



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

FORM

**OS-81302** (11-16-2011)

## 2012 ECONOMIC CENSUS

### Civic, Social, and Other Membership Organizations

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](http://econhelp.census.gov)
- **Call** 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

**OS-81302**

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**Report Online** - It's fast and secure!  
**Go to:** [econhelp.census.gov](http://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

**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

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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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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, 521, 527, or 528 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"/>
<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.****Civic, social, and recreational associations**

- 0700 813 990 40 3 ☐ Property owners' association, including home owners', condominium owners', and cooperative owners' associations (*Exclude locations which are strictly property management.*)
- 813 410 40 1 ☐ Civic, social, or fraternal association, including alumni associations, community membership clubs, etc. (*Exclude scouting and related youth development organizations.*)
- 813 410 30 1 ☐ Scouting and related youth development membership organization developing life, leadership, or business skills
- 713 990 80 B ☐ Youth day camp (*Exclude instructional camps.*)
- 611 620 00 6 ☐ Youth or adult sports instructional day camp
- 721 214 00 8 ☐ Adult or family sports and recreation overnight camp including fishing and hunting camps and camps operated by membership organizations
- 624 120 00 1 ☐ Adult activity or day care center
- 713 990 80 A ☐ Recreational sports club, program, or team for youth and adults
- 713 940 90 6 ☐ Fitness or recreational sports center, membership or non-membership
- 813 410 40 4 ☐ Bar or restaurant operated by social or fraternal organization for members
- 722 410 00 5 ☐ Drinking place, including tavern, bar, nightclub, etc. (*Open to the public.*)
- 777 813 90 1 ☐ Restaurant serving the public - *Describe type of service and food provided* 
- 0701
- 777 813 02 1 ☐ Social assistance provider - *Describe type of services (e.g., counseling, mentoring, day care) and primary clientele (e.g., general, children, the elderly, the disabled)* 
- 0701

**Business and professional membership associations**

- 813 910 00 1 ☐ Business association - organized to promote the business interests of its members (*Include trade associations, farm bureaus, chambers of commerce, boards of realtors, etc.*)
- 813 920 00 1 ☐ Professional membership organization - organized to advance the professional interests of their members and the profession as a whole (*Include bar associations, accountants' associations, physicians' associations, sports players' associations, etc.*)

**Labor, political, and religious organizations**

- 813 930 00 1 ☐ Labor union or similar labor organization
- 813 940 00 1 ☐ Political organization
- 813 110 00 1 ☐ Religious organization for worship, religious training or study, or administration of an organized religion

**Other membership organizations**

- 813 990 90 2 ☐ Sports governing body (*Include professional leagues, collegiate sports conferences, etc.*)
- 813 410 40 2 ☐ Automobile enthusiast club

CONTINUE WITH **19** ON PAGE 5

CONTINUE ON PAGE 5

81302044



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

**19** KIND OF BUSINESS OR ACTIVITY - Continued

**Other membership organizations - Continued**

- 0700 561 599 80 1 ☐ Automobile club providing road and travel services
- 813 410 40 3 ☐ Art council
- 561 990 30 1 ☐ Economic/industrial development organization
- 777 813 02 2 ☐ Other membership organization - Describe ↴

0701

**Grantmaking, giving, and advocacy**

- 813 211 00 4 ☐ Charitable trust or foundation - making grants but not directly providing services
- 777 813 02 3 ☐ Grantmaking or giving organization not directly providing social services - Describe ↴

0701

- 777 813 02 4 ☐ Advocacy group - Describe cause or belief promoted ↴

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 3** - Report receipts from providing training in the organization, management, and operation of membership organizations.

**Line 8a** - 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 8b** - 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 11** - 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 12** - Report receipts from the renting or leasing of space in buildings or other facilities, for non-residential uses, such as office space, industrial space, self-storage space, retail stores, concession stands, or food service. Include fees from short-term rental of space for meetings, conventions, weddings, parties, and similar events.

**Line 14** - 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.

CONTINUE WITH 22 ON PAGE 6

CONTINUE ON PAGE 6

81302051



**22** DETAIL OF REVENUE OR RECEIPTS - Continued

**Line 18** - 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 **17**.

**Line 20** - 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 21**.

**Line 21** - 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.

Description of revenue or receipts	2012		
	Report thousands of dollars. Estimates are acceptable.		
	\$ Bil.	Mil.	Thou.
<b>1. Membership services</b>			
<b>a. Labor union</b> . . . . . 32511			
<b>b. Civic and social organization</b> . . . . . 32512			
<b>c. Performing arts society and club</b> . . . . . 32513			
<b>d. Cultural institution (except performing arts society and club)</b> . . . . . 32514			
<b>e. Business and professional association</b> . . . . . 32515			
<b>f. Other membership (including religious congregation) services</b> . . . . . 32516			
<b>g. Add lines 1a through 1f</b> . . . . . 32510			
<b>2. Condominium and homeowners' association assessments</b> . . . . . 32550			
<b>3. Training services, membership organization activities</b> . . . . . 32560			
<b>4. Testing and examination services</b> . . . . . 32570			
<b>5. Organizing seminars, conferences, trade shows, and other special events</b> . . . 32580			
<b>6. Ticket sales (or event admissions)</b> . . . . . 32640			
<b>7. Meals and beverages, prepared and served or dispensed, for immediate consumption</b>			
<b>a. Meals and non-alcoholic beverages</b> . . . . . 39461			
<b>b. Alcoholic beverages</b> . . . . . 39462			
<b>c. Add lines 7a and 7b</b> . . . . . 39460			

CONTINUE WITH **22** ON PAGE 7

CONTINUE ON PAGE 7

81302069

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**22** DETAIL OF REVENUE OR RECEIPTS - Continued

Description of revenue or receipts		2012		
		Report thousands of dollars. Estimates are acceptable.		
		\$ Bil.	Mil.	Thou.
<b>8.</b> Licensing of rights to use intellectual property				
<b>a.</b> Protected by copyright . . . . .	39401			
<b>b.</b> Protected by trademark . . . . .	39403			
<b>9.</b> Gaming services (Include net charitable gaming income.) - Describe ↴				
	32550			
<b>10.</b> Publishing directories, periodicals, and books - Describe ↴				
	32520			
<b>11.</b> Advertising services (Include sales of advertising.) . . . . .	31250			
<b>12.</b> Rental of non-residential space in buildings or other facilities . . . . .	39550			
<b>13.</b> Lodging or rental of residential space . . . . .	39450			
<b>14.</b> Social assistance - Describe ↴				
	32540			
<b>15.</b> Resale of merchandise . . . . .	39696			
<b>16.</b> All other operating receipts - Describe if more than 10 percent of total receipts or revenue ↴				
	39776			
<b>17. OPERATING RECEIPTS - For taxable establishments, sum of preceding lines should equal 5, line B . . . . .</b>	39850			
<b>18.</b> Program service revenue including government fees and contracts . . . . .	39940			
<b>19.</b> Contributions, gifts, and grants				
<b>a.</b> Government . . . . .	39900			
<b>b.</b> Private, including individuals, community efforts, and fundraising (Include commissioned fundraising.) . . . . .	39910			


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CONTINUE WITH **22** ON PAGE 8

CONTINUE ON PAGE 8

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**22** DETAIL OF REVENUE OR RECEIPTS - Continued

Description of revenue or receipts	2012		
	Report thousands of dollars. Estimates are acceptable.		
	\$ Bil.	Mil.	Thou.
<b>20.</b> Investment income, including interest and dividends . . . . . 39920			
<b>21.</b> Gains (losses) from assets sold (Report losses by including a dash prior to the dollar amount.) . . . . . 39930			
<b>22.</b> 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> . . . . . 39980			
<b>23. TOTAL REVENUE - For tax-exempt establishments, sum of lines should equal 5, line C1</b> . . . . . 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 23862 ☐ No - Go to **B****2.** Amount of grants, transferred contributions, and similar payments . . . 3865

2012		
\$ Bil.	Mil.	Thou.

**B. SOCIAL ASSISTANCE**

Estimate the percent of receipts for social assistance services reported in 22, line 14, from the following payers:

**1.** Government payers . . . . . 3741**2.** Private payers . . . . . 3742**3. TOTAL** . . . . .

2012	
Percent	
	%
	%
100	%

**27-29** Not Applicable.



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

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

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**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

Month

Year

TO

Name of person to contact regarding this report

Title

Tele-  
phone

Area code

Number

Extension

Fax

Area code

Number

E-mail address

Date  
completed

Month

Day

Year

**Thank you for completing your 2012 ECONOMIC CENSUS form.**

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

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