



# 2007 ECONOMIC CENSUS

## Accounting, Tax Preparation, Bookkeeping, and Payroll Services

OMB No. 0607-0934: 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

PS-54102

**INFORMATION COPY  
DO NOT USE TO REPORT**

**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](http://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.

(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.

- 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.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
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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).

**1** EMPLOYER IDENTIFICATION NUMBER  
Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021  Yes - Go to **2**      0022  No - Enter current EIN (9 digits) → 0025 [ ] - [ ]

**2** PHYSICAL LOCATION  
**A.** Is this establishment's physical location the same as shown in the mailing address? (P.O. Box and rural route addresses are not physical locations.)

0031  Yes - Go to line B

0032  No - Enter physical location →

0035 Number and street										
0036 City, town, village, etc.						0037 State		0038 ZIP Code		

**B.** Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? (Mark "X" only ONE box.)

0041  Yes      0042  No      0043  No legal boundaries      0044  Do not know

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

0046  City, village, or borough      0047  Town or township      0048  Other      0024  Do not know

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**3 OPERATIONAL STATUS**

Which ONE of the following best describes this establishment's operational status at the end of 2007?  
(Mark "X" only ONE box.)

0011  In operation 0013  Temporarily or seasonally inactive

0014  Ceased operation - Give date at right \_\_\_\_\_ → 

Month	Day	Year

0015  Sold or leased to another operator - Give date at right \_\_\_\_\_ → 

Month	Day	Year

 0018

AND enter name and address of new owner or operator and Employer Identification Number (EIN) below ↴

0060 Name of new owner or operator	0061 EIN (9 digits)		
	-		
0062 Mailing address (Number and street, P.O. Box, etc.)			
0063 City, town, village, etc.	0064 State	0065 ZIP Code	
		-	

0016  Other - Specify \_\_\_\_\_ → 0815

**4 MONTHS IN OPERATION**

Mark "X" if None 

2007
Number

Number of months in operation during 2007 (If none, mark "X" and go to 50.) . . . . . 0002

<b>HOW TO REPORT DOLLAR FIGURES</b>		Dollar figures should be <b>rounded</b> to <b>thousands</b> of dollars.	Mark "X" if None	2007			
		If a figure is <b>\$1,025,628.79</b> :	Report → <input type="checkbox"/>	\$ Bil.	Mil.	Thou.	Dol.
		If a value is "0" (or less than \$500.00):	Report → <input checked="" type="checkbox"/>				

**5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

Mark "X" if None 

2007			
\$ Bil.	Mil.	Thou.	Dol.

Operating receipts . . . . . 0100

**6 Not Applicable.**

**7 EMPLOYMENT AND 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 1.

**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 . . . . . 0320

<b>B.</b> Payroll before deductions (Exclude employer's cost for fringe benefits.)			Mark "X" if None	2007			
		<b>1.</b> Annual payroll . . . . . 0300	<input type="checkbox"/>	\$ Bil.	Mil.	Thou.	Dol.
		<b>2.</b> First quarter payroll (January-March, 2007) . . . . . 0310	<input type="checkbox"/>				

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

8 - 18 Not Applicable.

19 KIND OF BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2007? (Mark "X" only ONE box.)

Offices of accountants

- 0700 541 211 00 1  Certified public accountants (CPAs)
- 541 211 00 2  Auditing services (CPAs)
- 541 219 00 1  Accountants, excluding CPAs

Tax return preparation services, bookkeeping, billing, and payroll services provided by non-CPAs

- 541 213 00 1  Income tax return preparation services, without also providing accounting, bookkeeping, or billing services
- 541 214 20 1  Payroll services, without also providing accounting, bookkeeping, or billing services
- 541 219 00 2  Bookkeeping services
- 541 219 00 3  Billing services
- 541 214 10 1  Talent payment services
- 541 219 00 4  Other accounting services provided by non-CPA firms - Specify ↴

0701

Other kind of business or activity

- 541 219 00 6  Tax consulting services
- 541 512 20 1  Computer systems consultants, excluding systems integrators
- 541 611 00 1  Administrative and general management consulting services
- 518 210 00 4  Data processing service bureaus - providing data entry, image processing, database management, record conversion, and other computer processing services from central processing centers
- 523 930 00 A  Financial planning and investment advisor services
- 777 541 02 1  Other consulting services - Specify ↴

0701

- 773 000 00 1  Other kind of business or activity - Specify ↴

0701

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**20 CLASS OF CUSTOMER**

Estimate the percentage of receipts (reported in 5) by class of customer.

2007	
Whole percent of receipts	
	%
	%
	%
	%
	%
1 0 0	%

1. Business firms and farms . . . . .	3108
2. Not-for-profit organizations (Include religious organizations) . . . . .	3107
3. Federal government . . . . .	3105
4. State and local governments . . . . .	3106
5. Individuals (Include receipts from individually owned businesses on line 1.) . . . . .	3100
<b>6. TOTAL . . . . .</b>	

**21 SUPPORT SERVICES**

Was this establishment primarily engaged in providing management, administrative, or support services to other establishments of your enterprise (rather than for the general public or other business firms) in 2007?

0998  Yes

0999  No

HOW TO REPORT PERCENTS



If figure is **38.76%** of total sales:

**Report whole percents**

2007				
Estimates are acceptable. Report dollars OR percents.				
\$ Bil.	Mil.	Thou.	Dol.	Percent
				3 9

**22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

(Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in 5). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipts lines.)

**Line 1a** - Report receipts from examinations of accounting records and other supporting evidence for the purpose of expressing an opinion as to whether financial statements are presented fairly in accordance with an appropriate, disclosed basis of accounting.

**Line 2** - Report receipts from analysis of reported financial statements to determine plausibility within the framework of the appropriate criteria. Include receipts from engagements to provide reports on the results of applying client-specified procedures to financial information.

**Line 4** - Report receipts from audits, reviews, and agreed-upon procedures performed in relation to non-financial matters.

**Line 5** - Report receipts from bookkeeping, compilation, and one or more of the following services (which were charged as a single fee): payroll services or tax preparation services. Report bookkeeping and compilation combined with payroll calculations only on **line 6**.

**Line 6** - Report bookkeeping services and compilation of financial statements. Bookkeeping may include payroll calculation services.

**Line 7a** - Report receipts from the combination of collection and processing of payroll information and paychecks; pay deposits and pay statements; withholding amounts from employees' pay for government-mandated and other deductions; remitting the amounts withheld to the appropriate authorities and plan administrators; filing regulatory and tax reports with regard to deductions; remitting the employer's contribution; filing regulatory and tax reports with regard to government-mandated and other contributions by the employer to employee benefit plans; and preparation of special payroll reports at client's request.

**Line 7b** - Report receipts from the stand-alone sale of individual payroll services. Include payroll calculation services; customized payroll reports; payroll deduction, remittance, and reporting; and other payroll services.

**Line 9** - Report receipts from preparation of income and other tax returns, review of returns prepared by others, filing of returns, preparation of supplementary documents associated with returns, and preparation for and representation at tax audits and appeals. Include compilation of financial statements when provided as a package with tax preparation for a single fee.

**Line 10** - Report receipts from providing consultation, design, development, installation, or customization of a computerized accounting system. Include receipts from providing training and support that enable the client to use the computerized accounting system.

CONTINUE WITH 22 ON PAGE 5

CONTINUE ON PAGE 5

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**If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.**

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

**Line 11** - Report receipts from providing advice, assistance, and implementation services in the areas of strategic and organizational planning, finance, human resources, marketing, and production. Include executive search services and other management consulting services. Report tax consulting on the appropriate detail lines under **line 8**.

**Line 12** - Report receipts from assisting an individual client in planning for financial goals, including examining the client's tax situation. The firm may provide investment advice and make investments on the client's behalf.

Description of sales, shipments, receipts, or revenue	Cen- sus use	2007				
		Estimates are acceptable. Report dollars OR percents.				
		\$ Bil.	Mil.	Thou.	Dol.	Percent
0723	0720	0721				0722
<b>1.</b> Financial auditing services						
<b>a.</b> Financial statement auditing .....	36821					
<b>b.</b> Specialized financial auditing .....	36822					
<b>c. Sum lines 1a and 1b</b> .....	36820					
<b>2.</b> Financial statement review, engagement, and agreed-upon procedures for financial information .....	36830					
<b>3.</b> Other financial assurance and related services .....	36840					
<b>4.</b> Non-financial assurance and related services .....	36850					
<b>5.</b> General accounting services .....	36860					
<b>6.</b> Bookkeeping and compilation services .....	38750					
<b>7.</b> Payroll services						
<b>a.</b> Full-service payroll services .....	36881					
<b>b.</b> Payroll services sold separately .....	36882					
<b>c. Sum lines 7a and 7b</b> .....	36880					
<b>8.</b> Tax planning and consulting services						
<b>a.</b> Individuals and unincorporated businesses .....	36891					
<b>b.</b> Corporate and other clients .....	36892					
<b>c. Sum lines 8a and 8b</b> .....	36890					
<b>9.</b> Tax preparation and representation services						
<b>a.</b> Individuals and unincorporated businesses .....	36910					
<b>b.</b> Corporate and other clients .....	36920					
<b>10.</b> Computerized accounting systems services .....	36930					
<b>11.</b> Management consulting services - <i>Specify type of consulting work</i> ↴						
	38980					

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CONTINUE WITH 22 ON PAGE 6

CONTINUE ON PAGE 6

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

Description of sales, shipments, receipts, or revenue	Cen- sus use	2007					
		Estimates are acceptable. Report dollars OR percents.					
		\$ Bil.	Mil.	Thou.	Dol.	Percent	
0723	0720	0721				0722	
<b>12.</b> Personal financial planning services . . . . .	36950						
<b>13.</b> All other operating receipts - <i>Specify if more than 10 percent of total receipts</i> ↴  	39722						
<b>14. TOTAL OPERATING RECEIPTS - Sum of lines should equal 5 if reporting in dollars</b> . . . . .	39850						1 0 0

**23 and 24** Not Applicable.

**25** EXPORTED SERVICES

**NOTE** - An exported service is a product (e.g., service performed, license agreement) that is performed for, or sold or transferred to, a customer or client (individual, government, business establishment, etc.) located **outside** the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Include products provided to unaffiliated and affiliated foreign firms (e.g., foreign parent firms, subsidiaries, branches). Exclude products provided to domestic subsidiaries of foreign firms.

**A.** Did the receipts or revenue (reported in 5) include any amounts for exported services?

0911  Yes - Go to line B

0912  No - Go to 26

2007			
\$ Bil.	Mil.	Thou.	Dol.

**B.** Amount of receipts or revenue for exported services . . . . . 0914

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

**26** SPECIAL INQUIRIES

**A. PERSONNEL BY OCCUPATION**

Enter employment reported on IRS Form 941, Employer's Quarterly Federal Tax Return, by occupational category. The total should equal the number reported in **7**, line A.

Enter personnel who perform a variety of functions on the **one** line which best describes the **primary** nature of their work.

**Lines 1a and 1b** - Accountants who are members of a professional service corporation should be included here. The proprietor or partners **not** considered employees of the firm for federal tax purposes should be included in **B**, PROPRIETORS AND PARTNERS OF UNINCORPORATED BUSINESSES.

**Line 1b** - Licensed, registered, and public accountants, and accounting practitioners who are **not** certified by the state should be included here.

	Cen- sus use	Number of employees for pay period including March 12, 2007
<b>1. Type of employee working for this establishment</b>		
<b>a.</b> Certified public accountants (employees of firm) . . . . .	3251	
<b>b.</b> Public accountants not certified (employees of firm) . . . . .	3252	
<b>c.</b> Management consultants and other non-accounting professional staff . . . . .	3253	
<b>d.</b> All others, including clerical and other support staff . . . . .	3254	
<b>2. Employees whose payroll is processed by this establishment, but who are not management and administrative employees of this establishment (i.e., employees or individuals serviced by payroll or talent payment services) . . . . .</b>	3255	
<b>3. TOTAL (Add lines 1a through 2. Total should equal 7, line A.) . . . . .</b>	3200	

**B. PROPRIETORS AND PARTNERS OF UNINCORPORATED BUSINESSES**

Unincorporated businesses should report each proprietor or partner **not** considered employees for federal tax purposes at this location. For businesses operating at more than one location, report the proprietor or partners at the location where they spend most of their working time.

	2007
	Number for the pay period including March 12
Active proprietor or partners at this location . . . . . 3260	<input type="checkbox"/>

Mark "X" if None

**C. SINGLE AND MULTIPLE SERVICES**

(To be completed by offices of Certified Public Accountants.)

Of the accounting services reported in **22**, lines 1 through 9, what percent were transacted as:

	2007	Percent
<b>1. A single service</b> . . . . . 3761		%
<b>2. Part of a multiple service package (such as financial auditing and tax planning offered together in a single transaction)</b> . . . . . 3762		%
<b>3. TOTAL</b> . . . . .	1 0 0	%

CONTINUE WITH **26** ON PAGE 8

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**26** SPECIAL INQUIRIES - Continued

**D. FRANCHISE**

Was this establishment operating under a trademark authorized by a franchisor in 2007?  
 (Mark "X" only ONE box.)

0237  Yes - franchisee owned establishment

0238  Yes - franchisor owned establishment

0239  No

**27-29** Not Applicable.

REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

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

Is the time period covered by this report a calendar year?

Yes  No - Enter time period covered →

FROM	Month	Year	TO	Month	Year

Name of person to contact regarding this report	Title

Telephone	Area code	Number		Extension	Fax	Area code	Number	
			-					-

Internet e-mail address	Date completed	Month	Day	Year

**Thank you for completing your 2007 ECONOMIC CENSUS form.**  
**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

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