



# 1997 ECONOMIC CENSUS

## MUSICAL INSTRUMENT AND SUPPLY STORES

**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:

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

**RT-5703**

**RT**

*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.

**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) \_\_\_\_\_

**Item 2. PHYSICAL LOCATION**

**a. Is this establishment's physical location the same as the address shown in the label? (P.O. box and rural route addresses are not physical locations)**

093 1  Yes 2  No – Report physical location below

Number and street \_\_\_\_\_

City, town, village, etc. \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?**

095 1  Yes 3  No legal boundaries  
2  No 4  Do not know

**c. In what type of municipality is this establishment physically located?**

096 1  City, village, or borough  
2  Town or township  
3  Other – Specify \_\_\_\_\_  
4  Do not know

**d. In what county (e.g., Dade County) is this establishment physically located?**

\_\_\_\_\_

**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.**

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 \_\_\_\_\_

**HOW TO REPORT DOLLAR FIGURES**

Dollar figures should be rounded to thousands of dollars.

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

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

Acceptable

**Item 4. DOLLAR VOLUME OF BUSINESS**

**Sales of merchandise and other operating receipts for 1997** (Exclude sales or other taxes collected)

Mil. Thou. Dol.

010

**Item 5. PAYROLL**

**Payroll in 1997, BEFORE DEDUCTIONS**

Mil. Thou. Dol.

030

**a. Annual**

031

**b. First quarter (January–March)**

**Item 6. EMPLOYMENT**

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

Number

032

**Item 7. KIND OF BUSINESS AND SELLING CHARACTERISTICS**

**a. Kind of business**

**What was this establishment's PRINCIPAL kind of business in 1997? Mark (X) only ONE box.**

070

Prerecorded tape, compact disc, and record store . . . . .  5735101

Musical instrument and supply store . . . . .  5736001

Musical instrument repair . . . . .  7699901

Video tape store – retail. . . . .  5735201

Video tape rental store . . . . .  7841001

Automotive stereo store . . . . .  5731101

Radio, TV, stereo, and electronics store . . . . .  5731201

Mail order – videos, tapes, compact discs, and records . . . . .  5961304

Mail order – musical instruments and supplies . . . . .  5961305

Other kind of business – Describe . . . . .  7777777

ITEM 7 CONTINUED ON PAGE 2

**Item 7. KIND OF BUSINESS AND SELLING CHARACTERISTICS – Continued**

**b. Selling characteristics**

**1. In what format did this establishment PRIMARILY sell in 1997? Mark (X) only ONE box.** 068

From physical displays of priced merchandise . . . 1

From a counter (little or no display) . . . . . 2

From a warehouse or office . . . . . 3

Other – Describe . . . . . 4

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**2. How did this establishment PRIMARILY attract new customers in 1997? Mark (X) only ONE box.** 069

Location and store attractiveness . . . . . 1

Advertising to the general public, including direct mail advertising . . . . . 2

Advertising to the trade or calls directly to customers . . . . . 3

Other – Describe . . . . . 4

**Item 8. METHOD OF SELLING**

**What was this establishment's PRINCIPAL method of selling in 1997? Mark (X) only ONE box.** 235

Selling at this establishment . . . . . 1

Mail order (include catalog selling and home shopping via television or computer) . . . . . 2

Telemarketing . . . . . 3

Direct selling (include selling from house-to-house and nonfixed or temporary locations) . . . . . 4

Operating merchandise vending machines . . . . . 5

**Item 9. CLASS OF CUSTOMER** Whole percent of sales

**Report the percentage of this establishment's total sales in 1997 (item 4) to each class of customer.** 237

**a. General public (household consumers and individuals)** 239

**b. Other, including retailers; wholesalers; institutional, industrial, commercial, professional, and farm users (for use in farm production); and government**

**Item 10. MERCHANDISE LINES**

**Report sales for each merchandise line sold by this establishment, either as a dollar figure or as a whole percent of total sales. (See HOW TO REPORT DOLLAR FIGURES on page 1 and HOW TO REPORT PERCENTS below)**

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

Merchandise lines	Census use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
<b>1. Audio equipment, musical instruments, and supplies (Include radios, stereos, compact discs, records, tapes, sheet music, accessories. Report parts installed in repair on line 14a and rental of musical instruments on line 14e.)</b>	230	231			232
<b>a. Audio equipment, components, parts, accessories (include radios, stereos, tape recorders and players, compact disc players, and other sound reinforcement and recording equipment)</b>	<b>0331</b>				
<b>b. Pianos</b>	<b>0332</b>				
<b>c. Organs</b>	<b>0333</b>				

Merchandise lines	Census use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
<b>1. Audio equipment, musical instruments, and supplies – Continued</b>					
<b>d. Other musical instruments and accessories (include string instruments, horns, drums, synthesizers, music stands, musical instrument digital interface (MIDI) equipment, etc.)</b>	<b>0334</b>				
<b>e. Records, tapes, and compact discs</b>	<b>0335</b>				
<b>f. Sheet music and related items</b>	<b>0336</b>				
<b>g. Sum of lines 1a through 1f</b>	<b>0330</b>				
<b>2. TV's, video recorders, video cameras, video tapes, etc. (include parts and accessories)</b>					
<b>a. Televisions</b>	<b>0321</b>				
<b>b. Video tape recorders and cameras (Include video laser disc players. Report receipts from video tape player/recorder and laser disc player rentals on line 14c.)</b>	<b>0322</b>				
<b>c. Video tapes and laser discs (Report receipts from video tape and laser disc rentals on line 14c)</b>	<b>0323</b>				
<b>d. Sum of lines 2a through 2c</b>	<b>0320</b>				
<b>3. Major household appliances (include refrigerators, ranges, microwave ovens, room air-conditioners, etc.)</b>	<b>0300</b>				
<b>4. Small electric appliances (include mixers, toasters, coffee makers, personal care appliances, etc.)</b>	<b>0310</b>				
<b>5. Toys, hobby goods, and games</b>	<b>0460</b>				
<b>6. Computer hardware, software, and supplies (Report computer-related furniture, office supplies, and office equipment, such as calculators, adding machines, copiers, fax machines, etc., on line 13.)</b>	<b>0370</b>				
<b>7. Kitchenware and homefurnishings (include cookware, dinnerware, clocks, pictures, frames, mirrors, bathroom accessories, etc.)</b>	<b>0380</b>				
<b>8. Men's wear (Report footwear and boys' wear on line 13)</b>	<b>0200</b>				
<b>9. Women's, juniors', and misses wear (Report footwear and girls', infants', and toddlers' wear on line 13)</b>	<b>0220</b>				
<b>10. Jewelry (include watches, watch attachments, novelty jewelry, etc.)</b>	<b>0400</b>				
<b>11. Paper and related products (Include paper towels, toilet tissue, wraps, bags, foils, etc. Report stationery and computer paper on line 13.)</b>	<b>0190</b>				

ITEM 10 CONTINUED ON PAGE 3

<b>If not shown, please enter your 11-digit Census File Number from the address label on page 1</b>					Census File Number																																								
<b>Item 10. MERCHANDISE LINES – Continued</b>					<b>Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION – Continued</b>																																								
Merchandise lines	Census use	ESTIMATES are acceptable. Report dollars OR percents.				<b>b. Is this company owned or controlled by another company?</b> 097 1 <input type="checkbox"/> Yes → 2 <input type="checkbox"/> No			Enter name, address, and EIN of the owning or controlling company																																				
12. Magazines and newspapers	0856	Mil.	Thou.	Dol.	Per-cent	EIN (9 digits)																																							
13. All other merchandise (Report receipts for services on line 14)	9810	Specify principal lines and estimated sales below				<b>c. Does this company own or control any other company or companies?</b> 098 1 <input type="checkbox"/> Yes → 2 <input type="checkbox"/> No			Enter name, address, and EIN of the owned or controlled company																																				
a. 076	9811					EIN (9 digits)																																							
b. 077	9812					EIN (9 digits)			Number 079																																				
c. 078	9813					EIN (9 digits)			Number																																				
14. All nonmerchandise receipts (include receipts from rentals, storage, and other services provided to customers) EXCLUDING SALES AND OTHER TAXES					<b>d. How many establishments operated under the Employer Identification Number shown in the label (or as corrected in item 1) AT THE END of 1997?</b>																																								
a. Parts installed in repair					If more than one, provide the <b>physical location</b> address and other information indicated below for each establishment. The headquarters location should be first, followed by all other locations. If more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.																																								
b. Labor charges for work performed by this establishment					<b>Estimates are acceptable</b> if book figures are not available.																																								
c. Receipts from video tape, video player/recorder, laser disc, and laser disc player rentals					<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 25%;">Name</th> <th style="width: 5%;">1997</th> <th style="width: 5%;">Mil.</th> <th style="width: 5%;">Thou.</th> <th style="width: 5%;">Dol.</th> </tr> <tr> <td>Number and street</td> <td>Sales</td> <td>081</td> <td></td> <td></td> </tr> <tr> <td>City State ZIP Code</td> <td>Annual payroll</td> <td>082</td> <td></td> <td></td> </tr> <tr> <td colspan="5" style="text-align: center;">Paid employees for pay period including March 12</td> </tr> <tr> <td colspan="5" style="padding: 5px;">Kind-of-business description</td> </tr> <tr> <td colspan="5" style="padding: 5px;">083</td> </tr> <tr> <td colspan="5" style="text-align: center;">Census use 088</td> </tr> </table>						Name	1997	Mil.	Thou.	Dol.	Number and street	Sales	081			City State ZIP Code	Annual payroll	082			Paid employees for pay period including March 12					Kind-of-business description					083					Census use 088				
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15. TOTAL (Should equal item 4 if reporting in dollars)					9990					100%																																			
<b>Item 11. SPECIAL INQUIRIES</b>					248 <b>Did sales of used or secondhand merchandise (including antiques and collectibles) account for more than 75 percent of the sales and receipts (item 4) of this establishment in 1997?</b> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No																																								
Item 12. Not applicable to this report					<b>REMARKS</b> – Please use this space for any explanations that may be essential in understanding your reported data.																																								
<b>Item 13. LEGAL FORM OF ORGANIZATION</b> <b>Which of the following best describes this establishment's legal form of organization during 1997? Mark (X) only ONE box.</b>																																													
003 1 <input type="checkbox"/> Individual owner (sole proprietorship) 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Cooperative association (taxable) 4 <input type="checkbox"/> Cooperative association (tax-exempt) 5 <input type="checkbox"/> Government – Specify _____ 0 <input type="checkbox"/> Corporation (Do not mark if any form of cooperative association) 9 <input type="checkbox"/> Other – Specify _____																																													
<b>Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION</b> <b>a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero?</b> 1 <input type="checkbox"/> Yes – Complete this item 2 <input type="checkbox"/> No – Skip to item 15					<b>Item 15. CERTIFICATION</b> – This report is substantially accurate and has been prepared in accordance with instructions.																																								
					<b>Period covered by this report</b> FROM: Mo.   Year TO: Mo.   Year		Name of person to contact regarding this report – Print or type																																						
					Telephone		Area code		Number		Extension																																		
					Signature of authorized person					Date																																			