



1997 ECONOMIC CENSUS HOMEFURNISHINGS STORES

RT

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:

RT-5705

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.

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 **1 126** • Preferred
Acceptable

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

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 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 _____

Item 6. EMPLOYMENT Number
Number of paid employees for pay period including March 12, 1997 (Include both full- and part-time employees)

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

- Drapery and curtain store, except custom 5714101
- Upholstery store 5714201
- Custom drapery and curtain store 5714011
- Blind and shade store 5719101
- Domestics/linens store (sheets, blankets, towels, linens, etc.) 5719202
- China, glassware, metalware store 5719203
- Lamps and lampshades store 5719204
- Lighting fixture and ceiling fan store 5211505
- Pictures and frames store (including custom framing) 5719205
- Kitchenware store 5719208
- Pottery and crafts store 5719206
- Homefurnishings store (china, glassware, metalware, lamps, lampshades, pictures, frames, mirrors, etc.) 5719201
- Gift, novelty, souvenir store 5947001
- Furniture store, except custom 5712501
- Floor coverings store 5713002
- Ceramic tile dealer 5211506
- Carpet specialty store (oriental rugs, area rugs, etc.) 5713003
- Carpet installation service 1752001

ITEM 7 CONTINUED ON PAGE 2

Item 7. KIND OF BUSINESS AND SELLING CHARACTERISTICS – Continued

a. Kind of business – Continued 070

Fireplace and other wood/gas burning appliance and supplies store 5719207

Cabinet shop (stock kitchen and bath cabinets to be installed) 5211504

Interior decorator/designer 7389201

Other kind of business – Describe 7777777

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

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)

b. Other, including retailers; wholesalers; institutional, industrial, commercial, professional, and farm users (for use in farm production); and government 239

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)

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			

Merchandise lines	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
1. Curtains, draperies, blinds, slipcovers, bed and table coverings	230	231			232
a. Curtains and draperies	0281				
b. Vertical and horizontal blinds and woven wood blinds	0282				

Item 10. MERCHANDISE LINES – Continued					
Merchandise lines	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
1. Curtains, draperies, blinds, slipcovers, bed and table coverings – Continued					
c. Furniture coverings (ready-made and custom-made)	0283				
d. Domestics (include towels, sheets, blankets, table linens and coverings, etc.)	0284				
e. Sum of lines 1a through 1d	0280				
2. Sewing, knitting, needlework goods (include fabrics, patterns, sewing supplies, notions, yarns, laces, trimmings, needlework kits, etc.)	0270				
3. Kitchenware and homefurnishings (include cookware, dinnerware, clocks, pictures, frames, mirrors, bathroom accessories, etc.)					
a. Cookware and cooking accessories (include strainers, sifters, grinders, cutlery, canning supplies, etc.)	0381				
b. Dinnerware, china, glassware, tableware, giftware (include all flatware and holloware)	0382				
c. Decorative accessories (Include lamps, lampshades, mirrors, pictures, picture frames, clocks, magazine racks, spice racks, desk sets, etc. Report ceiling fans and light fixtures on line 14.)	0383				
d. All other kitchenware and homefurnishings (include closet and bathroom accessories, etc.)	0384				
e. Sum of lines 3a through 3d	0380				
4. Flooring and floor coverings (Report receipts for carpet installation on line 26e, carpet repair on line 26b, and carpet cleaning on line 26c)					
a. Soft-surface (textile) floor coverings and accessories	0361				
b. Hardwood flooring	0363				
c. Other hard-surface floor coverings and accessories (include tile and sheet goods)	0364				
d. Sum of lines 4a through 4c	0360				
5. Furniture, sleep equipment (Report repair and rental receipts on line 26)	0340				
6. Audio equipment, musical instruments, radios, stereos, compact discs, records, tapes, sheet music, accessories (include audio tape books)	0330				
7. Small electric appliances (include mixers, toasters, coffee makers, personal care appliances, etc.)	0310				
8. Major household appliances (include refrigerators, ranges, microwave ovens, room air-conditioners, etc.)	0300				
9. Books	0420				

ITEM 10 CONTINUED ON PAGE 3

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

Census File Number

RT

Merchandise lines	Census use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
10. Jewelry (Include watches, watch attachments, novelty jewelry, etc. Report flatware and holloware on line 3b and receipts from watch, clock, and jewelry repair and engraving on line 26.)	0400				
11. Dimensional lumber and other building/structural materials and supplies (Include heating stoves and prefabricated fireplaces. Report wallpaper on line 12. Report paint and sundries on line 13.)	0640				
12. Wallpaper and other flexible wallcoverings	0690				
13. Paint and sundries	0670				
14. Hardware, tools, and plumbing and electrical supplies	0600				
15. Lawn, garden, and farm equipment and supplies; cut flowers; plants and shrubs; fertilizers; etc.	0620				
16. Women's, juniors', and misses' wear (Report footwear and girls', infants', and toddlers' wear on line 25)	0220				
17. Men's wear (Report footwear and boys' wear on line 25)	0200				
18. Sporting goods	0500				
19. Groceries and other food items for human consumption off the premises	0100				
20. Stationery and computer paper	0851				
21. Greeting cards	0855				
22. Art goods (Include original pictures and sculptures. Report reproductions on line 3c.)	0863				
23. Souvenirs and novelty items	0877				
24. Seasonal decorations	0878				
25. All other merchandise (Report receipts for services on line 26)	9810				
Specify principal lines and estimated sales below					
a. 076	9811				
b. 077	9812				
c. 078	9813				

Merchandise lines	Census use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
26. All nonmerchandise receipts (include receipts from rentals, storage, and other services provided to customers) EXCLUDING SALES AND OTHER TAXES					
a. Parts installed in repair	9907				
b. Carpet repair receipts and other labor charges for repair work performed by this establishment	9935				
c. Carpet cleaning receipts for work performed by this establishment	9936				
d. Labor charges for work contracted out to other establishments	9905				
e. Delivery and installation charges	9911				
f. All other nonmerchandise receipts (include receipts from customers for storage, rental, etc.)	9972				
g. Sum of lines 26a through 26f	9900				
27. TOTAL (Should equal item 4 if reporting in dollars)	9990				100%
Item 11. SPECIAL INQUIRIES 248					
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? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No					
Item 12. Not applicable to this report					
Item 13. LEGAL FORM OF ORGANIZATION					
Which of the following best describes this establishment's legal form of organization during 1997? Mark (X) only ONE box.					
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 _____					
Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION					
a. Is the FIRST DIGIT of your Census File Number (shown in the address label immediately after "CFN") a zero? 1 <input type="checkbox"/> Yes - Complete this item 2 <input type="checkbox"/> No - Skip to item 15					
b. Is this company owned or controlled by another company?		Enter name, address, and EIN of the owning or controlling company			
097 1 <input type="checkbox"/> Yes → 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes → 2 <input type="checkbox"/> No		EIN (9 digits) _____			
ITEM 14 CONTINUED ON PAGE 4					

Item 14. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION – Continued

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?

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 more room is needed, continue in the same format in REMARKS or on a separate sheet of paper.

Estimates are acceptable if book figures are not available.

Number
079

1	Name			1997	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	Kind-of-business description			Paid employees for pay period including March 12			
				083			
			Census use ⁰⁸⁸				
2	Name			1997	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	Kind-of-business description			Paid employees for pay period including March 12			
				083			
			Census use ⁰⁸⁸				
3	Name			1997	Mil.	Thou.	Dol.
	Number and street			Sales	081		
	City	State	ZIP Code	Annual payroll	082		
	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 15. 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