



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

FORM

OS-81301 (11-16-2011)

2012 ECONOMIC CENSUS

Grantmaking and Advocacy

OMB No. 0607-0934: Approval Expires 12/31/2013

DUE DATE
FEBRUARY 12, 2013

(Please correct any errors in this mailing address.)

Need help or have questions?

- **Read** the accompanying information sheet(s) before answering the questions.
- **Visit** econhelp.census.gov
- **Call** 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

OS-81301

INFORMATION COPY
DO NOT USE TO REPORT

Report Online - It's fast and secure!
Go to: econhelp.census.gov

- **OR** -

Mail your
completed
form to:

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

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.
- Do not put slashes through 0 or 7.
- Please center numbers in their respective boxes.
- Place an "X" inside the box.

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. For further clarification, see information sheet(s).

1 EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown to the left of the mailing address the same as the one used for this establishment on its latest 2012 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

-

CONTINUE WITH **2** ON PAGE 2

PENALTY FOR FAILURE TO REPORT

CONTINUE ON PAGE 2

81301012

2 PHYSICAL LOCATION - Continued

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

3 OPERATIONAL STATUS

Which ONE of the following best describes this establishment's operational status at the end of 2012?
(Mark "X" only ONE box.)

0011 ☐ In operation

0013 ☐ Temporarily or seasonally inactive

0014 ☐ Ceased operation - Give date at right →

0015 ☐ Sold or leased to another corporation - Give date at right
AND enter name and address of new owner or operator
and Employer Identification Number (EIN) below ↴

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

0060 Name of new owner or operator

0061 EIN (9 digits)

<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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0062 Mailing address (Number and street, P.O. Box, etc.)

0063 City, town, village, etc.

0064 State

0065 ZIP Code

<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"/>
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0016 ☐ Other - Specify →

0815

4 MONTHS IN OPERATION

Mark "X"
if None

2012
Number

Number of months in operation during 2012 (If none, mark "X" and go to 30.) 0002

☐

<input type="text"/>	<input type="text"/>
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81301020

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

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be **rounded to thousands** of dollars.

If a figure is **\$2,035,628.79**:

Report → ☐

If a value is "0" (or less than \$500.00):

Report → ☒

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

EXAMPLE

5 REVENUE OR RECEIPTS

A. Tax Status

Was all or part of the income of this establishment or organization exempt from Federal income taxes under section 501 of the Internal Revenue Code?

0103 ☐ Yes - Complete line C

0104 ☐ No - Complete line B

B. Operating receipts of this (taxable) establishment 0100 ☐

C. Revenue and expenses of this (tax-exempt) establishment

1. Revenue 0101 ☐

2. Expenses (Include payroll, exclude bad debt and other expenses identified on the information sheet.) 0140 ☐

Mark "X" if None

2012		
\$ Bil.	Mil.	Thou.
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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 to the left of 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).

Mark "X" if None

A. Number of employees for pay period including March 12 0320 ☐

2012		
Number		
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Payroll before deductions
(Exclude employer's cost for fringe benefits.)

Mark "X" if None

1. Annual payroll 0300 ☐

2. First quarter payroll (January-March 2012) 0310 ☐

2012		
\$ Bil.	Mil.	Thou.
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

8-18 Not Applicable.

19 KIND OF BUSINESS OR ACTIVITYWhich **ONE** of the following best describes this establishment's principal kind of business or activity in 2012?

If none of the provided selections seem appropriate, provide a specific description of the primary business activity.

Mark "X" only ONE box.**Grantmaking and giving**

- 0700 813 211 00 4 ☐ Charitable trust or foundation - making grants but not directly providing services
- 813 211 00 2 ☐ University or college foundation - providing financial assistance to students and/or support services to the university or college
- 777 813 01 1 ☐ Other trust or foundation - *Describe* ↴
- 0701 523 920 00 B ☐ Manager of trust, foundation, or fund providing asset management only - does not make awards
- 813 212 00 1 ☐ Health-related fundraising organization - solicits contributions from the general public and others to promote health-related awareness, education, and research services
- 813 219 00 2 ☐ Federated fundraising organization, excluding health-related fundraising organizations (*Include United Way locations.*)
- 813 219 00 1 ☐ Community chest or other local giving council - solicits contributions from the general public and others to promote health-related awareness, education, and research services
- 561 499 00 2 ☐ Fundraising organization - raises funds on a contract or fee basis for other organizations
- 525 120 00 8 ☐ Health or welfare fund - legal entity organized to provide medical, vacation, training, or other health- and welfare-related employee benefits
- 777 813 01 2 ☐ Other grantmaking or giving organization - *Describe* ↴
- 0701

Advocacy

- 813 311 00 1 ☐ Human rights organization, including civil liberties or constitutional rights organizations
- 813 312 00 1 ☐ Humane society
- 813 312 00 2 ☐ Environmental, natural resources, or wildlife advocacy organization
- 813 319 00 6 ☐ Organization against drunk driving and/or drug abuse
- 813 319 00 3 ☐ Community or neighborhood advocacy group, excluding civic associations
- 561 990 30 1 ☐ Economic/industrial development organization
- 813 319 00 4 ☐ Historical preservation association
- 712 120 00 3 ☐ Historic or heritage site operation
- 777 813 01 3 ☐ Other social advocacy group - promoting world peace or understanding, protecting national security interests, etc. - *Describe* ↴

0701

CONTINUE WITH **19** ON PAGE 5

CONTINUE ON PAGE 5

81301046



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

19 KIND OF BUSINESS OR ACTIVITY - Continued

Social assistance

- 0700
- 624 120 00 2 ☐ Agency for the aging
- 624 190 00 1 ☐ Community action agency
- 624 190 00 2 ☐ Family services agency
- 624 110 00 6 ☐ Multi-service organization providing a range of social assistance services to children and youth
- 624 190 00 3 ☐ Multi-service organization providing a range of social assistance services to families and individuals, excluding services primarily to children, the elderly, the disabled, the intellectually and developmentally disabled, or the mentally ill
- 624 221 00 1 ☐ Temporary shelter or housing for the homeless, victims of abuse, families in medical crisis, and runaway youth
- 624 210 00 1 ☐ Community food services, including food banks, non-profit meal delivery services, soup kitchens, community gardens, etc.
- 777 813 01 4 ☐ Other social assistance services - Describe ↗

0701

Other kind of business or activity

- 773 000 00 1 ☐ Other kind of business or activity - Describe ↗

0701

20 and 21 Not Applicable.

22 DETAIL OF REVENUE OR RECEIPTS

(Report receipts or revenue by source (reported in **5**) in dollar figures. See **HOW TO REPORT DOLLAR FIGURES** on page 3. Do not combine data for two or more receipts or revenue lines. Both taxable and tax-exempt establishments should complete all applicable lines.)

Line 1 - Report receipts from services offered to members in exchange for payment of nonrefundable initiation fees and/or annual membership fees. Services may include the right to participate in member events and decision-making activities of the organization, the use of organization facilities, the provision of organization newsletters and publications, and arranging for and providing access to specific goods and services at discounted prices.

Line 2a - Report receipts from granting permission to use content protected by copyright owned or controlled by this establishment. Exclude outright sale of rights in perpetuity.

Line 2b - Report receipts from granting permission for the commercial use of trademarked property (e.g., names, symbols, logos) owned or controlled by this establishment. Exclude outright sale of rights in perpetuity.

Line 4 - Report receipts from providing services that attract attention to a product, business, cause, etc. Include the provision of space in print or electronic publications, or time in broadcasts; display space on various surfaces, such as billboards and transit vehicles; creation of advertising messages; agent services involved in buying and selling space or time for advertising messages; and the sale of venue naming rights, endorsement services, and exclusivity rights.

Line 5 - Report receipts from providing social assistance (e.g., child care, counseling, community food, temporary shelter, relief, vocational rehabilitation) and related services to individuals and families.

Line 11 - Program service revenue includes income earned by the organization for providing a government agency with a service, facility, or product that benefited that government agency directly rather than benefiting the public as a whole. Include revenue from program services which are the basis of your exemption from taxes. Report unrelated program service business revenues on **lines 1** through **10**.

Line 13 - Report revenue from investments, including interest and dividends. Exclude unrealized gains or losses. Report proceeds from the sale of investments and other assets on **line 14**.

Line 14 - Report the net gain (or loss) from the sale or trade of real property and financial assets, such as stocks and bonds. Exclude unrealized gains or losses.

CONTINUE WITH **22** ON PAGE 6

CONTINUE ON PAGE 6

81301053

Description of revenue or receipts

Report thousands of dollars.
Estimates are acceptable.

\$ Bil.

Mil.

Thou.


39775

CONTINUE ON PAGE 7

81301061

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

22 DETAIL OF REVENUE OR RECEIPTS - Continued

Description of revenue or receipts	2012		
	Report thousands of dollars. Estimates are acceptable.		
	\$ Bil.	Mil.	Thou.
10. OPERATING RECEIPTS - For taxable establishments, sum of preceding lines should equal 5, line B 39850			
11. Program service revenue including government fees and contracts 39940			
12. Contributions, gifts, and grants			
a. Government 39900			
b. Private, including individuals, community efforts, and fundraising (include commissioned fundraising.) 39910			
13. Investment income, including interest and dividends 39920			
14. Gains (losses) from assets sold (Report losses by including a dash prior to the dollar amount.) 39930			
15. All other revenue - Describe if more than 10 percent of total receipts or revenue 			
<div style="border: 1px solid black; height: 30px; width: 550px;"></div> 39981			
16. TOTAL REVENUE - For tax-exempt establishments, sum of lines should equal 5, line C1 39990			

23-25 Not Applicable.

26 SPECIAL INQUIRIES

A. GRANTS, TRANSFERRED CONTRIBUTIONS, AND SIMILAR PAYMENTS OF TAX-EXEMPT ESTABLISHMENTS

(To be completed only by those indicating "Yes" in 5, line A.)

1. During 2012, did this establishment do **any** of the following:

- Award grants
- Make gifts or contributions
- Make payments to, or on behalf of, specific individuals
- Pay assessments (dues) to the parent or other chapters of the same organization
- Transfer funds raised by this establishment to charities or other organizations for charitable purposes?

3861 ☐ Yes - Go to line 2

3862 ☐ No - Go to **B**

2. Amount of grants, transferred contributions, and similar payments . . . 3865

2012		
\$ Bil.	Mil.	Thou.

CONTINUE WITH **26** ON PAGE 8

CONTINUE ON PAGE 8

81301079

26 SPECIAL INQUIRIES - Continued**B. SOCIAL ASSISTANCE**Estimate the percent of receipts for social assistance services reported in **22**, line 5, from the following payers:**1.** Government payers 3741**2.** Private payers 3742**3. TOTAL**

2012

Percent

			%
--	--	--	---

			%
--	--	--	---

1	0	0	%
---	---	---	---

27-29 Not Applicable.

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

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DO NOT USE TO REPORT**

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

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

Tele-
phone

Area code	Number
<input type="text"/>	<input type="text"/>

Fax

E-mail address

Date completed	Month	Day	Year
	<input type="text"/>	<input type="text"/>	<input type="text"/>

Thank you for completing your 2012 ECONOMIC CENSUS form.**PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.**

81301087