Do Not Submit - For Informational Purposes ONLY.

Mailing this to Census does not fulfill your reporting obligation.

NC-99007 - Report of Organization

Mailing Address

MAILING ADDRESS

Attention - Enter Attention field/Contact	
Name 1 - Enter Name 1	
Name 2 - Enter Name 2	
Street - Enter street address	
City - Enter city	
State - Enter state	
ZIP Code - Enter ZIP Code	

For Census Bureau Use Only

*CFN (census file number) - Unique identifier used for downloading and uploading data	
Electronic Batch Identification	

Ownership or Control - Voting Stock Validation

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

	Yes
	No

Ownership or Control - Management and Policy

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

	Yes
	No

Ownership or Control - Percent of Voting Stock Held

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

	More than 50%
	Less than 50%
	50%

Ownership or Control - Company Information

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

If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter name of the owning or controlling company	
If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter address (Number and street) of the owning or controlling company's home office	
If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter city of the owning or controlling company's home office	
If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter state of the owning or controlling company's home office	
If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter ZIP Code of the owning or controlling company's home office	
If AFFIL_OWNER_GT50 is "Yes" or AFFIL_CONTROL is "Yes - Enter Employer Identification Number (EIN) of the owning or controlling company	

Physical Location Validation

Is this establishment's physical location the same as the address shown above?

	No
	Yes

Physical Location Information

What is this establishment's physical location?

If PHYSLOC_ADDR is "No" - Enter the physical location number and street address	
If PHYSLOC_ADDR is "No" - Enter the physical location city, town, village, etc.	
If PHYSLOC_ADDR is "No" - Enter the physical location state	
If PHYSLOC_ADDR is "No" - Enter the physical location ZIP Code	

Remarks

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

Remarks - Enter any explanations that may be essential in understanding your reported data.	

Number of Establishments

How many establishments operated under EIN at the end of 2016?

Number of establishments that operated under this EIN at the end of 2016	

PHYSICAL LOCATION

What is this establishment's physical location?

Enter name of establishment	
Enter secondary name of establishment	
Enter store/plant number	
Enter street address	
Enter city	
Enter state	
Enter ZIP Code	
Describe kind of business at this location	

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.

Number of employees for pay period including March 12, 2016	
First quarter payroll (January-March 2016) (Report in thousands of dollars)	
Annual payroll (Report in thousands of dollars)	