**DUE DATE**
FEBRUARY 12, 2013

**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.

**INFORMATION COPY**
DO NOT USE TO REPORT

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### 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-PR, Employer's Quarterly Federal Tax Return or Form 944-PR, Employer's Annual Federal Tax Return?

<table>
<thead>
<tr>
<th>0021</th>
<th>Yes</th>
<th>Go to 2</th>
<th>0022</th>
<th>No</th>
<th>Enter current EIN (9 digits)</th>
<th>0025</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

### 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.)

<table>
<thead>
<tr>
<th>0031</th>
<th>Yes</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>0035</th>
<th>Number and street or location description</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>0032</th>
<th>No</th>
<th>Enter physical location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>0036</th>
<th>City, town, etc.</th>
<th>0037</th>
<th>State, PR, etc.</th>
<th>0038</th>
<th>ZIP Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**CONTINUE WITH 3 ON PAGE 2**

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### PHYSICAL LOCATION - Continued

**B. Municipio where this establishment is physically located**

| 0049 |

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### OPERATIONAL STATUS

Which ONE of the following best describes this establishment’s operational status at the end of 2012?

*(Mark “X” only ONE box.)*

- [ ] In operation
- [x] Temporarily or seasonally inactive
- [ ] Ceased operation - Give date at right
  
  
  Month Day Year

- [ ] Sold or leased to another operator - Give date at right AND enter name and address of new owner or operator and Employer Identification Number (EIN) below.
  
  Name of new owner or operator

  EIN (9 digits)

- [ ] Mailing address (Number and street, P.O. Box, etc.)
  
  City, town, etc.

  State, PR, etc.

  ZIP Code

- [ ] Other status - Specify

| 0815 |

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### MONTHS IN OPERATION IN 2012

Number of months in operation during 2012 *(If none, mark “X” and go to 30.)*

| 0002 |

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### HOW TO REPORT DOLLAR FIGURES

Dollar figures should be rounded to thousands of dollars.

- If a figure is **$2,035,628.79:** Report

  | 2 | 0 | 3 | 6 |

- If a value is "0" *(or less than $500.00):* Report

### SALES, SHIPMENTS, RECEIPTS, OR REVENUE IN 2012

Sales of merchandise and other operating receipts *(Exclude sales taxes or other taxes collected.)*

| 0100 |

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

**E-COMMERCE SALES, SHIPMENTS, RECEIPTS, OR REVENUE IN 2012**

**A.** Were any of the sales, receipts, and/or revenue reported in 5 a result of e-commerce transactions? (E-commerce includes sales, commissions, rents, or fees collected from any transactions completed online. Transactions are agreements between buyers and sellers to transfer ownership of, or rights to use, goods or services. Payment for these goods or services may or may not be made online. Please see the information sheets for further clarification.)

**E-commerce transactions include:**
- Internet
- E-mail
- Extranet
- Electronic Data Interchange (EDI)
- Other online systems

0181 □ Yes - Go to line B
0182 □ No - Go to 7

**B.** Percent of total sales, receipts, and/or revenue reported in 5 that are a result of e-commerce transactions. (Exclude sales taxes for only whole percents. Estimates are acceptable.)

[ ]

2012

Whole percent of sales and receipts %

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**EMPLOYMENT AND PAYROLL**

**Include:**
- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941-PR, Employer’s Quarterly Federal Tax Return, or Form 944-PR, Employer’s Annual Federal Tax Return, and filed under the Employer Identification Number (EIN) shown to the left of the mailing address or corrected in 1.

For further clarification, see information sheets.

**A.** Number of paid employees for pay period including March 12 (Exclude proprietors and partners.)

[ ]

Mark “X” if None

2012

Number

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

1. Annual payroll for 2012

[ ]

Mark “X” if None

2012

$ Mil. Thou. Dol.

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2. First quarter payroll (January-March, 2012)

[ ]

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**C.** Employer’s cost for benefits

1. Payroll taxes and any other legally required employee benefits

[ ]

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2. Voluntarily provided benefits (Include such items as payments for life insurance, medical insurance, pensions, etc.)

[ ]

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3. TOTAL (Add lines C1 and C2)

[ ]

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**8 – 11** Not Applicable.
**LEGAL FORM OF ORGANIZATION**

A. Legal form of organization that best describes this establishment at the end of 2012 (Mark "X" only ONE box.)

- [ ] Individual (sole) proprietorship
- [ ] Partnership
- [ ] Cooperative organization
- [ ] Corporation - Go to line B
- [ ] Other - Specify

B. If a corporation:

Type of corporation (Mark "X" only ONE box.)

- [ ] Private corporation (nonprofit)
- [ ] Private corporation (for-profit)
- [ ] Public corporation

**CAPITAL EXPENDITURES AND DEPRECIATION CHARGES**

Report the dollar value of capital expenditures including value of acquisitions under capital leases. Do not report rental payments made under operating leases.

A. Capital expenditures in 2012 for buildings and machinery

1. Buildings and structures, including building and leasehold improvements (Exclude land.)

2. Machinery and equipment (Include vehicles.)

3. Total capital expenditures (Exclude land.)

B. Depreciation charges in 2012 for buildings, structures, and leasehold improvements, equipment and machinery that your company owns or acquired under a capital lease agreement.

**RENTAL PAYMENTS**

(Exclude capital leases (leases with a contract to own at the end of the lease).)

A. Rental or lease of machinery, equipment, and other items, excluding computer software

B. Rental or lease of land, buildings, structures, store space, and offices

**NOT APPLICABLE.**
### SELECTED EXPENSES

<table>
<thead>
<tr>
<th>Category</th>
<th>2012 $ Mil.</th>
<th>Thou.</th>
<th>Dol.</th>
<th>Mark “X” if None</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Communication services (Include telephone, cellular phones, Internet, fax, and related service contracts.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Computer services (Include data processing and software.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Office supplies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Purchased maintenance and repair of machinery and equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E. Purchased maintenance and repair of buildings, including offices, and their integral parts (elevators, etc.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>F. All other operating expenses (Include payroll, benefits, utilities, depreciation, etc. Exclude cost of goods sold, interest, capital expenditures, and bad debt.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Interest paid</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PRINCIPAL KIND OF BUSINESS

Which ONE of the following best describes this establishment’s **PRINCIPAL kind of business** in 2012? (Mark “X” only ONE box. Continue with 19 on the following pages.)

- 721 120 00 2 Hotel with casino
- 721 110 00 5 Hotel (except with casino) or motel
- 721 190 00 1 Other traveler accommodation including tourist villa, or parador
- 721 211 00 3 Travel trailer park, recreational vehicle park, or campground except residential
- 721 214 00 4 Sporting, recreation, or vacation camp (except campground)
- 721 310 00 8 Rooming and boarding house including lodging house operated by membership organization
- 531 110 00 4 Apartment building operator
- 813 990 00 1 Property owners’ or tenants’ association
- 813 410 00 2 Bar or restaurant operated by social or fraternal organization for members
- 722 511 00 2 Full-service restaurant, patrons order through waiter/waitress service and pay after eating
- 722 513 00 3 Fast food restaurant
- 722 514 00 1 Cafeterias
- 722 515 00 1 Refreshment places selling snacks and nonalcoholic beverages
- 722 310 00 9 Food service contractors
- 722 320 00 1 Caterer for banquets, weddings, etc.

CONTINUE WITH 19 ON PAGE 6
**PRINCIPAL KIND OF BUSINESS - Continued**

- ☐ Mobile food service, including ice cream, snacks, sandwiches, and meals distributed from trucks, carts, or other vehicles
- ☐ Bar, tavern, pub, or other drinking place, selling alcoholic beverages for consumption on premises
- ☐ Other kind of business - Specify

20 and 21 Not Applicable.

**HOW TO REPORT PERCENTS**

Percents should be rounded to whole percents.

If figure is 38.76% of total sales:

Report

2012 Estimates are acceptable. Report dollars OR percents.

<table>
<thead>
<tr>
<th>$ Mil.</th>
<th>Thou.</th>
<th>Dol.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>39</td>
</tr>
</tbody>
</table>

**DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in 9). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipt lines.

<table>
<thead>
<tr>
<th>Description of sales, shipments, receipts, or revenue</th>
<th>2012 Report thousands of dollars OR whole percents. Estimates are acceptable.</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ Mil.</td>
<td>Thou.</td>
</tr>
<tr>
<td>--------</td>
<td>-------</td>
</tr>
<tr>
<td>1. Guestroom or unit rentals, EXCLUDING OCCUPANCY TAXES (If meals are included as a room package, estimate the percentage for meals on line 3.)</td>
<td>20010</td>
</tr>
<tr>
<td>2. Casino receipts</td>
<td>20040</td>
</tr>
<tr>
<td>3. Meals, unpackaged snacks, sandwiches, unpackaged ice cream and yogurt, bakery items, and nonalcoholic beverages generally served for immediate consumption</td>
<td>20120</td>
</tr>
<tr>
<td>4. Alcoholic drinks served at this establishment</td>
<td>20130</td>
</tr>
<tr>
<td>5. Packaged liquor, wine, and beer</td>
<td>20140</td>
</tr>
<tr>
<td>6. All other merchandise</td>
<td>29810</td>
</tr>
<tr>
<td>7. All other nonmerchandise receipts, including receipts from rental of conference/convention meeting rooms, ballrooms, and other public rooms; storage, other services provided to customers, and receipts OTHER than from customers EXCLUDING SALES AND OTHER TAXES</td>
<td>29980</td>
</tr>
<tr>
<td>8. TOTAL (Should equal 5 if reporting in dollars.)</td>
<td>29990</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

23–25 Not Applicable.
SPECIAL INQUIRIES

A. NUMBER AND TYPE OF ACCOMMODATIONS

1. Number of rooms, units, or quarters primarily rented as transient as of December 31, 2012 (Consists of the number which can be rented as single units. Suites of rooms which cannot be subdivided should be counted as a single unit.)

   2012 Number as of December 31

   2402

2. Were more than half of guestroom or unit rental receipts from transient guests?

   2921 ☐ Yes
   2922 ☐ No

B. PUERTO RICO TOURIST INCENTIVE ACT

Did this establishment operate under the Puerto Rico Tourist Incentive Act?

   2931 ☐ Yes
   2932 ☐ No

Not Applicable.

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

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

Name of person to contact regarding this report

Title

Telephone

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.