



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

SV-7902

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

Item 4. LEGAL FORM OF ORGANIZATION AND TAX STATUS
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 Individual owner (sole proprietorship)
- 2 Partnership - Mark (X) this box if you file a partnership Federal income tax form.
- 5 Government - Specify
- 0 Corporation - Mark (X) this box if you file a corporate Federal income tax form, including Subchapter S corporations.
- 9 Other - Specify

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be rounded to thousands of dollars.

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

Preferred
Acceptable

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

Item 5. DOLLAR VOLUME

OPERATING RECEIPTS of this establishment in 1997

NOTE - Include income from radio and television broadcast and advertising.

Mil.	Thou.	Dol.
010		

Item 6. PAYROLL

Payroll in 1997, BEFORE DEDUCTIONS

a. Annual

Mil.	Thou.	Dol.
030		
031		

b. First quarter (January-March)

Item 7. EMPLOYMENT

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

Number
032

CONTINUE WITH ITEM 8 ON PAGE 2

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Item 8. KIND OF BUSINESS OR ACTIVITY

Mark (X) the ONE box which best describes the business or activity that accounted for the MAJOR portion of this establishment's receipts in 1997.

070

Spectator sports

Professional or semiprofessional sports club:

- Baseball 7941101
- Football 7941201
- Basketball 7941301
- Hockey 7941302
- Soccer. 7941303
- Other – Describe 7941304

Racetrack operation:

- Auto 7948101
- Dog 7948301
- Horse 7948201
- Race car owner or driver 7948401
- Jockey or harness driver 7948402
- Individual sports professional (except jockey or racing car driver) 7999011
- Racing stable, dog or horse 7948403
- Other spectator sport – Describe 7777776

Promoters, agents, and managers

- Manager or agent of individual sports professional. 7941431
- Promoter of boxing, wrestling, or other sporting events without facilities 7941422
- Stadium or arena owner:
 - Promoting shows and renting facilities 6512921
 - Renting facilities only (no promotion) 6512912
- Stadium or arena operation (contract operations including booking events and promotions) 7941412
- Other kind of activity – Describe 7777777

Item 9. SOURCES OF RECEIPTS

Report receipts by source either in dollar figures (see example for item 5) or as percentages (in whole percents) of the total – see example below.

Please do **not** combine data for two or more receipts lines.

Line a(1)(a) – Report amounts received from the sale of general or specific exhibition admissions, exclusive of any State and local admissions taxes. Baseball, football, and other professional athletic clubs should report total receipts from admissions to their home games, including visiting teams' share (both league and nonleague). Do not deduct any payments made to operators of the facilities used.

Line a(1)(b) – Report club's share of admissions for games away from home (both league and nonleague).

Line a(6) – Report amounts received from the sale of food, candy, refreshments, including alcoholic beverages. Exclude all sales taxes. Do not include sales of concessions or vending machines operated by others at this establishment.

Line a(9) – Report amounts received from coin-operated amusement machines operated by this establishment.

Line a(10) – Report local market revenues from radio and television broadcasts and this establishment's share of national broadcast receipts.

Line a(11) – Report amounts received from display advertising in stadiums or arenas, advertising space in programs, and endorsement fees.

Item 9. SOURCE OF RECEIPTS – Continued

Line a(12) – Report this establishment's share of receipts from concessions or vending machines operated by others at this establishment.

Line a(13) – Do not include receipts reported on line b. Include such receipts as fees from parking.

Line b – Report receipts from rental of display space and royalties.

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 receipts	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
a. Amounts received from:	400	401			402
(1) Admissions					
(a) Admissions fees, including sports teams' total receipts for admissions to home games (do not include admission taxes)	5500				
(b) Sports teams only – report club's share of admissions for games away from home	5530				
(2) Commissions or fees from representation (e.g. from sports agents or managers or event promoters)	5600				
(3) Racetrack's share of receipts from parimutuel betting (do not include the State's share of such receipts)	5700				
(4) Rental fees for the use of facilities such as stadiums, arenas, or theaters	5650				
(5) Sales of programs	7200				
(6) Sales of food and beverages					
(a) Sales of food and nonalcoholic beverages	8501				
(b) Sales of alcoholic beverages	8502				
(7) Sales of other merchandise	8629				
(8) Gaming receipts	5750				
(9) Amusement machines operated by this establishment	5800				
(10) Radio and television income	5850				
(11) Advertising (including endorsement fees)	5900				
(12) This establishment's share of receipts from concessions or amusement machines not operated by this establishment	5670				
(13) All other receipts – Describe if more than 10 percent of total receipts	076				
	8975				
(14) OPERATING RECEIPTS (Sum of lines a(1) through a(13) should equal item 5.)	8990				100%
b. Nonoperating income:					500
(1) Did this establishment have other receipts from business during 1997?					1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
(2) If "Yes", what were the amounts?					
(a) Royalties		501			
(b) All other – Describe		502			
077					
		503			
(c) TOTAL					

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

Census File Number

Item 10. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION – Continued

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

- 1 Yes – Complete this item
- 2 No – Skip to item 11

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

- 097 1 Yes →
- 2 No

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

EIN (9 digits)

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

- 098 1 Yes →
- 2 No

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

EIN (9 digits)

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?

Number	079
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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.

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

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

Item 11. 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 – Print or type
Telephone	Area code	Number		Extension	Title		
Signature of authorized person							Date

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS

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