



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

AU-9202

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

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

Mil. Thou. Dol.

010

a. SALES TO/OPERATING RECEIPTS OR REVENUES FROM customers outside your enterprise in 1997 from this establishment (Do not include billings or sales to/receipts or revenues from establishments of your own enterprise.) If the answer to item 5a is \$0, enter "0."

b. Were there operating receipts in 1997 generated by employees of this establishment that were reported on another economic census form AND not reported in item 5a?

596 1 Yes
2 No

c. BILLINGS TO other establishments of your enterprise in 1997 (Do not include sales to/receipts or revenues from customers outside your enterprise.) If the answer to item 5c is \$0, enter "0."

Mil. Thou. Dol.

597

Item 6. PAYROLL

Mil. Thou. Dol.

Payroll in 1997, BEFORE DEDUCTIONS

030

a. Annual

031

b. First quarter (January-March)

Item 7. EMPLOYMENT

Number

032

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

CONTINUE WITH ITEM 8 ON PAGE 2

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Item 8. KIND OF BUSINESS OR ACTIVITY

a. Mark (X) the ONE box which best describes the business or activity of this establishment for 1997.

Corporate, subsidiary, or regional managing office or office of a holding company, providing a range of services to other establishments of the enterprise such as long term strategic and organizational planning, financial management, payroll and personnel management, centralized billing, advertising, and public relations 70

Office of holding company that is engaged in holding the securities of other firms (or other equity interests in) for the purpose of exercising control, either directly or indirectly, and/or influencing the management decisions of those companies

Depository bank holding company 95

Holding company other than depository bank. 96

Data processing center/facility 05

Research and development 15

Security or guard services 25

Janitorial, pest control, and landscaping services to building and dwellings 30

Repair or maintenance - Describe type of repair or maintenance 35

Warehouses and storage facilities 40

Trucking 45

Legal services 50

Accounting, billing, tax preparation, bookkeeping, or payroll services 55

Employing office that is engaged in recruiting, screening, and hiring employees 60

Advertising and related services 65

Sales office that sells directly to customers from this location 75

Mail order customer service center or mail order distribution warehouse 80

Other kind of activity - Describe 90

b. In 1997 did this establishment perform supporting services PRIMARILY for establishments of your enterprise rather than for businesses or customers outside your enterprise? 598 1 Yes 2 No

c. Did this establishment perform supporting services for a single establishment of your enterprise which is located at the same physical location as this establishment? 599 1 Yes 2 No

Item 9. EMPLOYMENT BY FUNCTION

Report employment by function for pay period including March 12, 1997. (Where records do not provide actual employee counts in terms of the function listed, estimates of the approximate number in each are acceptable. Those performing a variety of functions should be reported in their primary activity during the pay period.)

a. Administrative and management:	Number
	600
(1) Executive and general management (e.g., corporate officers and staff)	601
(2) Accounting, billing, tax preparation, and bookkeeping	602
(3) Personnel/human relations	603
(4) Advertising	604
(5) Marketing/marketing research - except direct sales staff	605
(6) Legal	606
(7) Computer systems design and custom computer programming	607
(8) Electronic data processing	608
(9) Other - Describe 076	609
b. Sales employees (and support staff) selling directly to customers from this location	
	610
c. Research and development	
	611
d. Security (including security patrol, locksmith, armored car, and investigation)	
	612
e. Building services (including janitorial, pest control, landscaping, and carpet cleaning)	
	613
f. Repair and maintenance - equipment	
	614
g. Trucking	
	615
h. Warehousing	
	616
i. Manufacturing - production workers	
	617
j. All other - Describe 077	
	618

k. Total March 12 employment - Sum of lines 9a(1) through 9a(9) and 9b through 9j

PLEASE VERIFY - Line 9k should equal item 7

CONTINUE WITH ITEM 10 ON PAGE 3

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

Census File Number

Item 10. SOURCES OF RECEIPTS AND BILLINGS

Did you report zero for item 5a AND item 5c?

- 619 1 Yes – Skip to item 11
 2 No – Complete the remainder of this item

Report in column (1) the sales to/receipts from customers outside your company. The total for column (1) should sum to the total in item 5a. Report in column (2) the amount of billings to other establishments of your own company. The total for column (2) should sum to the total in item 5c.

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Receipts/Billings by Type	Sales to/receipts from customers outside your company (1)			Mark (X) if "0"	Billings to other establishments of your company (2)			Mark (X) if "0"
	Mil.	Thou.	Dol.		Mil.	Thou.	Dol.	
a. Products manufactured or assembled at this establishment (include sales/billings of any product that this establishment manufactured/ fabricated, provided processing or assembly of)	620			<input type="checkbox"/> 0	634			<input type="checkbox"/> 0
b. Products manufactured or assembled by other establishments of this enterprise and sold by employees of this establishment	621			<input type="checkbox"/> 0	635			<input type="checkbox"/> 0
c. Products resold (products purchased from others and resold by this establishment without further assembly, fabrication or manufacturing)	622			<input type="checkbox"/> 0	636			<input type="checkbox"/> 0
d. Franchise sales and fees, license fees and royalties	623			<input type="checkbox"/> 0	637			<input type="checkbox"/> 0
e. Investment income (to be reported by finance, insurance, and real estate/leasing companies only)	624			<input type="checkbox"/> 0	638			<input type="checkbox"/> 0
f. Mineral extraction, production, or exploration	625			<input type="checkbox"/> 0	639			<input type="checkbox"/> 0
g. Construction, new and repair (including work subcontracted to others)	626			<input type="checkbox"/> 0	640			<input type="checkbox"/> 0
h. Transportation and warehousing	627			<input type="checkbox"/> 0	641			<input type="checkbox"/> 0
i. Equipment repair (including motor vehicles)	628			<input type="checkbox"/> 0	642			<input type="checkbox"/> 0
j. Research and development	629			<input type="checkbox"/> 0	643			<input type="checkbox"/> 0
k. Professional, scientific and technical services (e.g., engineering, legal, accounting, management consulting)	630			<input type="checkbox"/> 0	644			<input type="checkbox"/> 0
l. Management and administrative support (e.g., services to buildings and dwellings, waste management, remediation)	631			<input type="checkbox"/> 0	645			<input type="checkbox"/> 0
m. Other – Describe 078	632			<input type="checkbox"/> 0	646			<input type="checkbox"/> 0
n. TOTAL	633			<input type="checkbox"/> 0	647			<input type="checkbox"/> 0

PLEASE VERIFY – Total sales to/receipts from customers outside your company reported for item 10n should equal item 5a. Total billings to establishments of your company reported for item 10n should equal item 5c.

Item 11. EXPORTED SERVICES

NOTE – An exported service is a service performed for a customer or client (individual, government, business establishment, etc.) located outside the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Services performed for unaffiliated and affiliated foreign firms (i.e., foreign parent firms, subsidiaries, branches, etc.) are included. Services provided to domestic subsidiaries of foreign firms are excluded.

Did the receipts reported in item 5a include any amounts received for exported services?

- 648 1 Yes – Amount
 2 No

Mil.	Thou.	Dol.
649		

CONTINUE WITH ITEM 12 ON PAGE 4

Item 12. PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED

a. Mark (X) the ONE box which best describes the primary kind of business or activity of the establishments of your enterprise that are managed or serviced by this establishment.

- 650 1 Mineral extraction, production, or exploration
- 2 Construction (including general contracting, subcontracting, and land subdividing and developing)
- 3 Manufacturing
- 4 Transportation and warehousing
- 5 Electric and gas
- 6 Wholesale trade (including manufacturers' sales branches and offices)
- 7 Retail trade
- 8 Finance and insurance
- 9 Real estate, and rental and leasing
- 10 Software publishing
- 11 Publishing (except software publishing) - e.g., newspaper, periodicals, books
- 12 Motion picture and sound recording
- 13 Broadcasting and telecommunications
- 14 Health care services
- 15 Arts, entertainment, and recreation
- 16 Professional, scientific, and technical services
- 17 Administrative and management services (including travel arrangement, waste management, and remediation services)
- 18 Other services (including repair and maintenance, personal and laundry services, grant making, civic, professional, and similar operations)
- 19 Other - Specify

b. Describe the principal kinds of merchandise sold, products produced, types of services rendered, or activities performed by the establishments of your enterprise that are managed or serviced by this establishment.

Item 13. INVENTORIES OF THIS ESTABLISHMENT

a. Did you have inventories at the end of 1996 or 1997?

- 651 1 Yes - Complete the remainder of the item
- 2 No - Skip to item 14

b. Were inventories of this establishment subject to the last-in, first-out (LIFO) method of valuation?

- 652 1 Yes - Use the sum of the LIFO amount plus the LIFO reserve for lines c and c(2)
- 2 No - Complete only line c

	End of 1997			End of 1996		
	Mil.	Thou.	Dol.	Mil.	Thou.	Dol.
c. Total Inventories	046			047		
(1) Amount not subject to LIFO costing	181			186		
(2) Amount subject to LIFO costing (gross)	182			187		
(a) Amount of the LIFO reserve	183			188		
(b) LIFO value of the line c(2) (net)	184			189		

PLEASE VERIFY - The sum of lines c(1) and c(2) should equal line c. The sum of lines c(2a) and c(2b) should equal line c(2).

Item 14. RESEARCH AND DEVELOPMENT IN 1997

Report receipts and revenues of this establishment during 1997 to support research and development activities (i.e., wages and salaries, direct materials costs, services and supporting costs, and an appropriate share of depreciation and overhead).

If this establishment performed research and development for the Federal Government or for other enterprises on contract during 1997, include the total amount charged for such work performed.

a. Did this establishment receive receipts/revenues for research and development during 1997?

- 661 1 Yes - Complete the remainder of the item
- 2 No - Skip to item 15

b. Source of funds for research and development

	Mil.	Thou.	Dol.
(1) Federal Government contracts and subcontracts	662		
(2) Nonfederal sources outside your enterprise (other enterprises, local governments, etc.)	663		
(3) Other establishments of your enterprise	664		
(4) Total - PLEASE VERIFY - Item 14b(4) should equal the sum of lines 14b(1) through 14b(3)	665		

Sum of lines 14b(1) and 14b(2) should equal item 10j, column (1), and line 14b(3) should equal item 10j, column (2)

Item 15. SELECTED PURCHASED SERVICES AND EXPENSES

a. Employer's cost for FRINGE BENEFITS in 1997 for employees whose payroll is reported in item 6.

Mil.	Thou.	Dol.
666		

INCLUDE employer's social security tax, unemployment tax, workmen's compensation insurance, state disability insurance programs, pension plans, stock purchase plans, union-negotiated benefits, life insurance premiums, and insurance premiums on hospital and medical plans for employees at this establishment defined in item 7. EXCLUDE allowances for vacation, holiday, and sick leave, and fringe benefits for employees not at this establishment.

b. Did this establishment make RENTAL PAYMENTS in 1997?

INCLUDE payments made by this establishment in 1997 for lease or rental of land, buildings, structures, offices, machinery, equipment, and other tangible assets (whether used directly by this establishment or used by other establishments of your own company). EXCLUDE capital leases, and rental payments to your own company.

	Mil.	Thou.	Dol.
667 1 <input type="checkbox"/> Yes - Report rental payments	668		
(1) Buildings and structures	669		
(2) Machinery and equipment	670		
(3) TOTAL rental payments Sum of lines 15b(1) and 15b(2)			

2 No

c. Did this establishment have DEPRECIATION CHARGES during 1997?

INCLUDE additions made to accumulated depreciation and amortization accounts during 1997 for assets used by this establishment (whether owned directly by this establishment or owned by other establishments of your own company) at the beginning of 1997 or acquired during 1997. Include depreciation charges for assets obtained through capital lease agreements. EXCLUDE depreciation charges for intangible assets (goodwill, patents, copyrights, software, etc.) and depreciation charges for assets not owned by this company.

Mil.	Thou.	Dol.	
671 1 <input type="checkbox"/> Yes - Report depreciation charges	672		

2 No

ITEM 15 CONTINUED ON PAGE 5

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

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Item 15. SELECTED PURCHASED SERVICES AND EXPENSES - Continued

d. Did this establishment purchase REPAIR AND MAINTENANCE SERVICES in 1997?

Report payments made for all maintenance and repair work on buildings and equipment whether for this establishment or for other establishments of your company. INCLUDE all noncapitalized repair and maintenance to buildings and structures, and machinery and equipment. Report purchased repair and maintenance for equipment that is an integral or permanent part of a building or structure as repairs for buildings and structures, not as machinery and equipment. EXCLUDE capitalized improvements for which depreciation or amortization accounts are ordinarily maintained, repairs and maintenance performed by employees of this establishment, and repair or maintenance provided by the owner as part of the rental contract.

		Mil.	Thou.	Dol.
673	1 <input type="checkbox"/> Yes - Report purchased repair and/or maintenance	674		
	(1) Buildings, structures, and office space	675		
	(2) Machinery and equipment			
	(3) TOTAL purchased repair and maintenance services - Sum of lines 15d(1) and 15d(2)	676		
2 <input type="checkbox"/> No				

e. Did this establishment purchase SOFTWARE in 1997?

INCLUDE expensed computer software purchased by this establishment from other companies, whether for the use of this establishment or by other establishments of your own company. EXCLUDE salaries paid to your own employees for software development and payments by this establishment to the parent enterprise or any of its subsidiaries for software development.

		Mil.	Thou.	Dol.
677	1 <input type="checkbox"/> Yes - Report purchased software	678		
2 <input type="checkbox"/> No				

f. Did this establishment purchase DATA PROCESSING SERVICES in 1997?

INCLUDE custom software, system design and data processing services purchased by this establishment from other companies, whether for the use of this establishment or by other establishments of your own company. EXCLUDE salaries paid to your own employees for data processing and other computer-related services, and payments by this establishment to the parent enterprise or any of its subsidiaries for data processing services.

		Mil.	Thou.	Dol.
679	1 <input type="checkbox"/> Yes - Report purchased data processing services	680		
2 <input type="checkbox"/> No				

g. Did this establishment purchase ACCOUNTING, AUDITING, and BOOKKEEPING services in 1997?

INCLUDE accounting, auditing, and bookkeeping services purchased by this establishment, whether for the use of this establishment or by other establishments of your own company. EXCLUDE salaries paid to your own employees for accounting, auditing and bookkeeping services, and payments by this establishment to the parent enterprise or any of its subsidiaries for accounting services.

		Mil.	Thou.	Dol.
681	1 <input type="checkbox"/> Yes - Report purchased accounting, auditing, and bookkeeping services	682		
2 <input type="checkbox"/> No				

Item 15. SELECTED PURCHASED SERVICES AND EXPENSES - Continued

h. Did this establishment purchase LEGAL services in 1997?

INCLUDE legal services purchased by this establishment whether for the use of this establishment or by other establishments of your own company. EXCLUDE salaries paid to your own employees for legal services, and payments by this establishment to the parent enterprise or any of its subsidiaries for legal services.

		Mil.	Thou.	Dol.
683	1 <input type="checkbox"/> Yes - Report purchased legal services	684		
2 <input type="checkbox"/> No				

i. Did this establishment purchase ADVERTISING services in 1997?

INCLUDE payments to other companies for printing, media, and other services and materials used for advertising, whether for the use of this establishment or by other establishments of your own company. EXCLUDE salaries paid to your own employees for advertising services, and payments by this establishment to the parent enterprise or any of its subsidiaries for advertising services.

		Mil.	Thou.	Dol.
685	1 <input type="checkbox"/> Yes - Report purchased advertising services	686		
2 <input type="checkbox"/> No				

j. Did this establishment purchase COMMUNICATION services in 1997?

INCLUDE purchased telephone, data transmission, telegraph, telex, ticket tape, photo transmission, facsimile (FAX), paging, cellular telephone, on-line access, and related services, whether for the use of this establishment or by other establishments of your own company.

		Mil.	Thou.	Dol.
687	1 <input type="checkbox"/> Yes - Report purchased communication services	688		
2 <input type="checkbox"/> No				

k. Did this establishment consume FUEL for heat or power in 1997?

INCLUDE the value of coal, coke, natural and manufactured gas, fuel oil, liquefied petroleum gas, gasoline, etc. used by this establishment. EXCLUDE gasoline and fuel for highway vehicles.

		Mil.	Thou.	Dol.
689	1 <input type="checkbox"/> Yes - Report value of fuel consumed	690		
2 <input type="checkbox"/> No				

l. Did this establishment consume ELECTRICITY in 1997?

INCLUDE the value of electricity used by this establishment.

		Mil.	Thou.	Dol.
691	1 <input type="checkbox"/> Yes - Report value of electricity consumed	692		
2 <input type="checkbox"/> No				

m. Did this establishment PURCHASE OTHER UTILITIES in 1997?

INCLUDE the value of payments for water, sewer, refuse removal, and other purchased utilities whether for the use of this establishment or by other establishments of your own company. EXCLUDE fuels and electricity reported on items 15k and 15l.

		Mil.	Thou.	Dol.
693	1 <input type="checkbox"/> Yes - Report purchased utilities	694		
2 <input type="checkbox"/> No				

ITEM 15 CONTINUED ON PAGE 6

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<p>Item 15. SELECTED PURCHASED SERVICES AND EXPENSES – Continued</p> <p>n. Did this establishment consume MATERIALS AND SUPPLIES in 1997?</p> <p>INCLUDE the value of noncapitalized office supplies, parts, supplies and other goods and materials used by this establishment for repair, maintenance, or other purposes. Include all noncapitalized materials or supplies not reported on items 15k, 15l and 15m, including packaging materials, and gasoline and fuel for highway vehicles. EXCLUDE cost of goods purchased for resale.</p> <p>695 1 <input type="checkbox"/> Yes – Report purchased noncapitalized materials and supplies</p> <p> 2 <input type="checkbox"/> No</p> <table border="1" style="float: right; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 30px;">Mil.</td> <td style="width: 30px;">Thou.</td> <td style="width: 30px;">Dol.</td> </tr> <tr> <td>696</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Mil.	Thou.	Dol.	696						<p>Item 15. SELECTED PURCHASED SERVICES AND EXPENSES – Continued</p> <p>o. Did this establishment make any payment in 1997 to government agencies for taxes, including real property taxes, tobacco and liquor stamps, and license fees (such as business license fees)?</p> <p>INCLUDE businesses license fees, liquor and tobacco stamps, real and personal property taxes (such as taxes on real estate, motor vehicles, machinery, equipment, and inventories), and special assessments paid to government agencies. EXCLUDE income, sales, payroll, excise taxes (other than for liquor and tobacco stamps), and other taxes collected from customers and paid to local, State, or Federal government agencies. Also, exclude the cost of computer software purchased under licensing agreements, and license fees paid to other than government agencies.</p> <p>697 1 <input type="checkbox"/> Yes – Report payments for taxes and license fees</p> <p> 2 <input type="checkbox"/> No</p> <table border="1" style="float: right; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 30px;">Mil.</td> <td style="width: 30px;">Thou.</td> <td style="width: 30px;">Dol.</td> </tr> <tr> <td>698</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Mil.	Thou.	Dol.	698					
Mil.	Thou.	Dol.																	
696																			
Mil.	Thou.	Dol.																	
698																			
<p>p. Total SELECTED PURCHASED SERVICES and EXPENSES of this establishment in 1997. SUM LINES – 15a, 15b(3), 15c, 15d(3), and 15e through 15o. Exclude payroll expenses reported in item 6.</p>																			
<table border="1" style="float: right; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 30px;">Mil.</td> <td style="width: 30px;">Thou.</td> <td style="width: 30px;">Dol.</td> </tr> <tr> <td>699</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		Mil.	Thou.	Dol.	699														
Mil.	Thou.	Dol.																	
699																			

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

Item 16. 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