



2007 ECONOMIC CENSUS

Classification Form

DUE DATE
FEBRUARY 12, 2008

Mail your completed form to:

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

PS-54190

**INFORMATION COPY
DO NOT USE TO REPORT**

(Please correct any errors in this mailing address.)

Need help or have questions about filling out this form?

Visit www.census.gov/econhelp

- OR -

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the 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.
 - Do not use pencil or felt-tip pen.
 - Place an "X" inside the box.
 - Please center numbers in their respective boxes.
 - Do not put slashes through 0 or 7.
- Examples: 0 1 2 3 4 5 6 7 8 9

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.

1 Not Applicable.

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

54190012

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

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 →

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4 - 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 lawyers

- 0700 541 110 10 1 Law partnership or professional corporation/association, or individual lawyer or attorney engaged in private practice
- 541 110 20 1 Legal aid societies and similar legal services

All other legal services

- 541 191 00 1 Title abstract or settlement offices
- 541 199 00 1 Patent agent services
- 541 199 00 2 Notary public services
- 541 199 00 3 Paralegal services
- 523 991 00 5 Trustee in bankruptcy

Offices of accountants

- 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

CONTINUE WITH 19 ON PAGE 3

CONTINUE ON PAGE 3

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

19 KIND OF BUSINESS OR ACTIVITY - Continued

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

0700 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

541 611 00 2 Administrative and general management consulting services, including strategic planning and organizational change

541 519 00 1 Computer-related consulting, excluding computer systems consulting or design services - *Specify* ↴

0701

523 930 00 A Financial planning and investment advisor services

777 541 03 3 Management services - *Specify* ↴

0701

773 000 00 2 Other kind of business or activity - *Specify* ↴

0701

20-29 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
	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>

Name of person to contact regarding this report

Title

Telephone	Area code	Number			Extension	Fax	Area code	Number		
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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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