

Attachment D-18

**Department of Commerce
United States Census Bureau
OMB Information Collection Request
2017 Economic Census
OMB Control Number 0607-XXXX**

**Draft Previews of Standard, Consolidated, and Classification Questionnaires
Sector 81**

Attachment	Sector	Instrument Path	Instrument Path Title
D-18	81	81210	Personal Care Services
		81230	Drycleaning and Laundry Services
		8127X	Parking Lots and Garages (Enterprise Support)
		81349	Civic, Social, and Other Membership Organizations

DEFINITION OF ESTABLISHMENT

The reporting unit for this questionnaire is an **establishment**. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed.

MAILING ADDRESS

Please update the mailing address if needed.

ATTN
RECORD_ATTN_TXT

Name 1
RECORD_NAME1

Store/Plant
RECORD_STOR

Name 2
RECORD_NAME2

Number and Street
ADDR_STREET

City, town, village, etc.
ADDR_CITY

State
Select State or Territory

ZIP Code
ADDR_ZIP

PHYSICAL LOCATION

Please update the physical location if needed.
(P.O. Box and rural route addresses are not physical locations.)

Number and Street
PHYSLOC_ADDR_STREET

City, town, village, etc.
PHYSLOC_ADDR_CITY

State
Select State or Territory

ZIP Code
PHYSLOC_A

For Census Bureau Use Only

CFN
RECORD_CFN

ELECTRONIC_B

LEGAL BOUNDARY AND MUNICIPALITY

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

- Yes
- No
- No legal boundaries
- Do not know

In what type of municipality is this establishment physically located?

- City, village, or borough
- Town or township
- Other
- Do not know

Item 1: Employer Identification Number

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) used on this establishment's latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

- Yes
- No

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

What is this establishment's 9-digit Employer Identification Number (EIN) used on its latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

EIN
<input type="text"/>

ADDITIONAL REPORTING GUIDELINES

GENERAL INSTRUCTIONS

- Please report information for each establishment owned or controlled by the company or organization.
- Each report form should cover calendar year 2017. If book figures are not available, **estimates are acceptable**. If your fiscal year covers at least 10 months of calendar year 2017, you may report all items except payroll on a fiscal year basis. Calendar year figures for payroll should be available from your Internal Revenue Service (IRS) Form 941, Employer's Quarterly Federal Tax Return, or Form 944, Employer's Annual Federal Tax Return. Indicate the exact dates covered when the report form(s) is submitted.

How to Report Dollar Figures:

Dollar figures should be rounded to thousands of dollars

EXAMPLE: If a dollar figure is \$2,036,355.25

Report	Check if None	2017
	<input type="checkbox"/>	\$ 2036 ,000.00

EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

Report	Check if None	2017
	<input checked="" type="checkbox"/>	\$,000.00

How to Report Percents:

Percents should be **rounded to whole** percents

EXAMPLE: If figure is 38.76% of total sales

Report	2017
	39 %

ITEM 2A: OWNERSHIP OR CONTROL

Is your company owned or controlled by another domestic company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - VOTING STOCK VALIDATION

Does another domestic company own more than 50 percent of the voting stock of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - MANAGEMENT AND POLICY

Does another domestic company have the power to control the management and policies of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - PERCENT OF VOTING STOCK HELD

What percent of voting stock was held by the owning or controlling company?

- Less than 50%
- 50%

ITEM 2A: OWNERSHIP OR CONTROL - COMPANY INFORMATION

What is the name, address, and 9-digit Employer Identification Number (EIN) of the owning or controlling company?

Name of owning or controlling company

Home office address (Number and street)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

ITEM 2B: NUMBER OF ESTABLISHMENTS - MORE THAN ONE LOCATION

Does your company operate in more than one location?

- Yes
- No

Item 2B: Number of Establishments

ITEM 2B: NUMBER OF ESTABLISHMENTS

How many establishments operated under EIN at the end of 2017?

2017

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENTS OF THIS COMPANY

This company owns and operates establishments under EIN at the end of 2017.

- Use the 'Add Establishment' button to add ALL establishments in the company and their respective data.
- Provide the headquarters location first, then all the other locations.
- Data for establishments operated during 2017, but not in operation at the end of the year, should be included with the headquarters location.
- Please ensure all establishments of this company are listed below with one establishment per row.
- Use the 'Edit' button on each row to update the location's physical address or other information.

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENT INFORMATION

Name

Secondary Name

Store/Plant Number

Number and Street

City, town, village, etc.

State

ZIP Code

Describe kind of business at this location

For employees that worked at more than one location, report the employment and payroll data for employees at the ONE location where they spent most of their working time.

Number of Employees for Pay Period including March 12

2017 Number

First Quarter Payroll
 (Jan - March 2017)

2017
 \$,000.00

Annual Payroll

2017
 \$,000.00

Sales, Shipments, Receipts, or Revenue

2017
 \$,000.00

ITEM 2B: NUMBER OF ESTABLISHMENTS - CONSOLIDATING DATA INSTRUCTIONS

Consolidating Data for EIN :

- Add the values reported in Sales, Shipments, Receipts, or Revenue for all establishments of the EIN and report the combined total in the questions for **Item 5**, Sales, Shipments, Receipts, or Revenue and **Item 22**, Detail of Sales, Shipments, Receipts, or Revenue that follow.
- Add the values reported in Employment, First Quarter Payroll, and Annual Payroll for all establishments of the EIN and report the combined totals in the question for **Item 7**, Employment and Payroll that follows.
- Report combined data for all other questions that follow.

ITEM 3: OPERATIONAL STATUS

Which of the following best describes this establishment's operational status at the end of 2017?

- In operation
- Temporarily or seasonally inactive
- Ceased operation
- Sold or leased to another operator
- Other


Describe

Item 3: Operational Status - Ceased Operation Date

ITEM 3: OPERATIONAL STATUS - CEASED OPERATION DATE


When did this establishment cease operation?

MMDDYYYY



ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE AND INFORMATION

When was this establishment sold or leased to another operator?

MMDDYYYY
 

What is the name, address, and 9-digit Employer Identification Number (EIN) of this establishment's new owner or operator?

Name of new owner/operator

Mailing Address (Number and Street, P.O. Box, etc.)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

Item 4: Months in Operation

ITEM 4: MONTHS IN OPERATION

What was the number of months in operation during 2017?

Check
if
None

2017
Number

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

What were the total operating receipts? (Beauty shops and barber shops should include rents from leased stations/booths.)

Check
if
None

2017
\$,000.00

ITEM 7: 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) in **Item 1**

Exclude:

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

For further clarification, click the "Additional Information" link above.

A. Employment

What was the number of employees for pay period including March 12?

Check if None	2017
	<input type="text"/>

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

Check if None	2017
	\$ <input type="text"/> ,000.00

2. What was the first quarter payroll (January-March 2017)?

Check if None	2017
<input type="checkbox"/>	\$ <input type="text"/> ,000.00

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017?
If none of the provided selections seem appropriate, provide a specific description of the primary business activity.
Select only ONE.

Barber, beautician, and nail care services

- 812112 001 Beauty shop or hair salon
- 812113 001 Nail salon
- 812112 002 Unisex hair shop, including combined beauty/barber shop
- 812112 004 Day spa, including hair services
- 812111 001 Barber shop
- 812199 007 Day spa, excluding hair services
- 812112 005 Skin care (i.e., esthetician) services
- 812112 003 Facial salon
- 611511 001 Cosmetology or beauty school and barber college or school

Other personal care and appearance services

- 812199 002 Tanning salon
- 621399 007 Massage therapist(s) - NCTMB (Nationally Certified in Therapeutic Massage and Bodywork)
- 812199 001 Massage salon
- 812199 006 Hair replacement services, excluding services performed by a physician
- 812199 005 Tattoo parlor
- 812199 004 Hair removal services, including electrolysis, laser removal, and waxing
- 812199 003 Sauna, steam bath, or Turkish bath
- 812191 001 Diet or weight reducing center, excluding physical fitness facilities
- 713940 905 Physical fitness, strength development, or weight training center

Other principal business or activity

- 773000 002 Other principal business or activity - Describe

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS OR REVENUEOf the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included?**Select ALL that apply.**

1. Hair care services More	<input type="checkbox"/>	7005025000
a. Permanent hair texture modification	<input type="checkbox"/>	7005025003
b. Hair coloring and tinting	<input type="checkbox"/>	7005025006
c. Hair cut and styling services	<input type="checkbox"/>	7005025009
d. Other hair care services	<input type="checkbox"/>	7005025012
2. Nail care services	<input type="checkbox"/>	7005050000
a. Manicure services	<input type="checkbox"/>	7005050003
b. Pedicure services	<input type="checkbox"/>	7005050006
c. Other nail care services	<input type="checkbox"/>	7005050009
3. Skin care services	<input type="checkbox"/>	7005075000
a. Facial services	<input type="checkbox"/>	7005075009
b. Masks and body wrap services	<input type="checkbox"/>	7005075012
c. Temporary makeup services	<input type="checkbox"/>	7005075003
d. Permanent makeup services	<input type="checkbox"/>	7005075006
e. Other skin care services	<input type="checkbox"/>	7005075015
4. Hair removal services	<input type="checkbox"/>	7005100000
a. Permanent hair removal services	<input type="checkbox"/>	7005100003
b. Temporary hair removal services	<input type="checkbox"/>	7005100006
5. Non-therapeutic massage services	<input type="checkbox"/>	7005125000
6. Therapeutic massage services Include sports massage therapy.	<input type="checkbox"/>	7004925000
7. Tattoo, tanning and other body modification services More	<input type="checkbox"/>	7005150000

a. Tanning services	<input type="checkbox"/>	7005150003
b. Tattoo services	<input type="checkbox"/>	7005150006
c. Tattoo removal services	<input type="checkbox"/>	7005150009
d. Piercing services	<input type="checkbox"/>	7005150012
e. Other body modification services	<input type="checkbox"/>	7005150015
8. Rental and leasing of commercial space	<input type="checkbox"/>	7006375000
a. Rental and leasing of retail space in shopping malls	<input type="checkbox"/>	7006375003
b. Rental and leasing of food service space in shopping malls	<input type="checkbox"/>	7006375006
c. Rental and leasing of retail space in free-standing locations	<input type="checkbox"/>	7006375009
d. Rental and leasing of food service space in free-standing locations	<input type="checkbox"/>	7006375012
e. Rental and leasing of booths and chairs in beauty and personal care establishments	<input type="checkbox"/>	7006375015
f. Rental and leasing of other commercial space	<input type="checkbox"/>	7006375018
9. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	<input type="checkbox"/>	7006575000
10. Weight loss services More	<input type="checkbox"/>	7005175000
a. Non-medical weight loss programs	<input type="checkbox"/>	7005175003
b. Non-medical diet management services	<input type="checkbox"/>	7005175006
11. Fitness evaluation and personal fitness training services	<input type="checkbox"/>	7002100000
12. Trade, career, technical and professional development training programs (such as seminars and courses on beauty and personal care)	<input type="checkbox"/>	7003950000
13. Leisure, recreational, and athletic instructional programs Include exercise instructional programs.	<input type="checkbox"/>	7002500000
14. Retail sales of medicines, vitamins, minerals, and supplements	<input type="checkbox"/>	5001350000
15. Retail sales of cosmetics and fragrances	<input type="checkbox"/>	5001450000
16. Retail sales of personal hygiene supplies	<input type="checkbox"/>	5001425000
17. Retail sales of small household appliances, including mixers; blenders; can openers; toasters; coffee makers; frypans; personal care appliances, such as hair dryers, curling irons, and shavers; tap water purifiers and filters; etc.	<input type="checkbox"/>	5000725000
18. Other personal services, including access to public saunas and Turkish baths	<input type="checkbox"/>	7002560000



Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

Of the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service?

Description	Value	Product Code
1. Hair care services More		
a. Permanent hair texture modification	\$ <input type="text"/> ,000.00	7005025003
b. Hair coloring and tinting	\$ <input type="text"/> ,000.00	7005025006
c. Hair cut and styling services	\$ <input type="text"/> ,000.00	7005025009
d. Other hair care services	\$ <input type="text"/> ,000.00	7005025012
Subtotal	\$ <input type="text"/> ,000.00	7005025000
2. Nail care services		
a. Manicure services	\$ <input type="text"/> ,000.00	7005050003
b. Pedicure services	\$ <input type="text"/> ,000.00	7005050006
c. Other nail care services	\$ <input type="text"/> ,000.00	7005050009
Subtotal	\$ <input type="text"/> ,000.00	7005050000
3. Skin care services		
a. Facial services	\$ <input type="text"/> ,000.00	7005075009
b. Masks and body wrap services	\$ <input type="text"/> ,000.00	7005075012
c. Temporary makeup services	\$ <input type="text"/> ,000.00	7005075003
d. Permanent makeup services	\$ <input type="text"/> ,000.00	7005075006
e. Other skin care services	\$ <input type="text"/> ,000.00	7005075015
Subtotal	\$ <input type="text"/> ,000.00	7005075000
4. Hair removal services		
a. Permanent hair removal services	\$ <input type="text"/> ,000.00	7005100003
b. Temporary hair removal services	\$ <input type="text"/> ,000.00	7005100006
Subtotal	\$ <input type="text"/> ,000.00	7005100000
5. Non-therapeutic massage services	\$ <input type="text"/> ,000.00	7005125000
6. Therapeutic massage services Include sports massage therapy.	\$ <input type="text"/> ,000.00	7004925000

7. Tattoo, tanning and other body modification services [More](#)

a. Tanning services	\$,000.00	7005150003
b. Tattoo services	\$,000.00	7005150006
c. Tattoo removal services	\$,000.00	7005150009
d. Piercing services	\$,000.00	7005150012
e. Other body modification services	\$,000.00	7005150015
Subtotal	\$,000.00	7005150000

8. Rental and leasing of commercial space

a. Rental and leasing of retail space in shopping malls	\$,000.00	7006375003
b. Rental and leasing of food service space in shopping malls	\$,000.00	7006375006
c. Rental and leasing of retail space in free-standing locations	\$,000.00	7006375009
d. Rental and leasing of food service space in free-standing locations	\$,000.00	7006375012
e. Rental and leasing of booths and chairs in beauty and personal care establishments	\$,000.00	7006375015
f. Rental and leasing of other commercial space	\$,000.00	7006375018
Subtotal	\$,000.00	7006375000

9. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines

\$,000.00	7006575000
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10. Weight loss services [More](#)

a. Non-medical weight loss programs	\$,000.00	7005175003
b. Non-medical diet management services	\$,000.00	7005175006
Subtotal	\$,000.00	7005175000

11. Fitness evaluation and personal fitness training services

\$,000.00	7002100000
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12. Trade, career, technical and professional development training programs (such as seminars and courses on beauty and personal care)

\$,000.00	7003950000
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13. Leisure, recreational, and athletic instructional programs
Include exercise instructional programs.

\$,000.00	7002500000
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14. Retail sales of medicines, vitamins, minerals, and supplements

\$,000.00	5001350000
----	--	---------	------------

15. Retail sales of cosmetics and fragrances

\$,000.00	5001450000
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16. Retail sales of personal hygiene supplies	\$,000.00	5001425000	
17. Retail sales of small household appliances, including mixers; blenders; can openers; toasters; coffee makers; frypans; personal care appliances, such as hair dryers, curling irons, and shavers; tap water purifiers and filters; etc.	\$,000.00	5000725000	
18. Other personal services, including access to public saunas and Turkish baths	\$,000.00	7002560000	
19. All other products and services, not elsewhere classified					
a. All other products and services, not elsewhere classified - write-in #1					
<input type="text" value="Pick one"/>	<input type="text" value="Describe"/>	\$,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2					
<input type="text" value="Pick one"/>	<input type="text" value="Describe"/>	\$,000.00	9000000006
c. All other products and services, not elsewhere classified - write-in #3					
<input type="text" value="Pick one"/>	<input type="text" value="Describe"/>	\$,000.00	9000000009
<input type="button" value="Add Additional Products"/>					
TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5		\$,000.00	9900000000

ITEM 25: FRANCHISE

A. Was this establishment operating under any trademark(s) or brand name(s) authorized by a franchisor in 2017?

- Yes - franchisee-owned establishment
- Yes - franchisor-owned establishment
- No

B. If yes, what was the trademark(s) or brand name(s) operated under?

Describe

ITEM 26: BUSINESS COOPERATIVE

A cooperative is a business or organization owned by, controlled by, and operated for the benefit of members using its services. Members (also known as user-owners) benefit from use of service and product operations and/or earnings generated by the co-op. This includes purchasing co-ops, member/patron organizations, member-controlled non-profits, consumer co-ops, marketing co-ops, worker co-ops, etc.

Is this establishment a cooperative?

Yes

No

Remarks

REMARKS

(Please use this space for any explanations that may be essential in understanding your reported data.) Maximum length is 1,000 characters.

You have

1000

characters left.

DEFINITION OF ESTABLISHMENT

The reporting unit for this questionnaire is an **establishment**. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed.

MAILING ADDRESS

Please update the mailing address if needed.

ATTN
RECORD_ATTN_TXT

Name 1
RECORD_NAME1

Store/Plant
RECORD_STOR

Name 2
RECORD_NAME2

Number and Street
ADDR_STREET

City, town, village, etc.
ADDR_CITY

State
Select State or Territory

ZIP Code
ADDR_ZIP

PHYSICAL LOCATION

Please update the physical location if needed.
(P.O. Box and rural route addresses are not physical locations.)

Number and Street
PHYSLOC_ADDR_STREET

City, town, village, etc.
PHYSLOC_ADDR_CITY

State
Select State or Territory

ZIP Code
PHYSLOC_A

For Census Bureau Use Only

CFN
RECORD_CFN

ELECTRONIC_B

LEGAL BOUNDARY AND MUNICIPALITY

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

- Yes
- No
- No legal boundaries
- Do not know

In what type of municipality is this establishment physically located?

- City, village, or borough
- Town or township
- Other
- Do not know

Item 1: Employer Identification Number

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) used on this establishment's latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

- Yes
- No

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

What is this establishment's 9-digit Employer Identification Number (EIN) used on its latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

EIN
<input type="text"/>

ADDITIONAL REPORTING GUIDELINES

GENERAL INSTRUCTIONS

- Please report information for each establishment owned or controlled by the company or organization.
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Dollar figures should be rounded to thousands of dollars

EXAMPLE: If a dollar figure is \$2,036,355.25

Report	Check if None	2017
	<input type="checkbox"/>	\$ 2036 ,000.00

EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

Report	Check if None	2017
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How to Report Percents:

Percents should be **rounded to whole** percents

EXAMPLE: If figure is 38.76% of total sales

Report	2017
	39 %

ITEM 2A: OWNERSHIP OR CONTROL

Is your company owned or controlled by another domestic company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - VOTING STOCK VALIDATION

Does another domestic company own more than 50 percent of the voting stock of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - MANAGEMENT AND POLICY

Does another domestic company have the power to control the management and policies of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - PERCENT OF VOTING STOCK HELD

What percent of voting stock was held by the owning or controlling company?

- Less than 50%
- 50%

ITEM 2A: OWNERSHIP OR CONTROL - COMPANY INFORMATION

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Name of owning or controlling company

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City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

ITEM 2B: NUMBER OF ESTABLISHMENTS - MORE THAN ONE LOCATION

Does your company operate in more than one location?

- Yes
- No

Item 2B: Number of Establishments

ITEM 2B: NUMBER OF ESTABLISHMENTS

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2017

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENTS OF THIS COMPANY

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- Use the 'Add Establishment' button to add ALL establishments in the company and their respective data.
- Provide the headquarters location first, then all the other locations.
- Data for establishments operated during 2017, but not in operation at the end of the year, should be included with the headquarters location.
- Please ensure all establishments of this company are listed below with one establishment per row.
- Use the 'Edit' button on each row to update the location's physical address or other information.
- Do not consider branch locations of laundries and drycleaners (including industrial, linen, and diaper supply) that are only providing pick-up and distribution of finished work as separate establishments. Data for these locations should be included with the plant in which the work is actually done.

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENT INFORMATION

Name

Secondary Name

Store/Plant Number

Number and Street

City, town, village, etc.

State

ZIP Code

Describe kind of business at this location

For employees that worked at more than one location, report the employment and payroll data for employees at the ONE location where they spent most of their working time.

Number of Employees for Pay Period including March 12

2017 Number

First Quarter Payroll
 (Jan - March 2017)

2017
 \$,000.00

Annual Payroll

2017
 \$,000.00

Sales, Shipments, Receipts, or Revenue

2017
 \$,000.00

ITEM 2B: NUMBER OF ESTABLISHMENTS - CONSOLIDATING DATA INSTRUCTIONS

Consolidating Data for EIN :

- Add the values reported in Sales, Shipments, Receipts, or Revenue for all establishments of the EIN and report the combined total in the questions for **Item 5**, Sales, Shipments, Receipts, or Revenue and **Item 22**, Detail of Sales, Shipments, Receipts, or Revenue that follow.
- Add the values reported in Employment, First Quarter Payroll, and Annual Payroll for all establishments of the EIN and report the combined totals in the question for **Item 7**, Employment and Payroll that follows.
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Which of the following best describes this establishment's operational status at the end of 2017?

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Describe

Item 3: Operational Status - Ceased Operation Date

ITEM 3: OPERATIONAL STATUS - CEASED OPERATION DATE


When did this establishment cease operation?

MMDDYYYY



ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE AND INFORMATION

When was this establishment sold or leased to another operator?

MMDDYYYY
 

What is the name, address, and 9-digit Employer Identification Number (EIN) of this establishment's new owner or operator?

Name of new owner/operator

Mailing Address (Number and Street, P.O. Box, etc.)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

Item 4: Months in Operation

ITEM 4: MONTHS IN OPERATION

What was the number of months in operation during 2017?

Check
if
None

2017
Number

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

What were the total operating receipts?

Check
if
None

2017
\$,000.00

ITEM 7: 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) in **Item 1**

Exclude:

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

For further clarification, click the "Additional Information" link above.

A. Employment

What was the number of employees for pay period including March 12?

Check if None	2017
	<input type="text"/>

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

Check if None	2017
	\$ <input style="width: 100px;" type="text"/> ,000.00

2. What was the first quarter payroll (January-March 2017)?

Check if None	2017
	\$ <input style="width: 100px;" type="text"/> ,000.00

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017?
 If none of the provided selections seem appropriate, provide a specific description of the primary business activity.
Select only ONE.

Laundry and drycleaning services

- 812310 201 Self-service laundry and/or drycleaning store
- 812310 101 Coin-operated laundry washing machine route, including service provided in apartments, dormitories, etc.
- 812320 201 Drycleaning services, excluding rug cleaning
- 561740 001 Carpet, rug, and upholstery cleaning services
- 812320 101 Commercial or family laundry services
- 812331 001 Linen supply services on a rental or contract basis
- 812332 001 Industrial laundry services on a rental or contract basis
- 812320 301 Drop off/pick up site or garment pressing, including laundry or cleaning done by others
- 812320 302 Retail agent for laundries and drycleaners (work done by others)
- 812320 303 Wash and fold services
- 812320 401 Leather and/or fur cleaning services

Other clothing and fabric services

- 811490 402 Garment alteration or repair services
- 811430 001 Shoe and leather goods repair

Other principal business or activity

- 811192 001 Carwash
- 773000 001 Other principal business or activity - Describe

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS OR REVENUEOf the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included?**Select ALL that apply.**

1. Access to laundry machines More	<input type="checkbox"/>	7000100000
a. Access to washing machines	<input type="checkbox"/>	7000100003
b. Access to drying machines	<input type="checkbox"/>	7000100006
c. Access to dry-cleaning machines	<input type="checkbox"/>	7000100009
2. Dry-cleaning services More	<input type="checkbox"/>	7000150000
a. General dry-cleaning services	<input type="checkbox"/>	7000150003
b. Specialty dry-cleaning services	<input type="checkbox"/>	7000150006
3. Commercial laundry services More	<input type="checkbox"/>	7017250000
4. Non-commercial laundry services	<input type="checkbox"/>	7000125000
5. Laundry and dry-cleaning agency services More	<input type="checkbox"/>	7017275000
a. Laundry agency services	<input type="checkbox"/>	7017275003
b. Dry-cleaning agency services	<input type="checkbox"/>	7017275006
6. Uniform rental and linen supply services	<input type="checkbox"/>	7017300000
a. Garments supply, including gowns, coats, aprons, etc.	<input type="checkbox"/>	7017300003
b. Flatwork and full dry linens supply	<input type="checkbox"/>	7017300006
c. Industrial garments supply, excluding 'clean room' garments	<input type="checkbox"/>	7017300009
d. Industrial 'clean room' garments supply	<input type="checkbox"/>	7017300012
e. Industrial wiping cloths supply	<input type="checkbox"/>	7017300015
f. Industrial mats supply, including launderable and unlaunderable	<input type="checkbox"/>	7017300018
g. Industrial mops, cloths, and miscellaneous dust control items supply	<input type="checkbox"/>	7017300021
7. Steam pressing and ironing services	<input type="checkbox"/>	7000175000

8. Seasonal apparel and textile storage services	<input type="checkbox"/>	7000225000
9. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	<input type="checkbox"/>	7006575000
10. Maintenance, repair, and alteration services for apparel, footwear, watches, and jewelry More	<input type="checkbox"/>	7000200000
a. Restoration and repair services for garments and textiles	<input type="checkbox"/>	7000200003
b. Garment alteration services	<input type="checkbox"/>	7000200006
c. Footwear maintenance and repair services	<input type="checkbox"/>	7000200009
d. Watch and jewelry maintenance and repair services	<input type="checkbox"/>	7000200012

Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

Of the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service?

Description	Value	Product Code
1. Access to laundry machines More		
a. Access to washing machines	\$ <input type="text"/> ,000.00	7000100003
b. Access to drying machines	\$ <input type="text"/> ,000.00	7000100006
c. Access to dry-cleaning machines	\$ <input type="text"/> ,000.00	7000100009
Subtotal	\$ <input type="text"/> ,000.00	7000100000
2. Dry-cleaning services More		
a. General dry-cleaning services	\$ <input type="text"/> ,000.00	7000150003
b. Specialty dry-cleaning services	\$ <input type="text"/> ,000.00	7000150006
Subtotal	\$ <input type="text"/> ,000.00	7000150000
3. Commercial laundry services More	\$ <input type="text"/> ,000.00	7017250000
4. Non-commercial laundry services	\$ <input type="text"/> ,000.00	7000125000
5. Laundry and dry-cleaning agency services More		
a. Laundry agency services	\$ <input type="text"/> ,000.00	7017275003
b. Dry-cleaning agency services	\$ <input type="text"/> ,000.00	7017275006
Subtotal	\$ <input type="text"/> ,000.00	7017275000
6. Uniform rental and linen supply services		
a. Garments supply, including gowns, coats, aprons, etc.	\$ <input type="text"/> ,000.00	7017300003
b. Flatwork and full dry linens supply	\$ <input type="text"/> ,000.00	7017300006
c. Industrial garments supply, excluding 'clean room' garments	\$ <input type="text"/> ,000.00	7017300009
d. Industrial 'clean room' garments supply	\$ <input type="text"/> ,000.00	7017300012
e. Industrial wiping cloths supply	\$ <input type="text"/> ,000.00	7017300015
f. Industrial mats supply, including launderable and unlaunderable	\$ <input type="text"/> ,000.00	7017300018
g. Industrial mops, cloths, and miscellaneous dust control items supply	\$ <input type="text"/> ,000.00	7017300021
Subtotal	\$ <input type="text"/> ,000.00	7017300000

7. Steam pressing and ironing services	\$,000.00	7000175000
8. Seasonal apparel and textile storage services	\$,000.00	7000225000
9. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	\$,000.00	7006575000
10. Maintenance, repair, and alteration services for apparel, footwear, watches, and jewelry More				
a. Restoration and repair services for garments and textiles	\$,000.00	7000200003
b. Garment alteration services	\$,000.00	7000200006
c. Footwear maintenance and repair services	\$,000.00	7000200009
d. Watch and jewelry maintenance and repair services	\$,000.00	7000200012
Subtotal	\$,000.00	7000200000
11. All other products and services, not elsewhere classified				
a. All other products and services, not elsewhere classified - write-in #1				
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2				
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$,000.00	9000000006
c. All other products and services, not elsewhere classified - write-in #3				
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$,000.00	9000000009
<input type="button" value="Add Additional Products"/>				
TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5	\$,000.00	9900000000

ITEM 25: FRANCHISE

A. Was this establishment operating under any trademark(s) or brand name(s) authorized by a franchisor in 2017?

- Yes - franchisee-owned establishment
- Yes - franchisor-owned establishment
- No

B. If yes, what was the trademark(s) or brand name(s) operated under?

Describe

ITEM 26: BUSINESS COOPERATIVE

A cooperative is a business or organization owned by, controlled by, and operated for the benefit of members using its services. Members (also known as user-owners) benefit from use of service and product operations and/or earnings generated by the co-op. This includes purchasing co-ops, member/patron organizations, member-controlled non-profits, consumer co-ops, marketing co-ops, worker co-ops, etc.

Is this establishment a cooperative?

Yes

No

ITEM 28: SPECIAL INQUIRIES - DRYCLEANING

Was drycleaning work (other than finish work) done at this location?

- Yes
- No

ITEM 28: SPECIAL INQUIRIES - LAUNDRY WORK

Was laundry work (other than finish work) done at this location?

- Yes
- No

Remarks

REMARKS

(Please use this space for any explanations that may be essential in understanding your reported data.) Maximum length is 1,000 characters.

You have

1000

characters left.

DEFINITION OF ESTABLISHMENT

An **establishment** is generally a single physical location where business is conducted or where services or industrial operations are performed. This includes all locations of a company or organization, including administrative offices, warehouses, etc., that were in operation at any time during 2017. Report activity for each establishment on a separate form.

DEFINITION OF AN ENTERPRISE

An **enterprise** or company is a business, service, or membership organization consisting of one or more establishments within the United States under common ownership or control. It includes all establishments of subsidiary companies, where there is more than 50 percent ownership, as well as establishments of firms which the enterprise has the power to direct or cause the direction of management and policies.

DEFINITION OF AN ENTERPRISE SUPPORT ESTABLISHMENT

An **enterprise support establishment** is an establishment that is primarily engaged in performing management, supervision, general administrative functions, and supporting services for other establishments of the same enterprise, rather than for the general public or other business firms.

MAILING ADDRESS

Please update the mailing address if needed.

ATTN
RECORD_ATTN_TXT

Name 1
RECORD_NAME1

Store/Plant
RECORD_STOR

Name 2
RECORD_NAME2

Number and Street
ADDR_STREET

City, town, village, etc.
ADDR_CITY

State
Select State or Territory

ZIP Code
ADDR_ZIP

PHYSICAL LOCATION

Please update the physical location if needed.
(P.O. Box and rural route addresses are not physical locations.)

Number and Street
PHYSLOC_ADDR_STREET

City, town, village, etc.
PHYSLOC_ADDR_CITY

State
Select State or Territory

ZIP Code
PHYSLOC_A

For Census Bureau Use Only

CFN
RECORD_CFN

ELECTRONIC_B

LEGAL BOUNDARY AND MUNICIPALITY

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

- Yes
- No
- No legal boundaries
- Do not know

In what type of municipality is this establishment physically located?

- City, village, or borough
- Town or township
- Other
- Do not know

Item 1: Employer Identification Number

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) used on this establishment's latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

- Yes
- No

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

What is this establishment's 9-digit Employer Identification Number (EIN) used on its latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

EIN
<input type="text"/>

ADDITIONAL REPORTING GUIDELINES

GENERAL INSTRUCTIONS

- Please report information for each establishment owned or controlled by the company or organization.
- Each report form should cover calendar year 2017. If book figures are not available, **estimates are acceptable**. If your fiscal year covers at least 10 months of calendar year 2017, you may report all items except payroll on a fiscal year basis. Calendar year figures for payroll should be available from your Internal Revenue Service (IRS) Form 941, Employer's Quarterly Federal Tax Return, or Form 944, Employer's Annual Federal Tax Return. Indicate the exact dates covered when the report form(s) is submitted.

How to Report Dollar Figures:

Dollar figures should be rounded to thousands of dollars

EXAMPLE: If a dollar figure is \$2,036,355.25

Report	Check if None	2017
	<input type="checkbox"/>	\$ 2036 ,000.00

EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

Report	Check if None	2017
	<input checked="" type="checkbox"/>	\$,000.00

How to Report Percents:

Percents should be **rounded to whole** percents

EXAMPLE: If figure is 38.76% of total sales

Report	2017
	39 %

ITEM 3: OPERATIONAL STATUS

Which of the following best describes this establishment's operational status at the end of 2017?

- In operation
- Temporarily or seasonally inactive
- Ceased operation
- Sold or leased to another operator
- Other


Describe

Item 3: Operational Status - Ceased Operation Date

ITEM 3: OPERATIONAL STATUS - CEASED OPERATION DATE


When did this establishment cease operation?

MMDDYYYY



ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE AND INFORMATION

When was this establishment sold or leased to another operator?

MMDDYYYY
 

What is the name, address, and 9-digit Employer Identification Number (EIN) of this establishment's new owner or operator?

Name of new owner/operator

Mailing Address (Number and Street, P.O. Box, etc.)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

Item 4: Months in Operation

ITEM 4: MONTHS IN OPERATION

What was the number of months in operation during 2017?

Check
if
None

2017
Number

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Sales, Receipts, or Revenue

Include:

- Sales, receipts, or revenue from customers **outside** your enterprise originating from this location.

Exclude:

- Sales, receipts, or revenue from other establishments within your own enterprise.

What were the sales, receipts, or revenue (exclude billings) from customers **outside** your enterprise originating from this location?

Check
if
None

2017
\$,000.00

B. Exported Services

NOTE: An exported service is a product (e.g., service performed, license agreement) that is sold or transferred to, or 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).

Include:

- Products provided to unaffiliated and affiliated foreign firms (e.g., foreign parent firms, subsidiaries, branches)

Exclude:

- Products provided to domestic subsidiaries of foreign firms

What were the receipts or revenue for exported services?

Check
if
None

2017
\$,000.00

ITEM 7: 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) in **Item 1**

Exclude:

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

For further clarification, click the "Additional Information" link above.

A. Employment

What was the number of employees for pay period including March 12?

Check if None	2017
	<input type="text"/>

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

Check if None	2017
	\$ <input type="text"/> ,000.00

2. What was the first quarter payroll (January-March 2017)?

Check if None	2017
	\$ <input type="text"/> ,000.00

Item 8: Support Services

ITEM 8: SUPPORT SERVICES

Was this establishment primarily engaged in providing management, administrative, or support services to other establishments of your enterprise (rather than for the general public or other business firms) in 2017?

- Yes
- No

ITEM 8: SUPPORT SERVICES

PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED

What principal kind of business or activity is performed by the establishments of your enterprise that are managed or serviced by this establishment?

Example: If this establishment is a corporate, subsidiary, or regional managing office, data processing service center, or administrative/support office to a chain of clothing stores, please describe "clothing stores" below.

Describe

ITEM 16: SELECTED EXPENSES

Report the payment of selected expenses allocated by category

- Report payments for expenses directly incurred by this establishment in column 1.
- Report payments made by this establishment for expenses incurred by other establishments of your enterprise in column 2 (where applicable).

Exclude:

- Transfers made within the company
- Capitalized expenses
- Impairment
- Interest
- Bad debt
- Income tax
- Taxes collected from customers (e.g., sales and excise)
- Cost of merchandise for resale

Personnel costs, except payroll

1. Employer's cost for employer paid insurance premiums, pension plans, payroll taxes, and other employee benefits More	<input type="checkbox"/> Check if None	2017 Expenses of this establishment ONLY \$ <input type="text"/> ,000.00
2. Temporary staff and leased employee expense More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

Expensed equipment and materials

3. Expensed computer hardware and other equipment More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
4. Expensed purchases of other materials, parts, and supplies More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

Expensed purchased services

5. Expensed purchases of software More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
6. Purchased electricity More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
7. Purchased fuels (Exclude motor fuels.) More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

8. Data processing and other purchased computer services More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/> Check if None	2017 Payments made by this establishment on behalf of other establishments of your enterprise \$ <input type="text"/> ,000.00
9. Purchased communication services More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
10. Purchased repairs and maintenance to machinery, vehicles, and equipment More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
11. Purchased repairs and maintenance to buildings, structures, and offices More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
12. Water, sewer, refuse removal, and other utility payments More	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

13. Purchased advertising and promotional services More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00
14. Purchased professional and technical services More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00
Other selected expenses				
15. Lease and rental payments for machinery, equipment, and other tangible items More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00
16. Lease and rental payments for land, buildings, structures, store spaces, and offices More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00
17. Governmental taxes and license fees (<i>Exclude sales, excise, and income taxes.</i>) More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00
18. Depreciation and amortization charges More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00		
19. All other selected expenses (Describe - If more than 50% of TOTAL reported on line 20.) More	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00		
Describe				
20. TOTAL SELECTED EXPENSES of this establishment ONLY, excluding payroll (Add lines 1 through 19.)	<input type="checkbox"/>	\$ <input type="text" value=""/> ,000.00		

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017?
If none of the provided selections seem appropriate, provide a specific description of the primary business activity.
Select only ONE.

Automobile parking

812930 001 Parking lot

812930 003 Parking structure and lot at same location

812930 002 Parking structure

812930 004 Parking garage, underground

812930 009 Metered parking

812930 005 Valet parking services

812930 008 Other parking services - Describe

Describe

Other principal business or activity

773000 001 Other principal business or activity - Describe

Describe

ITEM 20: CLASS OF CUSTOMER

Estimate the percentage of receipts (reported in **Item 5**) from services provided to clients outside your enterprise by class of customer.

	2017
1. Business firms and farms	<input type="text"/> %
2. Not-for-profit organizations (Include religious organizations.)	<input type="text"/> %
3. Federal government	<input type="text"/> %
4. State and local governments	<input type="text"/> %
5. Household consumers and individuals	<input type="text"/> %
6. TOTAL (Sum of lines 1 through 5 should equal 100%.)	<input type="text"/> %

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS OR REVENUEOf the **\$,000.00** of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included?**Select ALL that apply.**

1. Parking services	<input type="checkbox"/>	7002750000
a. Off-street parking services, hourly or daily	<input type="checkbox"/>	7002750003
b. Off-street parking services, weekly or monthly, in buildings	<input type="checkbox"/>	7002750006
c. Off-street parking services, weekly or monthly, on lots	<input type="checkbox"/>	7002750009
d. On-street parking services	<input type="checkbox"/>	7002750012
e. Valet parking services	<input type="checkbox"/>	7002750015
2. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	<input type="checkbox"/>	7006575000

Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

Of the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service?

Description	Value	Product Code
1. Parking services		
a. Off-street parking services, hourly or daily	\$ <input type="text"/> ,000.00	7002750003
b. Off-street parking services, weekly or monthly, in buildings	\$ <input type="text"/> ,000.00	7002750006
c. Off-street parking services, weekly or monthly, on lots	\$ <input type="text"/> ,000.00	7002750009
d. On-street parking services	\$ <input type="text"/> ,000.00	7002750012
e. Valet parking services	\$ <input type="text"/> ,000.00	7002750015
Subtotal	\$ <input type="text"/> ,000.00	7002750000
2. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	\$ <input type="text"/> ,000.00	7006575000
3. All other products and services, not elsewhere classified		
a. All other products and services, not elsewhere classified - write-in #1		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000006
c. All other products and services, not elsewhere classified - write-in #3		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000009
<input type="button" value="Add Additional Products"/>		
TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5	\$ <input type="text"/> ,000.00	9900000000

Remarks

REMARKS

(Please use this space for any explanations that may be essential in understanding your reported data.) Maximum length is 1,000 characters.

You have

1000

characters left.

DEFINITION OF ESTABLISHMENT

The reporting unit for this questionnaire is an **establishment**. An establishment is generally a single physical location where business is conducted or where services or industrial operations are performed.

MAILING ADDRESS

Please update the mailing address if needed.

ATTN
RECORD_ATTN_TXT

Name 1
RECORD_NAME1

Store/Plant
RECORD_STOR

Name 2
RECORD_NAME2

Number and Street
ADDR_STREET

City, town, village, etc.
ADDR_CITY

State
Select State or Territory

ZIP Code
ADDR_ZIP

PHYSICAL LOCATION

Please update the physical location if needed.
(P.O. Box and rural route addresses are not physical locations.)

Number and Street
PHYSLOC_ADDR_STREET

City, town, village, etc.
PHYSLOC_ADDR_CITY

State
Select State or Territory

ZIP Code
PHYSLOC_A

For Census Bureau Use Only

CFN
RECORD_CFN

ELECTRONIC_B

LEGAL BOUNDARY AND MUNICIPALITY

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

- Yes
- No
- No legal boundaries
- Do not know

In what type of municipality is this establishment physically located?

- City, village, or borough
- Town or township
- Other
- Do not know

Item 1: Employer Identification Number

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) used on this establishment's latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

- Yes
- No

ITEM 1: EMPLOYER IDENTIFICATION NUMBER

What is this establishment's 9-digit Employer Identification Number (EIN) used on its latest 2017 Internal Revenue Service Form 941, Employer's Federal Quarterly Tax Return?

EIN
<input type="text"/>

ADDITIONAL REPORTING GUIDELINES

GENERAL INSTRUCTIONS

- Please report information for each establishment owned or controlled by the company or organization.
- Each report form should cover calendar year 2017. If book figures are not available, **estimates are acceptable**. If your fiscal year covers at least 10 months of calendar year 2017, you may report all items except payroll on a fiscal year basis. Calendar year figures for payroll should be available from your Internal Revenue Service (IRS) Form 941, Employer's Quarterly Federal Tax Return, or Form 944, Employer's Annual Federal Tax Return. Indicate the exact dates covered when the report form(s) is submitted.

How to Report Dollar Figures:

Dollar figures should be rounded to thousands of dollars

EXAMPLE: If a dollar figure is \$2,036,355.25

Report	Check if None	2017
	<input type="checkbox"/>	\$ 2036 ,000.00

EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

Report	Check if None	2017
	<input checked="" type="checkbox"/>	\$,000.00

How to Report Percents:

Percents should be **rounded to whole** percents

EXAMPLE: If figure is 38.76% of total sales

Report	2017
	39 %

ITEM 2A: OWNERSHIP OR CONTROL

Is your company owned or controlled by another domestic company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - VOTING STOCK VALIDATION

Does another domestic company own more than 50 percent of the voting stock of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - MANAGEMENT AND POLICY

Does another domestic company have the power to control the management and policies of your company?

- Yes
- No

ITEM 2A: OWNERSHIP OR CONTROL - PERCENT OF VOTING STOCK HELD

What percent of voting stock was held by the owning or controlling company?

- Less than 50%
- 50%

ITEM 2A: OWNERSHIP OR CONTROL - COMPANY INFORMATION

What is the name, address, and 9-digit Employer Identification Number (EIN) of the owning or controlling company?

Name of owning or controlling company

Home office address (Number and street)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

ITEM 2B: NUMBER OF ESTABLISHMENTS - MORE THAN ONE LOCATION

Does your company operate in more than one location?

- Yes
- No

Item 2B: Number of Establishments

ITEM 2B: NUMBER OF ESTABLISHMENTS

How many establishments operated under EIN at the end of 2017?

2017

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENTS OF THIS COMPANY

This company owns and operates establishments under EIN at the end of 2017.

- Use the 'Add Establishment' button to add ALL establishments in the company and their respective data.
- Provide the headquarters location first, then all the other locations.
- Data for establishments operated during 2017, but not in operation at the end of the year, should be included with the headquarters location.
- Please ensure all establishments of this company are listed below with one establishment per row.
- Use the 'Edit' button on each row to update the location's physical address or other information.

ITEM 2B: NUMBER OF ESTABLISHMENTS - ESTABLISHMENT INFORMATION

Name

Secondary Name

Store/Plant Number

Number and Street

City, town, village, etc.

State

ZIP Code

Describe kind of business at this location

For employees that worked at more than one location, report the employment and payroll data for employees at the ONE location where they spent most of their working time.

Number of Employees for Pay Period including March 12

2017 Number

First Quarter Payroll
 (Jan - March 2017)

2017
 \$,000.00

Annual Payroll

2017
 \$,000.00

Sales, Shipments, Receipts, or Revenue

2017
 \$,000.00

ITEM 2B: NUMBER OF ESTABLISHMENTS - CONSOLIDATING DATA INSTRUCTIONS

Consolidating Data for EIN :

- Add the values reported in Sales, Shipments, Receipts, or Revenue for all establishments of the EIN and report the combined total in the questions for **Item 5**, Sales, Shipments, Receipts, or Revenue and **Item 22**, Detail of Sales, Shipments, Receipts, or Revenue that follow.
- Add the values reported in Employment, First Quarter Payroll, and Annual Payroll for all establishments of the EIN and report the combined totals in the question for **Item 7**, Employment and Payroll that follows.
- Report combined data for all other questions that follow.

ITEM 3: OPERATIONAL STATUS

Which of the following best describes this establishment's operational status at the end of 2017?

- In operation
- Temporarily or seasonally inactive
- Ceased operation
- Sold or leased to another operator
- Other


Describe

Item 3: Operational Status - Ceased Operation Date

ITEM 3: OPERATIONAL STATUS - CEASED OPERATION DATE


When did this establishment cease operation?

MMDDYYYY



ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE AND INFORMATION

When was this establishment sold or leased to another operator?

MMDDYYYY
 

What is the name, address, and 9-digit Employer Identification Number (EIN) of this establishment's new owner or operator?

Name of new owner/operator

Mailing Address (Number and Street, P.O. Box, etc.)

City, town, village, etc.

State
Select States and Territories

ZIP Code

EIN

Item 4: Months in Operation

ITEM 4: MONTHS IN OPERATION

What was the number of months in operation during 2017?

Check
if
None

2017
Number

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Tax Status

Was all or part of the income of this establishment or organization exempt from Federal income taxes under section 501, 521, 527, or 528 of the Internal Revenue Code?

- Yes
- No

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

What were the total operating receipts of this **taxable** establishment?

Check
if
None

2017
\$,000.00

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Revenue and expenses of this **tax-exempt** establishment

1. What was the total revenue?

Check
if
None

2017	
\$	<input type="text"/>
	,000.00

2. What were the total expenses?
(Include payroll, exclude bad debt.)

2017	
\$	<input type="text"/>
	,000.00

ITEM 7: 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) in **Item 1**

Exclude:

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

For further clarification, click the "Additional Information" link above.

A. Employment

What was the number of employees for pay period including March 12?

Check if None	2017
	<input type="text"/>

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

Check if None	2017
	\$ <input type="text"/> ,000.00

2. What was the first quarter payroll (January-March 2017)?

Check if None	2017
	\$ <input type="text"/> ,000.00

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017?
If none of the provided selections seem appropriate, provide a specific description of the primary business activity.
Select only ONE.

Civic, social, and recreational associations

- 813990 405 Property owners' association, including home owners', condominium owners', and cooperative owners' associations (Not strictly providing property management.)
- 777813 026 Lessors of real estate - Describe type of real estate.
- 813410 406 Civic, social, or fraternal association, including alumni associations, community membership clubs, historical clubs, etc. (Exclude scouting and related youth development organizations.)
- 813410 405 Veterans membership organization
- 813410 303 Scouting membership organization
- 813410 304 Youth development membership organization developing life, leadership, or business skills, excluding scouting membership organizations
- 713990 80B Youth day camp (Exclude instructional camps.)
- 611620 003 Youth or adult sports instructional day camp
- 721214 006 Adult or family sporting or recreation overnight camp, including fishing and hunting camps and camps operated by membership organizations
- 624120 001 Adult activity or day care center
- 713990 80A Recreational sports club, program, or team for youth and adults
- 713940 906 Fitness or recreational sports center, membership or non-membership
- 813410 407 Fraternal or social membership organization
- 813410 404 Bar or restaurant operated by social or fraternal organization for members
- 722410 005 Drinking place, including tavern, bar, nightclub, etc. (Open to the public.)
- 777813 902 Restaurant serving the public - Describe type of service and food provided
- 624410 00D Childcare services including day care and after school care.
- 777813 027 Social assistance provider - Describe type of services (e.g., counseling, mentoring, day care) and primary clientele (e.g., general, children, the elderly, the disabled)

Business and professional membership associations

- 813910 003 Business association - organized to promote the business interests of its members (Include trade associations, farm bureaus, chambers of commerce, boards of realtors, etc.)
- 813920 003 Professional membership organization - organized to advance the professional interests of their members and the profession as a whole (Include bar associations, accountants' associations, physicians' associations, sports players' associations, etc.)

Labor, political, and religious organizations

- 813930 001 Labor union or similar labor organization
- 813940 001 Political organization
- 813110 001 Religious organization for worship, religious training or study, or administration of an organized religion

Other membership organizations

- 813990 902 Sports governing body (Include professional leagues, collegiate sports conferences, athletic regulatory associations, etc.)
- 813410 402 Automobile enthusiast club

561599 801 Automobile club providing road and travel services

813410 403 Art council

561990 301 Economic/industrial development organization

777813 022 Other membership organization - Describe

Describe

Grantmaking, giving, and advocacy

813211 004 Charitable trust or foundation - making grants but not directly providing services

777813 023 Grantmaking or giving organization not directly providing social services - Describe

Describe

777813 024 Advocacy group - Describe cause or belief promoted

Describe

Other principal business or activity

773000 00A Other principal business or activity - Describe

Describe

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS OR REVENUEOf the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included?**Select ALL that apply.**

1. Membership services of performing arts societies and cultural institutions More	<input type="checkbox"/>	7001650000
2. Civic and social organization membership services More	<input type="checkbox"/>	7005023000
3. Business and professional association membership services More	<input type="checkbox"/>	7017150000
4. Other membership services More	<input type="checkbox"/>	7005024000
a. Condominium and homeowners' association membership services More	<input type="checkbox"/>	7005024003
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	<input type="checkbox"/>	7005024006
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	<input type="checkbox"/>	7003950000
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	<input type="checkbox"/>	7000025000
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	<input type="checkbox"/>	7000050000
8. Meals, snacks, other food items, and beverages prepared for catered events	<input type="checkbox"/>	7000060000
9. Charitable gaming (Include net charitable gaming income.) More	<input type="checkbox"/>	7002450000
10. Directories, professional and technical periodicals, and periodicals of general interest More	<input type="checkbox"/>	7014505000
11. Advertising space, time and similar services More	<input type="checkbox"/>	7012425000
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	<input type="checkbox"/>	7006575000
13. Home, apartment, rooming house, and other residential space rental and leasing	<input type="checkbox"/>	7000275000
14. Room or unit accommodation for travelers	<input type="checkbox"/>	7003825000

Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

Of the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service?

Description	Value	Product Code
1. Membership services of performing arts societies and cultural institutions More	\$ <input type="text"/> ,000.00	7001650000
2. Civic and social organization membership services More	\$ <input type="text"/> ,000.00	7005023000
3. Business and professional association membership services More	\$ <input type="text"/> ,000.00	7017150000
4. Other membership services More		
a. Condominium and homeowners' association membership services More	\$ <input type="text"/> ,000.00	7005024003
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	\$ <input type="text"/> ,000.00	7005024006
Subtotal	\$ <input type="text"/> ,000.00	7005024000
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	\$ <input type="text"/> ,000.00	7003950000
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	\$ <input type="text"/> ,000.00	7000025000
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	\$ <input type="text"/> ,000.00	7000050000
8. Meals, snacks, other food items, and beverages prepared for catered events	\$ <input type="text"/> ,000.00	7000060000
9. Charitable gaming (Include net charitable gaming income.) More	\$ <input type="text"/> ,000.00	7002450000
10. Directories, professional and technical periodicals, and periodicals of general interest More	\$ <input type="text"/> ,000.00	7014505000
11. Advertising space, time and similar services More	\$ <input type="text"/> ,000.00	7012425000
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	\$ <input type="text"/> ,000.00	7006575000
13. Home, apartment, rooming house, and other residential space rental and leasing	\$ <input type="text"/> ,000.00	7000275000
14. Room or unit accommodation for travelers	\$ <input type="text"/> ,000.00	7003825000
15. All other products and services, not elsewhere classified		
a. All other products and services, not elsewhere classified - write-in #1		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000006

c. All other products and services, not elsewhere classified - write-in #3

Pick one

Describe

\$

,000.00

9000000009

Add Additional Products

TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5

\$

,000.00

9900000000

ITEM 22: DETAIL OF SALES, SHIPMENTS, RECEIPTS OR REVENUEOf the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what products and services were included?**Select ALL that apply.**

1. Membership services of performing arts societies and cultural institutions More	<input type="checkbox"/>	7001650000
2. Civic and social organization membership services More	<input type="checkbox"/>	7005023000
3. Business and professional association membership services More	<input type="checkbox"/>	7017150000
4. Other membership services	<input type="checkbox"/>	7005024000
a. Condominium and homeowners' association membership services More	<input type="checkbox"/>	7005024003
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	<input type="checkbox"/>	7005024006
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	<input type="checkbox"/>	7003950000
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	<input type="checkbox"/>	7000025000
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	<input type="checkbox"/>	7000050000
8. Meals, snacks, other food items, and beverages prepared for catered events	<input type="checkbox"/>	7000060000
9. Charitable gaming (Include net charitable gaming income.) More	<input type="checkbox"/>	7002450000
10. Directories, professional and technical periodicals, and periodicals of general interest More	<input type="checkbox"/>	7014505000
11. Advertising space, time and similar services More	<input type="checkbox"/>	7012425000
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	<input type="checkbox"/>	7006575000
13. Home, apartment, rooming house, and other residential space rental and leasing	<input type="checkbox"/>	7000275000
14. Room or unit accommodation for travelers	<input type="checkbox"/>	7003825000
16. Private contributions, gifts, and grants More	<input type="checkbox"/>	8000050000
17. Government contributions, gifts, and grants More	<input type="checkbox"/>	8000025000
18. Program service revenue More	<input type="checkbox"/>	8000200000
19. Investment income including interest and dividends, trading securities, and commodity contracts on own account More	<input type="checkbox"/>	8000150000
20. Gains (losses) from non-financial assets sold More	<input type="checkbox"/>	8000175000

Item 22: Detail of Sales, Shipments, Receipts, or Revenue - Continued

Of the \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in **Item 5**, what was the value for each product or service?

Description	Value	Product Code
1. Membership services of performing arts societies and cultural institutions More	\$ <input type="text"/> ,000.00	7001650000
2. Civic and social organization membership services More	\$ <input type="text"/> ,000.00	7005023000
3. Business and professional association membership services More	\$ <input type="text"/> ,000.00	7017150000
4. Other membership services		
a. Condominium and homeowners' association membership services More	\$ <input type="text"/> ,000.00	7005024003
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	\$ <input type="text"/> ,000.00	7005024006
Subtotal	\$ <input type="text"/> ,000.00	7005024000
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	\$ <input type="text"/> ,000.00	7003950000
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	\$ <input type="text"/> ,000.00	7000025000
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	\$ <input type="text"/> ,000.00	7000050000
8. Meals, snacks, other food items, and beverages prepared for catered events	\$ <input type="text"/> ,000.00	7000060000
9. Charitable gaming (Include net charitable gaming income.) More	\$ <input type="text"/> ,000.00	7002450000
10. Directories, professional and technical periodicals, and periodicals of general interest More	\$ <input type="text"/> ,000.00	7014505000
11. Advertising space, time and similar services More	\$ <input type="text"/> ,000.00	7012425000
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	\$ <input type="text"/> ,000.00	7006575000
13. Home, apartment, rooming house, and other residential space rental and leasing	\$ <input type="text"/> ,000.00	7000275000
14. Room or unit accommodation for travelers	\$ <input type="text"/> ,000.00	7003825000
15. All other products and services, not elsewhere classified		
a. All other products and services, not elsewhere classified - write-in #1		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2		
<input type="text" value="Pick one"/> <input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	9000000006

c. All other products and services, not elsewhere classified - write-in #3

<input type="text" value="Pick one"/>	<input type="text" value="Describe"/>	\$ <input type="text"/>	,000.00	9000000009
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16. Private contributions, gifts, and grants	More	\$ <input type="text"/>	,000.00	8000050000
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17. Government contributions, gifts, and grants	More	\$ <input type="text"/>	,000.00	8000025000
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18. Program service revenue	More	\$ <input type="text"/>	,000.00	8000200000
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19. Investment income including interest and dividends, trading securities, and commodity contracts on own account	More	\$ <input type="text"/>	,000.00	8000150000
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20. Gains (losses) from non-financial assets sold	More	\$ <input type="text"/>	,000.00	8000175000
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21. All other nonoperating or tax-exempt revenue

a. All other nonoperating or tax-exempt revenue - write-in #1

<input type="text" value="Describe"/>	\$ <input type="text"/>	,000.00	8000250003
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b. All other nonoperating or tax-exempt revenue - write-in #2

<input type="text" value="Describe"/>	\$ <input type="text"/>	,000.00	8000250006
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TOTAL - Sum of lines should equal total Revenue reported in Item 5	\$ <input type="text"/>	,000.00	9900000002
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ITEM 26: BUSINESS COOPERATIVE

A cooperative is a business or organization owned by, controlled by, and operated for the benefit of members using its services. Members (also known as user-owners) benefit from use of service and product operations and/or earnings generated by the co-op. This includes purchasing co-ops, member/patron organizations, member-controlled non-profits, consumer co-ops, marketing co-ops, worker co-ops, etc.

Is this establishment a cooperative?

Yes

No

ITEM 28: SPECIAL INQUIRIES - GRANTS AND CONTRIBUTIONS

During 2017, did this establishment do any of the following:

- Award grants
- Make gifts or contributions
- Make payments to, or on behalf of, specific individuals
- Pay assessments (dues) to the parent or other chapters of the same organization
- Transfer funds raised by this establishment to charities or other organizations for charitable purposes?

Yes

No

ITEM 28: SPECIAL INQUIRIES - GRANTS AND CONTRIBUTIONS

What were the amount of grants, transferred contributions, and similar payments?

2017	
\$	<input type="text"/>
	.000.00

ITEM 28: SPECIAL INQUIRIES - SOCIAL ASSISTANCE

Estimate the percent of receipts for social assistance services reported in **Item 22**, lines 1 through 14, from the following payers:

1. Government payers

2017
 %

2. Private payers

%

3. **TOTAL** (Sum of lines 1 and 2 should equal 100%.)

%

Remarks

REMARKS

(Please use this space for any explanations that may be essential in understanding your reported data.) Maximum length is 1,000 characters.

You have

1000

characters left.