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Location Information

DEFINITION OF ESTABLISHMENT

The reporting unit for this questionnaire is an **establishment**. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed.

MAILING ADDRESS

ATTN		
Name 1		
Store/Plant		
Name 2		
Number and Street		
City, town, village, etc.	State Select State or Territory	ZIP Code 99999-9999

PHYSICAL LOCATION

Please update the physical location if needed. (P.O. Box and rural route addresses are not physical locations.)

Number and Street		
City, town, village, etc.	State Select State or Territory	ZIP Code 99999-9999
For Census Bureau Use Only		

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CFN

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Legal Boundary and Municipality
EIN:
Store / Plant: CFN:
LEGAL BOUNDARY AND MUNICIPALITY
Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?
○ Yes
○ No
No legal boundaries
O Do not know
In what type of municipality is this establishment physically located?
City, village, or borough
O Town or township
O Other
O Do not know

._ . . .

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Item 1: Employer Identification Number

EIN: Store / Plant: CFN:

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) used on this establishment's latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

O Yes

No



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Item 1: Employer Identification Number - Enter/Update EIN

EIN: Store / Plant: CFN:

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

What is this establishment's 9-digit Employer Identification Number (EIN) used on its latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

EIN

99-9999999



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Item 2: Ownership or Control

EIN: Store / Plant: CFN:

ITEM 2: OWNERSHIP OR CONTROL

Is your company owned or controlled by another domestic company?

Yes



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Item 2: Ownership or Control - Voting Stock Validation

EIN: Store / Plant: CFN:

ITEM 2: OWNERSHIP OR CONTROL - VOTING STOCK VALIDATION

Does another domestic company own more than 50 percent of the voting stock of your company?

O Yes



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Item 2: Ownership or Control - Management and Policy

EIN: Store / Plant: CFN:

ITEM 2: OWNERSHIP OR CONTROL - MANAGEMENT AND POLICY

Does another domestic company have the power to control the management and policies of your company?

O Yes



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Item 2: Ownership or Control - Percent of Voting Stock Held

EIN: Store / Plant: CFN:

ITEM 2: OWNERSHIP OR CONTROL - PERCENT OF VOTING STOCK HELD

What percent of voting stock was held by the owning or controlling company?

Less than 50%

0 50%



. ._ . . .

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Item 2: Ownership or Control - Company Information

EIN: Store / Plant: CFN:

ITEM 2: OWNERSHIP OR CONTROL - COMPANY INFORMATION

What is the name, address, and 9-digit Employer Identification Number (EIN) of the owning or controlling company?

Name of owning or controlling company

Home office address (Number and street)

City, town, village, etc.

State

Select State or Territory

99999-9999

99-9999999



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	<u> </u>	
Item 3: Operational Status		N C
IN: tore / Plant: FN:		
EM 3: OPERATIONAL STATUS		9
	is establishment's operational status at the end of 2017?	d
 In operation Under construction, developme 		
 Temporarily or seasonally inaction 		
	TING	
Ceased operation		
Sold or leased to another operative statement of the second se	ator	
this establishment ceased operation o	or was sold or leased to another operator, what was the date?	
MMDDYYYY		
wner or operator? Name of new owner/operator Mailing Address (Number and Street, Box, etc.)	, P.O.	
City, town, village, etc.	State ZIP Code Select State or Territory 99999-9999	
EIN 99-9999999		



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Item 4: Months in Operation

EIN: Store / Plant: CFN:

ITEM 4: MONTHS IN OPERATION

What was the number of months in operation during 2017?





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Consolidating Data for Multiple Locations

EIN: Store / Plant: CFN:

CONSOLIDATING DATA FOR MULTIPLE LOCATIONS

If multiple physical locations (establishments) operate under EIN, report on a consolidated basis (sum the total of each location and combine) for:

- Item 5: Sales, Shipments, Receipts, or Revenue
- Item 7: Employment, Annual Payroll, and First Quarter Payroll
- Item 22: Detail of Sales, Shipments, Receipts, or Revenue
- Other Item Questions should be reported individually for just this location.
- At the end of the Survey, after Remarks, Item 32: Number of Establishments will ask for the number of locations operated under this EIN. Please provide information for **each** establishment **individually**.
 - Name, Store/Plant, Address, Kind of Business
 - Number of Employees; Annual Payroll; First Quarter Payroll; Sales, Shipments, Receipts, or Revenue



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2017 39 %

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General Reporting Guidelines

EIN: Store / Plant: CFN:

GENERAL REPORTING GUIDELINES

Reporting Period

Responses should cover calendar year 2017.

- If your fiscal year covers at least 10 months of calendar year 2017, you may report by fiscal year on all items EXCEPT payroll.
- Calendar year figures for payroll may be available from:
 - IRS Form 941 (Employer's Quarterly Federal Tax Return)
 - IRS Form 944 (Employer's Annual Federal Tax Return)
- If you report by fiscal year, indicate the exact dates of the fiscal year on the submission certification screen.

Providing Estimates

If book figures are not available, estimates are acceptable.

How to Report Dollar Figures:

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



How to Report Percents:

Percents should be **rounded** to **whole** percents.

EXAMPLE - if figure is 38.76% of total sales, report 39:



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Check

None

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2017

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,000.00

,000.00

%

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2017 Economic Census

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Item 5: Sales, Shipments, Receipts, or Revenue Additional Information

EIN: Store / Plant: CFN:

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A What was the total value of products shipped and other receipts for this establishment? (Report detail in **Item 22**.)

Include:

• All products physically shipped from this establishment during 2017

Exclude:

- Freight charges
- Excise taxes
- **B.** What was the value of products shipped for export? (This is a breakout of the \$,000.00 reported in **Item 5**, line A.)

Include:

- Products sold to the U.S. government to be shipped to foreign governments under military and economic assistance programs
- Products shipped to exporters or other wholesalers for export
- Products shipped to foreign subsidiaries or foreign divisions of your company and their affiliates

Exclude:

- Products shipped for further manufacture, assembly, or fabrication in the United States
- Freight charges
- Excise taxes
- Overseas sales to the U.S. government
- Shipments of bunker fuels and other supplies and equipment for U.S. vessels and planes engaged in foreign trade

C What was the market value of products shipped to other domestic plants of your company for further assembly, fabrication, or manufacture? (This is a breakout of the \$,000.00 reported in **Item 5**, line A.)

Include:

- A reasonable portion of other costs (company overhead)
- A reasonable portion of profits

Exclude:

٠	Products that are shipped to or on order from your company's sales or wholesale offices and sold to	-
	customers outside your company	

D. What percent of the \$,000.00 reported in Item 5, line A was for goods that were ordered or whose movement was controlled or coordinated over electronic networks? (*Report whole percent.*)

E-shipments are online orders accepted for manufactured products from customers. These include shipments to other domestic plants of your own company for further manufacture, assembly, or fabrication. The price and terms of sale for these shipments are negotiated over an online system. Payment may or may not be made online.

Include:

- Electronic Data Interchange (EDI)
- E-mail
- Internet
- Extranet
 - Other online systems

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Item 7: Employment and Payroll Additional Information

EIN: Store / Plant: CFN:

ITEM 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)
- All persons on paid sick leave, paid holidays, and paid vacation during the year at this establishment

Exclude:

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN (Report values in Item 16, line D1.)
- Temporary staffing obtained from a staffing service (Report values in Item 16, line D1.)
- Purchased professional and technical services (Report values in Item 16, line D9.)
- Subcontractors and their employees (Report cost of contract work in Item 16, line A3.)
- Fishermen, agricultural employees, members of the Armed Forces, and pensioners carried on your active rolls

A. What was the number of production workers at this establishment (direct labor including first-line supervisors) for the pay period including:

Include:

 Workers engaged in fabricating, processing, assembling, inspecting, receiving, packing, warehousing, shipping (but not delivering), maintenance, repair, janitorial, guard services, product development, auxiliary production for plant's own use (e.g., power plant), recordkeeping, and other closely associated services (including truck drivers delivering ready-mixed concrete)

1. March 12 (Q1)?	Check if None	2017 Number
2. June 12 (Q2)?		
3. September 12 (Q3)?		
4. December 12 (Q4)?		
TOTAL Production workers at this establishment (direct labor including first-line supervisors) (Add lines A1 through A4.)		
B. Average number of annual production workers at this establishment (direct labor including first-line supervisors)? (Divide TOTAL Production workers by 4 and round to the nearest whole number.)		



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	s the number of all other (non production) employees at this establishment for the first quarter - March 2017)?	
 Sup Sal Adv em 	icers at this establishment, if a corporation pervision above line-supervisor level les employees, including delivery (truck driver and helpers) vertising, clerical, credit, collection, purchasing, finance, legal, executive, and technical uployees ployees installing and servicing this establishment's products	
• Pro	oprietors and partners, if an unincorporated concern mporary staff and leased employees (Report values in Item 16, line D1.)	
TOTAL (Add	lines B and C.)	
D. HOURS W	NORKED:	
	s the annual number of hours worked by the production workers at this establishment (direct luding first-line supervisors) reported in line B?	
va	urs paid for vacations, holidays, or sick leave unless an employee elects to work during their cation period. Report only actual hours worked by such employee. Overtime hours should be ported as actual hours worked and not as straight-time equivalent hours.	2017 Hours ,000
E. PAYROLL What was	s the annual payroll at this establishment before deductions for:	
Exclude: • Em	ployer-paid annual cost for fringe benefits reported in lines F1 through F3	
1. Produ	ction workers reported in line B?	2017 \$,000.00
2. All oth	er employees reported in line C?	\$,000.00
TOTAL (A	ndd lines E1 and E2.)	\$,000.00
What was	s the first quarter payroll at this establishment before deductions (January - March 2017)?	\$,000.00

F. EMPLOYER-PAID ANNUAL COST FOR FRINGE BENEFITS

(This is the employer's annual cost at this establishment for legally required programs and programs not required by law. If any of the items here are maintained in your records only at the company level, allocate their costs to the manufacturing establishment. You may distribute the total on the basis of the ratio of the payroll of each manufacturing establishment to the total company payroll unless you have developed your own method of making such allocations. Specify the method used and the approximate portion that has been allocated in the Item 31: REMARKS section at the end of the instrument.)

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Include:

- Premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs) ٠
- Spread on stock options that are taxable to employees at this establishment as wages •

Exclude:

- Employee contributions
- Disbursements from trusts or funds to satisfy health insurance claims

What were the **employer's annual costs** at this establishment for:



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1. Health Insurance? - Insurance premiums on hospitals, medical plans, and single-service plans such as dental, vision, and prescription drug plans		\$,000.00	
2. Retirement Plans?			
a. Defined benefit pension plans (qualified and nonqualified) - Plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include employee's compensation and years of service and are not allocated to specific accounts maintained for employees.		\$,000.00	
 b. Defined contribution plans - Plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount contributed and the results of the account's activity. Examples: Profit sharing plans Money purchases (<i>e.g., 401k, 403b</i>) Stock bonus plans (<i>e.g., ESOPs</i>) 		\$,000.00	
 3. Payroll taxes, employer-paid insurance premiums, and other employer-paid benefits? Include: Legally-required fringe benefits (e.g., Social Security, workers compensation insurance, state disability insurance programs, long- and short- term disability, unemployment tax, and Medicare) Life insurance benefits "Quality of life" benefits (e.g., childcare assistance, adoption assistance, subsidized commuting, long-term care insurance, flexible workplace, employer-provided home PC, etc.) Employer contributions to pre-tax benefit accounts (e.g., health savings account) Education assistance Stock options Other benefits not specified above (e.g., job-related travel accident insurance, education assistance, wellness programs, fitness centers, employee assistance programs, etc.) Exclude: Disbursements from trusts or funds to satisfy health insurance claims 		\$,000.00	
4. TOTAL (Add lines F1 through F3.)		\$,000.00	

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Item 9: Value of Inventories Additional Information

EIN: Store / Plant: CFN:

ITEM 9: VALUE OF INVENTORIES

Report inventories at cost or market using generally accepted accounting practices, and report all inventories owned by this establishment regardless of where the inventories are held. If this establishment is part of a multiple-establishment company, assign to each establishment those inventories that the establishment is responsible for as if it owned them.

What was the value of inventories owned by this establishment as of December 31 before Last-In, First-Out (LIFO) adjustment (if any) for:

A	Finished goods <i>(final output of this establishment, but still within ownership)</i> ?	Check if None	2017 \$,000.00	Check if None	2016 \$,000.00
B.	Work-in-process (goods that have been substantially transformed in the manufacturing process, but are not yet the final output of the establishment?		\$,000.00		\$,000.00
c.	Materials, supplies, fuels, etc. (goods that are raw inputs to the manufacturing process and will be substantially altered to produce this establishment's output?		\$,000.00		\$,000.00
тс	TAL (Add lines A through C.)		\$,000.00		\$,000.00



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Item 10: Inventories by Valuation Method Additional Information

EIN: Store / Plant: CFN:

ITEM 10: INVENTORIES BY VALUATION METHOD

Of the \$,000.00 reported in **Item 9** as the total value of inventories **owned by this establishment** as of December 31, 2017 and the \$,000.00 reported in **Item 9** as the total value of inventories **owned by this establishment** as of December 31, 2016, how much is subject to the following valuation methods:

A Non-LIFO (Last-In, First-Out) valuation methods

1. First-In, First-Out (FIFO)?	Check if None	2017 \$,000.00	Check if None	2016 \$,000.00
2. Average Cost?		\$,000.00		\$,000.00
3. Standard Cost?		\$,000.00		\$,000.00
4. Other non-LIFO valuation method(s)? Describe		\$,000.00		\$,000.00
TOTAL (Add lines A1 through A4.)		\$,000.00		\$,000.00
B. LIFO Valuation Method (gross LIFO amount)?		\$,000.00		\$,000.00
TOTAL Non-LIFO and LIFO methods (Add TOTAL of lines A1 through A4 and B.)		\$,000.00		\$,000.00
C. What is the amount of LIFO reserve (if any)? (If the value of reserve is negative, use "-".)		\$,000.00		\$,000.00



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Item 11: Inventories Outside of the United States

EIN: Store / Plant: CFN:

ITEM 11: INVENTORIES OUTSIDE OF THE UNITED STATES

Of the \$,000.00 reported in **Item 9** as the total value of inventories owned by this establishment as of December 31, 2017, and the \$,000.00 reported in **Item 9** as the total value of inventories owned by this establishment as of December 31, 2016, what was the value of inventories stored or en route OUTSIDE the 50 U.S. states and the District of Columbia?

Exclude:

• Inventory held in Foreign Trade Zones or in bonded warehouses in the U.S

For more detailed definitions, please see:

http://enforcement.trade.gov/ftzpage/info/ftzstart.html

Check			Check if None			
None	2017			2016		
	\$,000.00		\$,000.00



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Item 13: Assets, Capital Expenditures, and Retirements Additional Information

EIN: Store / Plant: CFN:

ITEM 13: ASSETS, CAPITAL EXPENDITURES, AND RETIREMENTS

Include:

- Dollar value of assets, capital expenditures, and retirements
- Buildings, structures, and equipment used directly or indirectly by this establishment to produce the goods and services reported in Item 5, line A and Item 22

A What was the gross value of depreciable assets (acquisition costs) at the beginning of the year?	Check if None	2017 \$,000.00
B. What were the capital expenditures for new and used depreciable assets in 2017 for:		
1. New and used buildings and other structures?		
Exclude:The value of land on which structures stand		\$,000.00
2. New and used machinery and equipment?		
a. Automobiles, trucks, etc. for highway use?		\$,000.00
b. Computers and peripheral data processing equipment?		\$,000.00
c. All other expenditures for machinery and equipment?		\$,000.00
TOTAL (Add lines B1 and B2a through B2c.)		\$,000.00
C What was the gross value of depreciable assets sold, retired, scrapped, destroyed, etc.?		\$,000.00
D. What was the value of depreciable assets at the end of the year? (Add lines A, B1, B2a through B2c and subtract line C.)		\$,000.00



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Check

None

2017

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Item 14: Rental Payments Additional Information

EIN: Store / Plant: CFN:

ITEM 14: RENTAL PAYMENTS

Include:

Operating leases

Exclude:

Capital leases (leases with a contract to own at the end of the lease)

At this establishment, what were the payments for:

A Rental or lease of buildings and other structures?

Include:

- Job-site trailers
- Land on which the buildings and other structures stand
- **B.** Rental or lease of machinery and equipment?

Include:

٠	Production,	loading,	and	transportation	machinery	and equipment
---	-------------	----------	-----	----------------	-----------	---------------

- Construction equipment
- Tools
- Office equipment
- Furniture
- Vehicles

Exclude:

• Computer time-sharing charges for machinery and equipment rentals from computer service companies where the computer is not on site at the establishment

TOTAL (Add lines A and B.)



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Check

None

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Item 16: Selected Expenses Additional Information

EIN: Store / Plant: CFN:

ITEM 16: SELECTED EXPENSES

A.	For this establishment,	what were the	production-related	costs in 2017 for:
----	-------------------------	---------------	--------------------	--------------------

 Materials, parts, containers, packaging, supplies, etc. used for manufacturing processes, repairs, services for others, or other operating supplies? (Report detail in Item 18.)

Include:

• Cost of production-related materials purchased by this establishment for other companies (contractors).

Exclude:

- Non-production-related expenses that were paid to other companies (contractors) by this establishment. (*Report these expenses on the next screen in Item 16, <i>line D*.)
- 2. Products bought and sold without further processing? (*Report sales in Item 5*, line A and in Wholesaling Services product codes in Item 22.)
- **3.** Work done for you by others on your materials (work contracted to others)? (*Report on line A1 the cost of production-related materials purchased by this establishment for other companies (contractors).*)
- **4.** Purchased fuels consumed for heat, power, or the generation of electricity? (*Report on line B2 the quantity of electricity generated (Gross less generating station use).*)
- 5. Purchased electricity? (Report comparable quantity on line B1.)
- TOTAL (Add lines A1 through A5.)
- B. For this establishment, what was the quantity of:

1. Purchased electricity? (Quantity comparable to cost reported in line A5)	2017 Kilowatt Hours ,000
2. Generated electricity (gross less generating station use)? (<i>Quantity comparable to cost reported in line A4</i>)	,000
3. Electricity sold or transferred to other establishments? (Also include quantity on lines B1 and/or B2.)	,000
C. For this establishment, what were the depreciation/amortization charges for the current year obtained from your income statement? (Include depreciation on all assets reported in Item 13.)	2017 \$,000.00

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Item 16: Selected Expenses - Continued

EIN: Store / Plant: CFN:

ITEM 16: SELECTED EXPENSES

 ${\bf D}. \$ What were the other operating expenses paid by this establishment in 2017 for:

Include:

• Expenses normally considered as non-production-related costs purchased from other companies

 Temporary staff and leased employees? (Professional Employer Organizations and staffing agencies for personnel) 	Check if None	2017
 Include: All charges for payroll, benefits, and services 		\$,000.00
2. Expensed equipment? (Expensed computer hardware and other equipment)		
Include: • Copiers • Fax machines • Telephones • Shop and lab equipment • CPUs • Monitors Exclude:		
 Packaged software (<i>Report on line D3.</i>) Leased and rented equipment (<i>Report in Item 14</i>, <i>line B.</i>) 		\$,000.00
 Expensed purchases of software? (Purchases of prepackaged, custom-coded or vendor-customized software) 		
 Include: Software developed or customized by others Web-design services and purchases Licensing agreements Upgrades of software Maintenance fees related to software upgrades and alterations 		\$,000.00
4. Purchased communication services?		
 Include: Telephone, cellular, and fax services Computer-related communications (e.g., Internet, connectivity, online) Other wired and wireless communication services Credit card transaction fees 		\$,000.00



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5. Data processing and other purchased computer services?		
Include: Computer facilities management services Computer input preparation Data storage Computer time rental Optical scanning services Other computer-related advice and services, including training Exclude:		
 Services provided by other establishments of this company (such as a separate central data processing unit) Expensed integrated systems (<i>Report in line D4.</i>) Repair and maintenance of computer equipment (<i>Report on line D6.</i>) Payroll processing and credit card transaction fees (<i>Report payroll processing fees on line D9 and credit card transaction fees on line D4.</i>) Expenses for telecommunication services (e.g., Internet, connectivity, telephone) (<i>Report on line D4.</i>) 	\$,	000.00
 6. Purchased repairs and maintenance to buildings and/or machinery and equipment? Include: Repairs for painting, roof repairs, replacing parts, over-hauling of equipment, and other repairs chargeable as current operating costs Cost of repair and maintenance of any leased property if this establishment assumes the cost Exclude: Extensive "repairs" or reconstruction that is capitalized. Report these as a capital expenditure in Item 13. Costs of materials, parts, and supplies directly incurred by this establishment using its own work force to perform repairs and maintenance 	\$,	000.00
 7. Water, sewer, refuse removal, and other non-electric utility payments? (Report electric utility payments on line A5. If the costs of these utilities are included in a lease or rental payment, report in Item 14, line A.) Include: Cost of hazardous waste removal or treatment Exclude: Cost of refuse removal services if included in rental payments Machinery or equipment reported as a capital expenditure in Item 13 Cost of salaries paid to employees of this establishment whose work involves refuse removal and/or hazardous waste removal or treatment 	\$,	000.00
 8. Purchased advertising and promotional services? Include: Marketing and public relations services Exclude: 		
Salaries paid to employees of this establishment for advertising work	\$,	000.00

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 9. Purchased professional and technical services? Include: Management consulting Accounting Accounting Bookkeeping Legal Actuarial Payroll processing Architectural Engineering Other professional services (i.e. janitorial, security, or landscape services) 	
 Exclude: Salaries paid to your own employees for these services (Report in Item 7.) 	\$,000.00
• Salaries para to your own employees for these services (<i>Report III Rem 7.)</i>	
 10. Governmental taxes and licensing fees? (Payments to government agencies for taxes and licenses) Include: Business and property taxes Exclude: Income taxes 	\$,000.00
 11. All other operating expenses not reported elsewhere? Exclude: Purchases of merchandise for resale Non-operating expenses Describe 	\$,000.00
TOTAL (Add lines 1 through 11.)	\$,000.00



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Item 17A: Principal Business or Activity

EIN: Store / Plant: CFN:

ITEM 17A: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017? If none of the provided selections seem appropriate, provide a specific description of the primary business activity. *Select only ONE.*

311211 001	O Flour Milling
311212 001	O Rice Milling
311213 001	O Malt Manufacturing
311221 001	O Wet Corn Milling
311224 001	 Soybean and Other Oilseed Processing
311225 001	Fats and Oils Refining and Blending
311230 001	O Breakfast Cereal Manufacturing
311824 001	O Dry Pasta, Dough, and Flour Mixes Manufacturing from Purchased Flour
773000 001	O Other principal business or activity - Describe
	Describe



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Item 17B: Type of Operation
EIN: Store / Plant: CFN: ITEM 17B: TYPE OF OPERATION
Did you manufacture flour mixes (cake mixes, pancake mixes, doughs and batters, etc.) in this establishment during 2017?
725 () Yes
726 No
If "Yes," select the ONE that best describes the source of flour for your flour mixes.
116 O Made chiefly from flour manufactured in this establishment
117 O Made chiefly from flour purchased from other companies or received from other establishments of this company

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Item 18: Detailed Cost of Materials, Parts, and Supplies

EIN: Store / Plant: CFN:

ITEM 18: DETAILED COST OF MATERIALS, PARTS, AND SUPPLIES

Of the \$,000.00 of materials, parts, and supplies in 2017, reported on Item 16, line A1, how much was for the following specified materials?

General - The sum of the costs of the itemized materials in this section should equal the figure reported on **Item 16**, line A1 (*Cost of materials, parts, containers, packaging, etc. used*). The following is a breakout of the \$,000.00 currently reported there. The materials, parts, and supplies listed below are commonly consumed in the manufacture, processing, or assembly of the products listed in **Item 22**.

- Please review the entire list and report separately each item consumed.
- Leave a material blank if you did not consume the item.
- Report materials, parts, and supplies purchased, transferred from other plants of your company, or withdrawn from inventory.
- If the information as requested cannot be taken directly from your book records, reasonable estimates are acceptable.

Valuation of Materials Consumed - The value of the materials, parts, and supplies consumed should be based on the delivered cost; i.e., the amount paid or payable after discounts, and including freight and other direct charges incurred in acquiring the materials.

- Materials transferred from other plants within your company should be reported at their full economic value (the value assigned by the shipping plant, plus the cost of freight and other handling charges).
- If purchases or transfers do not differ significantly from the amounts actually consumed, you may report the cost of purchases or transfers. However, if
 consumption differs significantly from the amounts purchased or transferred, these amounts should be adjusted for changes in the materials and supplies
 inventories by adding the beginning inventory to the amount purchased or transferred and subtracting ending inventory, reported on Item 9.

Contract Manufacturing - The value of materials used for products produced under contract by other companies.

Include:

• Materials purchased by this establishment to be consumed by companies that are manufacturing products for this establishment under contract.

Exclude:

- Amounts paid to companies that are manufacturing products for this establishment under contract. Report these amounts on Item 16, line A3 (Cost of work done for you by others on your materials).
- Materials owned by other companies but used by this establishment to make products under contract or for a commission.

Wholesaling Activities (previously Resales) - The costs of imported or domestic products bought and sold or transferred from other establishments of your company and sold without further manufacture, processing, or assembly should not be reported here.

- The cost of these wholesale products should be reported on Item 16, line A2 (Cost of products bought and sold without further processing).
- The value of these wholesale products shipped by this establishment should be reported in **Item 22** on the line appropriate for the type of Wholesaling activity being reported.

Description	Value	Census Material Code
1. Wheat	\$,000.00	11114001
 Wheat flour and all other flour (excluding corn), and all other grain mill products (excluding corn) (including germ, bran, etc.) 	\$,000.00	31121100
3. Corn	\$,000.00	11115000
4. Grains (excluding wheat, corn, and rice)	\$,000.00	11119901
5. Paper and paperboard products	\$,000.00	32200000
6. Cost of all other materials and components, parts, containers, and supplies consumed Describe	\$,000.00	00970099

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TOTAL

,000.00	77100000
,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

\$

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Item 22: Detail of Sales, Shipments, Receipts, or Revenue

EIN: Store / Plant: CFN:

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Of the **\$,000.00** of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included? *Select ALL that apply.*

General - Please do not combine product lines. If the information is not directly available from your records, reasonable estimates are acceptable.

The manufactured products and services listed below are generally made in your industry. Select the items that apply to your establishment. If you make products or have revenue from other sources not listed, you will have the opportunity to report them later.

Manufacturing of Products Section - Includes products shipped and services performed

Include:

- Products made elsewhere by others from materials supplied by this establishment.
- Products transferred to other establishments within your company.

Exclude:

- Wholesaling products (previously **Resales**) Products that are bought from other establishments or transferred from other establishments of your company and then **sold without further manufacture, processing, or assembly** by this establishment. If you make products or have revenue from other sources not listed, you will have the opportunity to report them later.
- Products made from materials owned by others (i.e. the customer). If you make products or have revenue from other sources not listed, you will have the opportunity to report them later.

Wholesaling Products Section – Includes product lines sold by this establishment. These product lines were previously grouped together in one product code - Resales.

Include:

- Products that are bought from other establishments or transferred from other establishments of your company and then sold without further manufacture, processing, or assembly by this establishment.
- Imported products, including products made by your foreign affiliates, which are **sold without further manufacture, processing, or assembly** by this establishment.

Exclude:

• Receipts for construction, delivery, installation, and service contracts from the commodity sales.

Description	Select	Product Code
Manufacturing of:		
1. Cake mixes (including gingerbread)		2001600000
2. Flour mixes (including refrigerated and frozen doughs and batters) (excluding cake mixes)		2001625000
a. Pancake and waffle mixes		2001625003
b. Biscuit mixes		2001625006
c. Other prepared flour mixes (including cookie, piecrust, doughnut, and other sweet yeast goods mixes)		2001625009
d. Bread and bread-type roll mixes		2001625012



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e. Refrigerated doughs and batters (cookie, biscuit, bread and bread-type roll, pasta, pizza, coffeecake, pancake, etc.)	2001625015
f. Frozen doughs and batters (cookie, biscuit, bread and bread-type roll, pasta, pizza, coffeecake, pancake, etc.)	2001625018
3. Wheat flour (excluding flour mixes)	2001825000
4. Wheat mill products (excluding flour and feed)	2001835000
5. Corn mill products, for human consumption	2001875000
a. Corn grits and flakes for brewers' use, for human consumption	2001875003
b. Corn grits and hominy (excluding for brewers' use), for human consumption, and corn flour	2001875006
c. Other corn mill products, for human consumption	2001875009
d. Whole and degermed cornmeal, for human consumption	2001875012
6. Other grain mill flour products	2001900000
a. Rye, oat, buckwheat, and other flour	2001900003
b. Fruit flour	2001900006
7. Grains and flour milled products for animal and marine feed and fertilizer manufacturing	2019750000
a. Brewers' spent grains, wet and dry	2019750003
b. Wheat mill feed	2019750006
c. All corn mill products, not for human consumption	2019750009
d. Other mill feed (oats, rye, buckwheat, etc.)	2019750012
e. Soybean millfeed (hullmeal)	2019750015
f. Cottonseed hulls	2019750018
All other sales, shipments, receipts, or revenue from this establishment	
8. Wholesaling services for grains, beans, and seeds	4002875000



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Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

EIN: Store / Plant: CFN:

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Of the **\$,000.00** of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service? General – Please do not combine product lines. If the information is not directly available from your records, reasonable estimates are acceptable.

If quantities are requested, please use the unit of measure specified.

Below are the products and services you previously selected. If you make products or have revenue from sources not listed, describe and report them in the "All other sales, shipments, receipts, or revenue from this establishment" section at the end of this question.

Manufacturing of Products Section – Report the value of the products shipped and services performed at the net selling value, free on board (FOB) plant to the customer, after discounts and allowances.

Include:

- Products made elsewhere by others from materials supplied by this establishment. Report these products on the specific lines as if they were made in this establishment.
- Products transferred to other establishments within your company. These products should be assigned the full economic value (market value); i.e., include all direct costs of production and a reasonable proportion of all other costs and profits.

Exclude:

- Wholesaling products (previously Resales), which include products that are bought from other establishments or transferred from other establishments of
 your company and then sold without further manufacture, processing, or assembly by this establishment. Report these products in the appropriate
 Wholesaling products line(s) you selected or else describe and report them in the "All other sales, shipments, receipts, or revenue from this establishment"
 section at the end of this question.
- Products made from materials owned by others (i.e. the customer). Report your commission or contract receipts in the appropriate Contract Manufacturing
 products line(s) you selected or else describe and report them in the "All other sales, shipments, receipts, or revenue from this establishment" section at
 the end of this question.
- Freight charged
- Excise taxes

Wholesaling Products Section – Report sales for each product line sold by this establishment. In prior Censuses, these product lines were grouped together in one product code for Resales.

Include:

- Products bought from other establishments or transferred from other establishments of your company and then sold without further manufacture, processing, or assembly by this establishment.
- Imported products, including products made by your foreign affiliates, which are sold without further manufacture, processing, or assembly by this establishment.

Exclude:

• Receipts for construction, delivery, installation, and service contracts from the commodity sales. Report these products in the appropriate products line(s) you selected or else describe and report them in the "All other sales, shipments, receipts, or revenue from this establishment" section at the end of this question.

Description	Quantity Shipped	Unit of Measure	Value	Product Code
Manufacturing of:				
1. Cake mixes (including gingerbread)			\$,000.00 2001600000
 Flour mixes (including refrigerated and frozen doughs and batters) (excluding cake mixes) 				
a. Pancake and waffle mixes			\$,000.00 2001625003



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b. Biscuit mixes		\$,000.00	2001625006
 C Other prepared flour mixes (including cookie, piecrust, doughnut, and other sweet yeast goods mixes) 		\$,000.00	2001625009
d. Bread and bread-type roll mixes		\$,000.00	2001625012
 Refrigerated doughs and batters (cookie, biscuit, bread and bread-type roll, pasta, pizza, coffeecake, pancake, etc.) 		\$,000.00	2001625015
 f. Frozen doughs and batters (cookie, biscuit, bread and bread-type roll, pasta, pizza, coffeecake, pancake, etc.) 		\$,000.00	2001625018
Subtotal		\$,000.00	2001625000
3. Wheat flour (excluding flour mixes)		\$,000.00	2001825000
4. Wheat mill products (excluding flour and feed)	short tons	\$,000.00	2001835000
5. Corn mill products, for human consumption			
 Corn grits and flakes for brewers' use, for human consumption 		\$,000.00	2001875003
b. Corn grits and hominy (excluding for brewers' use), for human consumption, and corn flour		\$,000.00	2001875006
c Other corn mill products, for human consumption		\$,000.00	2001875009
d. Whole and degermed cornmeal, for human consumption		\$,000.00	2001875012
Subtotal		\$,000.00	2001875000
6. Other grain mill flour products			
a. Rye, oat, buckwheat, and other flour		\$,000.00	2001900003
b. Fruit flour		\$,000.00	2001900006
Subtotal		\$,000.00	2001900000
Grains and flour milled products for animal and marine feed and fertilizer manufacturing			
a. Brewers' spent grains, wet and dry		\$,000.00	2019750003
b. Wheat mill feed		\$,000.00	2019750006
c. All corn mill products, not for human consumption		\$,000.00	2019750009
d. Other mill feed (oats, rye, buckwheat, etc.)		\$,000.00	2019750012

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e.	Soybean millfeed (hullmeal)	1		\$,000.00	2019750015
f.	Cottonseed hulls			\$,000.00	2019750018
Su	btotal			\$,000.00	2019750000
All o	ther sales, shipments, receip	s, or revei	nue from this establishment			
8. V	Vholesaling services for grain	s, beans, a	nd seeds	\$,000.00	4002875000
9. O	ther manufacturing revenue,	not elsewl	nere classified			
a.	Other manufacturing revenu	ie, not else	where classified - write-in #1			
	Describe			\$,000.00	2054100003
b.	Other manufacturing revenu	ie, not else	where classified - write-in #2			
	Describe			\$,000.00	2054100006
с.	Other manufacturing revenu	ie, not else	where classified - write-in #3			
	Describe			\$,000.00	2054100009
10.	Wholesaling services for othe	r goods, ne	ot elsewhere classified			
a.	Wholesaling services for othe	er goods, r	ot elsewhere classified - write-in #1			
	Describe			\$,000.00	4005500003
b.	Wholesaling services for othe	er goods, r	ot elsewhere classified - write-in #2			
	Describe			\$,000.00	4005500006
с.	Wholesaling services for othe	er goods, r	ot elsewhere classified - write-in #3			
	Describe	_		\$,000.00	4005500009
11.	All other products and service	s, not else	where classified			
a	All other products and servic	es notelse	where classified - write-in #1			
u .	Pick one		Describe	\$,000.00	900000003
h	All other products and convic	os not ols	where classified - write-in #2			
IJ.	Pick one	-	Describe	\$,000.00	900000006
6	All other products and convic	os pot ola	ewhere classified - write-in #3			
L	Pick one		Describe	\$,000.00	900000009
	1		L			
	Add Additional Products					
TAL	- Sum of lines should equal to	otal Sales	Shipments, Receipts, or Revenue reported in Item 5	¢	000.00	
				\$,000.00	990000000

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Item 26: Business Cooperative

EIN: Store / Plant: CFN:

ITEM 26: BUSINESS COOPERATIVE

A cooperative is a business or organization owned by, controlled by, and operated for the benefit of members using its services. Members (also known as userowners) can be individuals or organizations, and benefit from the use of services, products, and/or earnings generated by the co-op. This includes purchasing co-ops, member/patron organizations, member-controlled non-profits, consumer co-ops, marketing co-ops, worker co-ops, etc.

Is this establishment a cooperative?

Yes



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Item 27: Manufacturing Activities - Manufacturing at This Location

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING AT THIS LOCATION

In 2017, did this establishment manufacture any products or produce any goods at this location?

O Yes



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Item 27: Manufacturing Activities - Manufacturing by Affiliated Companies Inside the U.S.

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY AFFILIATED COMPANIES INSIDE THE U.S.

In 2017, did this establishment have any manufacturing done on its behalf by any affiliated companies inside the U.S.?

O Yes



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Item 27: Manufacturing Activities - Manufacturing by Unaffiliated Companies Inside the U.S.

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY UNAFFILIATED COMPANIES INSIDE THE U.S.

In 2017, did this establishment have any manufacturing done on its behalf by any unaffiliated companies inside the U.S.?

O Yes

No



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Item 27: Manufacturing Activities - Manufacturing Done Outside the U.S.

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING DONE OUTSIDE THE U.S.

In 2017, did this establishment have any manufacturing done on its behalf outside the U.S.?

Include manufacturing done outside the U.S. by both affiliated and unaffiliated companies.

YesNo



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Item 27: Manufacturing Activities - Design or Specification for Products Manufactured on Its Behalf

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - DESIGN OR SPECIFICATION FOR PRODUCTS MANUFACTURED ON ITS BEHALF

In 2017, did this establishment determine the design or specifications for any of the products that were manufactured on its behalf?

"Design or specifications" refers to the function of the product, not just the appearance or its packaging.

YesNo



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Item 27: Manufacturing Activities - Percentage of Revenue for Products Manufactured on Its Behalf

EIN: Store / Plant: CFN:

ITEM 27: MANUFACTURING ACTIVITIES - PERCENTAGE OF REVENUE FOR PRODUCTS MANUFACTURED ON ITS BEHALF

What percentage of this establishment's total revenue in 2017 was from the sale of products that were manufactured on its behalf, per this establishment's design or specifications?

Estimates are acceptable.





You have 1000 characters remaining

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Item 31: Remarks

EIN: Store / Plant: CFN:

ITEM 31: REMARKS

Please use this space for any explanations that may be essential in understanding your reported data. (Maximum length is 1,000 characters.)

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Item 32: Number of Establishments

EIN: Store / Plant: CFN:

ITEM 32: NUMBER OF ESTABLISHMENTS

2017

How many establishments operated under EIN at the end of 2017?



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Item 32: Number of Establishments - Establishment Information					
EIN: Store / Plant: CFN:					
ITEM 32: NUMBER OF ESTABLISHMENTS	- ESTABLISHMENT INFORMATION				
Name					
Secondary Name	Store/Plant				
Number and Street					
City, town, village, etc.	State Select State or Territory	ZIP Code 99999-9999			
Describe kind of business at this locatio	חנ				
For employees that worked at more than one location, report the employment and payroll data for employees at the ONE location where they spent most of their working time.					
What was the number of employees for p	pay period including March 12?	2017			
What was the annual payroll?		2017 \$,000.00			
What was the first quarter payroll (Januar	ry - March 2017)?	2017 \$,000.00			
What were the sales, shipments, receipts,	, or revenue?	2017 \$,000.00			

