

Form BT-1
State Form 43760
(R10 / 3-11)

Indiana Department of Revenue
Business Tax Application

A separate application is required for each business location.

To file this application online, visit:
<https://secure.in.gov/apps/dor/bt1>



Section A: Taxpayer Information (see instructions on page 1)
Please print legibly or type the information on this application.

1. Federal Identification Number (FID): _____

2. If this business is currently registered with the Department of Revenue, enter your Taxpayer Identification Number (TID): _____

3. Name of contact person responsible for filing tax forms: _____

4. Contact person's daytime telephone number:
A () B EXT

5. Check (only one) reason for filing this application: A Starting New Business B Business Under New Ownership C To Change Type of Organization
 D To Add Location to Existing Account E To Register for Other Type(s) of Tax F Other _____

6. Owner name, Legal name, Partnership name, Corporate name or Other entity name: A Check if foreign address (See instructions)
B
If sole owner (last name, first name, middle initial, Suffix)
C
Primary Address: D
City: E
State: F Zip Code: G
County: H
E-Mail Address: I

7. Business trade name or DBA and physical location: (This name and address is for the business location.) A Check if foreign address (See instructions)
Name: B
Street Address:
P.O. Box numbers cannot be used as a business location address.
C
City: D
State: E Zip Code: F
County: G Township: H
Business Location
Telephone Number: I () J EXT

8. Check the type of organization of this business: A Sole Proprietor B Partnership C LLP D LP E Corporation
 F S Corp G LLC H Nonprofit I Fed Govt J Other Govt K Other

9. Indiana Secretary of State Control # _____ See www.in.gov/sos/ for requirements.

10. All corporations answer the following questions: Otherwise, proceed to Question 11.

A. State of Incorporation: _____ B. Date of Incorporation: _____
Month Day Year C. State of Commercial Domicile: _____

D. If not incorporated in Indiana, enter the date authorized to do business in Indiana. _____
Month Day Year E. Accounting period year ending date: _____
Month Day

11. North American Industry Classification System (NAICS): Please enter a primary and any secondary code(s) that may apply.
A PRIMARY B C D

12. Owner, Partners, or Officers (Attach separate sheet if necessary.) **Social Security Numbers are required in accordance with IC 4-1-8-1.**

A	B	C	D	E	F	G	H	I	J
Social Security Number	Last Name, First Name, Middle Initial, Suffix			Title	Street Address	City	State	Zip Code	
1									
2									
3									

13. Tax(es) to be Registered for this Business Location (Check all that apply.)

A Withholding Tax (Complete Section C.) E Sales Tax (Complete Section B for a Registered Retail Merchants Certificate.)
 B County Innkeepers Tax (Complete Section E.) F Out-of-State Use Tax (Complete Section B.)
 C Food and Beverage Tax (Complete Section D.) G Prepaid Gasoline Sales Tax (Complete Section G.)
 D Motor Vehicle Rental Excise Tax (Complete Section F.) H Private Employment Agency (See instructions on page 2.)
 I Tire Fee (Complete Section H.)

Section D: Food and Beverage (FAB) Tax Registration (see instructions on page 2) (No Additional Fee)

Sales Tax Section B must also be completed.

Contact the Department at (317) 233-4015 for more information regarding this tax.

Complete this section if prepared foods or beverages will be sold.

1. Date of first sales at this location under this ownership:

Month Year

3. Mailing name and address for FAB tax returns (if different from Section A, Line 6):

Check if foreign address (see instructions)

2. Enter the name(s) of the county(ies), city(ies) and/or town(s) where prepared foods or beverages are sold or catered and list start dates.

A County B City or Town C Starting Date

In care of: B

Street Address: C

City: D

State: E ZIP Code: F

Section E: County Innkeepers Tax (CIT) Registration (see instructions on page 2) (No Additional Fee)

Sales Tax Section B must also be completed.

Contact the Department at (317) 233-4015 for more information regarding this tax.

Complete this section if you will provide lodging or accommodations for periods of less than thirty (30) days.

1. Date room rentals or accommodations begin from this location:

Month Year

2. Mailing name and address for CIT tax returns (if different from Section A, Line 6):

Check if foreign address (See instructions)

In care of: B Street Address: C

City: D State: E IP Code: F

Section F: Motor Vehicle Rental (MVR) Excise Tax Registration (see instructions on page 2) (No Additional Fee)

Sales Tax Section B must also be completed.

Contact the Department at (317) 233-4015 for more information regarding this tax.

If cars or trucks (less than 11,000 lbs Gross Vehicle Weight) will be rented for less than thirty (30) days from this location, complete this section.

1. Date motor vehicle rental or leasing begins: Month Year

2. Tax District Number:
 If unknown, contact the County Assessors office.

3. Mailing name and address for MVR tax returns (if different from Section A, Line 6):

Check if foreign address (See instructions)

In care of: B Street Address: C

City: D State: E ZIP Code: F

Section G: Prepaid Sales (PPD) Tax on Gasoline for Qualified Distributors (see instructions on page 3) (\$100 Registration Fee)

Sales Tax Section B must also be completed.

Contact the Department at (317) 615-2630 for more information regarding this tax.

If you are a refiner, distributor, or a terminal operator which supplies gasoline to retail outlets and wish to become a Qualified Distributor, complete this section.

1. Enter your Indiana licensed gasoline distributor number:

2. Date of first gasoline sales:

3. Estimated number of gallons purchased/sold monthly:

Month Day Year

4. Mailing name and address for PPD tax returns (if different from Section A, Line 6):

Check if foreign address (see instructions)

In care of: B Street Address: C

City: D State: E ZIP Code: F

5. Name of contact person:

6. Contact person's daytime telephone number:

A () B EXT

Indiana Gross Retail & Use Tax Bond

All **Licensed Gasoline Distributors** who are issued a permit to collect Prepaid Sales Tax on Gasoline will be required to file monthly detailed reports with the Department.

A Prepaid Sales Tax permit (BT-2) is not assignable and is valid only for the distributor in whose name it is issued.

Bonding Procedure

Concurrently with the filing of this application for a permit, a qualified distributor **must** file a bond with the Department. Below is the formula for calculating the correct bond amount.

Enter the sum of estimated number of gallons supplied monthly times three (months). (Section G, Line 3 X 3)... 1. _____

Multiply Line 1 by .04 (Round to the nearest dollar amount)..... 2. _____

The amount on Line 2 is the amount of your bond, provided it is at least \$2,000 which is the minimum bond amount. Indiana Code 6-2.5-7-8 states that the Department shall determine the amount of the distributor's bond. Please use the most accurate figures available to avoid a deficient bond. Please enclose Bond Form ST-160 or another form of surety and return it to the Department with this application.

To obtain a permit to collect Prepaid Sales Tax on Gasoline, the Indiana Department of Revenue requires that each refiner, distributor or terminal operator agrees to make payment to the Department by means of Electronic Funds Transfer (EFT) as defined in IC 4-8.1-2-7. An EFT authorization must be completed and returned to the Department. For further information regarding EFT filing, and/or EFT authorization agreement contact the Department at (317) 232-5500.

**Section H: Tire Fee (TIF) Registration (see instructions on page 3) (No registration fee)
Contact the Department at (317) 233-4015 for more information regarding this fee.**

Complete this section if you will be selling new replacement tires and/or new tires mounted on motor vehicles.

1. Date sales begin from this location: _____
Month Year

2. Mailing name and address for TIF returns (if different from Section A, Line 6): Check if foreign address (See instructions)

In care of: B _____ Street Address: C _____
City: D _____ State: E _____ ZIP Code: F _____

**Section I: Signature Section
Contact the Department at (317) 232-4015 for more information regarding this application.**

I hereby certify that the statements are correct.

Signature: _____ Title: _____ Date: _____

This application **must** be signed by the owner, general partner, corporate officer, or resident agent **before it will be accepted by the Department.** (IC 6-8.1-3-4)

NOTE:

Failure to remit sales tax due and/or income tax withheld is a felony punishable by imprisonment, a fine of \$10,000 plus a 100-percent fraud penalty.

The partners or corporate officers are each personally, jointly and severally liable for the sales and use tax* collected and the withholding tax withheld. These taxes are trust fund taxes and are not discharged in bankruptcy proceedings.

***This includes: County Innkeepers Tax (CIT), Food and Beverage Tax (FAB), Prepaid Sales Tax (PPD), Tire Fee (TIF), and Motor Vehicle Rental and County Supplemental Excise Tax (MVR).**

Mail To:
**Indiana Department of Revenue
Tax Administration Processing
P. O. Box 6197
Indianapolis, IN 46206-6197**

Private Employment Agencies Only
Mail To:
**Indiana Department of Revenue
Licensing Section
100 N. Senate Room N281
Indianapolis, IN 46204**

For additional information
about private employment
agencies:
Call (317) 232-5977

Indiana Department of Revenue
Business Tax Application

Instructions for Completing Form BT-1. **Please allow four to six weeks for processing.**

Purpose: Form BT-1 is an application used when registering with the Indiana Department of Revenue for Sales Tax, Withholding Tax, Out-of-State Use Tax, Food and Beverage Tax, County Innkeepers Tax, Tire Fee, Motor Vehicle Rental Excise Tax, and Prepaid Sales Tax on Gasoline, or a combination of these taxes. The form also allows you to add a new tax type to an existing registered location in the event your business activities expand.

- Be sure to answer all applicable questions. Failure to do so may result in delays in establishing an account for you or may result in penalty assessments for returns that cannot post to your account.
- Please print legibly or type the information on your application.
- **Note:** Any outstanding tax liability owed by the applicant or an owner, partner, or officer will delay application approval.

Section A

(This section is devoted to taxpayer information.)

Line 1: According to federal guidelines, most partnerships and all corporations are required to obtain a Federal Identification Number (FID). This number is also required whenever you withhold federal income tax from employees, regardless of ownership type. If you have a FID, enter it on Line 1. This form may be submitted to the Department of Revenue prior to receiving your FID. If you have applied, but have not yet received your federal identification number, indicate "applied for" on Line 1. You may get this number by completing the Internal Revenue Service Form SS-4. This form may be obtained from your local IRS office or by calling 1-800-829-3676. Your FID is assigned to you by the Internal Revenue Service.

Line 2: The Taxpayer Identification Number (TID) is applicable only if you have previously registered with the Department. The TID is a 13-digit number shown on the Registered Retail Merchant Certificate and/or vouchers or returns.

Lines 3 and 4: Enter the name and the daytime telephone number of a person within your organization whom the Department may contact about tax-related matters for this location.

Line 5: Check the reason (only one) that explains why you are filing this application.

Note: Canadian/foreign address If you indicate it is a foreign address please complete the address following U.S. Postal guidelines. The City line should show the Country name written in full and preferably in capital letters. A Canadian address should be shown the same as a U.S. address. Use the standard two-character abbreviations for provinces and territories. It will go on the State line.

Line 6: These lines are for your ownership name and mailing address. On the first line, enter the ownership name of your business. If you are a sole proprietor, enter your last name, first name, and middle initial. If you are a corporation, enter the corporate name as listed on your corporate charter. If you are a partnership and have a legal partnership name, enter the name as recognized by the Internal Revenue Service. If you are a nonprofit organization, enter your organization's name as listed with the Internal Revenue Service. All government agencies should list their proper agency name. Enter the address of the ownership. Your e-mail address is optional.

Line 7: If your business is conducted under a trade name or DBA (doing business as) name, enter it here. Enter the location street address, city, state, zip code, county, and township. If you do not know your township, contact your county assessor. Enter the telephone number of the business location. If you are conducting business activities from your home, enter your home telephone number (include the area code).

Note: The business location address cannot be a P.O. Box number.

Line 8: This line is used to indicate the type of organization of your business. For detailed information about the different types of organizations, go to: www.in.gov/sos/business

Line 9: Enter your Indiana Secretary of State Control number, if you have one.

Line 10: This information is to be completed only if you are a corporation. Otherwise, proceed to Question 11.

A) "State of Incorporation" is the state where your Articles of Incorporation were filed.

B) "Date of Incorporation" is the date you incorporated.

C) "State of Commercial Domicile" is the principal place from where your trade or business is directed or managed. Commercial domicile is not necessarily in the state of incorporation.

D) "Enter the date authorized to do business in Indiana." This date is obtained from the Indiana Secretary of State's Office for any foreign corporation not incorporated in Indiana seeking authority to transact business in Indiana.

E) "Accounting Period Year Ending Date" is the month and day your corporation closes its books. If you are on a calendar year, your accounting period date is Dec. 31. If you are on a fiscal year, the accounting period date will be a date other than Dec. 31.

Line 11: Included in this application is a North American Industry Classification System (NAICS) list categorizing business types. Examine the list and locate your business activity or activities from the listing. You may enter up to four codes. The codes will assist the Department in mailing tax bulletins and other information applicable to your business. If you are currently using a six-digit code that is not on the list, but has been approved by the IRS, use that number(s).

Line 12: This section **must** be completed for processing of this form. If the business is a **Sole Proprietorship**, enter the Social Security number, last name, first name, middle initial, title as owner and home address. If the business is a **Partnership**, enter each general partner's Social Security number, name (last name, first name, middle initial), title of the partner, and home address. If you are a **Corporation**, enter the Social Security numbers, names of the corporate officers, titles, and home addresses. If you are a **Governmental Agency** or other type ownership, enter Social Security number(s), name(s) of official officer(s), title(s), and home address(es). **Social Security numbers are required in accordance with IC 4-1-8-1.** Affiliates of the registering entity listed on Line 6 must provide the Federal Identification Number, its entity name and address as well as the names, addresses and Social Security numbers of the affiliate's responsible officers or partners. Attach additional sheets if necessary.

Tax Registration

Line 13: Check (all that apply) the type of tax(es) you wish to register for this business location.

Private Employment Agency Instructions

Complete Section A and the Signature Section of the BT-1.

Contact Licensing at 317-232-5977 for a separate application which will need to be completed and submitted with your BT-1. See **Signature Section for mailing address.**

Section B

Retail Sales Tax Account: *\$25 Nonrefundable Registration Fee*
or **Out-of-State Use Tax Account:** *No Additional Fee*

Retail Sales Tax is applicable whenever selling activities are conducted in Indiana; whenever a business location, warehouse, distribution center exists; or whenever employees solicit or take orders for your products in Indiana (this includes wholesalers). Upon registration for retail sales tax, the Department will issue a Registered Retail Merchants Certificate. The registration fee of \$25 is a nonrefundable processing fee and must be remitted with this application when registering for sales tax. Each business location, including manufacturers, per 45 IAC 2.2-8-7, must have a separate Registered Retail Merchants Certificate. A change of ownership requires a new application to be filed along with the \$25 fee. For example: A sole proprietor changing to a partnership or corporation is a change of ownership. **Retail sales tax rate is seven percent (.07).**

Out-of-State Use Tax is a voluntary registration available to out-of-state businesses not meeting the conditions listed for retail sales tax. Upon registration for out-of-state use tax, the Department will issue an Out-of-State Use Tax Collection and Remittance Permit. This permit authorizes your business to collect Indiana Use Tax on sales shipped into Indiana. There is no fee associated with this registration. **The use tax rate is seven percent (.07).**

As of Jan. 1, 2007, all Registered Retail Merchant Certificates are valid for two years. The Indiana Department of Revenue will automatically renew the certificate 30 days before the expiration date, at no cost to the merchant, as long as all sales returns and payments are up to date. However, if a retail merchant has unpaid sales tax debts, the Department may not renew the certificate. Merchants cannot continue to operate a business without a valid certificate. Read Indiana Code 6-2.5-8-1 for more information.

Line 1: Enter the date or anticipated date selling activities will begin. If you want to make purchases prior to your doors actually opening, use the date your purchasing will begin for "Date of First Sale."

Line 2: Enter the dollar amount of your estimated monthly taxable sales. Wholesalers and manufactures please enter \$1. If this is left blank or you put in zero, you will be set up on a monthly filing status.

Lines 3 through 12: Answer either "yes" or "no" as required and provide additional information as requested.

Line 13: If you want your sales tax returns sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Section C

Withholding Tax Account: *No Additional Fee*

The following section is to be completed if you have employees in your workplace subject to Indiana Adjusted Gross (State) Income Tax. Separate withholding registration is required for remitting withholding taxes on non-resident shareholders, partners or beneficiaries for distributions of income made one time each year. If you are registering for Withholding Tax, you must have a Federal Identification Number or have applied for one. There is no application fee for a withholding tax account. The withholding rates will be mailed to you on Departmental Notice # 1 (DN # 1) upon processing of the application.

Indiana employers must withhold Indiana state tax from employees who

work in Indiana but are not residents of Indiana. The only exception is when an employee is a full-year resident of one of the states that has entered into a reciprocal agreement with Indiana. Also, county income tax must be withheld at the nonresident rate if the Indiana county is the county of principal employment.

Line 1: The "accounting period year ending date" is the month and day your corporation closes its books. If you are on a calendar year, your accounting period date is December 31. If you are on a fiscal year, the accounting period will be a date other than December 31.

Line 2: If you have a State Unemployment Tax Account (SUTA) number, enter it here. (For more information about the SUTA number, contact Indiana Workforce Development.)

Line 3: Check all that apply.

Line 4: List date taxes were first withheld.

Line 5: Enter dollar amount of anticipated monthly wages paid to your Indiana employees.

Line 6: If you want your withholding tax returns sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Section D

Food and Beverage Tax Account: *No Additional Fee*

The Food and Beverage Tax applies to the sales of food and beverages in adopting counties and/or cities. To obtain an account, you must be registered for sales tax for the location on this application. To determine if the food and beverage tax applies to your business, contact your County Auditor to see if your business location is in an adopting county and/or city.

Line 1: Enter the date of first sales of food and/or beverages from this location or enter the date you plan to begin.

Line 2: Enter the name(s) of the adopting county(ies), city(ies), and/or town(s) where prepared foods or beverages are sold or catered and list the starting date(s) for each.

Line 3: If you want your food and beverage tax returns sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Section E

County Innkeepers Tax Account: *No Additional Fee*

The County Innkeepers Tax applies to the rental or leasing of hotel/motel rooms or accommodations for periods of less than 30 days. To obtain an account for this tax, you must be registered for sales tax for the location on this application. To determine if this tax applies to your business, contact your county auditor to see if your location is in an adopting county, and if so, whether the tax is submitted to the state or to the county.

Line 1: Enter month /year when room rentals/ accommodations will begin.

Line 2: If you want your County Innkeepers Tax returns sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Section F

Motor Vehicle Rental Excise Tax Account: *No Additional Fee*

To obtain an account for this tax, you must be registered for sales tax for the location on this application. Every organization engaged in the rental or leasing of motor vehicles (weighing less than 11,000 lbs Gross Vehicle

Weight) for less than 30 days is required to collect the Motor Vehicle Rental Excise Tax. **The motor vehicle rental excise tax rate is four percent (.04).**

A supplemental rental excise tax may be in effect for some counties. Contact the Department at (317) 233-4015 for additional information.

Line 1: Enter month / year when renting/leasing motor vehicles will begin.

Line 2: Enter the tax district number of this business location. If unknown, contact the County Assessor.

Line 3: If you want your Motor Vehicle Rental excise tax returns sent to an address other than the address listed in Section A Line 6, enter the mailing address here.

Section G Prepaid Sales Tax on Gasoline for Qualified Distributors: \$100 Registration Fee

This section applies to the process involved in obtaining a Prepaid Sales Tax Permit (BT-2). This permit entitles the bearer to purchase gasoline exempt for the applicable prepaid rate Indiana has on gasoline. Specific details are in Sales Tax Information Bulletin 15A or contact a representative in the Prepaid Sales Tax Section at (317) 615-2630.

Line 1: Enter your Indiana Licensed Gasoline Distributor Number. This number is issued by the Indiana Department of Revenue.

A Prepaid Sales Tax collection remittance permit will not be issued until the Indiana Licensed Gasoline Distributor Number is provided.

Line 2: Enter the date of first gasoline sales. This date will determine your first payment due date. Payments collected from the first through the fifteenth of the month are due the twenty-fifth of that month. Payments collected during the sixteenth through the last day of the month are due the tenth of the following month.

For example, if you collect prepaid sales tax from Sept. 1 through Sept. 15, then the first prepaid tax payment due date is Sept. 25. If you collect prepaid sales tax from Sept. 16 through Sept. 30, the first prepaid payment due date is Oct. 10.

Line 3: Enter the estimated number of gallons of gasoline you anticipate purchasing/selling monthly.

Line 4: If you want your prepaid sales tax returns/reports sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Line 5 & 6: Enter the name and telephone number of the person within your organization whom the Department may contact about prepaid sales tax on gasoline.

An **Electronic Funds Transfer (EFT)** authorization is required. Please see "Pay Your Taxes by Electronic Funds Transfer (EFT)."

Indiana State Gross Retail & Use Tax Bond Instructions, to be completed by Licensed Gasoline Distributors only.

A **bond** is required as described on the application.

Section H Tire Fee Registration: No Additional Fee

Complete this section if you will be selling new replacement tires and/or

new tires mounted on motor vehicles.

Line 1: Enter the date of first tire sales.

Line 2: If you want Tire Fee returns sent to an address other than the address listed in Section A Line 6, enter the mailing address.

Section I Signature Section

This application must be signed by the owner, general partner, corporate officer, or resident agent before it will be accepted by the Department.

This application will be delayed if any individuals listed on Line 12 (Section A), or the business has any outstanding tax liabilities.

Additional Information

Contact the Department at (317) 232-2045 for more information regarding this application, or this business tax application can be processed by a district office.

Indianapolis (317) 233-4015	Evansville (812) 479-9261	Merrillville (219) 769-4267
Bloomington (812) 339-1119	Fort Wayne (260) 436-5663	Muncie (765) 289-6196
Clarksville (812) 282-7729	Kokomo (765) 457-0525	South Bend (574) 291-8270
Columbus (812) 376-3049	Lafayette (765) 448-6626	Terre Haute (812) 235-6046

Electronic Funds Transfer

Who is required to remit by EFT?

1) If your average monthly tax liability is over \$10,000 per month for any of the following tax types, you are required to register for EFT and remit tax payments electronically: withholding tax, sales tax, use tax, and/or out-of-sales use tax. **Note:** If you are subject to Tire Fee and are required to remit your sales tax by EFT, you are also required to remit the Tire Fee by EFT.

2) If you are applying to collect Pre-paid Sales Tax on Gasoline, you are required to remit by EFT, regardless of the amount due.

Can I Voluntarily Remit by EFT?

Any business taxpayer who wishes to remit withholding tax and or sales/use tax may register for EFT and make payments electronically.

How to Register for EFT?

1) You may register for the traditional EFT Program - Automated Clearing House (ACH) Debit or ACH Credit (www.in.gov/dor/3516.htm) Select EFT-100 to download the EFT Program Guide and Registration Packet. Select EFT-1 to download the single page registration form.

2) You may use the online INtax program to register for EFT as well as file returns and make payments online. Visit www.intax.in.gov/

If you have any questions about EFT or would like us to send you additional information, contact the EFT Section by calling (317) 232-5500.

Form BT-1C

Authorization for Consolidated
Sales Tax or Food and Beverage Tax Filing Number
(Found on the last two pages of this file.)

North American Industry Classification System (continued)

Code		Code		Code	
524210	Insurance Agencies and Brokerages	513300	Telecommunications (including paging, cellular, satellite, & other telecommunications)	327210	Glass & Glass Product Manufacturing
524290	Other Insurance Related Activities			327300	Cement & Concrete Product Mfg.
524292	Third Party Administration for Insurance and Pension Funds	514000	Information Services & Data Processing Services	327400	Lime & Gypsum Product Manufacturing
524298	All Other Insurance Related Activities	514100	Information Services (including news syndicates, libraries, & on-line information services)	327900	Other Nonmetallic Mineral Product Mfg.
525000	Funds, Trusts, and Other Financial Vehicles	514210	Data Processing Services	331000	Primary Metal Manufacturing
525100	Insurance & Employee Benefit Funds			331110	Iron and Steel Mills & Ferroalloy Mfg.
525910	Open-End Investment Funds (Form 1120-RIC)			331200	Steel Product Manufacturing from Purchased Steel
525920	Trusts, Estates, and Agency Accounts	Manufacturing		331310	Alumina & Aluminum Production and Processing
525930	Real Estate Investment Trusts (Form 1120-REIT)	311000	Food Manufacturing	331400	Nonferrous Metal (except Aluminum) Production & Processing
525990	Other Financial Vehicles	311110	Animal Food Manufacturing	331500	Foundries
		311200	Grain & Oilseed Milling	332000	Fabricated Metal Product Manufacturing
Health Care and Social Assistance (620000)		311300	Sugar & Confectionery Product Mfg.	332110	Forging and Stamping
621000	Ambulatory Health Care Services	311400	Fruit & Vegetable Preserving & Specialty Food Manufacturing	332210	Cutlery and Handtool Manufacturing
621110	Offices of Physicians	311500	Dairy Product Manufacturing	332300	Architectural and Structural Metals Mfg.
621111	Offices of Physicians (except mental health specialists)	311610	Animal Slaughtering & Processing	332400	Boiler, Tank, & Shipping Container Mfg.
621112	Offices of Physicians, Mental Health Specialists	311710	Seafood Product Preparation & Packaging	332510	Hardware Manufacturing
621210	Offices of Dentists	311800	Bakeries & Tortilla Manufacturing	332610	Spring and Wire Product Manufacturing
621300	Offices of Other Health Practitioners	311900	Other Food Manufacturing (including coffee, tea, flavorings & seasonings)	332700	Machine Shops; Turned Product & Screw; Nut & Bolt Manufacturing
621310	Offices of Chiropractors	312000	Beverage and Tobacco Product Mfg.	332810	Coating, Engraving, Heat Treating, & Allied Activities
621320	Offices of Optometrists	312110	Soft Drink and Ice Manufacturing	332900	Other Fabricated Metal Product Mfg.
621330	Offices of Mental Health Practitioners (except Physicians)	312120	Breweries	333000	Machinery Manufacturing
621340	Offices of Physical, Occupational & Speech Therapists, and Audiologists	312130	Wineries	333100	Agricultural, Construction, & Mining Machinery Manufacturing
621391	Offices of Podiatrists	312140	Distilleries	333200	Industrial Machinery Manufacturing
621399	Offices of All Other Miscellaneous Health Practitioners	312200	Tobacco Manufacturing	333310	Commercial & Service Industry Machinery Manufacturing
621400	Outpatient Care Centers	313000	Textile Mills	333410	Ventilation, Heating, Air-Conditioning, & Commercial Refrigeration Equipment Mfg.
621410	Family Planning Centers	314000	Textile Product Mills	333510	Metalworking Machinery Manufacturing
621420	Outpatient Mental Health & Substance Abuse Centers	315000	Apparel Manufacturing	333610	Engine, Turbine, & Power Transmission Equipment Manufacturing
621491	HMO Medical Centers	315100	Apparel Knitting Mills	333900	Other General Purpose Machinery Mfg.
621492	Kidney Dialysis Centers	315210	Cut and Sew Apparel Contractors	334000	Computer and Electronic Product Mfg.
621493	Freestanding Ambulatory Surgical and Emergency Centers	315220	Men's & Boys' Cut & Sew Apparel Mfg.	334110	Computer & Peripheral Equipment Mfg.
621498	All Other Outpatient Care Centers	315230	Women's & Girls' Cut & Sew Apparel Mfg.	334200	Communications Equipment Manufacturing
621510	Medical and Diagnostic Laboratories	315290	Other Cut & Sew Apparel Manufacturing	334310	Audio and Video Equipment Manufacturing
621610	Home Health Care Services	315990	Apparel Accessories & Other Apparel Mfg.	334410	Semiconductor & Other Electronic Component Manufacturing
621900	Other Ambulatory Health Care Services	316000	Leather & Allied Product Manufacturing	334500	Navigational, Measuring, Electromedical, & Control Instruments Manufacturing
621910	Ambulance Services	316110	Leather & Hide Tanning & Finishing	334610	Manufacturing & Reproducing Magnetic & Optical Media
621990	All Other Ambulatory Health Care Services	316210	Footwear Manufacturing (including rubber & plastic)	335000	Electrical Equipment, Appliance, & Component Manufacturing
621991	Blood and Organ Banks	316990	Other Leather & Allied Product Mfg.	335100	Electric Lighting Equipment Manufacturing
622000	Hospitals	321000	Wood Product Manufacturing	335200	Household Appliance Manufacturing
623000	Nursing & Residential Care Facilities	321110	Sawmills and Wood Preservation	335310	Electrical Equipment Manufacturing
623990	Other Residential Care Facilities	321210	Veneer, Plywood, & Engineered Wood Product Manufacturing	335900	Other Electrical Equipment & Component Manufacturing
624000	Social Assistance	321900	Other Wood Product Manufacturing	336000	Transportation Equipment Mfg.
624100	Individual & Family Services	322000	Paper Manufacturing	336110	Motor Vehicle Mfg./Auto Light Duty
624200	Community Food & Housing, and Emergency & Other Relief Services	322100	Pulp, Paper, & Paperboard Mills	336210	Motor Vehicle Body & Trailer Manufacturing
624310	Vocational Rehabilitation Services	322200	Converted Paper Product Manufacturing	336300	Motor Vehicle Parts Manufacturing
624410	Child Day Care Services	323100	Printing and Related Support Activities	336410	Aerospace Product & Parts Manufacturing
		323117	Book Printing	336510	Railroad Rolling Stock Manufacturing
Information (510000)		323119	Other Commercial Printing	336610	Ship and Boat Building
511100	Publishing Industries	324000	Petroleum and Coal Products Mfg.	336990	Other Transportation Equipment Mfg.
511110	Newspaper Publishers	324110	Petroleum Refineries (including integrated)	337000	Furniture and Related Product Mfg.
511120	Periodical Publishers	324120	Asphalt Paving, Roofing, & Saturated Materials Manufacturing	339000	Miscellaneous Manufacturing
511130	Book Publishers	324190	Other Petroleum and Coal Products Mfg.	339110	Medical Equipment & Supplies Mfg.
511140	Database and Directory Publishers	325000	Chemical Manufacturing	339900	Other Miscellaneous Manufacturing
511190	Other Publishers	325100	Basic Chemical Manufacturing		
511210	Software Publishers	325200	Resin, Synthetic Rubber & Artificial and Synthetic Fibers & Filaments Manufacturing	Mining (210000)	
512000	Motion Picture & Sound Recording Industries	325300	Pesticide, Fertilizer, & Other Agricultural Chemical Manufacturing	211110	Oil and Gas Extraction
512100	Motion Picture & Video Industries (except video rental)	325410	Pharmaceutical & Medicine Manufacturing	212110	Coal Mining
512200	Sound Recording Industries	325500	Paint, Coating, & Adhesive Manufacturing	212200	Metal Ore Mining
513000	Broadcasting and Telecommunications	325600	Soap, Cleaning Compound, & Toilet Preparation Manufacturing	212310	Stone Mining and Quarrying
513100	Radio & Television Broadcasting	325900	Other Chemical Product & Preparation Mfg.	212320	Sand, Gravel, Clay, & Ceramic and Refractory Minerals Mining & Quarrying
513200	Cable Networks & Program Distribution	326000	Plastics and Rubber Products Mfg.		
		326100	Plastic Product Manufacturing		
		326200	Rubber Product Manufacturing		
		327000	Nonmetallic Mineral Product Mfg.		
		327100	Clay Product & Refractory Manufacturing		

North American Industry Classification System (continued)

<p><i>Code</i></p> <p>454319 Other Fuel Dealers</p> <p>454390 Other Direct Selling Establishments - Flea Markets (including door-to-door retailing, frozen food plan providers, party plan merchandise, & coffee-break service providers)</p> <hr/> <p>Transportation and Warehousing</p> <p>481000 Air Transportation</p> <p>482110 Rail Transportation</p> <p>483000 Water Transportation</p> <p>484000 Truck Transportation</p> <p>484110 General Freight Trucking, Local</p> <p>484120 General Freight Trucking, Long-distance</p> <p>484200 Specialized Freight Trucking</p> <p>485000 Transit and Ground Passenger Transportation</p> <p>485110 Urban Transit Systems</p> <p>485210 Interurban & Rural Bus Transportation</p> <p>485310 Taxi Service</p> <p>485320 Limousine Service</p> <p>485410 School & Employee Bus Transportation</p> <p>485510 Charter Bus Industry</p> <p>485990 Other Transit & Ground Passenger Transportation</p> <p>486000 Pipeline Transportation</p> <p>487000 Scenic and Sightseeing Transportation</p> <p>488000 Support Activities for Transportation</p> <p>488100 Support Activities for Air Transportation</p> <p>488210 Support Activities for Rail Transportation</p> <p>488300 Support Activities for Water Transportation</p> <p>488410 Motor Vehicle Towing</p> <p>488490 Other Support Activities for Road Transportation</p> <p>488510 Freight Transportation Arrangement</p> <p>488990 Other Support Activities for Transportation</p> <p>492000 Couriers and Messengers</p> <p>492110 Couriers</p> <p>492210 Local Messengers and Local Delivery</p> <p>493000 Warehousing and Storage</p> <p>493100 Warehousing & Storage (except lessors of miniwarehouses & self-storage units)</p> <hr/> <p>Utilities</p> <p>221000 Utilities</p> <p>221100 Electric Power Generation, Transmission & Distribution</p> <p>221210 Natural Gas Distribution</p> <p>221300 Water, Sewage & Other Systems</p> <hr/> <p>Unrelated Business Activities</p> <p>900000 Unrelated Debt-financed Activities - other than rental or real estate</p> <p>900001 Investment Activities by section 501(c) (7), (9), or (17) organizations</p> <p>900002 Rental of Personal Property</p> <p>900003 Passive Income Activities with Controlled Organizations</p> <p>900004 Exploited Exempt Activities</p> <hr/> <p>Wholesale Trade</p> <p>421000 Wholesale Trade, Durable Goods</p> <p>421100 Motor Vehicle & Motor Vehicle Parts & Supplies Wholesales</p> <p>421200 Furniture & Home Furnishing Wholesalers</p> <p>421300 Lumber & Other Construction Materials Wholesalers</p> <p>421400 Professional & Commercial Equipment & Supplies Wholesalers</p> <p>421500 Metal & Mineral (except Petroleum) Wholesalers</p> <p>421600 Electrical Goods Wholesalers</p> <p>421700 Hardware, and Plumbing & Heating Equipment & Supplies Wholesalers</p>	<p><i>Code</i></p> <p>421800 Machinery, Equipment, & Supplies Wholesalers</p> <p>421910 Sporting & Recreational Goods & Supplies Wholesalers</p> <p>421920 Toy & Hobby Goods & Supplies Wholesalers</p> <p>421930 Recyclable Material Wholesalers</p> <p>421940 Jewelry, Watch, Precious Stone, & Precious Metal Wholesalers</p> <p>421990 Other Miscellaneous Durable Goods Wholesalers</p> <p>422000 Wholesale Trade, Nondurable Goods</p> <p>422100 Paper & Paper Product Wholesalers</p> <p>422210 Drugs and Druggists' Sundries Wholesalers</p> <p>422300 Apparel, Piece Goods, & Notions Wholesalers</p> <p>422400 Grocery & Related Product Wholesalers</p> <p>422500 Farm Product Raw Material Wholesalers</p> <p>422600 Chemical and Allied Products Wholesalers</p> <p>422700 Petroleum and Petroleum Products Wholesalers</p> <p>422800 Beer, Wine, & Distilled Alcoholic Beverage Wholesalers</p> <p>422910 Farm Supplies Wholesalers</p> <p>422920 Book, Periodical, and Newspaper Wholesalers</p> <p>422930 Flower, Nursery Stock, & Florists' Supplies Wholesalers</p> <p>422940 Tobacco & Tobacco Product Wholesalers</p> <p>422950 Paint, Varnish, & Supplies Wholesalers</p> <p>422990 Other Miscellaneous Nondurable Goods Wholesalers</p> <hr/> <p>999999 Unclassified Establishments (unable to classify)</p>
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