



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-5909

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

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 5. PAYROLL
Payroll in 1997, BEFORE DEDUCTIONS

Mil. Thou. Dol.

030

a. Annual

031

b. First quarter (January-March)

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

Camera and photographic supply store 5946001

Radio, TV, stereo, and other electronics store 5731201

Gift, novelty, and souvenir store 5947001

Photographic studio (portrait) 7221001

Photofinishing (film developing) laboratory, except "one-hour" lab 7384101

"One-hour" photofinishing laboratory 7384201

Other kind of business - Describe 7777777

ITEM 7 CONTINUED ON PAGE 2

Item 7. KIND OF BUSINESS AND SELLING CHARACTERISTICS - Continued

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)

239

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

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. Photographic equipment and supplies (Report photofinishing on line 12c or 12d and rental receipts on line 12e)	230 0440	231			232
2. Audio equipment, musical instruments, and supplies (Include radios, stereos, compact discs, records, tapes, sheet music, accessories. Report parts installed in repair on line 12a and rental receipts on line 12e.)	0330				
3. Televisions, video recorders, video cameras, video tapes, etc. (Include parts and accessories. Report video games on line 8, rentals on line 12e, and parts installed in repair on line 12a.)	0320				

Merchandise lines	Cen-sus use	ESTIMATES are acceptable. Report dollars OR percents.			
		Mil.	Thou.	Dol.	Per-cent
4. Computer hardware, software, and supplies (Report computer-related furniture, office supplies, and office equipment, such as calculators, adding machines, copiers, fax machines, etc., on line 11)	0370				
5. Kitchenware and homefurnishings (include cookware, dinnerware, clocks, pictures, frames, mirrors, bathroom accessories, etc.)	0380				
6. Greeting cards	0855				
7. Books (Report audio tape books on line 2 and comic books on line 11)	0420				
8. Toys, hobby goods, and games	0460				
9. Jewelry (include watches, watch attachments, novelty jewelry, etc.)	0400				
10. Optical goods (include eyeglasses, contact lenses, sunglasses, etc.)	0490				
11. All other merchandise (Report receipts for services on line 12)	9810				
<i>Specify principal lines and estimated sales below</i>					
a. _____	076 9811				
b. _____	077 9812				
c. _____	078 9813				
12. 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. Labor charges for work performed by this establishment	9904				
c. Receipts from photofinishing performed by this establishment	9917				
d. Receipts from photofinishing contracted out to other establishments	9918				
e. Rental or lease of equipment	9928				
f. All other nonmerchandise receipts	9962				
g. Sum of lines 12a through 12f	9900				
13. TOTAL (Should equal item 4 if reporting in dollars)	9990				100%

Item 11. SPECIAL INQUIRIES

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?

248 1 Yes
2 No

Item 12. Not applicable to this report

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

Census File Number

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 Individual owner (sole proprietorship)
- 2 Partnership
- 3 Cooperative association (taxable)
- 4 Cooperative association (tax-exempt)
- 5 Government - Specify _____
- 0 Corporation (Do not mark if any form of cooperative association)
- 9 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 Yes - Complete this item
- 2 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 Yes →
- 2 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 Yes →
- 2 No

EIN (9 digits)

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?

Number
079

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.

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

RT