NPS	5-1 A	L					OMB No	o. 1121-0102: Approval Expires 05/31/2011	
RETUR TO	Gove	Census Bur ernments Di hington, DC			NATIONA PRISONE	AL PRISONER S R POPULATION MIDYEAR COUN 2010	N REPORT	AND ACTING AS COLLECTION AGENT	
DATA SUPPLIED BY									
NAME						Title			
TELEPH	IONE	Area Code	Number		Extension	FAX NUMBER	Area Code	Number	
E-MAI ADDR									

GENERAL INFORMATION

- If you have any questions, call the U.S. Census Bureau at 1-800-352-7229, or e-mail govs.nps@census.gov.
- Please complete the questionnaire before **July 30, 2010** using the web-reporting option, by mailing the completed form to the **U.S. Census Bureau** in the enclosed envelope, or by **FAXing** all pages to **1–888–891–2099.**
- Please retain a copy of the completed form for your records.

What types of inmates are included?

Inmates under your jurisdiction on June 30, 2010

- INCLUDE inmates under your jurisdiction held in your prison facilities (e.g., prisons, penitentiaries, and correctional institutions; boot camps; prison farms; reception, diagnostic, and classification centers; release centers, halfway houses, and road camps; forestry and conservation camps; vocational training facilities; prison hospitals; and drug and alcohol treatment facilities for prisoners).
- INCLUDE inmates who are temporarily absent (less than 30 days), out to court, or on work release.
- INCLUDE inmates under your jurisdiction held in local jails, private facilities, and other States' or Federal facilities.
- INCLUDE inmates in your facilities who are serving a sentence for your jurisdiction and another jurisdiction at the same time.
- EXCLUDE inmates held in your facilities for another jurisdiction.

Inmates under your custody on June 30, 2010

- INCLUDE all inmates held in your facilities.
- INCLUDE inmates housed in your facilities for other jurisdictions.
- EXCLUDE inmates held in local jails, private facilities, and facilities in other jurisdictions.

BURDEN STATEMENT

Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. The burden of this collection is estimated to average 1.5 hours per response, including reviewing instructions, searching existing data sources, gathering necessary data, and completing and reviewing this form. Send comments regarding this burden estimate or any aspect of this survey, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW; Washington, DC 20531. Do not send your completed form to this address.

BEPORTING INSTRUCTIONS If you are unable to report an item using NPS definitions and reporting criteria, describe the definitions or criteria you used in the NOTES section. If your jurisdiction, by law or regulation, cannot have the type of inmate described by an item, write "NA" (Not Applicable) in the space provided. If your jurisdiction had the type of inmate, but you are unable to determine the number separately by item, report the combined count in one item; write "NR" (Not Reported) in the remaining items; and specify in NOTES. If your jurisdiction can have the type of inmate described, but did not have any on June 30, 2010, enter "O" (Zero) in the space provided. Section I — MIDYEAR PRISON COUNTS I. On June 30, 2010, how many inmates under your custody — Exclude inmates held in local jails, private facilities and facilities in other jurisdictions. Include inmates held in any public facility run by your state, including halfway houses, camps, farms, training/treatment centers, and hospitals.								
a. Had a total maximum	Mala	Family	Data reported for June 30, 2009					
 a. Had a total maximum sentence of more than 1 year (Include inmates with consecutive sentences that add to more than 1 year.) b. Had a total maximum sentence of 1 year or less 	Male	Female	Male	Female	← Update as needed			
c. Were unsentenced d. TOTAL (Sum of items 1a to 1c)								
 Mark (X) this box if custody numbers comparable to 2009. Explain in NOT 2. On June 30, 2010, how many inm jurisdiction — 	ES.							
a. Had a total maximum	Male	Female	Male	Female				
sentence of more than 1 year (Include inmates with consecutive sentences that add to more than 1 year.)					← Update as needed			
b. Had a total maximum sentence of 1 year or less			_					
c. Were unsentenced								
 d. TOTAL (Sum of items 2a to 2c) Mark (X) this box if jurisdiction numb comparable to 2009. Explain in NOT 	ers for 2010 a ES.	re not						

Section I — MIDYEAR PRISON COUNTS – Continued								
3. On June 30, 2010, how many inn jurisdiction were housed in a pr correctional facility —								
 Exclude inmates housed in any public if under contract. 	licly-operated f	acility, even						
 Include inmates housed in any priva houses, treatment facilities, hospital facilities. 	ately-operated I s, or other spe	nalfway cial	Data reported for June 30, 2009					
	Male Female		Male Female					
a. In your State					← Update as needed			
b. In another State	Male	Female						
c. Are these inmates included in item 2?	1 - Yes 2 - No	1 - Yes 2 - No						
(If item 3c is "NO," explain in the NOTI	ES section.)							
4. On June 30, 2010, how many in jurisdiction were housed in loca by a county or other local autho	I facilities o	your perated						
 Exclude inmates housed in privately reported in items 3a and 3b. 	-operated facil	ities						
 Include inmates housed in local fact other arrangement. 	ilities under cor	tract or						
	Male	Female	Male	Female				
a. TOTAL					← Update as needed			
b. Are these inmates included in item 2?	Male	Female						
	1 🔛 Yes 2 🗌 No	1 Yes 2 No						
(If item 4b is "NO," explain in the NOT	(If item 4b is "NO," explain in the NOTES section.)							
5. On June 30, 2010, how many in jurisdiction were housed —	nates under	your						
 Exclude inmates housed in privately (reported in items 3a and 3b) and in jails (reported in item 4a). 	/-operated facil imates housed							
,	Male	Female	Male	Female				
a. In Federal facilities					← Update as needed			
b. In other States' facilities (Include only those inmates housed in State-operated facilities in other States.)								
c. Are these inmates included in item 2?	Male 1 - Yes 2 - No	Female 1 🗌 Yes 2 🗌 No						
(If item 5c is "NO," explain in the NOT	ES section.)							

	Section II — CHA	RACTERI	STICS OF P	RISONERS I	N CUSTOD	Y AT MIDYEAR
1.	What was the racial composition your custody on June 30, 2010? (Data reported for June 30, 2009				
		Male	Female	Male	Female	, 2009
	a. White (not of Hispanic					
	origin)					Update as needed
	b. Black (not of Hispanic origin)					
	c. Hispanic or Latino (If your					
	c. Hispanic or Latino (If your system records indicate Hispanic origin separately from race, enter "NR" in item 1c and report counts in NOTES.)					
	d. American Indian/Alaska					
	Native					
	e. Asian					
	e. Asian					
	f. Native Hawaiian or other Pacific Islander					
	g. Two or more races					
	h. Additional categories in your information system – Specify <i></i> ∠					
	i. Not known					
	j. Total (Sum of 1a through 1i should equal Section I, item 1d)					
		Male	Female	Male	Female	
2.	How many inmates in your custody were under age 18?					← Update as needed
		Male	Female	Male	Female	
3.	How many inmates in your	Male	remale	Male	Temale	
	custody were not citizens of the United States?					← Update as needed

EXPLANATORY NOTES

Please review last year's explanatory notes (below) and make any corrections, additions, or deletions necessary for 2010.

 \Box Notes reviewed and updated as necessary for 2010 data. *Mark* X *box.*

Comments