



## **BUSINESS FIRM QUESTIONNAIRE**

UNITED STATES INTERNATIONAL TRADE COMMISSION  
ATTENTION: SME Project Team  
Office of Industries, Room 511  
500 E Street, SW, Washington, DC 20436  
FAX: 202-205-2217

The U.S. International Trade Commission, or Commission, ([www.usitc.gov](http://www.usitc.gov)) has been requested by the Office of the U.S. Trade Representative (USTR) to report on competitive conditions affecting U.S. business interactions with foreign clients. The Commission designed this questionnaire to collect information to fulfill this request. By completing this questionnaire, you will provide valuable information concerning U.S. businesses and their ability to compete internationally. The Commission will report its findings to the USTR on October 6, 2010, and the USTR has indicated it intends to make this report available to the public. Questionnaire data used in the Commission's report will be aggregated and presented in such a manner that the individual operations or responses of any one responding firm cannot be identified.

**RESPONSE TO THIS QUESTIONNAIRE IS REQUIRED BY LAW.  
READ ALL INSTRUCTIONS AND DEFINITIONS TO DETERMINE WHETHER THIS  
QUESTIONNAIRE APPLIES TO YOUR FIRM.  
THE COMPLETED QUESTIONNAIRE MUST BE RETURNED TO THE  
COMMISSION NO LATER THAN MARCH XX, 2010.**

The information called for in this questionnaire is for use by the Commission in connection with its investigation No. 332-510, *Small and Medium-Sized Enterprises: Characteristics and Performance*, notice of which was published in the *Federal Register* of December 11, 2009. The information is requested under the authority of section 332(g) of the Tariff Act of 1930 (19 U.S.C. § 1332(g)). Completing the questionnaire is mandatory and failure to reply as directed can result in a subpoena or other order to compel the submission of records or information in your possession (19 U.S.C. § 1333(a)). If you need further information about this questionnaire, please contact one of the project leaders listed below:

William Deese (202-205-2626)  
Erland Herfindahl (202-205-2374)

Please complete this questionnaire for your firm as a whole. If this is not possible, or is unreasonably burdensome, then individual business units or groups of business units within your firm can provide separate responses, but you must ensure that all of your firm's activities are reflected in questionnaire responses and that there is no double counting of such activities. If you have joint venture business units, these should, in general, provide their own responses, but contact one of the project leaders if you need further guidance.

This questionnaire can be downloaded from the Commission's Web site at:

<http://www.usitc.gov/documents/usitc.questionnaire.doc>

**WHO MUST COMPLETE THIS QUESTIONNAIRE**

**Your firm must complete this questionnaire if any of items A, B, or C below applied at any time during 2005-2009.**

- A. Manufactured goods: Your firm produced products in the United States.**
- B. Services: Your firm provided services from operations in the United States, or provided services through affiliates in foreign countries.**
- C. Intellectual property: Your firm had income from royalties, license fees, or other intellectual property-related sources related to the production of manufactured goods or the provision of services.**

**If items A, B, or C apply to your firm, check the “Yes” box on page 3 and follow the instructions provided there.**

**If A, B, and C do not apply to your firm, check the “No” box on page 3 and follow the instructions provided there.**

This questionnaire was reviewed by industry participants to ensure that data requests are sufficient, meaningful, and as limited as possible. Public reporting burden for this questionnaire is estimated to average 2 hours per response. Send comments regarding the accuracy of this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the address or fax number on the cover page.

**FIRM INFORMATION**

Firm name	_____		
Address	_____		
City	_____	State	_____ Zip code _____
Web site address	_____		
<p>Read the text in the "Who must complete this questionnaire" box on page 2. If items A, B, or C apply to your firm, check the "Yes" box below. Otherwise, check the "No" box.</p>			
<input type="checkbox"/> <b>YES</b>	Read the instructions and definitions carefully, complete all parts of the questionnaire that apply to you, sign the certification, and return the entire questionnaire to the Commission at the address or fax number on the cover page, no later than <b>March XX, 2010</b> . See page 5 for other submission options.		
<input type="checkbox"/> <b>NO</b>	Sign the certificate below, and promptly return this page to the Commission at the address or fax number on the cover page. See page 5 for other submission options.		

**BUSINESS FIRM QUESTIONNAIRE CERTIFICATION**

The undersigned certifies that the information herein supplied in response to this questionnaire is complete and correct to the best of his/her knowledge and belief and understands that the information submitted is subject to audit and verification by the Commission. Section 332(g) of the Tariff Act of 1930 (19 U.S.C. 1332(g)) provides that the Commission may not release information which the Commission considers to be confidential business information, unless the party submitting the confidential business information had notice, at the time of submission, that such information would be released by the Commission, or such party subsequently consents to the release of the information. The USTR, the requestor of this investigation, has requested that the Commission provide a nonconfidential (public) report. Consequently, the Commission will not release information gathered in this questionnaire in a form that reveals confidential business information of individual firms.

The undersigned acknowledges that information submitted in this questionnaire response and throughout this investigation may be used by the Commission, its employees, and contract personnel who are acting in the capacity of Commission employees, for developing or maintaining the records of this investigation or related proceedings for which this information is submitted, or in internal audits and in investigations relating to the programs and operations of the Commission pursuant to 5 U.S.C. Appendix 3. The undersigned understands that all contract personnel will sign nondisclosure agreements.

Name and title of Authorized Official	Date (MM/DD/YY)
Signature of Authorized Official*	Telephone (xxx-xxx-xxxx)      Fax (xxx-xxx-xxxx)

\*If submitting an electronic version of this certificate to the Commission, check this box in lieu of a written signature to indicate that the authorized official listed has certified the information provided.

## INSTRUCTIONS

**This questionnaire is intended for firms that have manufacturing or service operations, or have intellectual property revenues. The Commission requires information from all such firms regardless of the number of employees they have or amount of their revenues.**

This questionnaire is composed of 4 sections. Each section has a group of related questions. Not all sections apply to every firm. For example, section III must be completed only by firms that deal with foreign clients.

**All information submitted on this questionnaire will be treated as confidential business information. In the Commission's report, information will be combined with other responses so that it will not reveal the operations of your firm. Further, this questionnaire does not request information that relates to sensitive issues such as specific business plans or trade secrets.**

**Keep a copy of your submission for your records.**

**IF THE INFORMATION REQUESTED IS NOT READILY AVAILABLE FROM YOUR RECORDS, CAREFUL ESTIMATES ARE ACCEPTABLE.**

Use space provided in section IV at the end of the questionnaire if space provided for each question is not sufficient. Also include any other information you feel is relevant to the Commission's investigation in this section.

## DEFINITIONS

### **1. Firm:**

An individual proprietorship, partnership, joint venture, association, corporation (including any subsidiary corporation), business trust, cooperative, trustee in bankruptcy, or receiver under decree of any court.

### **2. Revenues:**

Income generated from the sale or license of goods or services, including royalties, fees, or other intellectual property-related income, associated with the main operations of your firm before any costs or expenses are deducted. Revenue is usually shown as the top item in an income (profit and loss) statement from which all charges, costs, and expenses are subtracted to arrive at the net income of the firm.

### **3. Employees:**

The number of people employed by your firm that were on your payroll on December 31 of each of the following years: 2005-2009. This includes paid full- and part-time employees in executive, production, management, sales, or administrative positions. Employees on sick leave, holidays, and vacations are also included.

A part-time employee is one that works less than 35 hours a week.

Do not include temporary staffing obtained from a staffing service; contractors, subcontractors, independent contractors; full or part time leased employees; and personnel related to purchased services, such as janitorial, guard or landscape services.

**4. Intellectual property:**

Refers to creations of the mind including inventions and discoveries, literary and artistic works, symbols and designs, and formulas and know-how that are potentially protectable under patent, copyright, trademark, trade secret, or contract law.

Intellectual property revenues include royalties, license fees, and all other income received from the sale or transfer, in whole or in part, of any of the rights associated with intellectual property.

**5. Foreign client:**

A client whose normal base of operation is not in one of the 50 states, Washington, D.C, or Puerto Rico.

**6. Services:**

Includes “cross border” and/or affiliate transactions. “Cross border” transactions occur when a firm provides services to clients in another country, with people, information, or money crossing national boundaries in the process. Affiliate transactions occur when a firm provides services to foreign clients through affiliates established in a foreign country.

Other definitions are shown in certain specific sections of this questionnaire.

**ELECTRONIC COMPLETION METHOD AND SUBMISSION INSTRUCTIONS**

Please consider completing this questionnaire electronically in Microsoft Word, following the instructions below.

Download the questionnaire from the Commission’s Web site at:

*<http://www.usitc.gov/documents/usitc.questionnaire.doc>*

Open the file in Microsoft Word for Windows. Contact one of the project leaders shown on the cover page if this file is incompatible with your firm’s computer operating system or version of Word.

Entry areas are indicated as gray boxes in this electronic version. These boxes turn black as they are selected. Enter the requested information for each question that applies to your firm. Use Tab key to advance from box to box. Use Shift and Tab keys, simultaneously, to go back to a previous box. Click on any box to go immediately to that box. Use scroll keys to navigate through areas with no entry boxes.

Other than in these boxes, you will not be able to add information to or change the questionnaire. Boxes will expand to accommodate responses.

Certain boxes require numeric information. If text is entered, it will be changed to a default numeric value after moving to the next entry box.

After you have completed the questionnaire electronically in Word, you have four submission options:

1. Attach the electronic version to an email message and send it to *jeremey.wise@usitc.gov*. Please note that submitting the questionnaire response by e-mail will subject your firm's confidential business information (CBI) to transmission over an unsecured environment and to possible disclosure to third parties. Any risk of disclosure of CBI during transmission is assumed by your firm and not the Commission. However, once the e-mail is received, the questionnaire response will be stored in the Commission's secured environment and will receive the safeguards described in the certification on page 3.
2. Use the Commission's secure file upload site. Type `https://dropbox.usitc.gov` in your web browser, and press enter. Complete the requested information in the form that appears and click on the browse button. Navigate to your completed questionnaire file and select it. Then click on "Submit."
3. Copy the electronic version onto removable computer media such as a CD and send by express mail service to the address listed below.
4. Print the completed questionnaire and send by express mail service to the address below:

UNITED STATES INTERNATIONAL TRADE COMMISSION  
ATTENTION: SME Project Team  
Office of Industries, Room 511  
500 E Street, SW, Washington, DC 20436

If you wish to discuss any security concerns about submitting your completed questionnaire, please contact one of the project leaders shown on the cover page.

#### **WRITTEN COMPLETION METHOD AND SUBMISSION INSTRUCTIONS**

Download the questionnaire from the Commission's Web site at:

*<http://www.usitc.gov/documents/usitc.questionnaire.doc>*

Open the file in Microsoft Word and print the document. Contact one of the project leaders shown on the cover page if this file is incompatible with your firm's computer operating system or version of Word. Type or write in the requested information for each question that applies to your firm. Submit the completed form by express mail service to the Commission using the address below:

UNITED STATES INTERNATIONAL TRADE COMMISSION  
ATTENTION: SME Project Team  
Office of Industries, Room 511  
500 E Street, SW, Washington, DC 20436

**SECTION I. GENERAL QUESTIONS**

I.1. Who at your firm should be contacted regarding the information provided in this questionnaire?

Name	Title
Telephone (xxx-xxx-xxxx)	E-mail address

I.2. Report below the actual number of hours required and the cost to your firm of completing this questionnaire, including all preparatory activities.

_____ Hours	_____ Dollars
-------------	---------------

I.3. Is your firm owned in whole or part by any other firm(s)?

- Yes
- No

If yes, provide the following for the three leading owners, based on equity share:

Firm name	City, State (if domestic), and Country	Equity share (%)

I.4. Does your firm have an ownership share in any other firm(s)?

- Yes
- No

If yes, provide the following for the three leading firms you own, based on your equity share:

Firm name	City, State (if domestic), and Country	Equity share (%)

I.5. In what year was your firm established (4 digits)? Give the year that your manufacturing or service operations began, or when you started receiving intellectual property revenues. Disregard any ownership changes.

<b>Year (YYYY)</b>

I.6. Please provide your firm's revenues for the indicated years.

Revenues are income generated from the sale of goods or services, including royalties, license fees, or other intellectual property-related income associated with the main operations of your firm before any costs or expenses are deducted. Revenue is shown usually as the top item in an income (profit and loss) statement from which all charges, costs, and expenses are subtracted to arrive at the net income of the firm.

**CAREFUL ESTIMATES ARE ACCEPTABLE. IF A VALUE IS ZERO, ENTER 0. IF A VALUE IS UNKNOWN, LEAVE ENTRY BLANK.**

Year	Revenues in full figure dollars
2005	
2006	
2007	
2008	
2009	

I.7. Please provide the number of people employed by your firm for the indicated years.

Include employees that were on your payroll on December 31 for the years indicated below. Include paid full- and part-time employees, including executive, production, management, sales, and administrative personnel. Also include employees on sick leave, holidays, and vacations.

A part-time employee is one that works less than 35 hours a week.

Exclude temporary staffing obtained from a staffing service; contractors, subcontractors, independent contractors; full- or part-time leased employees; and personnel related to purchased services, such as janitorial, guard or landscape services.

**CAREFUL ESTIMATES ARE ACCEPTABLE. IF A VALUE IS ZERO, ENTER 0. IF A VALUE IS UNKNOWN, LEAVE ENTRY BLANK.**

<b>Year</b>	<b>Full time (number)</b>	<b>Part-time (number)</b>
2005		
2006		
2007		
2008		
2009		

I.8. For any year during 2005-09, did your firm purchase or obtain goods, services, or intellectual property from firms with less than 500 employees to produce goods, services, or intellectual property that were directly sold or licensed to foreign clients?

- Yes
- No
- Don't know

If yes, please report these purchases as a percentage of the value of your total purchases during this time.

<input type="checkbox"/>	Less than 5 percent
<input type="checkbox"/>	From 5 percent up to 15 percent
<input type="checkbox"/>	From 15 percent up to 50 percent
<input type="checkbox"/>	50 percent or greater

I.9. For any year during 2005-09, did your firm sell or license manufactured goods, services, or intellectual property to firms with more than 500 employees to produce goods, services, or intellectual property that were directly sold or licensed to foreign clients?

- Yes
- No
- Don't know

If yes, please report these sales as a percentage of the value of your total sales during this time.

<input type="checkbox"/>	Less than 5 percent
<input type="checkbox"/>	From 5 percent up to 15 percent
<input type="checkbox"/>	From 15 percent up to 50 percent
<input type="checkbox"/>	50 percent or greater

I.10. For any year during 2005-09, did your firm sell or license manufactured goods, services, or intellectual property to wholesalers or similar entities that sold or licensed your products in foreign markets?

- Yes
- No
- Don't know the final market

If yes, please report these sales as a percentage of the value of your total sales during this time.

<input type="checkbox"/>	Less than 5 percent
<input checked="" type="checkbox"/>	From 5 percent up to 15 percent
<input checked="" type="checkbox"/>	From 15 percent up to 50 percent
<input type="checkbox"/>	50 percent or greater

I.11. Please indicate the North American Industry Classification System (NAICS) 4-digit classification code for your top three lines of business in 2009. A list and definition of NAICS codes can be found at <http://www.census.gov/cgi-bin/sssd/naics/naicsrch?chart=2007>. For example, if your firm's top line of business in 2009 was college education services, you would enter 6113 for rank 1 in the space below.

Rank	NAICS code (4-digit)
1	
2	
3	

**SECTION II. BUSINESS IMPEDIMENTS**

II.1. During 2005-2009, did your firm sell, or consider selling, goods, services, or intellectual property to foreign clients?

- Yes Continue with this section below.
- No Proceed to section III.

II.2. For each impediment below, please indicate, from 1 to 5, the extent to which it has affected your existing sales, or potential sales, to foreign clients. If sales not impeded, check 1; if the impediment has had a major effect on sales to foreign clients in your primary foreign market, check 5. If you have not encountered the impediment in your business, check the “not encountered” box. **If you have no knowledge about the impediment, do not check a box.**

#	Impediment	Not encountered	Check one box per row to indicate severity of impediment on sales				
			No impediment	Moderate impediment	Major impediment		
1	Obtaining financing	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
2	Foreign regulations	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
3	Difficulty locating sales prospects	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
4	Foreign sales not sufficiently profitable	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
5	Language or cultural barriers	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
6	Insufficient intellectual property protection	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
7	High tariffs	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
8	Unable to find foreign partner firm	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
9	U.S. regulations	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
10	Difficulty establishing affiliates in foreign market	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
11	Visa issues	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
12	Customs procedures	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
13	Difficulty in receiving or processing payments for goods or services	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
14	Lack of trained staff to manage international business activities	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
15	U.S. taxation issues	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
16	Foreign taxation issues	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
17	Lack of government support programs	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
18	Preference for local goods or services in foreign market	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
19	Transportation/shipping costs	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
20	Other (specify below)	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Specify:						
21	Other (specify below)	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Specify:						
22	Other (specify below)	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Specify:						

II.3. Please indicate the three most significant impediments affecting your firm's ability to do business with existing or potential foreign clients. Use the impediment number in the first column of the table in question II.2. For example, if transportation costs present the most significant impediment, please enter the number 19 for rank 1 in the space below.

<b>Rank</b>	<b>Put impediment number from question II.2 in this column</b>
1	
2	
3	

DRAFT

**SECTION III. FOREIGN CLIENT INFORMATION**

III.1. During 2005-2009, did your firm sell or license manufactured goods, services or intellectual property to foreign clients?

- Yes Continue with this section below.
- No Proceed to section IV.

III.2. Please provide your revenues derived from selling or licensing manufactured goods, services, or intellectual property to foreign clients.

**CAREFUL ESTIMATES ARE ACCEPTABLE. IF A VALUE IS ZERO, ENTER 0. IF A VALUE IS UNKOWN, LEAVE ENTRY BLANK.**

**ANNUAL REVENUES SHOULD NOT EXCEED THE TOTAL REVENUES REPORTED IN QUESTION I.6.**

Year	Revenue from sales to foreign clients in full figure dollars
2005	
2006	
2007	
2008	
2009	

III.3. Please provide your revenues derived from selling or licensing manufactured goods, services, or intellectual property to foreign clients in each of the following countries or regions.

**CAREFUL ESTIMATES ARE ACCEPTABLE. IF A VALUE IS ZERO, ENTER 0. IF A VALUE IS UNKOWN, LEAVE ENTRY BLANK.**

**THE SUM OF REVENUES FOR EACH YEAR SHOULD MATCH THE YEARLY FIGURES REPOTRED IN QUESTION III.2.**

Revenue from foreign clients in full figure dollars								
Year	Canada	Mexico	EU27	Other Europe <sup>1</sup>	China	Other Asia <sup>2</sup>	Latin America (besides Mexico) <sup>3</sup>	Other <sup>4</sup>
2005								
2006								
2007								
2008								
2009								

<sup>1</sup> Including Russia.  
<sup>2</sup> Including Middle Eastern, East Asian, and South Asian countries.  
<sup>3</sup> Including Central American and Caribbean countries.  
<sup>4</sup> Including Australia, New Zealand, African countries, and all other countries not provided for in the preceding columns.

III.4. Please indicate how your firm markets its manufactured goods, services, or intellectual property, as a share of total revenue. Please base your responses on 2009 data.

**CAREFUL ESTIMATES ARE ACCEPTABLE. SHARE(S) SHOULD SUM TO 100 PERCENT.**

Marketing method	Share of total revenue (percent)
<b>Domestic markets</b>	
<b>Foreign markets:</b>	
Physically or electronically shipped manufactured good or service to unrelated foreign client	
Foreign client traveled to the United States to purchase good or service from your firm	
Through affiliates (of any type, i.e., manufacturers, distributors, etc.) established by your firm in a foreign market	
Your firm's employees traveled to foreign market to deliver the good or service	
Provided intellectual property to firms in foreign markets	
Through licensed contracted foreign production with non-affiliated firms for products sold in countries other than the United States	
Other (Please specify: _____)	
Total (domestic and foreign market figures must sum to 100 percent)	100
If 2009 data are not available, please use the most recent data available, and indicate here the year your responses are based on.	

III.5. If your firm delivers part or all of its manufactured goods, services, or intellectual property through an affiliate in a foreign market, please check one box below that describes the affiliate. Check only one box.

- Sales office affiliate without production activities or core service provision
- Affiliate with production activities or core service provision
- Both of the above
- Other

III.6. Please indicate how your firm has attracted foreign clients. Rank in order of success, 1 being the most successful, 2 next, and so on. If unknown, leave spaces blank.

Method	Rank (1, 2, etc.)
Foreign client initiated contact with firm directly	
Business relationship extending more than 5 years in the past	
Trade shows in U.S. or foreign market	
Personal relationship with clients abroad	
Your firm's Web site	
Other marketing methods by your firm	
Assistance or information provided by a U.S. state or federal government agency	
Assistance or information provided by a private firm	
Other (Please specify: _____)	

III.7. Have your relationships with foreign clients spurred your firm to hire additional employees in the United States during 2005-2009?

- Yes Please complete this question.
- No Proceed to section IV.

**CAREFUL ESTIMATES ARE ACCEPTABLE. IF A VALUE IS ZERO, ENTER 0. IF A VALUE IS UNKNOWN, LEAVE ENTRY BLANK.**

Total number of additional full-time employees hired in the United States during 2005-2009 due to relationships with foreign clients	Total number of additional part-time employees hired in the United States during 2005-2009 due to relationships with foreign clients

**SECTION IV. OTHER INFORMATION**

IV.1. If you would like to elaborate on any of your responses, or provide any additional pertinent information, use the space below. Specify if the additional information applies to a specific question number. If information is general in nature, leave "Question no." column blank.

Question no.	Additional information

**DRAFT**