owned or controlled by others
Water transpoi	tatio	on of passengers, except by ferry
483 112 00 1		Deep sea to or from foreign ports, except by ferry
483 114 00 2		Coastal or Great Lakes - St. Lawrence Seaway, except by ferry
487 210 10 1		Scenic and sightseeing, including dinner cruises, excursions, and harbor tours
487 210 20 1		Charter fishing or party fishing boat
532 292 00 3		Pleasure boat rental
713 990 80 8		River rafting or canoeing
483 212 20 1		Other water passenger transportation, including water taxis - Specify
0701		
Ferry transport	atio	n of passengers
483 114 00 1		Coastal or Great Lakes - St. Lawrence Seaway
483 212 10 1		Inland waterways
Other services	inci	dental to water transportation or activity
483 113 00 2		Towing services: coastal or intercoastal
483 211 20 1		Towing services: inland waterways
488 330 00 4		Tugboat services, including fleeting and harbor service
488 310 00 4		Operation of a port or waterfront terminal
488 320 00 1		Marine cargo handling, including stevedoring
488 330 00 6		Piloting of vessels
488 330 00 5		Marine salvaging
532 411 10 1		Commercial vessel or barge rental or lease without crew
488 390 00 B		Marine cargo inspectors and/or surveyors
		CONTINUE WITH © ON PAGE 4

7	j	ŀ
C)
C)
(٥)
C	4)
C	•)
7	7	r

	1 1 1 1 1 - 40 900 (12/2	-7/2000/								ı age	_
1 9	KIND OF BUSINE	SS - (Continued								
	Other service	s inci	dental to water transport	ation or activity - Cor	ntinu	ed					
070	713 930 00 4		Marina								
	488 390 00 8		Other services incidental to	o water transportation, i	ncludi	ng boa	t barge cl	eaning - S	pecify	' ₹	
070	1										
	Arrangement	of tra	ansportation for freight a	nd cargo							
	488 510 10 1		Freight forwarding service	_							
	488 510 20 3		Freight/shipping agent or b	oroker, except freight for	ward	ing					
	Arrangement	of tra	ansportation for passenge	ers							
	561 510 00 1		Travel agency								
	561 520 00 2		Tour operator								
	Other busines	s act	ivities								
	774 000 00 1		Other kind of business or a	activity - Specify							
070	11										
┝	and 21 Not App	olicabl	e.								
								2007			
	ноw то							es are acce ollars OR po			
	REPORT PERCENTS					\$ Bil.	Mil.	Thou.	Dol.	Percent	
	TENOLIVIO		If figure is 38.76% of total sales:	Report whole perce	nts					3 9	$\overline{\ }$
22	(Report sources operating revenue	of ope ie (rep	IPMENTS, RECEIPTS, OR RE erating revenue for this estal ported in ⑤). See HOW TO not combine data for two c	blishment, either as a do REPORT DOLLAR FIGUR	ollar fi RES oi	igure o n page	r as a who 2 and HO	ole percent W TO REP	t of to ORT	tal	
					Cen-		- · ·	2007			4
	Descrip	otion of	f sales, shipments, receipts, or	revenue	sus			es are acce _l ollars OR po			
0723					0720	\$ Bil.	Mil.	Thou.	Dol.	Percent	
1.			liquids and gases in interm				1 1	1 1		1 1	
	,				43000						
2.			liquids and gases, except in		43010	·					
3.	•		oulks, except in intermodal t		43020						
4.			ate-controlled boxed and pa tainers, by water		43030						
5.	Transportation o	f boxe	ed and palletized goods, not		43040						
6.	·		ate-controlled intermodal co		43050						
7.			r intermodal containers, not		43060						
			CONTIN	IUE WITH ② ON PAGE 5							

If no Nun	ot shown, please enter your 11-digit Census File nber (CFN) from the mailing address.						
2	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued						
		Cen-		Estimat	2007 es are accej	otoblo.	
	Description of sales, shipments, receipts, or revenue	sus			ollars OR pe		
0723		0720	\$ Bil.	Mil.	Thou.	Dol.	Percent 0722
8.	Transportation of automobiles by water	43070		1 1	1 1		
9.	Transportation of livestock by water	43080					
10.	Transportation of waste by water	43090					
11.	Transportation of truck trailers by water	43100					
12.	Transportation of other goods by water	43110			' '		
13.	Passenger transportation by water						
	a. Coastal, fixed-route, passenger transportation by water	43122					
	b. Other transportation of passengers by water	43121					
	c. Sum lines 13a and 13b	43120					
14.	Cruises	43130					
15.	Participatory recreational services by water craft, except overnight cruises with cabin accomodation	43140					
16.	Sightseeing by water	43150					
17.	Towing services by water	43160					
18.	Tugboat services	43170			1 1		
19.	Related services						
	a. Meals and beverages, prepared and served or dispensed, for immediate consumption	43184					
	b. Reselling services for merchandise, retail	43183					
	c. Gambling services	43182					
	d. Related services, not elsewhere classified	43181		· ·			
	e. Sum lines 19a through 19d	43180					
20.	Marine facility services	43190					
21.	Navigational services to shipping	43200					
22.	Marine salvaging services	43210					
23.	Coordination of provisions for marine vessels and offshore oil platforms	43220					
24.	Maintenance and repair services for maritime vessels	43230					
25.	Handling of goods	44193					
	CONTINUE WITH 🕏 ON PAGE 6						

Form TW-48360 (12/27/2006) Page 6

Description of sales, shipments, receipts, or revenue Center Estimates are zeroptable. Report dollars OR percents.														
Description of sales, shipments, receipts, or revenue Sus use Report dollars OR percents.														
\$ Bil. Mil. Thou. Dol. Percent 0722				h.:				sus		Estimat	tes are	acce	ptable	
26. Other products - Specify 7 27. TOTAL (Should equal 9 if reporting in dollars.) 28. Other products - Specify 7 49810 1 0 0 29. Not Applicable.		Descr	ription of sal	es, shipme	ints, receipts,	or revenue		use	\$ Bil					
27. TOTAL (Should equal 3 if reporting in dollars.) 49990 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	723							0720		141111	1110	, u.	5011	
27. TOTAL (Should equal 3 if reporting in dollars.) 49990 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	20	Oth die	C :t -											·
27. TOTAL (Should equal 6) if reporting in dollars.)	26.	Other products	- Specify	•										
27. TOTAL (Should equal 6) if reporting in dollars.)									T	1 1				1 1
23-29 Not Applicable.								49810				+		
Not Applicable.	27.	TOTAL (Should	d equal 5 i	f reportin	g in dollars	:.)		49990		1 1				1 0
 	_			<u> </u>				<u>'</u>						
	_	CERTIFICATION					was prepa	ared in acco	ordance	e with the		ction		Year
☐ Yes ☐ No - Enter time period covered → FROM TO	s the	e time period cov	vered by th	is report - Enter tir	a calendar y	year?								Year
FROM	the	e time period cov	vered by th	is report - Enter tir	a calendar y	year?	FROM							Year
☐ Yes ☐ No - Enter time period covered → FROM TO	the	e time period cov	vered by th	is report - Enter tir	a calendar y	year?	FROM							Year
Yes No - Enter time period covered → FROM TO Name of person to contact regarding this report Title Area code Number Extension Area code Number	the	e time period cov	vered by th	is report - Enter tir	a calendar y ne period co	year? overed —▶	FROM	Month	Year	Т		Mon	th	
Yes No - Enter time period covered → FROM TO Name of person to contact regarding this report Title	the	e time period cov	vered by th	is report - Enter tir	a calendar y ne period co report Number	year? overed —▶	FROM	Month	Year	Т		Mon	th	
Yes No - Enter time period covered → FROM TO Name of person to contact regarding this report Title Area code Number Extension Fax Area code Number Telephone	the	e time period cov	vered by th No- contact rega	is report - Enter tir	a calendar y ne period co report Number	year? overed —▶	FROM	Month	Year	T Area code	0	Mon	th umber	r
Yes No - Enter time period covered → FROM TO Name of person to contact regarding this report Title Area code Number Extension Fax Area code Number Fax	the	e time period cov	vered by th No- contact rega	is report - Enter tir	a calendar y ne period co report Number	year? overed —▶	FROM	Month	Year A	Area code	0	Mon	th umber	r

48360069