

Applying for the NCAfE Award

North Carolina Awards for Excellence Program

The NCAfE Award Program recognizes organizations that have achieved the highest level of performance excellence, based on principles of the Baldrige Excellence Framework.

Following is information on applying for the NCAfE Award.

Applying for the NCAfE Award

What is the NCAfE Program?

The NCAfE Awards Program recognizes organizations that have achieved the highest level of performance excellence, based on principles of the Baldrige Excellence Framework—the Criteria for Performance Excellence. To participate, an organization must submit an application packet of appropriate materials.

Applications

Part 1 Intent to Apply/Eligibility Form \$250 Intent Fee Postmarked by May 31, 2024

Part 2 Application Form

*Organizational Profile and Criteria response
Application Fee
Postmarked by
July 31, 2024

*A five page Organizational Profile, plus up to 50 pages addressing the multiple item requirement is expected.

Please mail your completed and signed application. In addition to the printed Organizational Profile and Criteria response form, please send an electronic PDF version of all materials to contact@tncpe.org.

Application Review Process

Applicants are reviewed and evaluated based on the Baldrige Excellence Framework in a five - stage process by members of the NCAfE/TNCPE Board of Examiners. These examiners, specially trained in the Baldrige Excellence Framework, adhere to strict rules regarding confidentiality and conflict of interest during each stage of the review process.

- Stage 1 Independent review and evaluation by members of a team of examiners
- Stage 2 Consensus review and evaluation by a team of examiners
- Stage 3 Site visit review by a team of examiners
- Stage 4 Final Feedback Report preparation by a team of examiners
- Stage 5 Panel of Judges reviews and determines if applicant has achieved the excellence level. If not, the applicant will be encouraged to apply the following year.

Site Visit

Each NCAfE evaluation includes a site visit. A team of examiners will spend two to three days at the applicant's worksite to gain a better understanding of operations and processes. The site visit is not an audit; its purpose is to provide the applicant a further opportunity to tell its story.

Applicants will receive a site visit agenda at least one week in advance of the site visit. The agenda may include a schedule of planned visits to facilities and operating units, a list of officials to be interviewed and the names of examiners scheduled to participate.

Applicants must pay a site visit fee based on the number of full-time equivalent employees. Refer to the Fee Table. Applicants will be invoiced following completion of the site visit.

Feedback to Applicants

At the conclusion of every evaluation, the applicant receives a written assessment by the examiner team called a Feedback Report. Providing a pathway for improvement, the Feedback Report is one of the most valuable features of the NCAfE Award process.

Each Feedback Report contains applicant-specific strengths and opportunities for improvement based on the Baldrige Excellence Framework. Feedback Reports help organizations focus on their customers and improve overall performance.

Feedback Reports are mailed to applicants after the site visit, judging and editorial processes are complete. Strict confidentiality is observed at all times.

Promoting Excellence

All NCAFE applicants demonstrate a commitment to excellence. We encourage all winning organizations to promote their achievements and the benefits of the Baldrige Excellence Framework

NCAfE urges award recipients to publicize their awards and to share non-competitive information about their successful performance strategies with other organizations.

Award Application Requirements

Application Requirements

This table shows the NCAfE Award application requirements and review process.

Requirement	Excellence
Intent to Apply/ Eligibility Form with \$250 nonrefundable fee	Required Postmarked by • May 31, 2024
Organizational Profile	Required: Five pages maximum. One printed copy of Organizational Profile must accompany Application Form, Application Fee and Criteria response. Postmarked by July 31, 2024
Application Form and Application Fee	Required for all applicants. Postmarked by • July 31, 2024
CEO signature	Required
Criteria response	 Organizational Profile Multiple item requirements 50 pages max. Please mail one printed copy and submit an electronic copy saved in a PDF file.
Site Visit*	Two to three days.

^{*}Applicants must pay a site visit fee to cover site visit costs.

Award Program Fees

Intent to Apply/Processing Fee

A \$250 Intent to Apply Fee is required with the Intent to Apply/ Eligibility Form to cover costs associated with initial processing and eligibility determination.

Application Fee

The Application Fee is required and should be included when the application is submitted to NCAfE/TNCPE. The fee is related to workforce size. Use the table below to determine your Application Fee.

Site Visit Fee

All applicants participate in a site visit from a team of NCAfE/TNCPE examiners. The Site Visit Fee covers site visit expenses. The fee is related to workforce size. Applicants will be invoiced for the Site Visit Fee following completion of the site visit. Use the table below to determine your fee.

Workforce Size

Workforce size is based on the number of full-time equivalent (FTE) employees working for the applicant. FTEs are defined as those who regularly work 37.5 or more hours a week and are entitled to benefits such as paid vacation, sick leave and insurance coverage.

Each instance of job sharing, where multiple individuals fulfill the responsibilities of a single position that requires 37.5 or more hours per week, is counted as one FTE.

Fee Table:

Application Level	Number of Employees	Intent Fee	Application Fee	Site Visit Fee	Total
	Less than 100	\$250	\$1,800	\$3,400	\$5,450
Excellence Award	100-500	\$250	\$3,600	\$4,600	\$8,450
	501-1,500	\$250	\$6,000	\$7,000	\$13,250
	more than 1,500	\$250	\$9,000	\$8,200	\$17,450

III Award Cycle

Intent to Apply deadline	postmarked by May 31, 2024
Application deadline	postmarked by July 31, 2024
Examiner team conducts application assessment and scoring	postmarked by May 31, 2024
Award Program Applications Due	postmarked by July 31, 2024

Program Materials

Baldrige Excellence Framework Books

There are three versions of the Baldrige Excellence Framework:

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- The Business/Nonprofit Baldrige Excellence Framework is used by the manufacturing, service, small business, nonprofit and government sectors.
- The **Health Care** Baldrige Excellence Framework is used by health care organizations.
- The **Education** Baldrige Excellence Framework is used by educational organizations.

All three versions of the Baldrige Excellence Framework book may be purchased from the NIST Baldrige Performance Excellence Program for \$30 per copy. You can also purchase a downloadable PDF of the Framework for \$12 per copy. These are available at

www.nist.gov/baldrige/publications/baldrige-excellence-framework.

Please note, digital versions of the Framework will not include NCAfE-specific information such as the award cycle schedule and award application forms.

Preparing Your Award Application

Please use the following guidelines as you complete the Organizational Profile and Criteria response portions of your NCAfE Award application.

Organizational Profile

The Organizational Profile is a required part of your application.

Applicants will submit one printed copy of the Organizational Profile with the Application Form.

- The Organizational Profile must be no longer than five pages. Please respond to the questions on pages 4-6 of the Criteria.
- Inclusion of a glossary of terms and abbreviations, as well as an organizational chart, is strongly encouraged.
 The glossary and organizational chart do not count in the Organizational Profile's five-page limit.
- The number of pages in the Organizational Profile does NOT count toward the page limit in the organization's Criteria response, which will also be submitted with the Application Form.

Page Limits

The page limits include pictures, graphs, figures, data tables, and appendices. Page limits do not include the Application Form, the five-page Organizational Profile, a glossary of terms and abbreviations, or an organizational chart.

Criteria Response

Award applicants will submit a Criteria response, up to 50 pages, addressing multiple item requirements.

One printed copy of the Organizational Profile and Criteria response must be submitted along with the Application Form and Application Fee. In addition, you must submit an electronic copy of the Organizational Profile and Criteria response saved in a PDF file (please do not send a PDF of a scanned document).

The Criteria response should follow these guidelines:

- Must respond to a 2022–2023 version of the Baldrige Excellence Framework.
- Must be typed, using a font size no smaller than 10 point.
- Charts, graphs, tables, and other figures must be legible, using a font size no smaller than 8 point.

- Should identify the category and/or item number designation.
- Must not exceed the applicable page limits. Applicants may present fewer pages than noted if they wish.

Organization

A glossary of terms and abbreviations is highly recommended. Glossaries, title pages, organizational charts and tables of contents are not counted in the page limit. All remaining pages should be consecutively numbered from start to finish.

Printed materials must be mailed to NCAfE, c/o TNCPE and postmarked by the deadline on the Application Form to:

North Carolina Awards for Excellence c/o Tennessee Center for Performance Excellence 2525 Perimeter Place Drive, Suite 122 Nashville, TN 37214-3773

Electronic materials must be saved in a PDF file and emailed to contact@TNCPE.org by the deadline on the Application Form. Please do not send a PDF of a scanned document.

Before you apply for the Excellence Award, NCAfE must determine your organization's eligibility. Please send one copy of the Intent to Apply/Eligibility Form and the \$250 Intent to Apply Fee.

			City	County	Zip
			Telephone		
Please type or pr	rint		Email		
1. Applicant			7. Alternate Offic	cial Contact	
Organization name as it will app	pear on award				
Address			Name		
Address			Telephone		
City	County	Zip	 Email		
2. Size and Location	ns				
Total # of ampleyage	(full time aguivalent)		8. Returning App	olicant? Yes	No
Total # of employees (Total # of sites			Application year(s)	:	
			9. Highest Rankin	ıg Official	
3. Industry Sector			-		
Please check the sect	or that best describe	s your organization	Name		
Manufacturing	Education	Service	 Title		
Government	Health Care	Nonprofit	IIIle		
4. Industrial Classifi	ication		Address		
List up to three NAICS	S codes that best des	scribe your	City	County	Zip
			Telephone		
5. We will use the fo	ollowing Baldrige Cr	iteria for our	Email		
application:			10. Participation o	on the Board of Examine	rs
Business/Nonprofit	t		Our organization	on wishes to send one em	ployee to NCAfE
Health Care				ree of charge. We underst training, but is unable to co	
Education				cycle, our organization wi	
6. Official Contact			\$595, the value of	examiner training.	
Name			Name of examiner		
			Tala		
Title			Title		
Mailing address			Telephone		

Email



___ We prefer not to participate on the Board of Examiners this calendar year.

11. Assurance and Authorization

On Citizenship: We certify that our organization is a good community citizen, and that there are no current allegations, investigations, or violations of laws/regulations related to civil rights, health, safety, finances, tax status, environment, labor relations or similar issues that could be embarrassing to NCAfE or its Award Program. We agree to disclose any such issues to NCAfE and we understand that we may be asked to re-validate this certification before award levels are determined.

On NCAfE Application: We understand this Intent to Apply Form and subsequent application to NCAfE will be reviewed by members of the NCAfE Board of Examiners. We further understand that all examiners are required to follow the NCAfE Rules of Conduct and Code of Ethical Standards to ensure confidentiality and avoid possible conflict of interest.

Authorized Signature - Highest Ranking Official	
Name (please type or print)	

12. Business Factors

This information is used by NCAfE to screen and assign examiner teams to avoid conflict of interest in application reviews. Please attach a line and box organizational chart or charts for your organization.

Business/Organization Description: Provide a brief description of the nature of your business or organization (products services, programs or technologies). You must conclude with a list of key competitors or indicate if no direct competitors exist.

Market and Customers: Provide a brief description of the nature of major markets (local, regional, national, international). You must conclude with a list of key customers.

Suppliers, Partners and Collaborators: Provide a brief description of the importance of suppliers, partners, and collaborators. You must conclude with a list of key suppliers/partners and the type of product or service provided.

13. Subunits

Complete only if the applicant organization is a unit or division of a larger (or parent) company. If this is the case, attach a line and box organizational chart showing your organization's relationship to the highest management level of the parent organization.

Α.	Is the applicant(Check all that apply.)	_ a larger	parent or	system?
	a subsidiary of			
	a division of			
	controlled by			
	a unit of			
	a like organization lo	f		
	administered by			
	a school of			
	owned by			
В.	Parent organization			
	Name			
	Street address (no PO Box)			
	City		State	Zip
	Highest Ranking Official			
	Name			
	Title			
	Number of worldwide er	mployees	s of the pa	arent:
C.	Is the applicant the only organization intending to		of the pare	ent
	Yes No Do	not know	/	
D	Briefly describe the main	or functio	ns provid	ed to the

D. Briefly describe the major functions provided to the applicant by the parent or by other subunits of the parent. Examples of such functions include but are not limited to strategic planning, business acquisitions research and development, data gathering and analysis, human resources, legal services, finance or accounting sales/marketing, supply chain management, global expansion, information and knowledge management, education/training programs, information systems and technology services, curriculum and instruction, and academic program coordination/development.

Intent to Apply/Eligibility Form - Page 3

E.	Is the applicant self-sufficient enough to respond to all seven Baldrige Excellence Framework categories?		
	Yes No		
	If no, briefly explain.		
F.	Briefly describe the organization structure and relationship to the parent.		
14. How did you hear about NCAfE?			

15. Intent to Apply Fee

Enclose the \$250 Intent Fee (non-refundable) made payable to TNCPE to cover initial processing and eligibility determination. With your Intent to Apply Fee, mail one printed copy of your Intent to Apply/Eligibility Form to:

North Carolina Awards for Excellence c/o Tennessee Center for Performance Excellence 2525 Perimeter Place Drive, Suite 122 Nashville, TN 37214-3773

Completing the Intent to Apply/Eligibility Form

See Intent to Apply/Eligibility Form instructions below.

Please type or print.

1. Applicant

Use these fields to provide the official name and address of your organization.

2. Size and Locations

Provide the number of full-time equivalent employees (FTE) working at the organization. Indicate the number of sites to be included in the evaluation.

Full-time equivalent employees are defined as those who regularly work 37.5 or more hours a week and are entitled to benefits such as paid vacation, sick leave and insurance coverage. Each instance of job sharing, where multiple individuals fulfill the responsibilities of a single position that requires 37.5 or more hours per week, is counted as one full-time equivalent employee.

3. Industry Sector

Please select the sector that best describes your organization.

4. Industrial Classification

Insert the North American Industry Classification System (NAICS) codes most relevant to your organization's products and/or services. If you wish to access the NAICS codes online, go to www.census.gov/naics.

5. Baldrige Criteria

Please indicate which Criteria you will use for your application—Business/Nonprofit, Healthcare or Education.

6. Official Contact

In these fields, provide complete contact information (using a street address for courier deliveries) for the person at the organization who will be the point of contact for NCAfE and the examiner team leader.

7. Alternate Official Contact

Please provide contact information for an alternate contact with authority to provide additional information and arrange a site visit in the event the official contact is not available. If the official or alternate contact changes during the course of the application process, please inform NCAFE.

8. Returning Applicant?

Indicate if the organization is a return applicant and, if so, the year(s) of application.

9. Highest Ranking Official

In these fields, provide information about the organization's highest ranking official: owner, CEO, president, chairman of the board, plant manager, etc.

10. Participation on the Board of Examiners

One of the best ways to gain knowledge of the Excellence Framework is to serve as an examiner and see how the framework has been applied to other, diverse organizations. Past applicant organizations have benefited from having examiners on staff and NCAfE wants to make it as easy as possible to provide this benefit to applicants.

Indicate whether you would like us to train one employee as an examiner. We will follow up with that individual with information about training, review cycle dates, and an examiner application. We are happy to provide training free of charge to one employee of each applicant organization but if your examiner candidate is unable to fulfill all requirements of the review schedule, will will invoice you \$595, the value of examiner training.

11. Assurance and Authorization

The signature of your organization's highest ranking official is required. This indicates that your organization is a good citizen and will comply with the responsibilities associated with being a NCAfE Award Program participant.

12. Business Factors

You may include the description of business factors as a separate attachment. Also include a line and box organizational chart or charts for your organization.

13. Subunits

If your organization is a subunit of a larger organization, attach a line and box organizational chart showing your organization's relationship to the highest management level of the parent organization, including intervening levels.

14. How did you hear about NCAfE?

Please take a moment to tell us how you learned about NCAfE.



15. Intent Fee and Mailing Address

A \$250 non-refundable Intent to Apply Fee is required to cover the costs associated with the initial processing and eligibility determination. The Intent to Apply Fee may be paid by check or credit card. Submit your payment with the Intent to Apply/ Eligibility Form or contact NCAfE/TNCPE directly to make a credit card payment.

16. Submitting your Intent to Apply/Eligibility Packet

Your Intent to Apply Packet should include:

- The Intent to Apply/Eligibility Form
- A \$250 Intent Fee

Mail these items to NCAfE, c/o Tennessee Center for Performance Excellence postmarked, by May 31.

> NCAfE c/o Tennessee Center for Performance Excellence 2525 Perimeter Place Drive, Suite 122 Nashville, TN 37214-3773 (800) 453-6474

Application Form North Carolina Awards for Excellence Program State Excellence Award Program

Please send NCAfE/TNCPE this Application Form accompanied by one printed copy and one electronic copy of your Organizational Profile and Criteria response, and the appropriate Application Fee. These items should be sent to the NCAfE/TNCPE office and postmarked no later than July 15.

Please type or print.

1. Applicant

Organization name as it will appear on the award					
Address					
City	State	Zip			
2. Size and Locations	3				
Total # of employees (fu	ull-time equivalent)				
Total # of sites					
3. Official Contact					
Name					
Title					
Mailing address					
Street address (no PO Box)					
City	County	Zip			
Telephone					
Email					

4. Organizational Profile

One printed copy of your Organizational Profile must be submitted with this Application Form. The Organizational Profile must be no longer than five pages and respond to the questions on pages 4-6 of the Criteria. Inclusion of a glossary of terms and abbreviations, as well as an organizational chart, is strongly encouraged. The glossary and organizational chart do not count in the Organizational Profile's five-page limit.

Please note: The number of pages in the Organizational Profile does not count toward the organization's Criteria response that will be submitted with the Application Form.

5. Alternate Official Contact

Name			
Telephone			
Email			

6. Criteria Response

- A. Attach Organizational Profile and Criteria response to Application Form
- B. Check the Criteria you have used to write your response Business/Nonprofit Health Care Education

7. Application Fee

An Application Fee is required based on workforce size.

Please refer to the fee table to determine your application fee.

8. Release Statement and Signature of Highest Ranking Official

My signature states and attests that: I have reviewed the information provided by the Organizational Profile in this application package. To the best of my knowledge, no untrue statement or omission of a material fact has been made in this application package. Based on the information herein and the current eligibility requirements for the NCAfE Excellence Award, my organization is eligible to apply. I understand if information is found not to support eligibility at any time during the Award Program cycle, my organization will no longer receive consideration for the Award and will only receive a Feedback Report.

Signature

Completing the Application Form

Please type or print.

1. Applicant

Use these fields to provide the official name and address of your organization as it will appear on the award and in publicity material.

2. Size and Locations

Provide the number of full-time equivalent (FTE) employees working at the organization. Indicate the number of sites to be included in the evaluation.

Full-time equivalent employees are defined as those who regularly work 37.5 or more hours a week and are entitled to benefits such as paid vacation, sick leave and insurance coverage. Each instance of job sharing, where multiple individuals fulfill the responsibilities of a single position that requires 37.5 or more hours per week, is counted as one FTE employee.

3. Official Contact

In these fields, provide complete contact information (using a street address for courier deliveries) for the person at the organization who can provide additional information and arrange a site visit.

4. Alternate Official Contact

Please provide contact information for an alternate contact with authority to provide additional information and arrange a site visit in the event the official contact is not available. If the official or alternate contact changes during the course of the application process, please inform NCAfE.

5. Criteria Response

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- A. Along with your Organizational Profile, submit the Criteria response based on response requirements and formatting guidelines.
- B. When responding to the Criteria, you may use the Business version of the Baldrige Excellence Framework, the Health Care Framework or the Education Framework. Be sure to indicate which version you used on the application form so examiners can assess your response using the correct Criteria.

If you would like copies of any of the Framework books, go to www.nist.gov/baldrige/publications/baldrige-excellence-framework.

6. Application Fee

Application Fees may be paid by check or credit card. Submit your payment with this Application Form or call NCAfE/TNCPE to pay with a credit card: (800) 453-6474.

7. Organization Description

Provide a brief description of your organization. This description will be used in conjunction with the award presentation and for publicity purposes.

8. Release Statement and Signature of Highest Ranking Official

The applicant's highest-ranking official must sign in the space provided, indicating agreement to the terms and conditions stated in the Release Statement. His or her signature attests that no untrue statement of a material fact is contained in the application package and no omission of a material fact that is legally disclosable and affects organizational ethical and legal practices has been made.

Your application packet should include:

- One printed copy of the Application Form
- One printed copy of your Organizational Profile and Criteria response
- One electronic copy of your Organizational Profile and Criteria response saved in a PDF file (please do not send a PDF of a scanned document)
- Application Fee

Mail these items to NCAfE c/o Tennessee Center for Performance Excellence postmarked by July 15 Electronic materials should be emailed to contact@TNCPE.org.

NCAfE c/o Tennessee Center for Performance Excellence 2525 Perimeter Place Drive, Suite 122 Nashville, TN 37214-3773 (800) 453-6474

North American Industry Classification System (NAICS) Codes

Please insert NAICS codes most relevant to your organization's products and/or services on the first page of the Intent to Apply/ Eligibility Form or Application Form.

	,		
111	Crop Production	493	Warehousing and Storage
112	Animal Production	511	Publishing Industries (except Internet)
113	Forestry and Logging	512	Motion Picture and Sound Recording Industries
114	Fishing, Hunting and Trapping	515	Broadcasting (except Internet)
115	Support Activities for Agriculture and Forestry	517	Telecommunications
211	Oil and Gas Extraction	518	Data Processing, Hosting and Related Services
212	Mining (except Oil and Gas)	519	Other Information Services
213	Support Activities for Mining	521	Monetary Authorities-Central Bank
221	Utilities	522	Credit Intermediation and Related Activities
236	Construction of Buildings	523	Securities, Commodity Contracts, and Other Financial Investments
237	Heavy and Civil Engineering Construction		and Related Activities
238	Specialty Trade Contractors	524	Insurance Carriers and Related Activities
311	Food Manufacturing	525	Funds, Trusts, and Other Financial Vehicles
312	Beverage and Tobacco Product Manufacturing	531	Real Estate
313	Textile Mills	532	Rental and Leasing Services
314	Textile Product Mills	533	Lessors of Nonfinancial Intangible Assets (except Copyrighted Works)
315	Apparel Manufacturing	541	Professional, Scientific, and Technical Services
316	Leather and Allied Product Manufacturing	551	Management of Companies and Enterprises
321	Wood Product Manufacturing	561	Administrative and Support Services
322	Paper Manufacturing	562	Waste Management and Remediation Services
323	Printing and Related Support Activities	611	Educational Services
324	Petroleum and Coal Products Manufacturing		6111 Elementary and Secondary Schools
325	Chemical Manufacturing		6112 Junior Colleges
326	Plastics and Rubber Products Manufacturing		6113 Colleges, Universities, and Professional Schools
327	Nonmetallic Mineral Product Manufacturing		Business Schools and Computer and Management Training
331	Primary Metal Manufacturing		6115 Technical and Trade Schools
332	Fabricated Metal Product Manufacturing		Other Schools and Instruction
333	Machinery Manufacturing		6117 Educational Support Services
334	Computer and Electronic Product Manufacturing	621	Ambulatory Health Care Services
335	Electrical Equipment, Appliance, and Component Manufacturing		Offices of Physicians
336	Transportation Equipment Manufacturing		Offices of Dentists
337	Furniture and Related Product Manufacturing		Offices of Other Health Practitioners
339	Miscellaneous Manufacturing		6214 Outpatient Care Centers
423	Merchant Wholesalers, Durable Goods		6215 Medical and Diagnostic Laboratories
424	Merchant Wholesalers, Nondurable Goods		6216 Home Health Care Services
425	Wholesale Electronic Markets and Agents and Brokers		Other Ambulatory Health Care Services
441	Motor Vehicle and Parts Dealers	622	Hospitals
442	Furniture and Home Furnishings Stores	623	Nursing and Residential Care Facilities
443	Electronics and Appliance Stores	624	Social Assistance
444	Building Material and Garden Equipment and Supplies Dealers	711	Performing Arts, Spectator Sports, and Related Industries
445	Food and Beverage Stores	712	Museums, Historical Sites, and Similar Institutions
446	Health and Personal Care Stores	713	Amusement, Gambling, and Recreation Industries
447	Gasoline Stations	721	Accommodation
448	Clothing and Clothing Accessories Stores	722	Food Services and Drinking Places
451	Sporting Goods, Hobby, Book, and Music Stores	811	Repair and Maintenance
452	General Merchandise Stores	812	Personal and Laundry Services
453	Miscellaneous Store Retailers	813	Religious, Grantmaking, Civic, Professional, and Similar Organizations
454	Nonstore Retailers	814	Private Households
481	Air Transportation	921	Executive, Legislative, and Other General Government Support
482	Rail Transportation	922	Justice, Public Order, and Safety Activities
483	Water Transportation	923	Administration of Human Resource Programs
484	Truck Transportation	924	Administration of Environmental Quality Programs
485	Transit and Ground Passenger Transportation	925	Administration of Housing Programs, Urban Planning, and
486	Pipeline Transportation		Community Development
487	Scenic and Sightseeing Transportation	926	Administration of Economic Programs
488	Support Activities for Transportation	927	Space Research and Technology
491	Postal Service	928	National Security and International Affairs
102	Couriers and Massangers		

Couriers and Messengers

492