

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

WH-42317 (12/04/2006)

## 2007 ECONOMIC CENSUS

Coal, Coke, and Other Minerals and Ores

OMB No. 0607-0929: 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.

WH-42317

## 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, requi that receive this questionnaire to answer the questions and return the report to the law, YOUR CENSUS REPORT IS CONFIDENTIAL. It may be seen only by persof Census Bureau information and may be used only for statistical purposes. Furfiles are immune from legal process.	ne U.S. Census Bureau. By the same sons sworn to uphold the confidentiality
se blue or black ballpoint pen. • Please center numbers in their respective boxes.	Examples:
onot use pencil or felt-tip pen. • Do not put slashes through 0 or 7.	N 0 1 2 2 1 5 6 7 8 6

files are immune from legal process.	, , , , , , , , , , , , , , , , , , , ,
• Use blue or black ballpoint pen. • Please center numbers in their respec	ctive boxes. Examples:
<ul> <li>Do not use pencil or felt-tip pen.</li> <li>Do not put slashes through 0 or 7.</li> <li>Place an "X" inside the box.</li> </ul>	□ 0 1 2 3 4 5 6 7 8 9
The reporting unit for this form is an establishment. An <b>establishment</b> where business is conducted or where services or industrial operation information sheet(s).	
EMPLOYER IDENTIFICATION NUMBER     Is the Employer Identification Number (EIN) shown in the mailing address establishment on its latest 2007 Internal Revenue Service Form 941, E	lress the same as the one used for this Employer's Quarterly Federal Tax Return?
0021  Yes - Go to 2 0022  No - Enter current EIN (9 digits) -	0025
PHYSICAL LOCATION  A. Is this establishment's physical location the same as shown in the (P.O. Box and rural route addresses are not physical locations.)  10031 Yes - Go to line B	mailing address?
0035 Number and street	
0032 ☐ No - Enter → physical	
location 0036 City, town, village, etc.	0037 State 0038 ZIP Code
<b>B.</b> Is this establishment physically located inside the legal boundarie (Mark "X" only ONE box.)	s of the city, town, village, etc.?
0041 ☐ Yes 0042 ☐ No 0043 ☐ No legal boundar	ies <sub>0044</sub> Do not know
C. In what type of municipality is this establishment physically located	ed? (Mark "X" only ONE box.)

<sub>0047</sub> Town or township

0046 City, village, or borough

☐ Do not know

0024

0048 Other

		O 17 (12/04/2006	1										i age z
3	Which O	ONAL STATU ONE of the folion ONE only ONE be	wing best des	scribes this estab	olishment's	operational s	status	at the	end of	f 2007?			
	0011	In operation			0013	Temporarily	or se	asonal	ly inac	tive			
	0014	Ceased opera	tion - <i>Give da</i>	te at right					<b></b>	Month	Day	Yea	ar
	0015	AND enter na	me and addre	perator - Give da ss of new owner Number (EIN) b	r or operat				0018 ▶				
		0060 Name of	new owner or o	perator				(	0061 EI	N (9 dig	its)		
		0062 Mailing a	ddress (Number	and street, P.O. B	ox. etc.)					-			
			aarooo (rrambor	<u> </u>	<u>σχη στοιη</u>								
		0063 City, town	n, village, etc.				0064	State	0065 ZI	P Code			
											-	<u> </u>	
	0016	Other - Speci	fy	15									
4	MONTHS	S IN OPERATIO	N									1141 X	2007 Number
	Number	of months in	operation duri	ng 2007 ( <i>If none,</i>	, mark "X"	and go to ��.	)				. 0002		
	HOW TO		Dollar figures s t <b>housands</b> of	should be <b>round</b> dollars	<b>led</b> to			Mark "X if None		. Mi	2007 il.	Thou.	Dol.
	REPORT DOLLAR			1,025,628.79:		Report —	<b></b>				1	0 2 6	
	FIGURES		f a value is "0'	" (or less than \$5	00.00):	Report —	<b></b>	X					
5	SALES, S	SHIPMENTS, F	RECEIPTS, OR	REVENUE			/	Mark "X	,,		2007		
	cond	ucted for other	rs. Include shi	ude the gross se ipping and hand Excise Tax.)	ling charge	s. Exclude		if None		. Mi	il.	Thou.	Dol.
	<b>B.</b> Did th	his establishm	ent earn comn	nissions for the s	sale of me	chandise?							
	1121	Yes - Go	to line C										
	1122	□ No - Go to	o line E						\$ Bil	.   Mi	2007	Thou.	Dol.
				onducted on a co				1123	<b>D</b>			i ii di	Doi:
	<b>D.</b> Comr	missions receiv	ved on transac	ctions reported o	n line C .			1124					
	E. Is this	s the only esta	blishment of t	his firm?									
	0907	☐ Yes - Go	to line G							A 4		"	17
	0908	□ No - Go to				di d i	41 11	المناها و	24.4		ark "X" None	Perc	
	by <b>y</b> c	our company	or its subsidia	establishment ma iries						. 1125			%
		e-commerce ac pts as reported		e than 50% of thi	is establish	nment's sales	and/o	r opera	ating				
	0308	Yes											
	0309	□ No											

Form WH-42317 (12/04/2006)

Not Applicable.

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

ı	

) INVE	NITORIEC DV VALUATION METHOD						
Dana	NTORIES BY VALUATION METHOD						
the fo	rt how much of the inventory reported in <b>⑤</b> , line B1 for 2007 is subject tollowing valuation methods.	το					
			Mark "X" if None	<b>6</b> Du 1	200		
			ii ivolic	\$ Bil.	Mil.	Thou.	D
A. LI	FO valuation method before adjustment	0244					
R Fi	rst-in, First-out (FIFO)	0404			1 1		
D. 11	ist-iii, First-out (Firo)	0491					+
C. A	verage cost	0492			1 1		
D St	tandard cost	0402			1 1		
<b>D</b> , 0,		0493					
<b>E.</b> 0	ther valuation method - Specify method 🔀						
08	395	0494					
F. T(	OTAL (Add lines A through E. Total should equal 🧐, line B1.)	0490					
	Not Applicable.						
SELE	CTED EXPENSES		Лark "Х"		200	7	
		,	if None	\$ Bil.	Mil.	Thou.	
<b>A.</b> 0	perating expenses (Include payroll. Exclude cost of goods sold and						
in	terest expense.)	0140	Ш				-
<b>B.</b> Pi	urchases of merchandise for resale, net of returns, allowances, and				I I		
tra	ade and cash discounts (Include amounts allowed for trade-ins.)	1160	Ш				
<b>C.</b> Fo	or the value reported on line B, were any of these goods ordered over a terchange (EDI) network, electronic mail, or other online system?	n Inte	rnet, Ex	ctranet,	Electronic	Data	
044	41						
044							
04	42 No						
044							

If not show	n, please	ente	er your 11-digit Census File
			mailing address.
17 and 18 19 A. KIN	D OF BUSI		
Which (		follo	owing best describes this establishment's principal kind of business in 2007?
0700 <b>42</b> 3	3 520 10 1		Coal, with or without coal yard
423	3 520 20 1		Minerals and ores, excluding coal
771	000 00 1		Other kind of business - Specify
0701			
Which (	PE OF OPEF ONE of the X" only ON	follo	owing best describes this establishment's principal type of operation in 2007?
0600	_		nt wholesaler, buying and selling on own account
<sup>0600</sup> 12	☐ Impo	rter	
13	Expo	rter	
11			t wholesale distributor or jobber
14	∐ Own	-brar	nd importer and marketer
20	☐ Man	ufac	cturers' sales branch or office
	Age	nt, b	roker, or commission merchant
41	☐ Auct	ion c	company
42	Brok	er, re	epresenting buyers and sellers
43	Com	miss	ion merchant
44	☐ Impo	rt aç	gent
45	Expo	rt aç	gent
46	☐ Man	ufact	curers' agent
49	☐ Elec Inte	tron rnet	ic market - business-to-business marketplace that facilitates the sale of goods via the or other electronic means, and operates on a commission or fee basis
77	Othe	er br	oker or agent - Specify 🗡
0601			
20 CLASS	OF CUSTO	MEF	<b>1</b>
<b>A.</b> As a	general b	usine	ess practice, did this establishment sell to household consumers and individual users in 2007?
0251	□ Yes		
0252	□ No		
			CONTINUE WITH ② ON PAGE 6

UIII	II VV	H-44	23 17 (12/04/2006)			г	age c
20	CL	ASS	OF CUSTOMER - Continued				
	В.	Wer	e 75% or more of this establishment's sales to retailers/wholesalers for resale in 2007?				
		0256	Yes				
		0257	□ No				
	C.	Did	this establishment require proof of business or professional license from new customers in 2007?				
		0276	Yes				
		0277	□ No				
				Е		2007	
				Ιv	N/h∩	le ne	rcent
	D.	Estir cust	mate the percentage of this establishment's total sales (reported in <b>6</b> , line A) by class of omer. (Circle all that apply and then report percentages for the items circled.)		of s	ales eceip	and
							0/
		1.	Household consumers and individual users	-	+		%
		2.	Export sales	L	<b>—</b>		%
		3.	Retailers for resale				%
		4.	Wholesale establishments for resale				%
		5.	Repair shops for use in repair work				%
		6.	Manufacturing and mining industrial users for use as input goods in production		+		%
		О.	Manufacturing and mining industrial users for use as input goods in production	H	_		
		7.	Restaurants, hotels, food services, and contract feeding		_		%
		8.	Businesses for end use in their own operation, not for resale or production	L	_		%
		9.	Building contractors, heavy construction, and special trade contractors				%
		10.	Farmers for use in farm production				%
			Governmental bodies (federal, state, and local)				%
		12.	Other - Specify				
			0874				%
		13.	TOTAL		1	0 0	%



		<b>2317</b> (12/04/2006)						Page 7
If no Nun	ot shov nber (C	vn, please enter your 11-digit Census File FN) from the mailing address.						
2		OD OF SELLING ONE of the following best describes this establishment's principal r	metho	nd of se	lling in 20	107?		
		"X" only ONE box.)	1101110	.u 01 50	g 20			
	© Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)							
	0752	Store or display showroom (selling from a fixed or permanent lo merchandise and/or from a counter)	catio	n with p	ohysical d	isplays of <sub>l</sub>	priced	I
	0753	Warehouse or office (including telephone/fax orders or outside sa	ales r	epresei	ntatives)			
	0754	Mail order						
	0755	Home shopping via television						
	0756	Direct selling (selling in a face-to-face manner away from a fixed plan, or temporary kiosk sales)	locat	ion, su	ch as hous	se-to-hous	e, par	ty
	0757	Vending machines						
	0758	Other - Specify						
	07	59				2007		
	HOW .	то				es are accep		
	REPOR PERCE	RT		\$ Bil.	керогт а Mil.	ollars OR pe	Dol.	s. Percent
	TENCE	If figure is 38.76% of total sales:  Report whole percent	nts					3 9
22	(Repor sales r and re	OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE  t sales for each product line sold by this establishment, either as a seeported in four line A. Include the value of merchandise marketed until the line A. Include the value of merchandise marketed until the line line line line leases. See HOW TO REPORT PERCENTS above. Do not combine data for two	nder d HOV	capital, / TO RI	finance, o EPORT DO	r full payo	ut lea	ases,
	Z arru	TOW TO THE OUT TENDENTO above. Do not combine data for two		11110	<i>3.</i> /	2007		
		Description of sales, shipments, receipts, or revenue	Cen-			es are acce <sub>l</sub> ollars OR pe		
		Bookingtion of sures, simplificates, rescripts, or revenue	use	\$ Bil.	Mil.	Thou.	Dol.	Percent
0723			0720	0721				0722
1.	Coal a	nd coke						
	a. Coa	d	11311					
	<b>b.</b> Col	œ	11312					
	c. Su	n lines 1a and 1b	11300					
2.	Minera	ls and ores, excluding coal, gemstones, and crude oil	11320					
3.	lron ar	d steel pipes and tubing	11150					
4.	Other	ron and steel products	11160					
5.	Genera	al-purpose industrial machinery, equipment, and parts	12320					
6.	Abrasi	ves, strapping, tape, ink, and mechanical rubber goods	12460					
7.	Jewelr	y, diamonds, gemstones, and watches	13000					
		CONTINUE WITH <b>②</b> ON PAGE 8						

-orm	WH-4231/ (12/04/2006)						Pag	ge 8
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued							
					2007			
	Description of color chipments, receipts, or revenue	Cen- sus			es are acce ollars OR p	•		
	Description of sales, simplifients, receipts, of revenue	use	\$ Bil.	Mil.	Thou.	Dol.	Perce	nt
0723		0720	0721				0722	
8.	Plastics materials and basic shapes	15300						
9.	Chemicals and allied products, excluding agricultural chemicals, plastics, industrial and natural gases, liquefied petroleum (LP), and petroleum	15330		1 1				
10.	Refined petroleum products, excluding liquefied petroleum (LP)	15400						
11.	Miscellaneous commodities - Specify							
	a.	19811						
	b	19812						<u> </u>
	C	19813						<u> </u>
12.	Rental and operating lease receipts	19940						<u> </u>
	Service receipts and labor charges, including installed parts	19700					1 0	0
	<b>TOTAL</b> (Should equal <b>5</b> , line A if reporting in dollars.)	19990					, ,	<u> </u>
23	Not Applicable.							
24	SHIPPING AND HANDLING  A. Did this establishment have any receipts from customers for shipping a  OBSI  Yes - Go to line B	and h	andling	of merch	andise in			
	0982 No - Go to <b>3</b>			\$ Bil.	stimates are Mil.	e acce <sub>l</sub>		Dol.
	<b>B.</b> Receipts of this establishment from customers for shipping and handlin merchandise.	ng of	098	35				
	C. Are receipts for shipping and handling included in sales and receipts (r	eport	ed in <b>G</b>	, line A)?				
	0988							
25	Not Applicable.							

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If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.				
SPECIAL INQUIRIES				
A. EMPLOYMENT BY PRIMARY FUNCTION	Cen-			
(List the number of employees reported in <b>②</b> , line A, by the employee's primary function.)	sus	Paid	2007 I employe	200
			remploye	es
<b>1.</b> Selling	1131			
2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers	1132			
3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees	1133			
4. Packaging				
<ol> <li>Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.)</li> </ol>	1136			
6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products	1134			
7. Other - Specify		1		
0837	1137			
8. TOTAL (Add lines 1 through 7. Total should equal 🕏 , line A.)	1138	'		
B. PERCENT OF DROP SHIPPED SALES				
			200	7
			Whole po of sales receip	and
Percentage of sales (reported in <b>⑤</b> , line A) that were drop shipped and did not enter this establishment		1111		%

CONTINUE WITH 5 ON PAGE 10

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C. OTHER ESTABLISHMENT ACTIVITIES  1. Did this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?  1. Side this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?  1. Side this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?  2. Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)  2. Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)  2. Size Providing contract manufacturing services for others  3. Did this establishment purchase contract manufacturing services from other companies or other establishment of your company to process materials or components that this establishment owns or controls?  2. Size Providing Type provides the stablishment owns or controls?  2. Size Providing the stablishments WITHIN the 50 States and the District of Columbia case No.  2. Yes, primarily with establishments WITHIN the 50 States and the District of Columbia case No.  3. Did this establishment with establishments WITHIN the 50 States and the District of Columbia case No.  3. Did this establishment with establishments WITHIN the 50 States and the District of Columbia case No.  3. Did this establishment owns or controls?  4. Yes, primarily with establishments WITHIN the 50 States and the District of Columbia case No.  4. Peep No. Applicable.  5. CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.  5. The time period covered by this report a calendar year?  4. Yes No Enter time period covered No.  5. FROM  5. Area code Number  5. Area code Number  6. Area code Number	CDECIAL IN		
1. Did this establishment design, engineer, or formulate the manufactured products that it sold, produced, or shipped?    1919	<u> </u>		
2. Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)  2. Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)  2. Providing contract manufacturing services for others  2. Transforming raw materials or components into new products that this establishment owns or controls  2. Reselling goods manufactured by others (with or without minor final assembly)  2. Did this establishment purchase contract manufacturing services from other companies or other establishment of your company to process materials or components that this establishment owns or controls?  2. Did this establishment purchase contract manufacturing services from other companies or other establishment of your company to process materials or components that this establishment owns or controls?  2. Did this establishment with establishments WITHIN the 50 States and the District of Columbia  2. States and the District of Columbia  3. Did this establishment owns or controls?  3. Did this establishment owns or controls?  3. Did this establishment owns or controls?  4. States and the District of Columbia  3. Did this establishment owns or controls?  4. States and the District of Columbia  4. States and the Distri	<b>1.</b> Did	this e	establishment design, engineer, or formulate the manufactured products that it sold, produced, or
2. Which of the following best describes this establishment's primary activity? (Mark "X" only ONE box.)    Description   Providing contract manufacturing services for others	0318		Yes
Providing contract manufacturing services for others	0319		No
Transforming raw materials or components into new products that this establishment owns or controls	<b>2.</b> Whi	ch of	the following best describes this establishment's primary activity? (Mark "X" only ONE box.)
Controls  O388	0362		Providing contract manufacturing services for others
Other - Specify 7  Osss  3. Did this establishment purchase contract manufacturing services from other companies or other establishments of your company to process materials or components that this establishment owns or controls?  Osss	0363		
3. Did this establishment purchase contract manufacturing services from other companies or other establishments of your company to process materials or components that this establishment owns or controls?    1	0364		Reselling goods manufactured by others (with or without minor final assembly)
3. Did this establishment purchase contract manufacturing services from other companies or other establishments of your company to process materials or components that this establishment owns or controls?    Yes, primarily with establishments WITHIN the 50 States and the District of Columbia   Yes, primarily with establishments OUTSIDE of the 50 States and the District of Columbia   No   No Applicable.    No Applicable   No   No Applicable   EMARKS (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.   The time period covered by this report a calendar year?   Yes   No - Enter time period covered   FROM   TO   Month   Year   TO   Month   Year   TO   Name of person to contact regarding this report   Title   Area code   Number   Extension   Fax   Area code   Number   Extension   Fax   Internet e-mail address   Date   Month   Day   Year   Internet e-mail address   Date   Month   Day   Year   To   To   To   To   To   To   To   T	0365		Other - Specify
of your company to process materials or components that this establishment owns or controls?    Yes, primarily with establishments WITHIN the 50 States and the District of Columbia	0366		
Yes, primarily with establishments OUTSIDE of the 50 States and the District of Columbia  No  No Applicable.  EMARKS (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.  The time period covered by this report a calendar year?  Yes  No - Enter time period covered  FROM  TO  Month  Year  To  Month  Year  To  Name of person to contact regarding this report  Title  Telephone  Area code  Number  Extension  Fax  Month  Day  Year  Month  Day  Year	<b>3.</b> Did of yo	this e our c	establishment purchase contract manufacturing services from other companies or other establishments ompany to process materials or components that this establishment owns or controls?
Not Applicable.  EMARKS (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.  the time period covered by this report a calendar year?  Yes  No - Enter time period covered  FROM  TO  Month  Year  TO  Month  Year  TO  Name of person to contact regarding this report  Title  Telephone  Area code  Number  Extension  Fax  Area code  Number  Fax  Internet e-mail address  Date  Month  Day  Year	0496		Yes, primarily with establishments WITHIN the 50 States and the District of Columbia
EMARKS (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.  the time period covered by this report a calendar year?  Yes  No - Enter time period covered FROM  Name of person to contact regarding this report  Title  Area code  Number  Extension  Fax  Area code  Number  Telephone  Area code  Number  Telephone  Internet e-mail address  Date  Month Day Year	0497		Yes, primarily with establishments OUTSIDE of the 50 States and the District of Columbia
EMARKS (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.  the time period covered by this report a calendar year?  Yes No - Enter time period covered FROM TO Title  Name of person to contact regarding this report Title  Area code Number Extension Fax Area code Number  Telephone Fax Date Month Day Year	0498		No
CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.  the time period covered by this report a calendar year?  Yes  No - Enter time period covered  To  Name of person to contact regarding this report  Title  Telephone  Area code  Number  Extension  Fax  Area code  Number  Internet e-mail address  Date  Month  Day  Year	27-29 Not A	pplic	able.
the time period covered by this report a calendar year?  Yes No - Enter time period covered  Name of person to contact regarding this report  Title  Area code Number Extension Telephone -			
Yes No - Enter time period covered → FROM TO    Name of person to contact regarding this report  Title  Area code	CERTIFICA	HON	- This report is substantially accurate and was prepared in accordance with the instructions.
Name of person to contact regarding this report  Title  Area code		d cov	FDOM
Area code Number Extension Fax Area code Number  Telephone - Date			□ No - Enter time period covered →
Telephone - Fax - Month Day Year	Name of perso	on to	contact regarding this report Title
Telephone - Fax - Month Day Year			Area code Number Extension Area code Number
Date	Telephone		Fax
Completed	Internet e-mai	l addı	Date Control of the c
			completed

Thank you for completing your 2007 ECONOMIC CENSUS form.

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

42317107