U.S. DEPARTMENT OF Economics and Statistics A U.S. CENSUS BUREAU FORM IA-97172	Administration 2002 ECONOMIC CENSUS PUERTO RICO - ACCOMMODATION SERVICES
	OMB No. 0607-0894: Approval Expires 06/30/2004
DUE DATE FEBRUARY 12, 2003	
Mail your completed form to:	IA-97172
U.S. CENSUS BUREAU ATTENTION: Island Areas 1201 East 10th Street Jeffersonville, IN 47134-0001	
<b>Please read</b> the accompanying information sheet(s) before answering the questions.	TATION CULL
Need help or have questions about filling out this form?	TATEORMAIL REPORT
Visit our Web site at www.census.gov/econhelp	II TTSHIU
<i>Call</i> 1-800-681-3012, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday. - <i>OR</i> -	INFORMATION COPY DO NOT USE TO REPORT
<i>- OK -</i> <i>Write</i> to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.	(Please correct any errors in this mailing address.)
Rico No. 11 of March 27, 7 the questions and return t <b>CONFIDENTIAL.</b> It may	<b>COUIRED BY LAW.</b> Title 13, United States Code and an Act of the Legislature of Puerto 1950, require businesses and other organizations that receive this questionnaire to answer the report to the U.S. Census Bureau. By the same laws, <b>YOUR CENSUS REPORT IS</b> be seen only by persons sworn to uphold the confidentiality of Census Bureau information and istical purposes. Further, copies retained in respondents' files are immune from legal process.
• Use blue or black ink.	Please center numbers in their respective boxes. Examples:
<ul><li>Do not use pencil.</li><li>Place an "X" inside the box.</li></ul>	• Do not put slashes through 0 or 7.
The reporting unit for this where business is conduct information sheet(s).	form is an establishment. An <b>establishment</b> is generally a single physical location ted or where services or industrial operations are performed. For further clarification, see
1 MONTHS IN OPERATION	Mark "X" 2002 if None Number of months
Number of months in the	
2 EMPLOYER IDENTIFICATIOn Is the Employer Identificate establishment on its latest	ON NUMBER tion Number (EIN) shown in the mailing address the same as the one used for this t 2002 Internal Revenue Service Form 941-PR, Employer's Quarterly Federal Tax Return?
0021 <b>Yes</b> 0022	□ No - Enter current EIN (9 digits) → 0025 -
	physical location the same as shown in the mailing address? Ite addresses are not physical locations.)
<sub>0031</sub> Yes	0035 Number and street or location description
<sub>0031</sub> L Yes	
0032 No - Enter physic location	cal → 0036 City, town, etc. 0037 State, PR, etc. 0038 ZIP Code
<b>B.</b> Municipio where this e	establishment is physically located
0049	

				Mark "X	"11	2	2002		
HOW TO	Dollar figures should be ro thousands of dollars.	ounded to		if None		I.	Tho	u.	Do
REPORT DOLLAR	If a figure is <b>\$1,025,628.</b>	79:	Report —	□		1	02	6	
FIGURES	If a value is "0" (or less that		Report —						
4 SALES, SHIPME									
4 SALES, SHIPWE	NTS, RECEIPTS, OR REVENUE			Mark "X			2002		1
				if None	\$ Mi	I.	Tho	u.	Do
Sales of mercha collected.).	ndise and other operating receipts (	Exclude sales or c 	other taxes	. 0100			I	I	
5 E-COMMERCE S	ALES, SHIPMENTS, RECEIPTS, OR F	REVENUE							
receipts, and (EDI) networ transfer own	lishment have any e-commerce sal for revenue from any transaction co r, electronic mail, or other online sy ership of, or rights to use, goods or Please see the information sheet(s	mpleted over an l stem. Transactior services. Paymei	Internet, Extra ns are agreem nt for these go	net, Electron ents betwee	ic Data n buyer:	Inter s an	rchan d sell	ge ers t	to
0181 Yes	- Go to line B						2002		
<sub>0182</sub> 🗌 No	Go to 🖸				Estim		are ac	cept	able
0102					\$ Mi	I.	Tho	u.	Do
B. E-commerce sales, receipt	sales, receipts, and/or revenue of th s, and/or revenue in <b>4</b> . Exclude sa	is establishment ( <i>les taxes.</i> )	(Include e-com	nmerce					
6 EMPLOYMENT		,		0100				-	
<b>Include:</b> • Full- and p. Service For Number (E	nt-time employees working at this e m 941-PR, Employer's Quarterly Feo N) shown in the mailing address or partners, and unpaid family memb	leral Tax Return, a corrected in <b>2</b> .	and filed unde	r the Employ	n Intern ver Iden	al R tifica	evenu ation	le	
Include: • Full- and particles For Service For Number (E • Proprietors Exclude:	rt-time employees working at this e m 941-PR, Employer's Quarterly Feo N) shown in the mailing address or partners, and unpaid family memb	deral Tax Return, a corrected in 2. ers working at thi	and filed unde	r the Employ	n Intern yer Iden	al R tifica	'evenı ation	le	
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Include: • Full- and p. Service For Number (E • Proprietors Exclude: • Temporary For further clarin A. Number of p B. Proprietors a included Mai C. Unpaid famil included Mai D. Payroll befor 1. Annual p. 2. First quar 7-12 Not Applica 3 RENTAL PAYME	Art-time employees working at this employer's Quarterly Fee M) shown in the mailing address or partners, and unpaid family members staffing obtained from a staffing se ication, see information sheet(s). And employees for pay period include and partners that worked 15 or more ch 12	deral Tax Return, a corrected in <b>2</b> . ers working at thi rvice. ing March 12 hours during the  bost for fringe bene 	and filed unde s establishme 	nt. M. M. M. M. M. M. M. M. M. M	ark "X"		200 2002	02 ber u.	
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	IA-97172						Pag
lf no Nun	ot shown, please nber (CFN) from t	ente the n	r your 11-digit Census File nailing address.				
14	Not Applicable.						
15	SELECTED EXPEN	ISES		Mark "X"		2002	
				if None	\$ Mil.	Thou.	D
	A. Communicatio related service	on ser e <i>cont</i>	vices (Include telephone, pager, data transmission, fax, and racts.)				
	B. Computer serv	vices	(Include data processing and software.)				_
	<b>C.</b> Office supplies	S					_
	<b>D.</b> Purchased ma	inten	ance and repair of machinery and equipment $\ldots$ $\ldots$ $\ldots$ $_{0401}$				
			ance and repair of buildings, structures, offices, and their ators, etc.)				
16-	• Not Applicab	ole.					
0700	Principal kind of b (Mark "X" only ON		х.)				
	721 120 00 22		Hotel with casino				
	721 110 00 73		Hotel (except with casino) or motel				
	721 110 00 32		Hotel operated by membership organization				
	721 191 00 34		Tourist villa or parador				
	721 199 00 44		Guest house				
	721 310 00 14		Rooming and boarding house				
	721 310 00 22		Lodging house operated by membership organization				
	531 110 00 43		Apartment building operator				
	813 990 00 16		Property owners' or tenants' association Sporting, recreation, or vacation camp (except campground)				
	721 214 00 52 721 211 00 30		Travel trailer park, recreational vehicle park, or campground, exc	opt racid	lontial		
	813 410 00 26		Bar or restaurant operated by social or fraternal organization for				
	722 410 00 26		Bar, tavern, pub, or other drinking place, selling alcoholic bevera				
	722 410 00 11		premises	963 101 0	Jonaumpti		
	722 110 00 14		Full-service restaurant, patrons order through waiter/waitress service res	vice and	pay after	eating	
	722 213 70 56		Refreshment place or limited-service restaurant				
	772 000 00 12		Other kind of business - <i>Specify</i>				
0701	I						

NOTE - Continue with  $\mathfrak{P}$  ONLY if the principal kind of business for this establishment is HOTEL, MOTEL, OR OTHER TRAVELER ACCOMMODATION. Otherwise go to  $\mathfrak{P}$ .

**19–21** Not Applicable.

						2002	2	
	HOW TO REPORT					mates are are rt dollars (		
	PERCENTS	If figure is <b>38.76%</b> of total sales:	Report whole perce	ents	\$ Mil.	Thou.	Dol.	Percer 3
22		HIPMENTS, RECEIPTS, OR REVENU	IE					
•	(Report receipts by so	burce either as a dollar figure or as URES on page 2 and HOW TO REI	s a whole percent of total	receij Do no	ots (report ot combine	ed in <b>4</b> ). e data for	See two c	HOW T or more
				Cen-		2002		
	Descript	ion of sales, shipments, receipts, or rev	venue	sus		mates are a rt dollars (	•	
				use	\$ Mil.	Thou.	Dol.	Perce
0723				0720	0721			0722
1.		ntals, EXCLUDING OCCUPANCY T. ackage, estimate the percentage fo		20010				
2.	Casino receipts			20040				
3.	bakery items, and nor	nacks, sandwiches, unpackaged ice nalcoholic beverages generally ser	ved for immediate	20120				
4.	Alcoholic drinks serve	ed at this establishment		20130				
5.	Packaged liquor, wine	e, and beer		20140				
6.	All other merchandise			29810				
7.	conference/convention storage and other ser	dise receipts, including receipts fr n meeting rooms, ballrooms, and vices provided to customers EXCL	other public rooms; .UDING SALES AND	29980				
8.	TOTAL (Should equa	I ④ if reporting in dollars.)		29990				1 0
23-	<b>25</b> Not Applicable.							
26	SPECIAL INQUIRIES							
	A. RECEIPTS FROM (	OTHER SOURCES					2002	
			the second the second		Mark "X" if None	\$ Mil.	2002	ou. [
	business operation	nan from customers received by the n (Include rental and commission in ts, concessions and stores, and co	receipts from operators o	of ••• 29	910			
	<b>B.</b> NUMBER AND TY	PE OF ACCOMMODATIONS					20	)02
								er as of
	2002 (Consists	ms, units, or quarters primarily re of the number which can be rente be subdivided should be counted a	ed as single units. Suites	of roo	oms	1	Decen	nber 31
	2. Were more that	n half of guestroom or unit rental	receipts from transient g	uests	<b>)</b>			
	2921 <b>Yes</b>							
	2922 <b>No</b>							

26	SPECIAL INQUIRIES - Continued
-	C. PUERTO RICO TOURIST ENCOURAGEMENT LAW
	Did this establishment operate under the Puerto Rico Tourist Encouragement Law?
	2931 C Yes
	2932 <b>No</b>
27	LEGAL FORM OF ORGANIZATION
	A. Legal form of organization that best describes this establishment at the end of 2002 (Mark "X" only ONE box.)
	0691 Individual proprietorship
	0692 Partnership
	0693 Cooperative organization
	0694 Corporation (Do not mark if any form of cooperative association.) - Go to line B
	0695 Government - Specify
	0805
	0696 Unter - Specify
	0806
	<b>B.</b> If a corporation:
	1. Type of corporation (Mark "X" only ONE box.)
	8913 Private corporation (nonprofit)
	8911 Private corporation (for-profit)
	8912 Public corporation
	2. Status that best describes this corporation (Mark "X" only ONE box.)
	7901 Puerto Rico corporation
	<sup>8914</sup> United States corporation
	8916 Foreign corporation - Specify country
	8917
28	Not Applicable.

	OPER	RATIONAL STATUS						
		vity that best describes this establishment's status at the $rk$ "X" only ONE box.)	end of 2002	2				
	0011	□ In operation <sub>0014</sub> □ Ceased operation - G	ive date at	right	0018	Month	Day	Yea
	0013	Temporarily or 0015 Sold or leased to and Give date at right AN and mailing address	ID enter nev	tor - w name	•			
		0060 Name of new owner or operator		oyer Identification	n Numbe	r		
			Enter	EIN of new		-		
		0062 Mailing address (number and street, P.O. Box, etc.)	owner	r (9 digits)			<u>                                      </u>	
		0063 City, town, etc.	00	064 State, PR, etc	. 0065 Z	IP Code		
							-	
Daves		(Please use this space for any explanations that may be	a a a a m ti a l i m				data 1	
30	CERT	TIFICATION - This report is substantially accurate and wa	as prepared	in accordance	with the	e instru	ctions.	
	e time	e period covered by this report a calendar year?		in accordance onth Year		e instru TO	ctions. Month	
Is the 0078	e time	e period covered by this report a calendar year? Yes 0079 No - Enter time period covered	M					
Is the 0078	e time	e period covered by this report a calendar year? Yes 0079 O No - Enter time period covered	FROM 0070			то		1
Is the 0078	e time	e period covered by this report a calendar year? Yes 0079 No - Enter time period covered	FROM 0070 173 Title	onth Year Fax		TO 0071	Month	1
Is the 0078 [ 0072 N	e time P V Jame o Telepl	e period covered by this report a calendar year? Yes 0079 No - Enter time period covered	FROM 0070 173 Title	onth Year	rea code	TO 0071	Month	Yea