

1997 ECONOMIC CENSUS Transportation and Utilities

INSTRUCTIONS (Multiunit)

The Transportation and Utilities Sectors of the 1997 Economic Census include establishments primarily engaged in the following:

- o Transit and ground passenger transportation.
- o Trucking, warehousing, and storage.
- o Air, water, scenic and sightseeing, pipeline transportation, and support activities.
- o Electricity, gas, steam, and water services.

If you are **NOT** engaged in any of these kinds of businesses, **DESCRIBE** your business or activity in ITEM 8 **AND COMPLETE** the report form as accurately as possible. In most cases, completion of the report form will satisfy the Census Bureau's requirements and eliminate further correspondence.

These instructions provide general guidelines for the above listed activities. For instructions specific to an individual activity, refer to the instructions that may be printed on the report form.

CONFIDENTIALITY

YOUR RESPONSE to these questionnaires **IS STRICTLY CONFIDENTIAL**. Your company's reports will be used solely for developing summary statistics. **THEY CANNOT BE USED FOR PURPOSES OF TAXATION, INVESTIGATION, OR REGULATION.**

DEFINITION OF ESTABLISHMENT

An establishment is a single physical location at which business is conducted. This includes all selling and service locations of a company and any other facilities such as warehouses, administrative offices, main or branch offices, or terminals. This report should include data for all establishments (locations) operated by this company during 1997. Locations with no paid employees (such as unmanned warehouses) are not considered separate establishments.

GENERAL INSTRUCTIONS

- o Complete a separate report form for each establishment owned or controlled by your company. If you did not receive a separate form for each establishment, call 1-800-233-6136 between 8:00 a.m. and 8:00 p.m., eastern time, Monday through Friday, to request additional forms.
- o Each report should cover calendar year 1997. If book figures are not available, **estimates** are acceptable.
- o If an establishment stopped operating before January 1, 1997, indicate final disposition and effective date in item 3b and return the form.
- o If an establishment stopped operating during 1997, i.e., it was closed, sold, or leased to another company, complete the remainder of the report form for the portion of 1997 that the establishment was in operation under this ownership.
- o Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget (OMB). The OMB 8-digit number appears in the upper right corner of the questionnaire.
- o If you have any questions or if any communication regarding a report is necessary, be sure to reference the 11-digit Census File Number (CFN) printed on the address label.
- o If additional space is necessary to complete any item, use the remarks section at the end of the form (if applicable) or attach a separate sheet. If extra sheets are added, **write the CFN and the item number at the top of each additional page.**
- o Please make photocopies of your completed forms and retain the copies in your files.
- o Revenue and payroll data should be rounded to the nearest thousand dollars, as illustrated on the report form.
- o Public reporting burden for this collection of information is estimated to vary from 12 minutes to 9.4 hours per response, with an average of 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Associate Director for Administration/ Comptroller, Attn: Paperwork Reduction Project (0607-0834), Room 3104, Federal Building 3, Bureau of the Census, Washington, DC 20233.

INSTRUCTIONS FOR SELECTED ITEMS

Item 1. EMPLOYER IDENTIFICATION NUMBER

Check the Employer Identification Number (EIN) located in the upper right part of the address label. If it is not correct, please enter the correct number in the space provided.

Item 2. PHYSICAL LOCATION

Answer all sections (a through d) of item 2, including name of county, even if the address on the label is correct.

Item 3. OPERATIONAL STATUS

Part b. Mark the one box that best describes the operational status of each establishment at the **end of 1997**.

1. In operation — The establishment was open and actively conducting business on December 31, 1997.
2. Temporarily or seasonally inactive — Although not conducting business at the end of 1997, the establishment will eventually reopen and conduct business under the same EIN. (Examples: Sightseeing boats that do not work during winter; establishments which temporarily close for remodeling)
3. Ceased operation — The establishment has gone out of business or closed and does not plan to reopen. Provide the **month and year** that the establishment ceased operation. Complete the remainder of the report form for the portion of 1997 during which the establishment was in operation.
4. Sold or leased to another operator — Your company sold or leased the establishment to another company. Provide the **month and year** in which the change occurred and indicate the name and address of the new owner or operator. Complete the remainder of the report form for the portion of 1997 during which your company operated the establishment.

Item 4. DOLLAR VOLUME OF BUSINESS

For establishments which generate no revenue, report zero and explain in the remarks section at the end of the report form.

Revenue should be reported on the accrual basis of accounting, using Generally Accepted Accounting Principles (GAAP), if possible.

The definition of revenue **varies by industry** - refer to the general instructions below, as well as any **specialized instructions on the report form**.

Report revenue from all business activities.

Include:

- o Gross revenue from services provided, for the use of facilities, and from merchandise sold in 1997, whether or not payment was received in 1997.
- o Fair sales value of merchandise marketed in 1997 under capital, finance, or "full-payout" leases.
- o Rental revenue from leasing of vehicles, equipment, instruments, tools, etc., marketed under operating leases.
- o Total value of service contracts.
- o Amounts received for work subcontracted to others.

Exclude:

- o Sales or other taxes collected directly from customers and paid directly to a State, local, or Federal tax agency.
- o Income from interest, rental of real estate, dividends, contributions, and grants.
- o Revenue from installment payments received from leasing of vehicles, equipment, instruments, tools, etc., marketed under capital, finance, or "full-payout" leases.

Item 4. DOLLAR VOLUME OF BUSINESS — Continued

Exclude: continued

- o All cash or noncash subsidies from any agency of local, State, or Federal government.
- o Other nonoperating income (e.g., royalties, franchise income, etc.)

Item 5. PAYROLL

Answer this item according to the guidelines outlined below. (Definitions are the same as those used on the Employer's Quarterly Federal Tax Return, Form 941, and as described in Circular E, Employer's Tax Guide.)

If employees worked at more than one location, report payroll for employees at the ONE location where they spent most of their working time.

Include:

- o Wages, salaries, tips, vacation allowances, bonuses, commissions, and other compensation paid to employees during 1997, whether or not subject to income or FICA tax.
- o Salaries of officers and executives of a corporation.

Exclude:

- o Payments to or withdrawals by proprietors or partners of an unincorporated company.
- o Annuities or supplemental unemployment compensation benefits, even if income tax was withheld.
- o Compensation paid to agents not considered employees of the firm on your IRS Form 941 (e.g., taxicab drivers).

Item 6. EMPLOYMENT

Include:

- o All full- and part-time employees on the payroll during the pay period including March 12, 1997.
- o Salaried officers and executives of a corporation.
- o Employees on paid sick leave, paid vacations, and paid holidays.

Exclude:

- o Proprietors or partners of an unincorporated company.
- o Agents not considered employees of the firm on your IRS Form 941 (e.g., taxicab drivers).

Item 7. LEGAL FORM OF ORGANIZATION

Indicate the legal form of organization used for tax purposes for each establishment.

Mark (X) "Government" if an establishment is operated by (or is under the control of) a government entity or a board of directors either appointed by such an entity or publicly elected. The fact that an establishment is regulated by (or receives funds from) a government agency does NOT qualify the establishment as governmental.

Item 8. KIND OF BUSINESS OR ACTIVITY

Choose the **one** kind of business which best describes the activity conducted at each establishment in 1997. If none of the provided selections seem appropriate for an establishment, mark (X) the box next to "Other kind of business," provide a specific description of the **primary** business activity, and complete the remainder of the report form.

Item 9. SOURCES OF REVENUE

- o Revenue may be reported EITHER in thousands of dollars OR in whole percents of total revenue as illustrated on the report form. It is not necessary to report both dollars and percents.
- o Allocate revenue (as reported in item 4) by source on appropriate revenue lines. Please do not combine data for two or more lines.
- o If an establishment received revenue from a source(s) not listed, report this revenue on the "All Other Operating Revenue" line at the end of the list and describe the revenue source(s) in the space provided.
- o The sum of revenue lines reported should equal the amount reported in item 4 (or 100 percent if the lines were reported as percentages of the total revenue).

Item 10. SPECIAL INQUIRIES (NOT APPLICABLE TO ALL FORMS)

The content of this item varies by report form. Refer to the specialized instructions on each report form.

Item 11. OWNERSHIP, CONTROL, AND LOCATIONS OF OPERATION

Answer "NO" to item 11a and SKIP to item 12, "Certification." Responses to items 11b, c, and d are required only of firms which, according to our records, are single-establishment firms.