



2002 ECONOMIC CENSUS

MUSEUMS, ART GALLERIES, BOTANICAL AND ZOOLOGICAL GARDENS

OMB No. 0607-0887: Approval Expires 09/30/2004

DUE DATE
FEBRUARY 12, 2003

Mail your completed form to:
U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47134-0001

Please read the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

Visit our Web site at www.census.gov/econhelp

Call 1-800-233-6136, between 8:00 a.m. and 8:00 p.m., Eastern time, Monday through Friday.

- OR -

Write to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

AE-71201

**INFORMATION COPY
DO NOT USE TO REPORT**

(Please correct any errors in this mailing address.)

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 U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ink.
- Do not use pencil.
- Place an "X" inside the box.
- Please center numbers in their respective boxes. Examples:
- Do not put slashes through 0 or 7.

<input checked="" type="checkbox"/>	0	1	2	3	4	5	6	7	8	9
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The reporting unit for this form is an establishment. An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

1 MONTHS IN OPERATION

Number of months in operation during 2002 (If none, mark "X" and go to 29.) 0002

2002	
Number of months	

Mark "X" if None

2 EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2002 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021 Yes 0022 No - Enter current EIN (9 digits) → 0025

3 PHYSICAL LOCATION

A. Is this establishment's physical location the same as shown in the mailing address? (P.O. box and rural route addresses are not physical locations.)

0031 Yes

0032 No - Enter physical location →

0035 Number and street		
0036 City, town, village, etc.	0037 State	0038 ZIP Code

B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?

0041 Yes 0042 No 0043 No legal boundaries 0044 Do not know

C. Type of municipality where this establishment is physically located

0046 City, village, or borough 0047 Town or township 0048 Other or do not know

71201016

HOW TO REPORT DOLLAR FIGURES

Dollar figures should be rounded to thousands of dollars.

If a figure is \$1,025,628.79:

If a value is "0" (or less than \$500.00):

Mark "X" if None

2002

\$ Mil. Thou. Dol.

1 0 2 6

Report

Report

4 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Tax Status

1. Is this establishment operated on a not-for-profit basis?

0106 Yes - Go to line A2 0107 No - Complete line B

2. Was all or part of the income of this establishment or organization exempt from Federal income taxes under section 501 of the Internal Revenue Code?

0103 Yes - Complete line C 0104 No - Complete line B

Mark "X" if None

2002

\$ Mil. Thou. Dol.

B. Operating receipts of this (taxable) establishment 0100

C. Revenue and expenses of this (tax-exempt) establishment

1. Revenue 0101

2. Expenses (Include payroll). 0140

5 E-COMMERCE SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Did this establishment have any e-commerce sales, receipts, and/or revenue in 2002? (E-commerce includes sales, receipts, and/or revenue from any transaction completed over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system. Transactions are agreements between buyers and sellers to transfer ownership of, or rights to use, goods or services. Payment for these goods or services may or may not be made online. Please see the information sheet(s) for further clarification.)

0181 Yes - Go to line B

0182 No - Go to 6

2002

Estimates are acceptable

\$ Mil. Thou. Dol.

B. E-commerce sales, receipts, and/or revenue of this establishment (Include e-commerce sales, receipts, and/or revenue in 4. Exclude sales taxes.) 0185

6 EMPLOYMENT AND PAYROLL

Include:

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in 2.

Exclude:

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Temporary staffing obtained from a staffing service.

For further clarification, see information sheet(s).

Mark "X" if None

2002

Number

A. Number of employees for pay period including March 12 0320

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

Mark "X" if None

2002

\$ Mil. Thou. Dol.

1. Annual payroll 0300

2. First quarter payroll (January-March, 2002). 0310

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

7 LEASED EMPLOYMENT AND PAYROLL

A. Did this establishment have any full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN?

Exclude:

- Temporary staffing obtained from a staffing service.
- Contractors, subcontractors, or independent contractors.
- Purchased or managed services, such as janitorial, guard, or landscape services.
- Professional or technical services purchased from another firm, such as software consulting, computer programming, engineering, or accounting services.
- Employees already reported in **6**.

For further clarification, see information sheet(s).

0241 Yes - Go to line B

0242 No - Go to **13**

Mark "X" if None

2002		
Number		

B. Number of leased employees for pay period including March 12. 0370

C. Payroll for leased employees before deductions (Exclude employer's cost for fringe benefits.)

1. Annual payroll for leased employees 0350

2002		
\$ Mil.	Thou.	Dol.

2. First quarter payroll for leased employees (January-March, 2002) 0360

Mark "X" if None

2002		
\$ Mil.	Thou.	Dol.

8-17 Not Applicable.

18 KIND OF BUSINESS OR ACTIVITY

Principal kind of business or activity in 2002
(Mark "X" only ONE box.)

Museums and art galleries

- 0700 712 110 00 15 Museums
- 712 110 00 23 Art galleries or exhibitors with receipts primarily from admissions, contributions, and/or grants
- 453 920 00 24 Art gallery with receipts primarily from sales or commissions on sales of artwork
- 813 410 40 36 Art councils

Botanical and zoological gardens

- 712 130 00 11 Arboretum and botanical gardens
- 712 130 00 29 Zoo/zoological gardens
- 712 130 00 37 Aquariums
- 712 130 00 45 Other live animal, reptile, or plant exhibits, including wild animal parks

CONTINUE WITH **13** ON PAGE 4

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18 KIND OF BUSINESS OR ACTIVITY - Continued

Other attractions or exhibits

- 0700 712 110 00 31 Planetaria and observatories
- 712 120 00 13 Historic and heritage sites
- 712 190 00 18 Wildlife sanctuaries or preserves, including bird sanctuaries
- 712 190 00 26 Conservation areas, nature parks, or preserves
- 712 190 00 42 Caverns, natural wonders, and similar tourist attractions
- 777 710 00 12 Other - *Specify* ↴

0701

Other kind of business or activity

- 773 000 00 28 Other kind of business or activity - *Specify* ↴

0701

19-21 Not Applicable.

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report receipts or revenue by source (reported in 4) in dollar figures. See HOW TO REPORT DOLLAR FIGURES on page 2. Do not combine data for two or more receipts or revenue lines. Both taxable and tax-exempt establishments should complete all applicable lines.)

Line 1 - Report amounts received from admission fees, exclusive of any State or local taxes.

Line 4 - Include amounts received from the sale of food, refreshments, and alcoholic beverages. Exclude all sales taxes. This establishment's share of sales of concessions operated by others should be reported on line 8.

Line 8 - Include amounts received from the use of facilities; fees from parking; income from operation of schools, classes, training facilities, etc.; income from concessions or coin-operated machines operated by others on these premises; income from advertising and endorsements; income from rental of facilities; other receipts from patrons and customers; and contract fees not reported on lines 1 and 2, and include all receipts from sources not separately identified on other lines. Do not include items listed in lines 10 through 13.

Line 10 - Report grants, contributions, and other support, whether or not restricted against use for operations. Include funds received from benefits, performances, and other fund-raising events, as well as any donations made for admissions. Report membership dues on line 2.

Line 11 - Report amounts received from interest and dividends. Exclude amounts transferred to operating funds from capital or reserve funds, and proceeds from the sale of investments, real estate, or other assets.

Description of sales, shipments, receipts, or revenue	Cen- sus use	2002		
		Estimates are acceptable		
		\$ Mil.	Thou.	Dol.
0723	0720	0721		
1. Admissions, excluding admission taxes	30500			
2. Membership dues	30400			
3. Sales of programs	30570			
4. Sales of food and beverages				
a. Sales of food and nonalcoholic beverages	39201			
b. Sales of alcoholic beverages	39202			
c. Sum lines 4a and 4b	39200			

CONTINUE WITH 22 ON PAGE 5

71201040

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued

Description of sales, shipments, receipts, or revenue	Census use	2002		
		Estimates are acceptable		
		\$ Mil.	Thou.	Dol.
0723	0720	0721		
5. Sales of other merchandise	39016			
6. Rental fees for the use of facilities, for example, receptions held in galleries, museums, or historical sites	30670			
7. Amounts received from royalties, licensing fees, and residual fees from literary works, musical recordings and compositions, filmed entertainment, or other cultural works	30540			
8. All other operating receipts - Specify if more than 10 percent of total receipts or revenue	39511			
9. OPERATING RECEIPTS - For taxable establishments, sum of preceding lines should equal ④, line B	39690			
10. Contributions, gifts, and grants				
a. Government	39700			
b. Private	39710			
11. Investment income, including interest and dividends	39720			
12. Gains (losses) from assets sold (Report losses by including a dash prior to the dollar amount.)	39730			
13. All other revenue - Specify if more than 10 percent of total receipts or revenue	39909			
14. TOTAL REVENUE - For tax-exempt establishments, sum of lines should equal ④, line C1	39990			

23-28 Not Applicable.

29 OPERATIONAL STATUS

Activity that best describes this establishment's status at the end of 2002 (Mark "X" only ONE box.)

- 0011 In operation
- 0013 Temporarily or seasonally inactive
- 0014 Ceased operation - Give date at right
- 0015 Sold or leased to another operator - Give date at right AND enter new name and mailing address below

0018	Month	Day	Year

0060 Name of new owner or operator	0061 Employer Identification Number		
	Enter EIN of new owner (9 digits) →		
0062 Mailing address (number and street, P.O. Box, etc.)			
0063 City, town, village, etc.	0064 State	0065 ZIP Code	

71201057

Remarks (Please use this space for any explanations that may be essential in understanding your reported data.)

30 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

Is the time period covered by this report a calendar year?

0078 Yes 0079 No - Enter time period covered →

FROM 0070	Month	Year	TO 0071	Month	Year

0072 Name of person to contact regarding this report 0073 Title

Telephone 0074	Area code	Number		Extension	Fax 0075	Area code	Number	
		-					-	

0076 Internet e-mail address Date completed 0069 Month Day Year

Thank you for completing your 2002 Economic Census form.
PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

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