



1997 ECONOMIC CENSUS

RENTAL AND LEASING OF AUTOMOTIVE EQUIPMENT (WITHOUT DRIVERS)

DUE DATE ▶ **FEBRUARY 12, 1998**

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Please return your completed report to:

FI-6504

BUREAU OF THE CENSUS
1201 East 10th Street
Jeffersonville, IN 47134-0001

Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:

1-800-233-6136

Please read the accompanying instructions before answering the questions.

Census use

(Please correct any errors in name, address, and ZIP Code.)

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

If this questionnaire does not seem to apply to your business, complete it to the extent possible and explain in REMARKS section - this should fulfill your reporting requirements and will reduce followup correspondence.

Item 1. EMPLOYER IDENTIFICATION NUMBER
Is the Employer Identification Number (EIN) shown in the label the same as the one used for this establishment on its latest 1997 Employer's Quarterly Federal Tax Return, Treasury Form 941?

094 1 Yes 2 No - Report current EIN below

(9 digits)

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be **rounded to thousands** of dollars.

Example: If a figure is **\$1,125,628.79** report

• Preferred
Acceptable

Mil- lions (000)	Thou- sands (000)	Dol- lars (000)
1	126	
1	125	629

Item 4. DOLLAR VOLUME OF REVENUE

Bil.	Mil.	Thou.	Dol.
010			

Revenue in 1997

Item 5. PAYROLL

Mil.	Thou.	Dol.
030		

Payroll in 1997, BEFORE DEDUCTIONS

a. Annual

031		
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b. First quarter (January-March)

Item 6. EMPLOYMENT

Number

032

Number of paid employees for pay period including March 12, 1997
(Include both full- and part-time employees)

Item 7. LEGAL FORM OF ORGANIZATION

Mark (X) the **ONE** box which best describes this establishment during 1997.

- 003 1 Individual proprietorship
- 2 Partnership
- 5 Government - Specify
- 0 Corporation
- 0 Subchapter "S" corporation
- 9 Other - Specify

Item 3. OPERATIONAL STATUS

Number of months

a. How many months during 1997 was this establishment actively operated?

002

b. Which of the following best describes this establishment's status at the end of 1997? Mark (X) only ONE box.

Note: Complete the remainder of this report for the period operated even if the establishment ceased operation during 1997.

- 001 1 In operation
- 2 Temporarily or seasonally inactive
- 3 Ceased operation - Give date at right
- 4 Sold or leased to another operator - Give date at right AND enter name, etc., below

Figures only

Month Year

Name of new owner or operator

Number and street

City

State

ZIP Code

CONTINUE WITH ITEM 8 ON PAGE 2

Item 8. KIND OF BUSINESS OR ACTIVITY
What was this establishment's PRINCIPAL kind of business or activity in 1997?
 Mark (X) only ONE box.

Passenger car rental and leasing
 Renting passenger cars, passenger vans, and sport utility vehicles without drivers on a short-term basis 7514001
 Leasing passenger cars, passenger vans, and sport utility vehicles without drivers 7515001
 Renting limousines with drivers 4119200
 Third-party financing of passenger car, passenger van, and sport utility vehicle leases 6159913

Truck rental and leasing
 Renting trucks (including nonpassenger vans), truck tractors, truck trailers, and semitrailers without drivers on a short-term basis 7513101
 Leasing trucks (including nonpassenger vans), truck tractors, truck trailers, and semitrailers without drivers 7513201
 Renting or leasing trucks with drivers
 Local without storage 4212210
 Except local 4213210
 Third-party financing of truck (including nonpassenger van), truck tractor, truck trailer, and semitrailer leases 6159914

Other automotive rental and leasing
 Renting and/or leasing utility trailers 7519001
 Renting motor homes, travel trailers, or other recreational vehicles 7519002
 Rental or leasing of other equipment - Describe equipment 7777771
 Third-party financing of other automotive equipment leases 6159915
Other kind of business or activity - Describe 7777777

Item 9. SOURCES OF REVENUE - Continued

Sources of revenue	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.				
		Bil.	Mil.	Thou.	Dol.	Per-cent
1. Rental and/or leasing of automotive equipment without drivers - Continued						
c. Truck rental (including nonpassenger vans)	2503					
d. Truck leasing (including nonpassenger vans)	2504					
e. Truck tractors	2505					
f. Truck trailers and semitrailers	2506					
g. Utility trailers	2507					
h. Motor homes, travel trailers, and other recreational vehicles	2508					
i. Sum of lines 1a through 1h	2500					
2. Rental and leasing of passenger cars and trucks with drivers	2520					
3. Rental and leasing of all other equipment - Describe equipment 076	2600					
4. Interest from lease financing receivables (financing leases)	2701					
5. Sales of merchandise - Describe if this is the largest source of revenue 077	2720					
6. All other revenue - Describe if this is more than 10 percent of revenue 078	9810					
7. TOTAL (Should equal item 4 if reporting in dollars)	9990					

Item 9. SOURCES OF REVENUE
Report sources of revenue for this establishment either as dollar figures or as whole percents of total revenue. (See HOW TO REPORT DOLLAR FIGURES on page 1 and HOW TO REPORT PERCENTS, below) **Do NOT combine data for two or more lines.**
 Report revenue by source either in dollar figures (see example for item 4) or as percentages (in whole percents) of the total - see example below.
 Please do **not** combine data for two or more revenue lines.
Lines 1 through 3 - Report gross revenue from the rental and leasing of equipment, whether owned by this establishment or by investors.
 Include revenue derived during 1997 from leasing equipment under both maintenance and nonmaintenance operating leases. Interest revenue from financing leases should be reported on line 4.
Line 5 - **Do not include** the value of used equipment sold or traded for replacement, or sales of other capital assets. **Do include** sales of vehicles acquired for the purpose of resale (not previously rented or leased by this company) as well as the fair market value of merchandise marketed in 1997 by your firm under capital, finance, or full-payout leases if you do not hold the lease.

HOW TO REPORT PERCENTS	If figure is 38.76% of total sales:	Mil.	Thou.	Dol.	Per-cent
	• Report whole percents				39
	Not acceptable				38.76

Sources of revenue	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.				
		Bil.	Mil.	Thou.	Dol.	Per-cent
1. Rental and/or leasing of automotive equipment without drivers	850	851				852
a. Passenger car rental (including passenger vans and sport utility vehicles)	2501					
b. Passenger car leasing (including passenger vans and sport utility vehicles)	2502					

Item 10. SPECIAL INQUIRIES

a. Sales of used equipment

1. Did this establishment sell cars, trucks, or vans to the general public which were previously rented/leased OR purchased for resale? 985
 1 Yes
 2 No

2. If "Yes," what was the dollar amount of these automobile and truck sales? 986
 Mil. Thou. Dol.

b. Revenue by class of client
 Estimate the percentage of revenue (reported in item 4) by class of client. Report in whole percents

1. Individuals 982

2. Federal, State, and local governments 983

3. All other 984

4. TOTAL **100%**

If not shown, please enter your 11-digit Census File Number from the address label on page 1.

Census File Number

Item 11. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION

Item 11. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION - Continued

a. Is the FIRST DIGIT of your Census File Number (CFN) (shown in the address label immediately after CFN) a zero?

- 1 Yes - Complete this item
- 2 No - Skip to item 12

d. How many establishments operated under the Employer Identification Number (EIN) shown in the label (or as corrected in item 1) AT THE END of 1997?

Number
079

If more than one, provide the **physical location** address and other information indicated below for each establishment. The headquarters location should be first, followed by all other locations. If you need additional space, continue with the same format in REMARKS (or attach a separate sheet).

NOTE - Separate automotive rental offices or concessions (for example, airport locations) in the same metropolitan area, for which a common fleet is maintained, should not be considered separate locations for the purpose of this report. Data for offices that share a common fleet should be included with the controlling main or branch location for that metropolitan area.

Estimates are acceptable if book figures are not available.

b. Is this company owned or controlled by another company?

Enter name, address, and EIN of the owning or controlling company

- 097 1 Yes →
- 2 No

EIN (9 digits)

c. Does this company own or control any other company or companies?

Enter name, address, and EIN of the owned or controlled company

- 098 1 Yes →
- 2 No

EIN (9 digits)

Name	1997	Mil.	Thou.	Dol.
Number and street	Revenue	081		
City State ZIP Code	Annual payroll	082		
1 Kind-of-business description	Paid employees for pay period including March 12			
	083			
	Census use 088			

Name	1997	Mil.	Thou.	Dol.
Number and street	Revenue	081		
City State ZIP Code	Annual payroll	082		
2 Kind-of-business description	Paid employees for pay period including March 12			
	083			
	Census use 088			

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

Item 12. CERTIFICATION - This report is substantially accurate and has been prepared in accordance with instructions.

Period covered by this report	FROM: Mo. Year	TO: Mo. Year	Name of person to contact regarding this report - <i>Print or type</i>	
Telephone	Area code	Number	Extension	Title
Signature of authorized person				Date